

# Peck Memorial Library

## Annual Report For Public And Association Libraries - 2017

### 1. GENERAL LIBRARY INFORMATION

Please note: Bibliostat Collect is best viewed using Internet Explorer 6.0 or higher or Firefox 1.5 or higher. When using Internet Explorer 10 or higher, Compatibility View needs to be enabled (this can be found under the Tools menu).

Please note: No version of the Google Chrome browser can be used to access Collect at this time. Use of this browser can result in data loss even if the report is locked. The Microsoft Edge browser cannot be used.

Report all information in Part 1 as of December 31, 2017, except for questions related to the current library director/manager (questions 1.36 through 1.41).

|      |   |   |
|------|---|---|
| 1.1  | Library ID Number   | 2400113890  |
| 1.2  | Library Name  | PECK MEMORIAL LIBRARY   |
| 1.3  | Name Status (State use only)  | 00 (for no change from previous year)   |
| 1.4  | Structure Status (State use only)   | 00 (for no change from previous year)   |
| 1.5  | Community   | Marathon  |
| 1.6  | Beginning Fiscal Reporting Year   | 01/01/2017  |
| 1.7  | Ending Fiscal Reporting Year  | 12/31/2017  |
| 1.8  | Is the library now reporting on a different fiscal year than it reported on in the previous Annual Report?                | No  |
| 1.9  | If yes, please indicate the beginning date of library's new reporting year. Enter N/A if No was answered to Question 1.8. | N/A   |
| 1.10 | Please indicate the ending date of library's new reporting year. Enter N/A if No was answered to Question 1.8.            | N/A   |
| 1.11 | Beginning <u>Local</u> Fiscal Year  | 1/1/2017  |
| 1.12 | Ending <u>Local</u> Fiscal Year   | 12/31/2017  |
| 1.13 | Address Status  | 00 (for no change from previous year)   |
| 1.14 | Street Address  | 24 MAIN STREET  |
| 1.15 | City  | MARATHON  |
| 1.16 | Zip Code  | 13803   |
| 1.17 | Mailing Address   | P.O. BOX 325  |
| 1.18 | City  | MARATHON  |
| 1.19 | Zip Code  | 13803   |
| 1.20 | Telephone Number (enter 10 digits only and hit the Tab key; enter N/A if no telephone number)                             | (607) 849-6135  |
| 1.21 | Fax Number (enter 10 digits only and hit the Tab key; enter N/A if no fax number)   | (607) 849-3799  |
| 1.22 | E-Mail Address to Contact the Library (Enter N/A if no e-mail address)  | director@peckmemoriallibrary.org  |
| 1.23 | Library Home Page URL (Enter N/A if no home page URL)   | <a href="http://peckmemoriallibrary.org/">http://peckmemoriallibrary.org/</a> |
| 1.24 | Population Chartered to Serve (per 2010 Census)   | 919   |
| 1.25 | Indicate the type of library as stated in the library's charter (select one):   | ASSOCIATION   |
| 1.26 | Indicate the area chartered to serve as stated in the library's charter (select one):                                     | Village   |

|  |   |                                  |
|--|---|----------------------------------|
| 1.27   | During the reporting year, has there been any change to the library's legal service area boundaries? Changes must be the result of a Regents charter action. Answer Y for Yes, N for No.  | N                                |
| 1.28   | Indicate the type of charter the library currently holds (select one):  | Absolute                         |
| 1.29   | Date the library was granted its absolute charter <u>or</u> the date of the provisional charter if the library does not have an absolute charter  | 06/26/1895                       |
| 1.30   | Date the library was last registered  | 10/17/1907                       |
| 1.31   | Federal Employer Identification Number  | 150581087                        |
| 1.32   | County  | CORTLAND                         |
| 1.33   | School District   | Marathon                         |
| 1.34   | Town/City   | Marathon                         |
| 1.35   | Library System  | Finger Lakes Library System      |
| <b>THESE QUESTIONS ARE FOR NYC LIBRARIES ONLY. PLEASE PROCEED TO THE NEXT QUESTION.</b>                        |   |                                  |
| 1.36a  | President/CEO Name  |                                  |
| 1.36b  | President/CEO Phone Number  |                                  |
| 1.36c  | President/CEO Email   |                                  |
| NOTE: For questions 1.37 through 1.45, report all information for the <u>current</u> library director/manager. |   |                                  |
| 1.37   | Title of Library Director/ Manager (select one):  | Mrs.                             |
| 1.38   | First Name of Library Director/Manager  | Mary                             |
| 1.39   | Last Name of Library Director/Manager   | Frank                            |
| 1.40   | NYS Public Librarian Certification Number   | N/A                              |
| 1.41   | What is the highest education level of the library manager/director?  | Other                            |
| 1.42   | If the library manager/director holds a Master's Degree, is it a Master's Degree in Library/Information Science?  | N                                |
| 1.43   | Do all staff working in the budgeted Librarian (certified) positions reported in 6.4 have an active NYS Public Librarian Certificate? If No, list the name and e-mail address of each staff member without an active certificate in a Note.   | N/A                              |
| 1.44   | E-mail Address of the Director/Manager  | director@peckmemoriallibrary.org |
| 1.45   | Fax Number of the Director/Manager  | (607) 849-3799                   |
| 1.46   | Is the library a member of the New York State and Local Retirement System?  | N                                |
| 1.47   | Does the library charge fees for library cards to people residing outside the system's service area?  | N                                |
| 1.48   | Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. | N                                |
| 1.   | Name of municipality or district holding the public vote  | N/A                              |
| 2.   | Indicate the type of municipality or district holding the public vote   | N/A                              |
| 3.   | Date the vote was held (mm/dd/2017)   | N/A                              |
| 4.   | Was the vote successful? Y/N  | N/A                              |
| 5.   | What type of public vote was it?  | N/A                              |
| 6a.  | Most recent prior year approved appropriation from a public vote:   | N/A                              |

6b. Proposed increase in appropriation as a result of the vote held on the date reported in question number 3: N/A

6c. Total proposed appropriation (sum of 6a and 6b): N/A

**This question should only be answered if "No" was answered in Q1.48 OR the library has votes from different municipalities/districts that were held in different years, both current and prior.**

1.49 Did the library receive funding from an appropriation which was approved by public vote in a prior year? (Prior to Calendar Year 2017) Enter Y for Yes, N for No. If Yes, complete one record for the vote from each funding source. If No, go to question 1.50. Y

1. Name of municipality or district holding the public vote Marathon Central School

2. Indicate the type of municipality or district holding the public vote School District

3. Date the last successful vote was held (mm/dd/yyyy) 05/15/2007

4. What type of public vote was it? school district ballot proposition (Ed. Law Â§259(1)(a))

5. What was the total dollar amount of the appropriation from tax dollars resulting from the last successful vote? \$52,000

1.50 Does the reporting library have a contractual agreement with a municipality or district to provide library services to residents of an area not served by a chartered library? Enter Y for Yes, N for No. If yes, please complete one record for *each* contract. If no, go to question 1.51. N

1. Name of contracting municipality or district N/A

2. Is this a written contractual agreement? N/A

3. Population of the geographic area served by this contract N/A

4. Dollar amount of contract N/A

5. Enter the appropriate code for range of services provided (select one): N/A

1.51 For the reporting year, has the library experienced any unusual circumstance(s) that affected the statistics reported (e.g., natural disaster, fire, closed for renovations, massive weeding of collection, etc.)? If yes, please annotate explaining the circumstance(s) and the impact on the library using the Note; if no, please go to Part 2, Library Collection. N

## 2. LIBRARY COLLECTION

Report holdings, additions, and subscriptions as of the end of the fiscal year reported in Part 1. Please click [here](#) to read general instructions before completing this section.

This section of the survey (2.1-2.22) collects data on selected types of materials.

It does not cover all materials (i.e., microforms, loose sheet music, maps, and pictures) for which expenditures are reported under Print Materials Expenditures, Electronic Materials Expenditures, and Other Materials Expenditures (questions 12.6, 12.7 and 12.8). Under this category report only items that have been purchased, leased or licensed by the library, a consortium, the state library, a donor or other person or entity. Included items must only be accessible with a valid library card or at a physical library location; inclusion in the catalog is not required. Do not include items freely available without monetary exchange. Count electronic materials at the administrative entity level; do not duplicate numbers at each branch.

### PRINT MATERIALS

#### Cataloged Books

2.1 Adult Fiction Books 6,002

|     |   |        |
|-----|---|--------|
| 2.2 | Adult Non-fiction Books                                       | 1,991  |
| 2.3 | <b>Total Adult Books (Total questions 2.1 &amp; 2.2)</b>      | 7,993  |
| 2.4 | Children's Fiction Books                                      | 3,659  |
| 2.5 | Children's Non-fiction Books                                  | 1,855  |
| 2.6 | <b>Total Children's Books (Total questions 2.4 &amp; 2.5)</b> | 5,514  |
| 2.7 | <b>Total Cataloged Books (Total questions 2.3 &amp; 2.6)</b>  | 13,507 |

#### **Other Print Materials**

|      |   |        |
|------|---|--------|
| 2.8  | Total Uncataloged Books   | 65     |
| 2.9  | Total Print Serials   | 15     |
| 2.10 | All Other Print Materials   | 0      |
| 2.11 | <b>Total Other Print Materials (Total questions 2.8 through 2.10)</b> | 80     |
| 2.12 | <b>Total Print Materials (Total questions 2.7 and 2.11)</b>           | 13,587 |

#### **ALL OTHER MATERIALS**

#### **Electronic Materials**

|      |   |        |
|------|---|--------|
| 2.13 | Electronic Books  | 9,895  |
| 2.14 | Local Electronic Collections  | 5      |
| 2.15 | NOVELNY Electronic Collections  | 16     |
| 2.16 | <b>Total Electronic Collections (Total questions 2.14 and 2.15)</b>   | 21     |
| 2.17 | Audio - Downloadable Units  | 4,412  |
| 2.18 | Video - Downloadable Units  | 1      |
| 2.19 | Other Electronic Materials (Include items that are not included in the above categories, such as e-serials; electronic files; collections of digital photographs; and electronic government documents, reference tools, scores and maps.) | 0      |
| 2.20 | <b>Total Electronic Materials (Total questions 2.13, 2.16, 2.17, 2.18 and 2.19)</b>   | 14,329 |

#### **Non-Electronic Materials**

|      |   |        |
|------|---|--------|
| 2.21 | Audio - Physical Units  | 285    |
| 2.22 | Video - Physical Units  | 767    |
| 2.23 | Other Non-Electronic Materials (includes films, slides, etc.)             | 74     |
| 2.24 | <b>Total Other Materials Holdings (Total questions 2.21 through 2.23)</b> | 1,126  |
| 2.25 | <b>GRAND TOTAL HOLDINGS (Total questions 2.12, 2.20 and 2.24)</b>         | 29,042 |

#### **CURRENT SERIAL SUBSCRIPTIONS**

|      |                                    |    |
|------|------------------------------------|----|
| 2.26 | Current Print Serial Subscriptions | 15 |
|------|------------------------------------|----|

**ADDITIONS TO HOLDINGS** - Do not subtract withdrawals or discards.

|      |  |     |
|------|--|-----|
| 2.27 | Cataloged Books  | 466 |
| 2.28 | All Other Print Materials                                  | 3   |
| 2.29 | Electronic Materials                                       | 0   |
| 2.30 | All Other Materials  | 51  |
| 2.31 | <b>Total Additions (Total questions 2.27 through 2.30)</b> | 520 |

### **3. LIBRARY PROGRAMS, POLICIES, AND SERVICES**

Report all information on questions 3.1 through 3.28 as of the end of the fiscal year reported in Part 1; report

information on questions 3.29 through 3.80 for the 2017 calendar year. Please click [here](#) to read general instructions before completing this section.

Please report information on LIBRARY USE as of the end of the fiscal year reported in Part 1.

### LIBRARY USE

|     |  |       |
|-----|--|-------|
| 3.1 | Library visits (total annual attendance) | 7,315 |
| 3.2 | Registered resident borrowers            | 840   |
| 3.3 | Registered non-resident borrowers        | 155   |

Please report information on WRITTEN POLICIES as of 12/31/17.

### WRITTEN POLICIES (Answer Y for Yes, N for No)

|     |   |   |
|-----|---|---|
| 3.4 | Does the library have an open meeting policy?                                     | Y |
| 3.5 | Does the library have a policy protecting the confidentiality of library records? | Y |
| 3.6 | Does the library have an Internet use policy?                                     | Y |
| 3.7 | Does the library have a disaster plan?  | N |
| 3.8 | Does the library have a board-approved conflict of interest policy?               | Y |
| 3.9 | Does the library have a board-approved whistle blower policy?                     | Y |

Please report information on ACCESSIBILITY as of 12/31/17.

### ACCESSIBILITY (Answer Y for Yes, N for No)/b>

|      |  |   |
|------|--|---|
| 3.10 | Does the library provide service to persons who cannot visit the library (homebound persons, persons in nursing homes, persons in jail, etc.)? | Y |
| 3.11 | Does the library have assistive devices for persons who are deaf and hearing impaired (TTY/TDD)?   | N |
| 3.12 | Does the library have large print books?   | Y |
| 3.13 | Does the library have assistive technology for the blind and visually impaired?  | N |

#### 3.14 - If so, what do you have?

|  |    |
|--|----|
| screen reader, such as JAWS or Windoweyes                  | No |
| refreshable Braille keyboard                               | No |
| screen magnification software, such as Zoomtext            | No |
| electronic scanning and reading software, such as OpenBook | No |

|      |  |   |
|------|--|---|
| 3.15 | Is the library registered for services from either the New York State Talking Book and Braille Library (New York State Library, Albany) or the Andrew Heiskell Braille and Talking Book Library (The New York Public Library, New York)? | N |
|------|--|---|

Please report information on LIBRARY SPONSORED PROGRAMS as of the end of the fiscal year reported in Part 1.

### LIBRARY SPONSORED PROGRAMS

|      |   |            |
|------|---|------------|
| 3.16 | Adult Program Sessions  | 110        |
| 3.17 | Young Adult Program Sessions  | 0          |
| 3.18 | Children's Program Sessions   | 62         |
| 3.19 | All Other Program Sessions  | 0          |
| 3.20 | <b>Total Number of Program Sessions (Total questions 3.16 through 3.19)</b> | <b>172</b> |
| 3.21 | One-on-One Program Sessions   | 72         |

|      |  |       |
|------|--|-------|
| 3.22 | Do library staff, trustees and/or volunteers reach outside of the library to promote library programs and services through group presentations, information tables and/or other similar educational activities sponsored by the Library? | Yes   |
| 3.23 | Adult Program Attendance   | 967   |
| 3.24 | Young Adult Program Attendance   | 0     |
| 3.25 | Children's Program Attendance  | 1,182 |
| 3.26 | All Other Program Attendance   | 0     |
| 3.27 | <b>Total Program Attendance (Total questions 3.23 through 3.26)</b>  | 2,149 |
| 3.28 | One-on-One Program Attendance  | 72    |

Please report information on SUMMER READING PROGRAMS for the 2017 calendar year.

### SUMMER READING PROGRAM

3.29 - Indicate which of the following apply to the summer reading program(s) offered by the library during the summer of 2017 (check all that apply):

|    |   |     |
|----|---|-----|
| a. | Program(s) for children   | Yes |
| b. | Program(s) for young adults   | No  |
| c. | Program(s) for Adults   | No  |
| d. | Summer Reading at New York Libraries name and/or logo used  | Yes |
| e. | Collaborative Summer Library Program (CSLP Manual, provided through the New York State Library, used) | Yes |
| f. | N/A   | No  |

|      |  |     |
|------|--|-----|
| 3.30 | Library outlets offering a summer reading program  | 1   |
| 3.31 | Children registered for the library's summer reading program                                       | 38  |
| 3.32 | Young adults registered for the library's summer reading program                                   | 14  |
| 3.33 | Adults registered for the library's summer reading program   | 44  |
| 3.34 | <b>Total number registered for the library's summer reading program (total 3.31 + 3.32 + 3.33)</b> | 96  |
| 3.35 | Children's program sessions - Summer 2017  | 13  |
| 3.36 | Young adult program sessions - Summer 2017   | 0   |
| 3.37 | Adult program sessions - Summer 2017   | 0   |
| 3.38 | <b>Total program sessions - Summer 2017 (total 3.35 + 3.36 + 3.37)</b>                             | 13  |
| 3.39 | Children's program attendance - Summer 2017  | 592 |
| 3.40 | Young adult program attendance - Summer 2017   | 0   |
| 3.41 | Adult program attendance - Summer 2017   | 0   |
| 3.42 | <b>Total program attendance - Summer 2017 (total 3.39 + 3.40 + 3.41)</b>                           | 592 |

### COLLABORATORS

|      |  |   |
|------|--|---|
| 3.43 | Public school district(s) and/or BOCES               | 1 |
| 3.44 | Non-public school(s)                                 | 1 |
| 3.45 | Childcare center(s)                                  | 1 |
| 3.46 | Summer camp(s)                                       | 0 |
| 3.47 | Municipality/Municipalities                          | 0 |
| 3.48 | Literacy provider(s)                                 | 0 |
| 3.49 | Other (describe using the State note)                | 0 |
| 3.50 | <b>Total Collaborators (total 3.43 through 3.49)</b> | 3 |

Please report information on EARLY LITERACY PROGRAMS for the 2017 calendar year.

## EARLY LITERACY PROGRAMS

|      |  |     |
|------|--|-----|
| 3.51 | Did the library offer early literacy programs? (Enter Y for Yes, N for No) | Y   |
| 3.52 | - Indicate types of programs offered (check all that apply)                |     |
| a.   | Focus on birth - school entry (kindergarten)                               | Yes |
| b.   | Focus on parents & caregivers  | No  |
| c.   | Combined audience  | No  |
| d.   | N/A  | No  |
| 3.53 | - Number of sessions   |     |
| a.   | Focus on birth - school entry (kindergarten)                               | 21  |
| b.   | Focus on parents & caregivers  | N/A |
| c.   | Combined audience  | N/A |
| d.   | N/A  | N/A |
| 3.54 | <b>Total Sessions</b>  | 21  |
| 3.55 | - Attendance at sessions   |     |
| a.   | Focus on birth - school entry (kindergarten)                               | 231 |
| b.   | Focus on parents & caregivers  | N/A |
| c.   | Combined audience  | N/A |
| d.   | N/A  | N/A |
| 3.56 | <b>Total Attendance</b>  | 231 |
| 3.57 | - Collaborators (check all that apply):                                    |     |
| a.   | Childcare center(s)  | Yes |
| b.   | Public School District(s) and/or BOCES                                     | No  |
| c.   | Non-Public School(s)   | Yes |
| d.   | Health care providers/agencies   | No  |
| e.   | Other (describe using the State note)                                      | No  |

Please report information on ADULT LITERACY for the 2017 calendar year.

## ADULT LITERACY

|      |  |     |
|------|--|-----|
| 3.58 | Did the library offer adult literacy programs?   | No  |
| 3.59 | Total group program sessions                     | 0   |
| 3.60 | Total one-on-one program sessions                | 0   |
| 3.61 | Total group program attendance                   | 0   |
| 3.62 | Total one-on-one program attendance              | 0   |
| 3.63 | - Collaborators (check all that apply)           |     |
| a.   | Literacy NY (Literacy Volunteers of America)     | Yes |
| b.   | Public School District(s) and/or BOCES           | No  |
| c.   | Non-Public Schools                               | No  |
| d.   | Other (see instructions and describe using Note) | No  |

Please report information on PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL) for the 2017 calendar year.

## PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL)

|      |  |   |
|------|--|---|
| 3.64 | Did the library offer programs for English Speakers of Other Languages (ESOL)? (Enter Y for Yes, N for No) | N |
| 3.65 | Children's program sessions  | 0 |
| 3.66 | Young adult program sessions   | 0 |

|      |  |    |
|------|--|----|
| 3.67 | Adult program sessions                                     | 0  |
| 3.68 | <b>Total program sessions (total 3.65 + 3.66 + 3.67)</b>   | 0  |
| 3.69 | One-on-one program sessions                                | 0  |
| 3.70 | Children's program attendance                              | 0  |
| 3.71 | Young adult program attendance                             | 0  |
| 3.72 | Adult program attendance                                   | 0  |
| 3.73 | <b>Total program attendance (total 3.70 + 3.71 + 3.72)</b> | 0  |
| 3.74 | One-on-one program attendance                              | 0  |
| 3.75 | Collaborators (check all that apply):                      |    |
| a.   | Literacy NY (Literacy Volunteers of America)               | No |
| b.   | Public School District(s) and/or BOCES                     | No |
| c.   | Non-Public School(s)                                       | No |
| d.   | Other (describe using the Note)                            | No |

Please report information on DIGITAL LITERACY for the 2017 calendar year.

#### **DIGITAL LITERACY**

|      |  |   |
|------|--|---|
| 3.76 | Did the library offer digital literacy programs? | Y |
| 3.77 | Total group program sessions                     | 0 |
| 3.78 | Total one-on-one program sessions                | 3 |
| 3.79 | Total group program attendance                   | 0 |
| 3.80 | Total one-on-one program attendance              | 3 |

#### **4. LIBRARY TRANSACTIONS**

Report all transactions as of the end of the fiscal year reported in Part 1. (Please note: Internal Library usage is not considered part of circulation)

##### **CATALOGED BOOK CIRCULATION**

|     |  |       |
|-----|--|-------|
| 4.1 | Adult Fiction Books  | 5,424 |
| 4.2 | Adult Non-fiction Books  | 1,022 |
| 4.3 | <b>Total Adult Books (Total questions 4.1 &amp; 4.2)</b>               | 6,446 |
| 4.4 | Children's Fiction Books   | 2,933 |
| 4.5 | Children's Non-fiction Books   | 611   |
| 4.6 | <b>Total Children's Books (Total questions 4.4 &amp; 4.5)</b>          | 3,544 |
| 4.7 | <b>Total Cataloged Book Circulation (Total question 4.3 &amp; 4.6)</b> | 9,990 |

##### **CIRCULATION OF OTHER MATERIALS**

|      |  |        |
|------|--|--------|
| 4.8  | Circulation of Adult Other Materials                                   | 1,449  |
| 4.9  | Circulation of Children's Other Materials                              | 733    |
| 4.10 | <b>Total Circulation of Other Materials (Total questions 4.8, 4.9)</b> | 2,182  |
| 4.11 | <b>Physical Item Circulation (Total questions 4.7 &amp; 4.10)</b>      | 12,172 |

##### **ELECTRONIC USE**

|      |  |        |
|------|--|--------|
| 4.12 | Use of Electronic Material   | 999    |
| 4.13 | Successful Retrieval of Electronic Information   | 0      |
| 4.14 | <b>Electronic Content Use (Total questions 4.12 &amp; 4.13)</b>                        | 999    |
| 4.15 | <b>Total Circulation of Materials (Total questions 4.11 &amp; 4.12)</b>                | 13,171 |
| 4.16 | <b>Total Collection Use (Total questions 4.13 &amp; 4.15)</b>                          | 13,171 |
| 4.17 | <b>Grand Total Circulation of Children's Materials (Total questions 4.6 &amp; 4.9)</b> | 4,277  |

##### **REFERENCE TRANSACTIONS**

2,610

|  |   |       |
|--|---|-------|
| 4.18   | Total Reference Transactions              |       |
| 4.19   | Does the library offer virtual reference? | Y     |
| <b>INTERLIBRARY LOAN - MATERIALS RECEIVED (BORROWED)</b> |   |       |
| 4.20   | TOTAL MATERIALS RECEIVED                  | 2,893 |
| <b>INTERLIBRARY LOAN - MATERIALS PROVIDED (LOANED)</b>   |   |       |
| 4.21   | TOTAL MATERIALS PROVIDED                  | 3,155 |

## 5. TECHNOLOGY AND TELECOMMUNICATIONS

Report all information as of December 31, 2017.

### SYSTEMS AND SERVICES

|     |   |                                  |
|-----|---|----------------------------------|
| 5.1 | Automated circulation system?   | Y                                |
| 5.2 | Online public access catalog (OPAC)?  | Y                                |
| 5.3 | Electronic access to the OPAC from outside the library?                               | Y                                |
| 5.4 | Annual number of visits to the library's web site                                     | 62,527                           |
| 5.5 | Does the library use Internet filtering software on any computer?                     | Y                                |
| 5.6 | Name of the person responsible for the library's Information Technology (IT) services | Mary Frank                       |
| 5.7 | IT contact's telephone number (enter 10 digits only and hit the Tab key)              | (607) 849-6135                   |
| 5.8 | IT contact's email address  | director@peckmemoriallibrary.org |

## 6. STAFF INFORMATION

Note: Report figures as of the last day of the fiscal year reported in Part 1. Include the FTE for all positions funded in the library's budget whether those positions are filled or not. This report requires conversion of part-time hours to full-time equivalents (FTE). To compute the FTE of employees in any category, take the total number of hours worked per week for all budgeted positions in that category and divide that total by the number of hours per week the library considers to be full-time. Report the FTE to two decimal places.

### FTE (FULL-TIME EQUIVALENT CALCULATION)

|     |  |    |
|-----|--|----|
| 6.1 | The number of hours per workweek used to compute FTE for all paid library personnel in this section. | 28 |
|-----|--|----|

### BUDGETED POSITIONS IN FULL-TIME EQUIVALENTS

|      |  |      |
|------|--|------|
| 6.2  | Library Director (certified)   | 0    |
| 6.3  | Vacant Library Director (certified)  | 0    |
| 6.4  | Librarian (certified)  | 0    |
| 6.5  | Vacant Librarian (certified)   | 0    |
| 6.6  | Library Manager (not certified)  | 1    |
| 6.7  | Vacant Library Manager (not certified)   | 0    |
| 6.8  | Library Specialist/Paraprofessional (not certified)                            | 0    |
| 6.9  | Vacant Library Specialist/Paraprofessional (not certified)                     | 0    |
| 6.10 | Other Staff  | 2    |
| 6.11 | Vacant Other Staff   | 0    |
| 6.12 | <b>TOTAL PAID STAFF (Total questions 6.2, 6.4, 6.6, 6.8 &amp; 6.10)</b>        | 3.00 |
| 6.13 | <b>VACANT TOTAL PAID STAFF (Total questions 6.3, 6.5, 6.7, 6.9 &amp; 6.11)</b> | 0.00 |

### SALARY INFORMATION

|      |   |   |
|------|---|---|
| 6.14 | FTE - Entry Level Librarian (certified) | 0 |
|------|---|---|

|      |  |          |
|------|--|----------|
| 6.15 | Salary - Entry Level Librarian (certified) | \$0      |
| 6.16 | FTE - Library Director (certified)         | 0        |
| 6.17 | Salary - Library Director (certified)      | \$0      |
| 6.18 | FTE - Library Manager (not certified)      | 1        |
| 6.19 | Salary - Library Manager (not certified)   | \$22,751 |

## 7. MINIMUM PUBLIC LIBRARY STANDARDS

Report all information as of December 31, 2017. Please click [here](#) to read general instructions before completing this section.

|      |  |   |
|------|--|---|
| 7.1  | 1. Is governed by board-approved written bylaws which outline the responsibilities and procedures of the library board of trustees.  | Y |
| 7.2  | 2. Has a board-approved written long range plan of service.  | Y |
| 7.3  | 3. Presents a board-approved annual report to the community on the library's progress in meeting its goals and objectives.   | Y |
| 7.4  | 4. Has board-approved written policies for the operation of the library.   | Y |
| 7.5  | 5. Presents annually to appropriate funding agencies a written board-approved budget which would enable the library to meet or exceed these standards and to carry out its long-range plan of service. | Y |
| 7.6  | 6. Periodically evaluates the effectiveness of the library's collection and services in meeting community needs.   | Y |
| 7.7  | 7. Is open the minimum standard number of public service hours for population served. (see instructions)   | Y |
| 8.   | Maintains a facility to meet community needs, including adequate:  |   |
| 7.8  | 8a. space  | Y |
| 7.9  | 8b. lighting   | Y |
| 7.10 | 8c. shelving   | Y |
| 7.11 | 8d. seating  | Y |
| 7.12 | 8e. restroom (see instructions)  | Y |
| 9.   | Provides equipment and connections to meet community needs and provide access to other library catalogs and other electronic information, including but not limited to the following:                  |   |
| 7.13 | 9a. telephone  | Y |
| 7.14 | 9b. photocopier (see instructions)   | Y |
| 7.15 | 9c. microcomputer or terminal  | Y |
| 7.16 | 9d. printer  | Y |
| 7.17 | 9e. Fax capability (see instructions)  | Y |
| 7.18 | 10. Distributes board-approved printed information listing the library's hours open, borrowing rules, services, location and phone number.   | Y |
| 7.19 | 11. Employs a paid director in accordance with the provisions of Commissioner's Regulation 90.8.   | Y |

## 8. PUBLIC SERVICE INFORMATION

Report all information as of the end of the fiscal year reported in Part 1. Please click [here](#) to read general instructions before completing this section.

PUBLIC SERVICE OUTLETS - Libraries reporting main libraries, branches and bookmobiles should complete Service Outlets Information in Part 9.

|     |              |   |
|-----|--------------|---|
| 8.1 | Main Library | 1 |
|-----|--------------|---|

|   |  |                 |
|---|--|-----------------|
| 8.2   | Branches   | 0               |
| 8.3   | Bookmobiles  | 0               |
| 8.4   | Other Outlets  | 0               |
| 8.5   | <b>TOTAL PUBLIC SERVICE OUTLETS (Total questions 8.1 - 8.4)</b>                  | <b>1</b>        |
| PUBLIC SERVICE HOURS - Report hours to <u>two</u> decimal places. |  |                 |
| 8.6   | Minimum Weekly Total Hours - Main Library  | 32.00           |
| 8.7   | Minimum Weekly Total Hours - Branch Libraries                                    | 0.00            |
| 8.8   | Minimum Weekly Total Hours - Bookmobiles   | 0.00            |
| 8.9   | <b>Minimum Weekly Total Hours - Total Hours Open (Total questions 8.6 - 8.8)</b> | <b>32.00</b>    |
| 8.10  | Annual Total Hours - Main Library  | 1,625.00        |
| 8.11  | Annual Total Hours - Branch Libraries  | 0.00            |
| 8.12  | Annual Total Hours - Bookmobiles   | 0.00            |
| 8.13  | <b>Annual Hours Open - Total Hours Open (Total questions 8.10 through 8.12)</b>  | <b>1,625.00</b> |

## 9. SERVICE OUTLET INFORMATION

Report all information as of the end of the fiscal year reported in Part 1. Please click [here](#) to read general instructions before completing this section.

NOTE: Libraries reporting Public Service Outlets in questions 8.1, 8.2 and 8.3 of Part 8 are required to complete this part of the Annual Report. Use this section to enter outlet information on main libraries, branches or bookmobiles. Complete one record for *each* main library, branch or bookmobile.

If you have multiple libraries, you may 1) enter the data for the Service Outlet Information section directly into the survey as usual or 2) send Baker and Taylor the data for this section to be uploaded into Collect. If you choose to send your data for uploading, you must enter the data into the spreadsheet form available in the survey by clicking [here](#). Complete this form and email it to [bibliostat@btol.com](mailto:bibliostat@btol.com).

|     |  |                                  |
|-----|--|----------------------------------|
| 1.  | Outlet Name  | Peck Memorial Library            |
| 2.  | Outlet Name Status   | 00 (for no change)               |
| 3.  | Street Address   | 24 Main Street                   |
| 4.  | Outlet Street Address Status   | 00 (for no change)               |
| 5.  | City   | Marathon                         |
| 6.  | Zip Code   | 13803                            |
| 7.  | Phone (enter 10 digits only)   | (607) 849-6135                   |
| 8.  | Fax Number (enter 10 digits only)  | (607) 849-3799                   |
| 9.  | E-mail Address   | director@peckmemoriallibrary.org |
| 10. | Outlet URL   | N/A                              |
| 11. | County   | Cortland                         |
| 12. | School District  | Marathon                         |
| 13. | Library System   | Finger Lakes Library System      |
| 14. | Outlet Type Code (select one):   | CE                               |
| 15. | Public Service Hours Per Year for This Outlet  | 1,625                            |
| 16. | Number of Weeks This Outlet is Open  | 52                               |
| 17. | Does this outlet have meeting space available for public use (non-library sponsored programs, meetings and/or events)? | Y                                |
| 18. | Is the meeting space available for public use even when the outlet is closed?  | Y                                |

|     |   |  |
|-----|---|--|
| 19. | Total number of non-library sponsored programs, meetings and/or events at this outlet               | 72   |
| 20. | Enter the appropriate outlet code (select one):   | LO   |
| 21. | Who owns this outlet building?  | Library Board  |
| 22. | Who owns the land on which this outlet is built?  | Library Board  |
| 23. | Indicate the year this outlet was initially constructed   | 1895   |
| 24. | Indicate the year this outlet underwent a major renovation costing \$25,000 or more                 | 2010   |
| 25. | Square footage of the outlet  | 3,052  |
| 26. | Number of internet computers at this outlet used by general public                                  | 7  |
| 27. | Number of uses (sessions) of public Internet computers per year                                     | 780  |
| 28. | Type of connection on the outlet's public Internet computers  | Cable  |
| 29. | Maximum <u>download</u> speed of connection on the outlet's public Internet computers               | 10 Greater than or equal to 50 mbps and less than 100 mbps |
| 30. | Maximum <u>upload</u> speed of connection on the outlet's public Internet computers                 | 10 Greater than or equal to 50 mbps and less than 100 mbps |
| 31. | Internet Provider   | Spectrum/Time Warner Cable                                 |
| 32. | WiFi Access   | No restrictions to access                                  |
| 33. | Number of wireless sessions provided by the library wireless service per year                       | 5,475  |
| 34. | Does the outlet have interactive videoconferencing capability for public use?                       | N  |
| 35. | Does the outlet have a building entrance that is physically accessible to a person in a wheelchair? | Y  |
| 36. | Is every public part of the outlet accessible to a person in a wheelchair?                          | Y  |
| 37. | <i>LIBID</i>  | 2400113890   |
| 38. | <i>FSCSID</i>   | NY0146   |
| 39. | <i>Number of Bookmobiles in the Bookmobile Outlet Record</i>  | 0  |
| 40. | <i>Outlet Structure Status</i>  | 00 (for no change from previous year)                      |

## 10. OFFICERS AND TRUSTEES

Report information about trustee meetings as of December 31, 2017. All public and association libraries are required by Education Law to hold at least four meetings a year.

### BOARD MEETINGS

|      |   |    |
|------|---|----|
| 10.1 | Total number of board meetings held during calendar year (January 1, 2017 to December 31, 2017) | 12 |
|------|---|----|

### NUMBER OF TRUSTEES AND TERMS

|      |   |      |
|------|---|------|
| 10.2 | Does your library have a range of trustees stated in the library's charter documents (incorporation)?                           | Yes  |
| 10.3 | If yes, what is the range?  | 5-15 |
| 10.4 | If your library has a range, how many voting positions are stated in the library's current by-laws?                             | 8    |
| 10.5 | If your library does not have a range, how many voting positions are stated in the library's charter documents (incorporation)? | N/A  |
| 10.6 | Does your library's charter documents (incorporation) state a specified term for trustees? If no, please explain in a Note.     | No   |

10.7 If yes, what is the trustee term length, as stated in your library's charter documents (incorporation)? n/a

### BOARD MEMBER SELECTION

10.8 Enter Board Member Selection Code (select one): EA - board members are elected by the library association membership

List Officers and Board Members as of February 1, 2018. Complete one record for each board member. There must be a record for each voting position, whether filled or vacant. Do not include non-voting positions.

#### BOARD PRESIDENT

10.9 Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the Note), or Vacant Mrs.

10.10 First Name Kathy

10.11 Last Name Cusick

10.12 Mailing Address Box 2, 12 Tannery Street

10.13 City Marathon

10.14 Zip Code (5 digits only) 13803

10.15 Phone (enter 10 digits only) (607) 849-6701

10.16 E-mail Address kmcus@aol.com

10.17 Term Begins - Month January

10.18 Term Begins - Year (yyyy) 2017

10.19 Term Expires - Month December

10.20 Term Expires - Year (yyyy) 2018

10.21 Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). Yes

10.22 The date the Oath of Office was taken (mm/dd/yyyy) N/A

10.23 The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) N/A

10.24 Is this a brand new trustee? N

You may 1) enter the data for the Officers and Board Members directly into the survey as usual or 2) send Baker and Taylor the data for this section to be uploaded into Collect (**but do not include the Board President**—this information should still be entered directly into the survey). If you choose to send your data for uploading, you must enter the data into the spreadsheet form available [here](#). Complete this form and email it to [bibliostat@btol.com](mailto:bibliostat@btol.com).

1. Title of Board Member (select one): Mrs.

2. First Name of Board Member Connie

3. Last Name of Board Member White

4. Mailing Address PO Box 290

5. City Marathon

6. Zip Code (5 digits only) 13803

7. E-mail address adamswhitehouse@aol.com

8. Office Held or Trustee Vice President

9. Term Begins - Month January

10. Term Begins - Year (year) 2017

11. Term Expires December

12. Term Expires - Year (yyyy) 2018

13. Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). Yes

14. The date the Oath of Office (mm/dd/yyyy) was taken N/A

|     |  |                      |
|-----|--|----------------------|
| 15. | The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)   | N/A                  |
| 16. | Is this a brand new trustee?   | N                    |
| 1.  | Title of Board Member (select one):  | Ms.                  |
| 2.  | First Name of Board Member   | Catalina             |
| 3.  | Last Name of Board Member  | Charles              |
| 4.  | Mailing Address  | 493 Merrill Creek Rd |
| 5.  | City   | Marathon             |
| 6.  | Zip Code (5 digits only)   | 13803                |
| 7.  | E-mail address   | N/A                  |
| 8.  | Office Held or Trustee   | Trustee              |
| 9.  | Term Begins - Month  | February             |
| 10. | Term Begins - Year (year)  | 2017                 |
| 11. | Term Expires   | December             |
| 12. | Term Expires - Year (yyyy)   | 2018                 |
| 13. | Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). | No                   |
| 14. | The date the Oath of Office (mm/dd/yyyy) was taken   | N/A                  |
| 15. | The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)   | N/A                  |
| 16. | Is this a brand new trustee?   | Y                    |
| 1.  | Title of Board Member (select one):  | Mr.                  |
| 2.  | First Name of Board Member   | Dave                 |
| 3.  | Last Name of Board Member  | Light                |
| 4.  | Mailing Address  | PO Box 235           |
| 5.  | City   | Marathon             |
| 6.  | Zip Code (5 digits only)   | 13803                |
| 7.  | E-mail address   | N/A                  |
| 8.  | Office Held or Trustee   | Trustee              |
| 9.  | Term Begins - Month  | January              |
| 10. | Term Begins - Year (year)  | 2017                 |
| 11. | Term Expires   | December             |
| 12. | Term Expires - Year (yyyy)   | 2018                 |
| 13. | Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). | Yes                  |
| 14. | The date the Oath of Office (mm/dd/yyyy) was taken   | N/A                  |
| 15. | The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)   | N/A                  |
| 16. | Is this a brand new trustee?   | N                    |
| 1.  | Title of Board Member (select one):  | Mrs.                 |
| 2.  | First Name of Board Member   | Marilyn              |
| 3.  | Last Name of Board Member  | Negus                |
| 4.  | Mailing Address  | 1063 State Route 221 |
| 5.  | City   | Marathon             |
| 6.  | Zip Code (5 digits only)   | 13803                |
| 7.  | E-mail address   | N/A                  |
| 8.  | Office Held or Trustee   | Trustee              |

|     |  |                         |
|-----|--|-------------------------|
| 9.  | Term Begins - Month  | January                 |
| 10. | Term Begins - Year (year)  | 2016                    |
| 11. | Term Expires   | December                |
| 12. | Term Expires - Year (yyyy)   | 2017                    |
| 13. | Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). | Yes                     |
| 14. | The date the Oath of Office (mm/dd/yyyy) was taken   | N/A                     |
| 15. | The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)   | N/A                     |
| 16. | Is this a brand new trustee?   | N                       |
| 1.  | Title of Board Member (select one):  | Ms.                     |
| 2.  | First Name of Board Member   | Sharon                  |
| 3.  | Last Name of Board Member  | Trokanski               |
| 4.  | Mailing Address  | PO Box 472              |
| 5.  | City   | Marathon                |
| 6.  | Zip Code (5 digits only)   | 13803                   |
| 7.  | E-mail address   | N/A                     |
| 8.  | Office Held or Trustee   | Trustee                 |
| 9.  | Term Begins - Month  | January                 |
| 10. | Term Begins - Year (year)  | 2017                    |
| 11. | Term Expires   | December                |
| 12. | Term Expires - Year (yyyy)   | 2018                    |
| 13. | Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). | Yes                     |
| 14. | The date the Oath of Office (mm/dd/yyyy) was taken   | N/A                     |
| 15. | The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)   | N/A                     |
| 16. | Is this a brand new trustee?   | N                       |
| 1.  | Title of Board Member (select one):  | Ms.                     |
| 2.  | First Name of Board Member   | Joan                    |
| 3.  | Last Name of Board Member  | Fleming                 |
| 4.  | Mailing Address  | 1140 Marathon-McGraw Rd |
| 5.  | City   | Marathon                |
| 6.  | Zip Code (5 digits only)   | 13803                   |
| 7.  | E-mail address   | N/A                     |
| 8.  | Office Held or Trustee   | Trustee                 |
| 9.  | Term Begins - Month  | January                 |
| 10. | Term Begins - Year (year)  | 2017                    |
| 11. | Term Expires   | December                |
| 12. | Term Expires - Year (yyyy)   | 2018                    |
| 13. | Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). | Yes                     |
| 14. | The date the Oath of Office (mm/dd/yyyy) was taken   | N/A                     |
| 15. | The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)   |                         |
| 16. | Is this a brand new trustee?   | N                       |

|     |  |                      |
|-----|--|----------------------|
| 1.  | Title of Board Member (select one):  | Mrs.                 |
| 2.  | First Name of Board Member   | Cathy                |
| 3.  | Last Name of Board Member  | Maricle              |
| 4.  | Mailing Address  | 427 Merrill Creek Rd |
| 5.  | City   | Marathon             |
| 6.  | Zip Code (5 digits only)   | 13803                |
| 7.  | E-mail address   | N/A                  |
| 8.  | Office Held or Trustee   | Trustee              |
| 9.  | Term Begins - Month  | January              |
| 10. | Term Begins - Year (year)  | 2018                 |
| 11. | Term Expires   | December             |
| 12. | Term Expires - Year (yyyy)   | 2019                 |
| 13. | Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). | Yes                  |
| 14. | The date the Oath of Office (mm/dd/yyyy) was taken   | N/A                  |
| 15. | The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)   | N/A                  |
| 16. | Is this a brand new trustee?   | N                    |

## 11. OPERATING FUNDS RECEIPTS

Report financial data based on the fiscal reporting year reported in Part 1. *ROUND TO THE NEAREST DOLLAR*. Please click [here](#) to read general instructions before completing this section.

### LOCAL PUBLIC FUNDS

Specify by name the municipalities or districts which are the source of funds.

|      |   |                         |
|------|---|-------------------------|
| 11.1 | Does the library receive any local public funds? If yes, complete one record for each funding source; if no, go to question 11.3. | Y                       |
| 1.   | Source of Funds   | School District         |
| 2.   | Name of funding County, Municipality or District  | Marathon Central School |
| 3.   | Amount  | \$52,000                |
| 4.   | Subject to public vote held in reporting year or in a previous reporting year(s).   | Y                       |
| 5.   | Written Contractual Agreement   | N/A                     |
| 11.2 | <b>TOTAL LOCAL PUBLIC FUNDS</b>   | \$52,000                |

### SYSTEM CASH GRANTS TO MEMBER LIBRARY

|      |   |         |
|------|---|---------|
| 11.3 | Local Library Services Aid (LLSA)   | \$0     |
| 11.4 | Central Library Aid (CLDA and/or CBA)   | \$0     |
| 11.5 | Additional State Aid received from the System                                   | \$7,824 |
| 11.6 | Federal Aid received from the System  | \$0     |
| 11.7 | Other Cash Grants   | \$0     |
| 11.8 | <b>TOTAL SYSTEM CASH GRANTS</b> (Add Questions 11.3, 11.4, 11.5, 11.6 and 11.7) | \$7,824 |

### OTHER STATE AID

|      |   |     |
|------|---|-----|
| 11.9 | State Aid other than LLSA, Central Library Aid (CLDA and/or CBA), or other State Aid reported as system cash grants | \$0 |
|------|---|-----|

### FEDERAL AID FOR LIBRARY OPERATION

|       |      |     |
|-------|------|-----|
| 11.10 | LSTA | \$0 |
|-------|------|-----|

|                       |  |           |
|-----------------------|--|-----------|
| 11.11                 | Other Federal Aid  | \$0       |
| 11.12                 | <b>TOTAL FEDERAL AID</b> (Add Questions 11.10 and 11.11)   | \$0       |
| 11.13                 | <b>CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE</b>   | \$0       |
| <b>OTHER RECEIPTS</b> |  |           |
| 11.14                 | Gifts and Endowments   | \$850     |
| 11.15                 | Fund Raising   | \$2,838   |
| 11.16                 | Income from Investments  | \$1,235   |
| 11.17                 | Library Charges  | \$3,737   |
| 11.18                 | Other  | \$4,141   |
| 11.19                 | <b>TOTAL OTHER RECEIPTS</b> (Add Questions 11.14, 11.15, 11.16, 11.17 and 11.18)   | \$12,801  |
| 11.20                 | <b>TOTAL OPERATING FUND RECEIPTS</b> (Add Questions 11.2, 11.8, 11.9, 11.12, 11.13 and 11.19)  | \$72,625  |
| 11.21                 | <b>BUDGET LOANS</b>  | \$0       |
| <b>TRANSFERS</b>      |  |           |
| 11.22                 | From Capital Fund (Same as Question 14.8)  | \$0       |
| 11.23                 | From Other Funds   | \$0       |
| 11.24                 | <b>TOTAL TRANSFERS</b> (Add Questions 11.22 and 11.23)   | \$0       |
| 11.25                 | BALANCE IN OPERATING FUND - Beginning Balance for Fiscal Year Ending 2017 (Same as Question 12.40 of previous year if fiscal year has not changed) | \$42,135  |
| 11.26                 | <b>GRAND TOTAL RECEIPTS, BUDGET LOANS, TRANSFERS AND BALANCE</b> (Add Questions 11.20, 11.21, 11.24 and 11.25; Same as Question 12.41)             | \$114,760 |

## 12. OPERATING FUND DISBURSEMENTS

Report financial data based on the fiscal reporting year reported in Part 1. **ROUND TO THE NEAREST DOLLAR.** Please click [here](#) to read general instructions before completing this section.

### STAFF EXPENDITURES

#### Salaries & Wages Paid from Library Funds

|      |  |          |
|------|--|----------|
| 12.1 | Certified Librarians   | \$0      |
| 12.2 | Other Staff  | \$35,552 |
| 12.3 | <b>Total Salaries &amp; Wages Expenditures</b> (Add Questions 12.1 and 12.2) | \$35,552 |
| 12.4 | <b>Employee Benefits Expenditures</b>  | \$3,064  |
| 12.5 | <b>Total Staff Expenditures</b> (Add Questions 12.3 and 12.4)                | \$38,616 |

### COLLECTION EXPENDITURES

|      |  |         |
|------|--|---------|
| 12.6 | Print Materials Expenditures   | \$3,041 |
| 12.7 | Electronic Materials Expenditures  | \$406   |
| 12.8 | Other Materials Expenditures   | \$3,109 |
| 12.9 | <b>Total Collection Expenditures</b> (Add Questions 12.6, 12.7 and 12.8) | \$6,556 |

### CAPITAL EXPENDITURES FROM OPERATING FUNDS

|       |                                |       |
|-------|--------------------------------|-------|
| 12.10 | From Local Public Funds (71PF) | \$0   |
| 12.11 | From Other Funds (71OF)        | \$885 |

12.12 **Total Capital Expenditures** (Add Questions 12.10 and 12.11) \$885

**OPERATION AND MAINTENANCE OF BUILDINGS**

**Repairs to Building & Building Equipment**

12.13 From Local Public Funds (72PF) \$0  
12.14 From Other Funds (72OF) \$0  
12.15 **Total Repairs** (Add Questions 12.13 and 12.14) \$0  
12.16 Other Disbursements for Operation & Maintenance of Buildings \$15,150  
12.17 **Total Operation & Maintenance of Buildings** (Add Questions 12.15 and 12.16) \$15,150

**MISCELLANEOUS EXPENSES**

12.18 Office and Library Supplies \$2,216  
12.19 Telecommunications \$1,453  
12.20 Binding Expenses \$0  
12.21 Postage and Freight \$103  
12.22 Professional & Consultant Fees \$2,143  
12.23 Equipment \$0  
12.24 Other Miscellaneous \$7,581  
12.25 **Total Miscellaneous Expenses** (Add Questions 12.18, 12.19, 12.20, 12.21, 12.22, 12.23 and 12.24) \$13,496

12.26 **CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE** \$0

**DEBT SERVICE**

**Capital Purposes Loans (Principal and Interest)**

12.27 From Local Public Funds (73PF) \$0  
12.28 From Other Funds (73OF) \$0  
12.29 **Total** (Add Questions 12.27 and 12.28) \$0  
12.30 Budget Loans (Principal and Interest) \$0  
12.31 Short-Term Loans \$0  
12.32 **Total Debt Service** (Add Questions 12.29, 12.30 and 12.31) \$0  
12.33 **TOTAL OPERATING FUND DISBURSEMENTS** (Add Questions 12.5, 12.9, 12.12, 12.17, 12.25, 12.26 and 12.32) \$74,703

**TRANSFERS**

**Transfers to Capital Fund**

12.34 From Local Public Funds (76PF) \$0  
12.35 From Other Funds (76OF) \$0  
12.36 **Total Transfers to Capital Fund** (Add Questions 12.34 and 12.35; same as Question 13.8) \$0  
12.37 **Transfer to Other Funds** \$0  
12.38 **TOTAL TRANSFERS** (Add Questions 12.36 and 12.37) \$0  
12.39 **TOTAL DISBURSEMENTS AND TRANSFERS** (Add Questions 12.33 and 12.38) \$74,703  
12.40 **BALANCE IN OPERATING FUND - Ending Balance for the Fiscal Year Ending 2017** \$40,057  
12.41 **GRAND TOTAL DISBURSEMENTS, TRANSFERS & BALANCE** (Add Questions 12.39 and 12.40; same as Question 11.26) \$114,760

## ASSURANCE

- 12.42 The Library operated in accordance with all provisions of Education Law and the Regulations of the Commissioner, and assures that the "Annual Report" was reviewed and accepted by the Library Board on (date - mm/dd/yyyy). 02/19/2018

## FISCAL AUDIT

- 12.43 Last audit performed (mm/dd/yyyy) 06/10/2009
- 12.44 Time period covered by this audit (mm/dd/yyyy) - (mm/dd/yyyy) 01/01/2007-12/31/2008
- 12.45 Indicate type of audit (select one): Private Accounting Firm

## CAPITAL FUND

- 12.46 Does the library have a Capital Fund? Enter Y for Yes, N for No. If No, stop here. If Yes, complete the Capital Fund Report. Y

## 13. CAPITAL FUND RECEIPTS

Report financial data based on the fiscal year reported in Part 1. *ROUND TO THE NEAREST DOLLAR.* Please click [here](#) to read general instructions before completing this section.

### REVENUES FROM LOCAL SOURCES

- 13.1 Revenues from Local Government Sources \$0
- 13.2 All Other Revenues from Local Sources \$1,523
- 13.3 **Total Revenues from Local Sources** (Add Questions 13.1 and 13.2) \$1,523

### STATE AID FOR CAPITAL PROJECTS

- 13.4 State Aid Received for Construction \$0
- 13.5 Other State Aid \$0
- 13.6 **Total State Aid** (Add Questions 13.4 and 13.5) \$0

### FEDERAL AID FOR CAPITAL PROJECTS

- 13.7 **TOTAL FEDERAL AID** \$0

### INTERFUND REVENUE

- 13.8 **Transfer from Operating Fund** (Same as Question 12.36) \$0
- 13.9 **TOTAL REVENUES** (Add Questions 13.3, 13.6, 13.7 and 13.8) \$1,523
- 13.10 **NON-REVENUE RECEIPTS** \$0
- 13.11 **TOTAL CASH RECEIPTS** (Add Questions 13.9 and 13.10) \$1,523
- 13.12 **BALANCE IN CAPITAL FUND - Beginning Balance for Fiscal Year Ending 2017** (Same as Question 14.11 of previous year, if fiscal year has not changed) \$51,314
- 13.13 **TOTAL CASH RECEIPTS AND BALANCE** (Add Questions 13.11 and 13.12; same as Question 14.12) \$52,837

## 14. CAPITAL FUND DISBURSEMENTS

Report financial data based on the fiscal reporting year reported in Part 1. *ROUND TO THE NEAREST DOLLAR.* Please click [here](#) to read general instructions before completing this section.

### PROJECT EXPENDITURES

- 14.1 Construction \$0
- 14.2 Incidental Construction \$2,780

### Other Disbursements

|       |   |          |
|-------|---|----------|
| 14.3  | Purchase of Buildings   | \$0      |
| 14.4  | Interest  | \$0      |
| 14.5  | Collection Expenditures   | \$0      |
| 14.6  | Total Other Disbursements (Add Questions 14.3, 14.4 and 14.5)                                       | \$0      |
| 14.7  | <b>TOTAL PROJECT EXPENDITURES</b> (Add Questions 14.1, 14.2 and 14.6)                               | \$2,780  |
| 14.8  | <b>TRANSFER TO OPERATING FUND</b> (Same as Question 11.22)  | \$0      |
| 14.9  | <b>NON-PROJECT EXPENDITURES</b>   | \$0      |
| 14.10 | <b>TOTAL CASH DISBURSEMENTS AND TRANSFERS</b> (Add Questions 14.7, 14.8 and 14.9)                   | \$2,780  |
| 14.11 | <b>BALANCE IN CAPITAL FUND</b> - Ending Balance for the Fiscal Year Ending 2017                     | \$50,057 |
| 14.12 | <b>TOTAL CASH DISBURSEMENTS AND BALANCE</b> (Add Questions 14.10 and 14.11; same as Question 13.13) | \$52,837 |

## 15. CENTRAL LIBRARIES

PART 15 EXISTS FOR THE CENTRAL/CO-CENTRAL LIBRARIES ONLY. PLEASE PROCEED TO SECTION 16. FEDERAL TOTALS AND CONTINUE ON WITH YOUR SURVEY

## 16. FEDERAL TOTALS

All questions in Part 16 are calculated, locked fields.

Note: See instructions for definitions and calculations of each of these Federal Totals.

|       |   |          |
|-------|---|----------|
| 16.1  | Total ALA-MLS   | 0.00     |
| 16.2  | Total Librarians  | 0.70     |
| 16.3  | All Other Paid Staff  | 1.40     |
| 16.4  | Total Paid Employees  | 2.10     |
| 16.5  | State Government Revenue  | \$7,824  |
| 16.6  | Federal Government Revenue  | \$0      |
| 16.7  | Other Operating Revenue   | \$12,801 |
| 16.8  | Total Operating Revenue   | \$72,625 |
| 16.9  | Other Operating Expenditures  | \$28,646 |
| 16.10 | Total Operating Expenditures  | \$73,818 |
| 16.11 | Total Capital Expenditures  | \$3,665  |
| 16.12 | Print Materials   | 13,587   |
| 16.13 | Total Registered Borrowers  | 995      |
| 16.14 | Other Capital Revenue and Receipts  | \$1,523  |
| 16.15 | Number of internet computers used by general public                       | 7        |
| 16.16 | Total Uses (sessions) of Public Internet Computers Per Year               | 780      |
| 16.17 | Total Wireless Sessions Provided by the Library Wireless Service Per Year | 5,475    |

## 17. FOR NEW YORK STATE LIBRARY USE ONLY

|      |                                |            |
|------|--------------------------------|------------|
| 17.1 | LIB ID                         | 2400113890 |
| 17.2 | Interlibrary Relationship Code | ME         |
| 17.3 | Legal Basis Code               | NP         |
| 17.4 | Administrative Structure Code  | SO         |
|      |                                | Y          |

|      |                                       |              |
|------|---------------------------------------|--------------|
| 17.5 | <i>FSCS Public Library Definition</i> |              |
| 17.6 | <i>Geographic Code</i>                | OTH          |
| 17.7 | <i>FSCS ID</i>                        | NY0146       |
| 17.8 | <i>SED CODE</i>                       | 110901700035 |
| 17.9 | <i>INSTITUTION ID</i>                 | 800000053577 |

## **SUGGESTED IMPROVEMENTS**

|   |   |
|---|---|
| Library Name:   | PECK MEMORIAL LIBRARY   |
| Library System:   | Finger Lakes Library System   |
| Name of Person Completing Form:   | Mary Ann Frank  |
| Phone Number:   | (607) 849-6135  |
| I am satisfied that this resource (Collect) is meeting library needs:   | Disagree  |
| Applying this resource (Collect) will help improve library services to the public:  | Disagree  |
| Please share with us your suggestions for improving the <i>Annual Report</i> . When providing feedback, if applicable please indicate the question number each comment/suggestion refers to. Thank you! | Could whoever is on your tech team make it compatible with Google chrome? |