# Powers Library Association Annual Report For Public And Association Libraries - 2014

# 1. GENERAL LIBRARY INFORMATION

Report all information in Part 1 as of December 31, 2014, <u>except</u> for questions related to the <u>current</u> library director/manager (questions 1.35 through 1.40).

uncen	manager (questions 1.55 through 1.40).	
1.1	Library ID Number	2400054250
1.2	Library Name	POWERS LIBRARY ASSOCIATION
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	Moravia
1.6	Beginning Fiscal Reporting Year	01/01/2014
1.7	Ending Fiscal Reporting Year	12/31/2014
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 Local Fiscal Year	01/01/2014
1.12	Ending Local Fiscal Year	12/31/2014
1.13	Address Status	00 (for no change from previous year)
1.14	Street Address	29 CHURCH STREET
1.15	City	MORAVIA
1.16	Zip Code	13118
1.17	Mailing Address	P.O. BOX 71
1.18	City	MORAVIA
1.19	Zip Code	13118
1.20	Telephone Number (enter 10 digits only and hit the Tab key; enter N/A if no telephone number)	(315) 497-1955
1.21	Fax Number (enter 10 digits only and hit the Tab key; enter N/A if no fax number)	(315) 497-3284
1.22	E-Mail Address to Contact the Library (Enter N/A if no e-mail address)	powerslibrary@hotmail.com
1.23	Library Home Page URL (Enter N/A if no home page URL)	www.powerslibrary.org
1.24	Population Chartered to Serve (per 2010 Census)	1,282
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.	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	01/31/1880
1.30	Date the library was last registered	03/13/1903
1.31	Federal Employer Identification Number	150564082
1.32	County	CAYUGA
1.33	School District	Moravia Central School
1.34	Town/City	MORAVIA
1.35	Library System	Finger Lakes Library System
NOTE	: For questions 1.36 through 1.41, report all information for the current	nt library director/manager.
1.36	Title of Library Director/ Manager (select one):	Mrs.
1.37	First Name of Library Director/Manager	Lori
1.38	Last Name of Library Director/Manager	Cochran
1.39	NYS Public Librarian Certification Number	N/A
1.40	E-mail Address of the Director/Manager	powerslibrary@hotmail.com
1.41	Fax Number of the Director/Manager	(315) 497-3284
1.42	Does the library charge fees for library cards to people residing outside the system's service area?	N
1.43	Was all or part of the library's budget either subject to public vote held during the fiscal reporting year, or from an appropriation which was approved by public vote in a previous year? Enter Y for Yes, N for No. If yes, complete one record for the most recent vote from each funding source. If no, go to question 1.45.	
1.	Name of municipality or district holding the vote	Moravia Central School District
2.	Indicate the type of municipality or district holding the vote	School District
3.	Was this a Chapter 414 (Ed. Law §259.1.b)?	N/A
4.	Dollar amount	\$38,000
5.	Was the vote successful?	Y
6.	Date the vote was held (mm/dd/yyyy)	05/20/2014
1.44	For the fiscal year that ended in 2014, indicate the <i>total percentage</i> of the library's local public funding that was either subject to public vote during the fiscal reporting year, or that came from an appropriation which was approved by public vote	87.76
1.45	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 <i>each</i> contract. If no, go to question 1.46.	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
1.46	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 <a href="State">State</a> 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 <u>here</u> to read general instructions before completing this section.

# PRINT MATERIALS

Cataloged Books			
2.1	Adult Fiction Books	5,229	
2.2	Adult Non-fiction Books	3,576	
2.3	Total Adult Books (Total questions 2.1 & 2.2)	8,805	
2.4	Children's Fiction Books	3,758	
2.5	Children's Non-fiction Books	2,275	
2.6	Total Children's Books (Total questions 2.4 & 2.5)	6,033	
2.7	Total Cataloged Books (Total questions 2.3 & 2.6)	14,838	
Other	Print Materials		
2.8	Total Uncataloged Books	371	
2.9	Total Print Serials	52	
2.10	All Other Print Materials	16	
2.11	Total Other Print Materials (Total questions 2.8 through 2.10)	439	
2.12	Total Print Materials (Total questions 2.7 and 2.11)	15,277	
ALL	OTHER MATERIALS		
Elect	ronic Materials		
2.13	Electronic Books	5,431	
2.14	Local Databases	11	
2.15	NOVELny Databases	11	
2.16	Total Databases (Total questions 2.14 and 2.15)	22	
2.17	Audio - Downloadable Units	2,520	
2.18	Video - Downloadable Units	0	
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.)	3	
2.20	Total Electronic Materials (Total questions 2.13, 2.16, 2.17, 2.18 and 2.19)	7,976	
Non-l	Electronic Materials		
2.21	Audio - Physical Units	390	
2.22	Video - Physical Units	695	
2.23	Other Non-Electronic Materials (includes films, slides, etc.)	0	
2.24	Total Other Materials Holdings (Total questions 2.21 through 2.23)	1,085	
2.25	<b>GRAND TOTAL HOLDINGS</b> (Total questions 2.12, 2.20 and 2.24)	24,338	
CUR	RENT SERIAL SUBSCRIPTIONS		
2.26	Current Print Serial Subscriptions	4	
ADD	ITIONS TO HOLDINGS - Do not subtract withdrawals or discards.		
2.27	Cataloged Books	1,033	
2.28	All Other Print Materials	0	
2.29	Electronic Materials	5,435	
2.30	All Other Materials	152	
2.31	Total Additions (Total questions 2.27 through 2.30)	6,620	

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

Report all information on questions 3.1 through 3.21 as of the end of the <u>fiscal</u> year reported in Part 1; report information on questions 3.22 through 3.67 for the 2014 <u>calendar</u> year. Please click <u>here</u> 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)	47,350
3.2	Registered resident borrowers	491
3.3	Registered non-resident borrowers	1,590

Please report information on WRITTEN POLICIES as of 12/31/14.

#### 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?	N
Please	report information on ACCESSIBILITY as of 12/31/14.	

#### 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.)?
- 3.11 Does the library have assistive devices for persons who are deaf and hearing impaired (TTY/TDD)? N

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

#### LIBRARY SPONSORED PROGRAMS

3.12	Adult Program Sessions	12
3.13	Young Adult Program Sessions	2
3.14	Children's Program Sessions	48
3.15	All Other Program Sessions	3
3.16	Total Number of Program Sessions (Total questions 3.12 through 3.15)	65
3.17	Adult Program Attendance	322
3.18	Young Adult Program Attendance	12
3.19	Children's Program Attendance	1,135
3.20	All Other Program Attendance	52
3.21	Total Program Attendance (Total questions 3.17 through 3.20)	1,521

Please report information on SUMMER READING PROGRAMS for the 2014 calendar year.

#### SUMMER READING PROGRAM

3.22- Indicate which of the following apply to the summer reading program(s) offered by the library during the summer of 2014 (check all that apply):

	1 10 grann(s) 101 y comp wastes	
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
3.23	Library outlets offering a summer reading program	1
3.24	Children registered for the library's summer reading program	38
3.25	Young adults registered for the library's summer reading program	0
3.26	Adults registered for the library's summer reading program	0
3.27	Total number registered for the library's summer reading program (total $3.24 + 3.25 + 3.26$ )	38
3.28	Children's program sessions - Summer 2014	6
3.29	Young adult program sessions - Summer 2014	0
3.30	Adult program sessions - Summer 2014	0
3.31	Total program sessions - Summer 2014 (total $3.28 + 3.29 + 3.30$ )	6
3.32	Children's program attendance - Summer 2014	335
3.33	Young adult program attendance - Summer 2014	0
3.34	Adult program attendance - Summer 2014	0
3.35	$Total\ program\ attendance\ \textbf{-}\ Summer\ 2014\ (total\ 3.32+3.33+3.34)$	335
COLL	ABORATORS	
3.36	Public school district(s) and/or BOCES	1
3.37	Non-public school(s)	0
3.38	Childcare center(s)	1
3.39	Summer camp(s)	0
3.40	Municipality/Municipalities	1
3.41	Literacy provider(s)	0
3.42	Other (describe using the State note)	1
3.43	Total Collaborators (total 3.36 through 3.42)	4
DI	TABLET TO THE PART OF THE PART	

No

Please report information on EARLY LITERACY PROGRAMS for the 2014 calendar year.

# **EARLY LITERACY PROGRAMS**

Program(s) for young adults

b.

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3.44	Did the library offer early literacy programs? (Enter Y for Yes, N for No)	Y
3.45 ]	Indicate types of programs offered (check all that apply)	
a.	Focus on birth - school entry	Yes
b.	Focus on parents & caregivers	Yes
c.	Combined audience	Yes
d.	N/A	No
3.46 1	Number of sessions	
a.	Focus on birth - school entry	18
b.	Focus on parents & caregivers	2
c.	Combined audience	18
d.	N/A	0
3.47	Total Sessions	38
3.48	Attendance at sessions	
a.	Focus on birth - school entry	85
b.	Focus on parents & caregivers	16

c.	Combined audience	108
d.	N/A	0
3.49	Total Attendance	209
3.50 (	Collaborators (check all that apply):	
a.	Childcare center(s)	Yes
b.	Public School District(s) and/or BOCES	Yes
c.	Non-Public School(s)	Yes
d.	Health care providers/agencies	Yes
e.	Other (describe using the State note)	Yes
f.	N/A	No
Please report information on ADULT LITERACY for the 2014 calendar year.		
ADUI	LT LITERACY	

3.51	Did the library offer adult literacy programs?	No
3.52	Total program sessions	0
3.53	Total program attendance	0
3.54	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 Schools	No
d.	Other (see instructions and describe using State Note)	No
e	N/A	Yes

Please report information on PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL) for the 2014 calendar year.

# PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL)

		(
3.55	Did the library offer programs for English Speakers of Other Languages (ESOL)? (Enter Y for Yes, N for No)	N
3.56	Children's program sessions	0
3.57	Young adult program sessions	0
3.58	Adult program sessions	0
3.59	Total program sessions (total $3.56 + 3.57 + 3.58$ )	0
3.60	Children's program attendance	0
3.61	Young adult program attendance	0
3.62	Adult program attendance	0
3.63	Total program attendance (total $3.60 + 3.61 + 3.62$ )	0
3.64 (	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 State note)	No
e.	N/A	Yes
Please	e report information on DIGITAL LITERACY for the 2014 calendar	year.

#### **DIGITAL LITERACY**

3.65	Did the library offer digital literacy programs?	Y
3.66	Total program sessions	1
3.67	Total program attendance	12

# 4. LIBRARY TRANSACTIONS

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

#### CATALOGED BOOK CIRCULATION

ALUGED BOOK CIRCULATION	
Adult Fiction Books	7,141
Adult Non-fiction Books	2,557
Total Adult Books (Total questions 4.1 & 4.2)	9,698
Children's Fiction Books	3,821
Children's Non-fiction Books	1,358
Total Children's Books (Total questions 4.4 & 4.5)	5,179
Total Cataloged Book Circulation (Total question 4.3 & 4.6)	14,877
ULATION OF OTHER MATERIALS	
Circulation of Adult Other Materials	3,531
Circulation of Children's Other Materials	952
Circulation of Electronic Materials	971
Total Circulation of Other Materials (Total questions 4.8, 4.9 & 4.10)	5,454
Grand Total Circulation Transactions (Total questions 4.7 & 4.11)	20,331
Grand Total Circulation of Children's Materials (Total questions 4.6 & 4.9)	6,131
CRENCE TRANSACTIONS	
Total Reference Transactions	6,152
Does the library offer virtual reference?	N
RLIBRARY LOAN - MATERIALS RECEIVED (BORROWED)	
TOTAL MATERIALS RECEIVED	4,168
RLIBRARY LOAN - MATERIALS PROVIDED (LOANED)	
TOTAL MATERIALS PROVIDED	2,741
	Adult Fiction Books Adult Non-fiction Books Total Adult Books (Total questions 4.1 & 4.2) Children's Fiction Books Children's Non-fiction Books Total Children's Books (Total questions 4.4 & 4.5) Total Cataloged Book Circulation (Total question 4.3 & 4.6) CULATION OF OTHER MATERIALS Circulation of Adult Other Materials Circulation of Children's Other Materials Circulation of Electronic Materials Total Circulation of Other Materials (Total questions 4.8, 4.9 & 4.10) Grand Total Circulation Transactions (Total questions 4.7 & 4.11) Grand Total Circulation of Children's Materials (Total questions 4.6 & 4.9) CRENCE TRANSACTIONS Total Reference Transactions Does the library offer virtual reference? RLIBRARY LOAN - MATERIALS RECEIVED (BORROWED) TOTAL MATERIALS RECEIVED RLIBRARY LOAN - MATERIALS PROVIDED (LOANED)

# 5. TECHNOLOGY AND TELECOMMUNICATIONS

Report all information as of December 31, 2014.

#### **SYSTEMS AND SERVICES**

0101	ENISTINE 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	64,320
5.5	Does the library use Internet filtering software on any computer?	Y
5.6	Number of uses (sessions) of public Internet computers per year	11,580
5.7	Name of the person responsible for the library's Information Technology (IT) services	Richard Tkachuck
5.8	IT contact's telephone number (enter 10 digits only and hit the Tab key)	(607) 591-1962
5.9	IT contact's email address	rictka@gmail.com

### 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.	
BUDO	GETED 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)	0.9
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	1.1
6.11	Vacant Other Staff	0
6.12	TOTAL PAID STAFF (Total questions 6.2, 6.4, 6.6, 6.8 & 6.10)	2.00
6.13	VACANT TOTAL PAID STAFF (Total questions 6.3, 6.5, 6.7, 6.9	0.00
	& 6.11)	0.00
SALA	ARY 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)	0
6.19	Salary - Library Manager (not certified)	\$22,144

#### 7. MINIMUM PUBLIC LIBRARY STANDARDS

Report all information as of December 31, 2014. Please click <u>here</u> to read general instructions before completing this section.

compi	ting 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. Mai	ntains 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 <u>here</u> 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	TOTAL PUBLIC SERVICE OUTLETS (Total questions 8.1 - 8.4)	1
PUBL	IC SERVICE HOURS - Report hours to two decimal places.	
8.6	Minimum Weekly Total Hours - Main Library	30
8.7	Minimum Weekly Total Hours - Branch Libraries	0
8.8	Minimum Weekly Total Hours - Bookmobiles	0
8.9	Minimum Weekly Total Hours - Total Hours Open (Total questions $8.6$ - $8.8$ )	30.00
8.10	Annual Total Hours - Main Library	1,560
8.11	Annual Total Hours - Branch Libraries	0
8.12	Annual Total Hours - Bookmobiles	0
8.13	Annual Hours Open - Total Hours Open (Total questions 8.10 through 8.12)	1,560.00

#### 9. SERVICE OUTLET INFORMATION

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.

1.	Outlet Name	Powers Library Association
2.	Outlet Name Status	00 (for no change)
3.	Street Address	29 Church St.
4.	Outlet Street Address Status	00 (for no change)
5.	City	Moravia

6.	Zip Code	13118
7.	Phone (enter 10 digits only)	(315) 497-1955
8.	Fax Number (enter 10 digits only)	(315) 497-3284
9.	E-mail Address	PowersLibrary@Hotmail.com
10.	Outlet URL	http://www.powerslibrary.org
11.	County	Cayuga
12.	School District	Moravia Central School
13.	Library System	Finger Lakes Library System
14.	Outlet Type Code (select one):	CE
15.	Public Service Hours Per Year for This Outlet	1,560
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	38
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	1880
24.	Indicate the year this outlet underwent a major renovation costing \$25,000 or more	2002
25.	Square footage of the outlet	4,500
26.	Total number of Internet terminals at this outlet used by the general public	7
27.	Type of connection on the outlet's public Internet computers	Cable
28.	Maximum <u>download</u> speed of connection on the outlet's public Internet computers	1 Less than or equal to 200 kbps
29.	Maximum <u>upload</u> speed of connection on the outlet's public Internet computers	1 Less than or equal to 200 kbps
30.	Internet Provider	Southern Cayuga County Cablevision
31.	WiFi Access	Password required
32.	Number of wireless sessions provided by the library wireless service per year	7,120
33.	Does the outlet have interactive videoconferencing capability for public use?	N
34.	Does the outlet have a building entrance that is physically accessible to a person in a wheelchair?	Y
35.	Is every public part of the outlet accessible to a person in a wheelchair?	Y
36.	LIBID	2400054250
37.	FSCSID	NY0138
38.	Number of Bookmobiles in the Bookmobile Outlet Record	0
39.	Outlet Structure Status	00 (for no change from previous year)

# 10. OFFICERS AND TRUSTEES

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, 2014 to December 31, 2014)	12
10.2	Number of voting library board positions stated in the library's charter.	12
10.3	Number of current voting positions on library board.	12
10.4	Trustee term length	3 years

#### **BOARD MEMBER SELECTION**

10.5 Enter Board Member Selection Code (select one):

EA - board members are elected by the library association membership

List Officers and Board Members as of March 1, 2015. 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

BOAR	RD PRESIDENT	
10.6	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), or Vacant	Mr.
10.7	First Name	Shawn
10.8	Last Name	Raymond
10.9	Mailing Address	93 S. Main Street
10.10	City	Moravia
10.11	Zip Code (5 digits only)	13118
10.12	Phone (enter 10 digits only)	(315) 246-7908
10.13	E-mail Address	sraymond@upscoinc.com
10.14	Term Begins - Month	January
10.15	Term Begins - Year (yyyy)	2014
10.16	Term Expires - Month	December
10.17	Term Expires - Year (yyyy)	2016
10.18	The date the Oath of Office was taken (mm/dd/yyyy)	N/A
10.19	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
10.20	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Amy
3.	Last Name of Board Member	Jones
4.	Mailing Address	5 Keeler Ave.
5.	City	Moravia
6.	Zip Code (5 digits only)	13118
7.	E-mail address	awj1228@gmail.com
8.	Office Held or Trustee	Secretary
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2014
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2016
13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A

15.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Lesley
3.	Last Name of Board Member	Horner
4.	Mailing Address	PO Box 448
5.	City	Moravia
6.	Zip Code (5 digits only)	13118
7.	E-mail address	horner4@scccinternet.com
8.	Office Held or Trustee	Treasurer
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2013
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2015
13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
15.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Janice
3.	Last Name of Board Member	Baylor
4.	Mailing Address	27 Grove Street
5.	City	Moravia
6.	Zip Code (5 digits only)	13118
7.	E-mail address	janice.baylor@waldenu.edu
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2014
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2016
13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
15.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mr.
2.	First Name of Board Member	Ann
3.	Last Name of Board Member	Gaston
4.	Mailing Address	5360 Dresserville Rd.
5.	City	Moravia
6.	Zip Code (5 digits only)	13118
7.	E-mail address	agaston82@hotmail.com
8.	Office Held or Trustee	Vice President
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2014
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2016
13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A

1.         Title of Board Member (Select one):         Mrs.           2.         First Name of Board Member         Lauren           3.         Last Name of Board Member         S51 Brockway Rd.           4.         Mailing Address         5351 Brockway Rd.           5.         City         Moravia           6.         Zip Code (5 digits only)         13118           7.         E-mail address         Irlangtry @aol.com           8.         Office Held or Trustee         Trustee           9.         Term Begins - Month         January           10.         Term Expires         December           12.         Term Expires - Year (year)         2014           13.         The date the Oath of Office (mm/dd/yyyy) was taken         N/A           14.         The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)         N/A           15.         Is this a brand new trustee?         N           1.         Title of Board Member (select one):         Ms.           2.         First Name of Board Member         Shields           3.         Last Name of Board Member         Shields           4.         Mailing Address         S466 Dresserville Rd.           5.         City         Mora	15.	Is this a brand new trustee?	N
2.         First Name of Board Member         Lauren           3.         Last Name of Board Member         Langtry           4.         Mailing Address         5551 Brockway Rd.           5.         City         Moravia           6.         Zip Code (5 digits only)         13118           7.         F-mail address         Irlangtry@aol.com           8.         Office Held or Trustee         Trustee           9.         Term Begins - Wound         January           10.         Term Begins - Year (year)         2014           11.         Term Expires         December           12.         Term Expires - Year (yyyy)         2016           13.         The date the Oath of Office (mm/dd/yyyy) was taken         N/A           14.         The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)         N/A           15.         Is this a brand new trustee?         N           1.         Title of Board Member (select one):         Ms.           2.         First Name of Board Member (select one):         Ms.           3.         Last Name of Board Member         Siedo Dresserville Rd.           4.         Mailing Address         S466 Dresserville Rd.           5.         City <t< td=""><td></td><td></td><td></td></t<>			
3.         Last Name of Board Member         Langtry           4.         Mailing Address         551 Brockway Rd.           5.         Ciry         Moravia           6.         Zip Code (5 digits only)         13118           7.         E-mail address         Irlangtry @ aol.com           8.         Office Held or Trustee         Trustee           9.         Term Begins - Year (year)         2014           10.         Term Expires         December           12.         Term Expires - Year (yyyy)         2016           13.         The date the Oath of Office (mm/dd/yyyy) was taken         N/A           14.         The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)         N/A           15.         Is this a brand new trustee?         N           1.         Title of Board Member (select one):         Ms.           2.         First Name of Board Member         Shicids           3.         Last Name of Board Member         Shicids           4.         Mailing Address         5466 Dresserville Rd.           5.         City         Moravia           3.         Last Name of Board Member         Basketweaver33@yahoo.com           6.         Zip Code (5 digits only)         1			Lauren
4.         Mailing Address         5351 Brockway Rd.           5.         City         Moravia           6.         Zip Code (5 digits only)         13118           7.         E-mail address         Irlangtry@aol.com           8.         Office Held or Trustee         Trustee           9.         Term Begins - Wonth         January           10.         Term Begins - Year (year)         2014           11.         Term Expires         December           12.         Term Expires - Year (yyyy)         2016           13.         The date the Oath of Office (mm/dd/yyyy) was taken         N/A           14.         The date the Oath of Office was filed with fown or county clerk (mm/dd/yyyy)         N/A           15.         Is this a brand new trustee?         N           16.         Title of Board Member (select one):         Ms.           2.         First Name of Board Member         Shields           3.         Last Name of Board Member         Shields           4.         Mailing Address         5466 Dresserville Rd.           5.         City         Moravia           6.         Zip Code (5 digits only)         13118           7.         E-mail address         basketweaver33@yahoo.com <td></td> <td></td> <td></td>			
5.       City       Moravia         6.       Zip Code (5 digits only)       13118         7.       E-mail address       Irlangtr@aol.com         8.       Office Held or Trustee       Trustee         9.       Term Begins - Month       January         10.       Term Expires       December         11.       Term Expires - Year (yyyy)       2016         13.       The date the Oath of Office (mm/dd/yyyy) was taken       N/A         14.       The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)       N/A         15.       Is this a brand new trustee?       N         16.       Title of Board Member       Elizabeth         17.       Title of Board Member       Elizabeth         18.       Last Name of Board Member       Elizabeth         19.       Last Name of Board Member       Blivabeth         10.       Last Name of Board Member       Shields         11.       Term Expires       5466 Dresserville Rd.         10.       Zip Code (5 digits only)       13118         11.       Term Expires - Month       January         10.       Term Expires - Month       January         10.       Term Expires - Year (yyyy)       2014 <td></td> <td></td> <td>- ·</td>			- ·
6. Zip Code (5 digits only) 13118 1. E-mail address 1. Office Held or Trustee 2. Trustee 3. Office Held or Trustee 3. Trustee 4. Trustee 4. Trustee 5. Office Held or Trustee 7. Trustee 7. Trustee 7. December 7. Dec		-	•
7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office (mm/dd/yyyy) was taken 15. Is this a brand new trustee? 16. Title of Board Member (select one): 17. E-mail address 18. Office Held of Trustee 19. Term Begins - Year (year) 19. Title of Board Member (select one): 20. First Name of Board Member 30. Last Name of Board Member 31. Last Name of Board Member 32. First Name of Board Member 33. Last Name of Board Member 34. Mailing Address 35. City 36. City 37. E-mail address 38. Office Held of Trustee 39. Term Begins - Wonth 300. Term Begins - Year (year) 301. Term Expires 302. Term Expires - Year (yyyy) 303. The date the Oath of Office (mm/dd/yyyy) was taken 36. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 38. Is this a brand new trustee? 39. Title of Board Member 40. Mailing Address 40. Mrs. 40. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 40. Title of Board Member 41. Title of Board Member 42. First Name of Board Member 43. Last Name of Board Member 44. Mailing Address 46. Zip Code (5 digits only) 47. E-mail address 46. Zip Code (5 digits only) 48. Title of Board Member 49. Title of Board Member 40. Title of Board Member 41. Title of Board Member 42. First Name of Board Member 43. Last Name of Board Member 44. Mailing Address 46. Zip Code (5 digits only) 47. E-mail address 46. Zip Code (5 digits only) 48. Title of Board Member 49. Term Expires 40. Trustee 41. Title of Board Member 41. Title of Board Member 42. Term Expires 43. Last Name of Board Member 44. Mailing Address 46. Digital Read Read Read Read Read Read Read Read		•	
8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 16. Title of Board Member (select one): 17. Title of Board Member 18. Last Name of Board Member 19. Last Name of Board Member 19. City 10. Term Begins - Month 10. Term Begins - Wonth 11. Term Expires 10. Term Expires 11. Term Expires 12. Term Expires 13. Last Name of Board Member 14. The date the Oath of Office (mm/dd/yyyy) was taken 15. City 16. Zip Code (5 digits only) 17. E-mail address 18. Office Held or Trustee 19. Term Begins - Month 10. Term Begins - Year (yyyy) 10. Term Expires 11. Term Expires 12. Term Expires 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office (mm/dd/yyyy) was taken 15. Is this a brand new trustee? 16. Title of Board Member 17. It does not not not county clerk (mm/dd/yyyy) 18. Is this a brand new trustee? 18. Alsa Name of Board Member 19. Last Name of Board Member 19. Last Name of Board Member 19. Last Name of Board Member 20. City 21. Title of Board Member 22. First Name of Board Member 23. Last Name of Board Member 24. Mailing Address 25. City 26. Zip Code (5 digits only) 27. E-mail address 28. Office Held or Trustee 29. Term Begins - Year (year) 20. Term Begins - Wonth 20. Term Begins - Wonth 21. Term Expires 20. Term Expir			
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10. Term Begins - Year (year) 11. Term Expires December 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 16. Title of Board Member (select one): 17. Title of Board Member (select one): 18. Last Name of Board Member 19. Elizabeth 19. Last Name of Board Member 20. First Name of Board Member 21. Shields 22. First Name of Board Member 23. Last Name of Board Member 24. Mailing Address 25. City 26. Moravia 27. E-mail address 28. Office Held or Trustee 29. Term Begins - Wonth 20. Term Begins - Wonth 20. Term Expires 20. Term Expires 20. Term Expires 20. Term Expires - Year (yyyy) 20. The date the Oath of Office (mm/dd/yyyy) was taken 20. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 20. Last Name of Board Member 20. Last Name of Board Member 20. Last Name of Board Member 20. Eith of Board Member (select one): 20. First Name of Board Member 20. Last Name of Board Member 20. Last Name of Board Member 21. Title of Board Member (select one): 22. First Name of Board Member 23. Last Name of Board Member 24. Mailing Address 25. City 26. Zip Code (5 digits only) 27. E-mail address 28. Office Held or Trustee 29. Term Expires - Year (yyyr) 20. January 20. Trustee 20.			
11. Term Expires December 12. Term Expires - Year (yyyy) 2016 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? N 1. Title of Board Member (select one): Ms. 2. First Name of Board Member Elizabeth 3. Last Name of Board Member Shields 4. Mailing Address 5466 Dresserville Rd. 6. Zip Code (5 digits only) 13118 6. Zip Code (5 digits only) 13118 7. E-mail address basketweaver33@yahoo.com 8. Office Held or Trustee Trustee 9. Term Begins - Month January 10. Term Expires December 12. Term Expires - Year (yyyy) 2016 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? N 16. Title of Board Member Bellnier 17. Eighn Board Member Bellnier 18. Last Name of Board Member Bellnier 19. Eighn Address Acord Member Bellnier 20. Eighn Address Acord Member Bellnier 21. Term Expires Pear (year) 13118 22. First Name of Board Member Bellnier 23. Last Name of Board Member Acord Member Bellnier 24. Mailing Address Acord Member Bellnier 25. City Moravia 26. Zip Code (5 digits only) 13118 27. E-mail address Pobort Bellnier 28. Office Held or Trustee Trustee Trustee 29. Term Begins - Year (year) 2015 29. Term Begins - Year (year) 2015 2016 2017 2017 2017 2017 2017 2017 2017 2017		-	
12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 16. Title of Board Member (select one): 17. Last Name of Board Member 18. Last Name of Board Member 19. Last Name of Board Member 20. Address 21. City 22. City 23. Moravia 24. Mailing Address 25. City 26. Zip Code (5 digits only) 27. E-mail address 28. Office Held or Trustee 29. Term Begins - Year (year) 2014 2016 21. Term Expires 21. Term Expires - Year (yyyy) 21. The date the Oath of Office (mm/dd/yyyy) was taken 22. First Name of Board Member 23. Last Name of Board Member 24. Mailing Address 25. City 26. City 27. Title of Board Member 28. Mrs. 29. First Name of Board Member 29. Title of Board Member 20. Last Name of Board Member 20. First Name of Board Member 21. City 22. First Name of Board Member 23. Last Name of Board Member 24. Mailing Address 25. City 26. City 27. City 28. Moravia 29. Trustee 29. Term Begins - Year (year) 20. Last Name of Board Member 30. Last Name of Board Member 41. Mailing Address 4623 Riley Rd. 4623 Riley Rd. 4623 Riley Rd. 4623 Riley Rd. 4624 Riley Rd. 4625 Riley Rd. 4626 Riley Rd. 4627 Riley Rd. 4627 Riley Rd. 4628 Riley Rd. 4629 Riley Rd. 4629 Riley Rd. 4620 Riley Rd. 4621 Riley Rd. 4623 Riley Rd. 4623 Riley Rd. 4623 Riley Rd. 4624 Riley Rd. 4625 Riley Rd. 4626 Riley Rd. 4627 Riley Rd. 4627 Riley Rd. 4628 Riley Rd. 4629 Riley Rd. 4629 Riley Rd. 4620 Riley Rd. 4621 Riley Rd. 4622 Riley Rd. 4623 Riley Rd. 4623 Riley Rd. 4623 Riley Rd. 4624 Riley Rd. 4625 Riley Rd. 4626 Riley Rd. 4627 Riley Rd. 4627 Riley Rd. 4628 Riley Rd. 4629 Riley Rd. 4629 Riley Rd. 4629 Riley Rd. 4620 Riley Rd. 4621 Riley Rd. 4623 Riley Rd. 4624 Riley Rd. 4625 Riley Rd. 4626 Riley Rd. 4627 Riley Rd. 4627 Riley Rd. 4628 Riley Rd. 4629 Riley Rd. 4629 Riley Rd. 4629 Riley Rd. 4620 Riley Rd. 4621 Riley Rd. 4623 Riley Rd. 4624 Riley Rd. 4625 Riley Rd. 4626 Riley Rd. 4626 Riley Rd. 4627 Riley Rd. 4628 Riley Rd. 4629 Rile			
The date the Oath of Office (mm/dd/yyyy) was taken  The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)  Title of Board Member (select one):  First Name of Board Member  Last Name of Board Member  Mrs.  Last Name of Board Member  Mrs.  Last Name of Board Member  Last Name of Board Member  Mailing Address  A623 Riley Rd.  Moravia  Latt Name of Board Member  Last Name of Board Member  Last Name of Board Member  Mailing Address  Office Held or Trustee  T		•	
14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)  15. Is this a brand new trustee?  16. Title of Board Member (select one):  27. First Name of Board Member  38. Last Name of Board Member  49. Mailing Address  40. Zip Code (5 digits only)  41. Term Begins - Year (year)  41. The date the Oath of Office (mm/dd/yyyy) was taken  42. Title of Board Member  43. Last Name of Board Member  44. Mailing Address  45. City  46. Moravia  47. E-mail address  48. Office Held or Trustee  49. Term Begins - Year (year)  40. Term Expires  40. December  41. Term Expires - Year (yyyy)  41. The date the Oath of Office (mm/dd/yyyy) was taken  41. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)  41. Title of Board Member (select one):  42. First Name of Board Member  43. Last Name of Board Member  44. Mailing Address  4623 Riley Rd.  4624 Riley Rd.  4625 City  4626 City  4627 Roberta  4628 Riley Rd.  4629 Riley Rd.  4629 Riley Rd.  4620 City  4620 City  4621 Riley Rd.  4623 Riley Rd.  4624 Riley Rd.  4625 Riley Rd.  4626 Riley Rd.  4627 Riley Rd.  4627 Riley Rd.  4628 Riley Rd.  4629 Riley Rd.  4629 Riley Rd.  4620 Roberta  4621 Riley Rd.  4622 Riley Rd.  4623 Riley Rd.  4623 Riley Rd.  4623 Riley Rd.  4623 Riley Rd.  4624 Riley Rd.  4625 Riley Rd.  4626 Riley Rd.  4627 Riley Rd.  4627 Riley Rd.  4628 Riley Rd.  4629 Riley Rd.  4629 Riley Rd.  4620 Riley Rd.  4621 Riley Rd.  4622 Riley Rd.  4623 Riley Rd.  4623 Riley Rd.  4623 Riley Rd.  4623 Riley Rd.  4624 Riley Rd.  4625 Riley Rd.  4626 Riley Rd.  4627 Riley Rd.  4628 Riley Rd.  4629 Riley Rd.  4629 Riley Rd.  4620 Riley Rd.  4621 Riley Rd.  4622 Riley Rd.  4623 Riley Rd.  4623 Riley Rd.  4624 Riley Rd.  4625 Riley Rd.  4626 Riley Rd.  4627 Riley Rd.  4628 Rd.  4628 Riley Rd.  4629 Riley Rd.  4629 Riley Rd.  4620 Rd.  4620 Rd.  4621 R			
15. Is this a brand new trustee? 1. Title of Board Member (select one): 2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 5. City 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Year (yyyy) 11. Term Expires 12. Title of Board Member 13. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Last Name of Board Member 16. Zip Code (5 digits only) 17. E-mail address 18. Office Held or Trustee 19. Term Begins - Year (year) 10. Term Begins - Year (yyyy) 11. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 16. First Name of Board Member 17. Title of Board Member (select one): 18. Mailing Address 19. City Moraus 19. City Moraus 19. City Moraus 19. E-mail address 19. Office Held or Trustee 19. Term Begins - Month 10. Term Begins - Year (year) 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires 13. Last Name of Doard Member 14. The date the Oath of Office (mm/dd/yyyy) was taken 19. Term Begins - Year (year) 10. Term Expires 11. Term Expires 12. Term Expires 12. Term Expires 13. The date the Oath of Office (mm/dd/yyyy) was taken 19. Term Expires 19. Term		The date the Oath of Office was filed with town or county clerk	
2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 5. City 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 11. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office was filed with town or county clerk 13. Last Name of Board Member 14. Mailing Address 15. List Name of Board Member 16. Title of Board Member 17. Title of Board Member 18. City 19. Term Expires - Year (yyyy) 2016 2016 2016 2016 2016 2017 2017 2017 2017 2018 2019 2019 2010 2010 2010 2010 2011 2011	15.		N
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4. Mailing Address 5. City Moravia 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. Title of Board Member 15. Is this a brand new trustee? 16. First Name of Board Member 17. Last Name of Board Member 18. City 19. Moravia 19. City 10. Term Begins - Wear (year) 10. Trustee 11. Trustee 12. Trustee 13. Is this a brand new trustee? 14. Mailing Address 15. City 16. City 17. City 18. City 18	2.	First Name of Board Member	Elizabeth
5. City Moravia 6. Zip Code (5 digits only) 7. E-mail address basketweaver33@yahoo.com 8. Office Held or Trustee 9. Term Begins - Month January 10. Term Begins - Year (year) 11. Term Expires December 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 16. Title of Board Member (select one): 17. Title of Board Member (select one): 28. First Name of Board Member 39. Last Name of Board Member 40. Mailing Address 51. City Moravia 62. Zip Code (5 digits only) 63. Zip Code (5 digits only) 64. Zip Code (5 digits only) 75. E-mail address 76. December 77. E-mail address 77. E-mail address 78. Office Held or Trustee 79. Term Begins - Month 70. Term Begins - Year (year) 71. Term Expires 71. Term Expires 72. Term Expires 73. December 74. Trustee 75. Term Begins - Year (year) 76. Term Begins - Year (year) 77. Term Expires 78. December 79. Term Begins - Year (year) 79. Term Begins - Year (year) 79. Term Expires 70. Term Expires 70. December 70. Term Expires 70. Term Expires 70. December 71. Term Expires 71. Term Expires 72. Term Expires 73. The date the Oath of Office (mm/dd/yyyy) was taken 74. The date the Oath of Office was filed with town or county clerk 70. The date the Oath of Office (mm/dd/yyyy) was taken 71. The date the Oath of Office was filed with town or county clerk 71. The date the Oath of Office was filed with town or county clerk 71. The date the Oath of Office was filed with town or county clerk 71. The date the Oath of Office was filed with town or county clerk 71. The date the Oath of Office was filed with town or county clerk 71. The date the Oath of Office was filed with town or county clerk 71. The date the Oath of Office was filed with town or county clerk 71. The date the Oath of Office was filed with town or county clerk	3.	Last Name of Board Member	Shields
5. City Moravia 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 16. Title of Board Member (select one): 17. Title of Board Member (select one): 18. Mailing Address 19. City Moravia 19. City Moravia 19. E-mail address 10. Gigits only) 11. Trustee 11. Trustee 12. Term Expires - Year (year) 13. Last Name of Board Member 14. Mailing Address 15. City Moravia 16. Zip Code (5 digits only) 16. Zip Code (5 digits only) 17. E-mail address 18. Office Held or Trustee 19. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office (mm/dd/yyyy) was taken 15. The date the Oath of Office (mm/dd/yyyy) was taken 16. The date the Oath of Office (mm/dd/yyyy) was taken 17. The date the Oath of Office (mm/dd/yyyy) was taken 18. The date the Oath of Office (mm/dd/yyyy) was taken 19. Term Expires 10. The date the Oath of Office (mm/dd/yyyy) was taken 10. The date the Oath of Office (mm/dd/yyyy) was taken 11. The date the Oath of Office (mm/dd/yyyy) was taken 12. The date the Oath of Office (mm/dd/yyyy) was taken 13. The date the Oath of Office was filed with town or county clerk (m/d)	4.	Mailing Address	5466 Dresserville Rd.
7. E-mail address  8. Office Held or Trustee  9. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires - Pear (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)  15. Is this a brand new trustee?  16. Title of Board Member (select one):  17. Title of Board Member  18. Mailing Address  19. City  10. Zip Code (5 digits only)  10. E-mail address  10. Office Held or Trustee  11. Trustee  12. Term Begins - Month  13. Last Name of Board Member  14. Mailing Address  15. City  16. Zip Code (5 digits only)  17. E-mail address  18. Office Held or Trustee  19. Term Begins - Month  10. Term Begins - Year (year)  10. Term Expires  11. Term Expires  12. Term Expires  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  15. Trustee  16. N/A	5.	-	Moravia
7. E-mail address  8. Office Held or Trustee  9. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)  15. Is this a brand new trustee?  16. Title of Board Member  17. Title of Board Member  18. Mailing Address  19. City  10. Zip Code (5 digits only)  10. E-mail address  10. Tirustee  11. Trustee  12. Term Begins - Month  13. Last Name of Board Member  14. Mailing Address  15. City  16. Zip Code (5 digits only)  17. E-mail address  18. Office Held or Trustee  19. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office (mm/dd/yyyy) was taken  15. The date the Oath of Office was filed with town or county clerk  16. N/A	6.	Zip Code (5 digits only)	13118
9. Term Begins - Month 10. Term Begins - Year (year) 2014 11. Term Expires 2016 12. Term Expires - Year (yyyy) 2016 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 1 N 1. Title of Board Member (select one): 2 First Name of Board Member 3 Last Name of Board Member 4 Mailing Address 4623 Riley Rd. 5 City Moravia 6 Zip Code (5 digits only) 13118 7 E-mail address Office Held or Trustee 9 Term Begins - Month 10 Term Begins - Year (year) 11 Term Expires 12 Term Expires 12 Term Expires 13 December 14 The date the Oath of Office (mm/dd/yyyy) was taken 14 The date the Oath of Office (mm/dd/yyyy) was taken 15 Trustee to the Coath of Office (mm/dd/yyyy) was taken 16 N/A	7.		basketweaver33@yahoo.com
10. Term Begins - Year (year)  11. Term Expires  12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)  15. Is this a brand new trustee?  1. Title of Board Member (select one):  2. First Name of Board Member  3. Last Name of Board Member  4. Mailing Address  5. City  6. Zip Code (5 digits only)  7. E-mail address  8. Office Held or Trustee  9. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  N/A	8.	Office Held or Trustee	Trustee
11. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 1 N 1. Title of Board Member (select one): 2 First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 5. City 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk N/A	9.	Term Begins - Month	January
12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)  15. Is this a brand new trustee?  1. Title of Board Member (select one):  2. First Name of Board Member  3. Last Name of Board Member  4. Mailing Address  5. City  6. Zip Code (5 digits only)  7. E-mail address  8. Office Held or Trustee  9. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  15. N/A  16. N/A  17. E-mail address  18. Office Held or Trustee  19. Term Expires  10. Term Expires  11. Term Expires  12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk	10.	Term Begins - Year (year)	2014
13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 1. Title of Board Member (select one): 2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 5. City 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk 14. N/A 15. The date the Oath of Office was filed with town or county clerk 15. Trustee 16. Trustee 17. Trustee 18. Office Held or Trustee 19. Term Expires 10. Term Expires 11. Term Expires 12. Term Expires 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk 15. N/A	11.	Term Expires	December
14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)  15. Is this a brand new trustee?  1. Title of Board Member (select one):  2. First Name of Board Member  3. Last Name of Board Member  4. Mailing Address  5. City  6. Zip Code (5 digits only)  7. E-mail address  8. Office Held or Trustee  9. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  N/A	12.	Term Expires - Year (yyyy)	2016
(mm/dd/yyyy)  15. Is this a brand new trustee?  1. Title of Board Member (select one):  2. First Name of Board Member  3. Last Name of Board Member  4. Mailing Address  5. City  6. Zip Code (5 digits only)  7. E-mail address  8. Office Held or Trustee  9. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  Nr.  Nr.  Roberta  Roberta  8. Horica  Mrs.  14. The date the Oath of Office was filed with town or county clerk  Nr.  Nr.  Nr.  15. Nr.  Nr.  Nr.  Nr.  Nr.  Nr.  Nr.  Nr.	13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
1. Title of Board Member (select one):  2. First Name of Board Member  3. Last Name of Board Member  4. Mailing Address  5. City  6. Zip Code (5 digits only)  7. E-mail address  8. Office Held or Trustee  9. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  Mrs.  Roberta  Bellnier  4623 Riley Rd.  Moravia  13118  7. E-mail address  pbbobbie@yahoo.com  Trustee  9. Trustee  9. Term Begins - Year (year)  10. Term Expires - Year (year)  11. Term Expires  December  12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  N/A	14.	•	N/A
2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 4623 Riley Rd. 5. City Moravia 6. Zip Code (5 digits only) 13118 7. E-mail address pbbobbieb@yahoo.com 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk N/A	15.	Is this a brand new trustee?	N
3. Last Name of Board Member 4. Mailing Address 4623 Riley Rd. 5. City Moravia 6. Zip Code (5 digits only) 7. E-mail address Pbbobbieb@yahoo.com 8. Office Held or Trustee 9. Term Begins - Month January 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk N/A	1.	Title of Board Member (select one):	Mrs.
4. Mailing Address 5. City 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk 15. City 13. Moravia 13. Moravia 13. Hodate she Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk 15. City 16. Moravia 17. Trustee 18. Debobbieb@yahoo.com 19. Trustee 19. Trustee 19. December 20. December 20. Term Expires 20. December 20. Term Expires - Year (yyyy) 20. N/A	2.	First Name of Board Member	Roberta
5. City  6. Zip Code (5 digits only)  7. E-mail address  8. Office Held or Trustee  9. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  Moravia  13118  pbbobbieb@yahoo.com  Trustee  9. Trustee  1 January  2015  December  2017  N/A	3.	Last Name of Board Member	Bellnier
6. Zip Code (5 digits only)  7. E-mail address  8. Office Held or Trustee  9. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  13. The date the Oath of Office was filed with town or county clerk  13. The date the Oath of Office was filed with town or county clerk  14. The date the Oath of Office was filed with town or county clerk	4.	Mailing Address	4623 Riley Rd.
7. E-mail address pbbobbieb@yahoo.com  8. Office Held or Trustee Trustee  9. Term Begins - Month January  10. Term Begins - Year (year) 2015  11. Term Expires December  12. Term Expires - Year (yyyy) 2017  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  N/A	5.	City	Moravia
8. Office Held or Trustee  9. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  N/A	6.	Zip Code (5 digits only)	13118
9. Term Begins - Month  10. Term Begins - Year (year)  11. Term Expires  12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  N/A	7.	E-mail address	pbbobbieb@yahoo.com
10. Term Begins - Year (year)  11. Term Expires  12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  N/A	8.	Office Held or Trustee	Trustee
11. Term Expires  12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  N/A	9.	Term Begins - Month	January
12. Term Expires - Year (yyyy)  13. The date the Oath of Office (mm/dd/yyyy) was taken  14. The date the Oath of Office was filed with town or county clerk  N/A	10.	Term Begins - Year (year)	2015
13. The date the Oath of Office (mm/dd/yyyy) was taken  N/A  14. The date the Oath of Office was filed with town or county clerk  N/A	11.	Term Expires	December
14. The date the Oath of Office was filed with town or county clerk	12.	Term Expires - Year (yyyy)	2017
$\mathbf{V} = \mathbf{W} / \mathbf{A}$	13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
	14.	·	N/A

15.	Is this a brand new trustee?	Y
1.	Title of Board Member (select one):	Mr.
2.	First Name of Board Member	Jeff
3.	Last Name of Board Member	Carmichael
4.	Mailing Address	174 N. Main Street
5.	City	Moravia
6.	Zip Code (5 digits only)	13118
7.	E-mail address	jc2693@cornell.edu
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2014
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2016
13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
15.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Ms.
2.	First Name of Board Member	Jacki
3.	Last Name of Board Member	Hess
4.	Mailing Address	35 E. Cayuga Street
5.	City	Moravia
6.	Zip Code (5 digits only)	13118
7.	E-mail address	hessjacki@aol.com
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2015
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2017
13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
15.	Is this a brand new trustee?	Y
1.	Title of Board Member (select one):	Ms.
2.	First Name of Board Member	Linda
3.	Last Name of Board Member	Larsen
4.	Mailing Address	PO Box 45
5.	City	Moravia
6.	Zip Code (5 digits only)	13118
7.	E-mail address	lindaplarsen@gmail.com
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2015
11.	Term Expires	December 2017
12.	Term Expires - Year (yyyy)	2017
13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A

15.	Is this a brand new trustee?	Y
1.	Title of Board Member (select one):	Mr.
2.	First Name of Board Member	Richard
3.	Last Name of Board Member	Tkachuck
4.	Mailing Address	1406 Clover Leaf Rd.
5.	City	Locke
6.	Zip Code (5 digits only)	13092
7.	E-mail address	rictka@gmail.com
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2015
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2017
13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
15.	Is this a brand new trustee?	Y

# 11. OPERATING FUNDS RECEIPTS

Report financial data based on the fiscal reporting year reported in Part 1. *ROUND TO THE NEAREST DOLLAR*. Please click <u>here</u> to read general instructions before completing this section.

#### LOCAL PUBLIC FUNDS

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

1	1	
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	Moravia Central School
3.	Amount	\$38,000
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	Y
5.	Written Contractual Agreement	N/A
1.	Source of Funds	Town
2.	Name of funding County, Municipality or District	Town of Moravia
3.	Amount	\$1,800
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	N
5.	Written Contractual Agreement	Y
1.	Source of Funds	Village
2.	Name of funding County, Municipality or District	Village of Moravia
3.	Amount	\$3,000
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	N
5.	Written Contractual Agreement	Y
1.	Source of Funds	Town
2.	Name of funding County, Municipality or District	Town of Locke
3.	Amount	\$500
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	N

5.	Written Contractual Agreement	Y
11.2	TOTAL LOCAL PUBLIC FUNDS	\$43,300
	EM CASH GRANTS TO MEMBER LIBRARY	, ,
11.3	Local Library Services Aid (LLSA)	\$1,270
11.4	Central Library Aid (CLDA and/or CBA)	\$0
11.5	Additional State Aid received from the System	\$2,000
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)	\$3,270
OTH	ER 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
FEDE	CRAL AID FOR LIBRARY OPERATION	
11.10	LSTA	\$0
11.11	Other Federal Aid	\$0
11.12	TOTAL FEDERAL AID (Add Questions 11.10 and 11.11)	\$0
11.13	CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE	\$ \$0
OTHI	ER RECEIPTS	
11.14	Gifts and Endowments	\$23,896
11.15	Fund Raising	\$440
11.16	Income from Investments	\$14,292
11.17	Library Charges	\$855
11.18	Other	\$2,233
11.19	<b>TOTAL OTHER RECEIPTS</b> (Add Questions 11.14, 11.15, 11.16, 11.17 and 11.18)	\$41,716
11.20	<b>TOTAL OPERATING FUND RECEIPTS</b> (Add Questions 11.2, 11.8, 11.9, 11.12, 11.13 and 11.19)	\$88,286
11.21	BUDGET LOANS	\$0
TRAN	NSFERS	
11.22	From Capital Fund (Same as Question 14.8)	\$0
11.23	From Other Funds	\$20,708
11.24	TOTAL TRANSFERS (Add Questions 11.22 and 11.23)	\$20,708
11.25	BALANCE IN OPERATING FUND - Beginning Balance for Fiscal Year Ending 2014 (Same as Question 12.39 of previous year if fiscal year has not changed)	\$16,533
11.26	GRAND TOTAL RECEIPTS, BUDGET LOANS, TRANSFERS AND BALANCE (Add Questions 11.20, 11.21, 11.24 and 11.25; Same as Question 12.41)	\$125,527

# 12. OPERATING FUND DISBURSEMENTS STAFF EXPENDITURES

# Salaries & Wages Paid from Library Funds

12.1	Certified Librarians	\$0
12.2	Other Staff	\$41,001

12.3	<b>Total Salaries &amp; Wages Expenditures</b> (Add Questions 12.1 and 12.2)	\$41,001
12.4	<b>Employee Benefits Expenditures</b>	\$3,136
12.5	<b>Total Staff Expenditures (Add Questions 12.3 and 12.4)</b>	\$44,137
COLL	ECTION EXPENDITURES	
12.6	Print Materials Expenditures	\$13,660
12.7	Electronic Materials Expenditures	\$1,028
12.8	Other Materials Expenditures	\$205
12.9	<b>Total Collection Expenditures</b> (Add Questions 12.6, 12.7 and 12.8)	\$14,893
CAPI	TAL EXPENDITURES FROM OPERATING FUNDS	
12.10	From Local Public Funds (71PF)	\$0
12.11	From Other Funds (710F)	\$25,188
12.12	<b>Total Capital Expenditures</b> (Add Questions 12.10 and 12.11)	\$25,188
OPER	ATION AND MAINTENANCE OF BUILDINGS	
_	rs to Building & Building Equipment	+ -
	From Local Public Funds (72PF)	\$0
	From Other Funds (72OF)	\$0
12.15	<b>Total Repairs</b> (Add Questions 12.13 and 12.14)	\$0
12.16	Other Disbursements for Operation & Maintenance of Buildings	\$20,524
12.17	<b>Total Operation &amp; Maintenance of Buildings</b> (Add Questions 12.15 and 12.16)	\$20,524
MISC	ELLANEOUS EXPENSES	
12.18	Office and Library Supplies	\$1,499
12.19	Telecommunications	\$2,102
12.20	Binding Expenses	\$0
12.21	Postage and Freight	\$504
12.22	Professional & Consultant Fees	\$1,343
12.23	Equipment	\$0
12.24	Other Miscellaneous	\$1,809
12.25	<b>Total Miscellaneous Expenses</b> (Add Questions 12.18, 12.19, 12.20, 12.21, 12.22, 12.23 and 12.24)	\$7,257
12.26	CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE	\$5,752
DEBT	SERVICE	
~ .		
-	al Purposes Loans (Principal and Interest)	4.0
	From Local Public Funds (73PF)	\$0
	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	<b>Total Debt Service</b> (Add Questions 12.29, 12.30 and 12.31)	\$0
12.33	<b>TOTAL OPERATING FUND DISBURSEMENTS</b> (Add Questions 12.5, 12.9, 12.12, 12.17, 12.25, 12.26 and 12.32)	\$117,751
TRAN	SFERS	
Tr.		
	fers to Capital Fund	4.0
12.34	From Local Public Funds (76PF)	\$0

	12.35	From Other Funds (760F)	\$0
	12.36	<b>Total Transfers to Capital Fund</b> (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	<b>TOTAL DISBURSEMENTS AND TRANSFERS</b> (Add Questions 12.33 and 12.38)	\$117,751
	12.40	BALANCE IN OPERATING FUND - Ending Balance for the Fiscal Year Ending 2014	\$7,776
	12.41	<b>GRAND TOTAL DISBURSEMENTS, TRANSFERS &amp; BALANCE</b> (Add Questions 12.39 and 12.40; same as Question 11.26)	\$125,527
	ASSU	RANCE	
	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).	02/22/2015
FISCAL AUDIT			
	12.43	Last audit performed (mm/dd/yyyy)	N/A
	12.44	Time period covered by this audit (mm/dd/yyyy) - (mm/dd/yyyy)	N/A
	12.45	Indicate type of audit (select one):	N/A
	CAPI	TAL 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.	N

# 13. CAPITAL FUND RECEIPTS

Report financial data based on the fiscal year reported in Part 1. *ROUND TO THE NEAREST DOLLAR*. Please click <u>here</u> to read general instructions before completing this section.

REVE	ENUES FROM LOCAL SOURCES			
13.1	Revenues from Local Government Sources	\$0		
13.2	All Other Revenues from Local Sources	\$0		
13.3	<b>Total Revenues from Local Sources</b> (Add Questions 13.1 and 13.2)	\$0		
STAT	E 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		
FEDE	FEDERAL AID FOR CAPITAL PROJECTS			
13.7	TOTAL FEDERAL AID	\$0		
INTE	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)	\$0		
13.10	NON-REVENUE RECEIPTS	\$0		
13.11	TOTAL CASH RECEIPTS (Add Questions 13.9 and 13.10)	\$0		
13.12	Year Ending 2014 (Same as Question 14.11 of previous year, if fiscal year has not changed)	\$0		
	TOTAL CASH RECEIPTS AND BALANCE			

#### 14. CAPITAL FUND DISBURSEMENTS

#### PROJECT EXPENDITURES

Please click <u>here</u> to read general instructions before completing this section.

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14.1	Construction	\$0
14.2	Incidental Construction	\$0
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)	\$0
14.8	TRANSFER TO OPERATING FUND (Same as Question 11.22)	\$0
14.9	NON-PROJECT EXPENDITURES	\$0
14.10	<b>TOTAL CASH DISBURSEMENTS AND TRANSFERS</b> (Add Questions 14.7, 14.8 and 14.9)	\$0
14.11	<b>BALANCE IN CAPITAL FUND</b> - Ending Balance for the Fiscal Year Ending 2014	\$0
14.12	<b>TOTAL CASH DISBURSEMENTS AND BALANCE</b> (Add Questions 14.10 and 14.11; same as Question 13.13)	\$0

#### 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	0.68
16.3	All Other Paid Staff	0.83
16.4	Total Paid Employees	1.51
16.5	State Government Revenue	\$3,270
16.6	Federal Government Revenue	\$0
16.7	Other Operating Revenue	\$41,716
16.8	Total Operating Revenue	\$88,286
16.9	Other Operating Expenditures	\$33,533
16.10	Total Operating Expenditures	\$92,563
16.11	Total Capital Expenditures	\$25,188
16.12	Print Materials	15,261
16.13	Total Registered Borrowers	2,081
16.14	Other Capital Revenue and Receipts	\$0
16.15	Total Number of Internet Terminals Used by the General Public	7

#### 17. FOR NEW YORK STATE LIBRARY USE ONLY

2400054250 17.1 LIB ID ME 17.2 Interlibrary Relationship Code 17.3 Legal Basis Code NP SO 17.4 Administrative Structure Code Y 17.5 FSCS Public Library Definition OTH 17.6 Geographic Code NY0138 17.7 FSCS ID

# SUGGESTED IMPROVEMENTS

Library Name: POWERS LIBRARY ASSOCIATION

Library System: Finger Lakes Library System

Name of Person Completing Form: Lori A. Cochran & Lesley Horner

Phone Number: (315) 497-1955

Please share with us your suggestions for improving the *Annual Report*. When providing feedback, if applicable please indicate the question number each comment/suggestion refers to. Thank you!