# George P. & Susan Platt Cady Library Annual Report For Public And Association Libraries - 2015

## 1. GENERAL LIBRARY INFORMATION

#### Part 1

Report all information in Part 1 as of December 31, 2015, <u>except</u> for questions related to the <u>current</u> library director/manager (questions 1.35 through 1.40).

directe	manager (questions 1.33 through 1.40).	
1.1	Library ID Number	2400604550
1.2	Library Name	GEORGE P. & SUSAN PLATT CADY 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	Nichols
1.6	Beginning Fiscal Reporting Year	01/01/2015
1.7	Ending Fiscal Reporting Year	12/31/2015
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	01/01/2015
1.12	Ending Local Fiscal Year	12/31/2015
1.13	Address Status	00 (for no change from previous year)
1.14	Street Address	42 RIVER STREET
1.15	City	NICHOLS
1.16	Zip Code	13812
1.17	Mailing Address	P.O. BOX 70
1.18	City	NICHOLS
1.19	Zip Code	13812
1.20	Telephone Number (enter 10 digits only and hit the Tab key; enter N/A if no telephone number)	(607) 699-3835
1.21	Fax Number (enter 10 digits only and hit the Tab key; enter N/A if no fax number)	(607) 699-3835
1.22	E-Mail Address to Contact the Library (Enter N/A if no e-mail address)	clibrary3@stny.rr.com
1.23	Library Home Page URL (Enter N/A if no home page URL)	http://www.flls.org/memberpages/nichols.htm
1.24	Population Chartered to Serve (per 2010 Census)	2,525
1.25	Indicate the type of library as stated in the library's charter (select one):	PUBLIC
1.26	Indicate the area chartered to serve as stated in the library's charter (select one):	Town
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	06/20/1941
1.30	Date the library was last registered	12/24/1981
1.31	Federal Employer Identification Number	156001066
1.32	County	TIOGA
1.33	School District	Tioga Central Schools
1.34	Town/City	Nichols
1.35	Library System	Finger Lakes Library System
NOTE	: For questions 1.36 through 1.41, report all information f	or the <u>current</u> library director/manager.
1.36	Title of Library Director/ Manager (select one):	Ms.
1.37	First Name of Library Director/Manager	Ronnette
1.38	Last Name of Library Director/Manager	Councilman
1.39	NYS Public Librarian Certification Number	22114
1.40	E-mail Address of the Director/Manager	clibrary3@stny.rr.com
1.41	Fax Number of the Director/Manager	(607) 699-3835
1.42	Does the library charge fees for library cards to people residing outside the system's service area?	Y
Part 2	,	
1.43	Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2015? (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 1.44.	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/2015)	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
	Total proposed appropriation (sum of oa and ob).	
	question should only be answered if "No" was answered the municipalities/districts that were held in different y	d in Q1.43 OR the library has votes from
	uestion should only be answered if "No" was answere	d in Q1.43 OR the library has votes from

1.44	Did the library receive funding from an appropriation which was approved by public vote in a prior year? (Prior to Calendar Year 2015) Enter Y for Yes, N for No. If Yes, complete one record for the vote from each funding source. If No, go to question 1.45.	Y
1	Name of municipality or district holding the public vote	Tio

Tioga Central School District Name of municipality or district holding the public vote

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

05/15/2001

School District

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

- 4. What type of public vote was it? school district ballot proposition (Ed. Law  $\hat{A}$ §259(1)(a))
- 5. What was the total dollar amount of the appropriation from tax dollars resulting from the last successful vote? \$4,000

Part 3

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? N
	Enter Y for Yes, N for No. If yes, please complete one
	record for each contract. If no, go to question 1.46.

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 N/A (select one):

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.

## 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.

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

It does not cover all materials (i.e., microform, scores, 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. Do not include items that are permanently retained by the patron; count only items that have a set circulation period where it is available for their use. Count electronic materials at the administrative entity level; do not duplicate numbers at each branch.

#### PRINT MATERIALS

#### **Cataloged Books**

	9	
2.1	Adult Fiction Books	4,792
2.2	Adult Non-fiction Books	2,477
2.3	Total Adult Books (Total questions 2.1 & 2.2)	7,269
2.4	Children's Fiction Books	3,251
2.5	Children's Non-fiction Books	1,429
2.6	Total Children's Books (Total questions 2.4 & 2.5)	4,680
2.7	Total Cataloged Books (Total questions 2.3 & 2.6)	11,949

#### **Other Print Materials**

2.0	Total Officataloged Dooks	7,000
2.9	Total Print Serials	31
2.10	All Other Print Materials	0
2.11	Total Other Print Materials (Total questions 2.8 through 2.10)	4,031
2.12	Total Print Materials (Total questions 2.7 and 2.11)	15,980
ALL (	OTHER MATERIALS	
Electr	onic Materials	
2.13	Electronic Books	7,353
2.14	Local Electronic Collections	14
2.15	NOVELNY Electronic Collections	10
2.16	Total Electronic Collections (Total questions 2.14 and 2.15)	24
2.17	Audio - Downloadable Units	3,308
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.)	0
2.20	Total Electronic Materials (Total questions 2.13, 2.16, 2.17, 2.18 and 2.19)	10,685
Non-E	lectronic Materials	
2.21	Audio - Physical Units	328
2.22	Video - Physical Units	489
2.23	Other Non-Electronic Materials (includes films, slides, etc.)	26
2.24	Total Other Materials Holdings (Total questions 2.21 through 2.23)	843
2.25	<b>GRAND TOTAL HOLDINGS</b> (Total questions 2.12, 2.20 and 2.24)	27,508
CURR	RENT SERIAL SUBSCRIPTIONS	
2.26	Current Print Serial Subscriptions	10
<b>ADDI</b>	<b>TIONS TO HOLDINGS</b> - Do not subtract withdrawals of	r discards.
2.27	Cataloged Books	348
2.28	All Other Print Materials	52
2.29	Electronic Materials	2,761
2.30	All Other Materials	35
2.31	Total Additions (Total questions 2.27 through 2.30)	3,196

# 3. LIBRARY PROGRAMS, POLICIES, AND SERVICES

Report all information on questions 3.1 through 3.26 as of the end of the <u>fiscal</u> year reported in Part 1; report information on questions 3.27 through 3.78 for the 2015 <u>calendar</u> year. Please click <u>here</u> to read general instructions before completing this section.

4,000

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

#### LIBRARY USE

2.8

**Total Uncataloged Books** 

3.1	Library visits (total annual attendance)	6,502
3.2	Registered resident borrowers	590

Please	e report information on WRITTEN POLICIES as of 12/31/	715.
WRI	TTEN 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?	N
3.9	Does the library have a board-approved whistle blower policy?	N
Please	e report information on ACCESSIBILITY as of 12/31/15.	
ACC	ESSIBILITY (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
Please Part 1	e report information on LIBRARY SPONSORED PROGR .	AMS as of the end of the fiscal year reported in
LIBR	ARY SPONSORED PROGRAMS	
3.15	Adult Program Sessions	42
3.16	Young Adult Program Sessions	18
3.17	Children's Program Sessions	21
3.18	All Other Program Sessions	1
3.19	Total Number of Program Sessions (Total questions 3.15 through 3.18)	82
3.20	One-on-One Program Sessions	0
3.21	Adult Program Attendance	262
3.22	Young Adult Program Attendance	84
3.23	Children's Program Attendance	188
3.24	All Other Program Attendance	4
3.25	Total Program Attendance (Total questions 3.21	538

0

Please report information on SUMMER READING PROGRAMS for the 2015 calendar year.

248

3.3

Registered non-resident borrowers

through 3.24)

3.26

One-on-One Program Attendance

## SUMMER READING PROGRAM

3.27 - Indicate which of the following apply to the summer reading program(s) offered by the library during the summer of 2015 (check all that apply):

Summe	of 2015 (effects all that apply).	
a.	Program(s) for children	Yes
b.	Program(s) for young adults	Yes
c.	Program(s) for Adults	Yes
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
3.28	Library outlets offering a summer reading program	1
3.29	Children registered for the library's summer reading program	34
3.30	Young adults registered for the library's summer reading program	1
3.31	Adults registered for the library's summer reading program	0
3.32	Total number registered for the library's summer reading program (total $3.29 + 3.30 + 3.31$ )	35
3.33	Children's program sessions - Summer 2015	4
3.34	Young adult program sessions - Summer 2015	0
3.35	Adult program sessions - Summer 2015	1
3.36	Total program sessions - Summer 2015 (total 3.33 + 3.34 + 3.35)	5
3.37	Children's program attendance - Summer 2015	154
3.38	Young adult program attendance - Summer 2015	0
3.39	Adult program attendance - Summer 2015	6
3.40	Total program attendance - Summer 2015 (total $3.37 + 3.38 + 3.39$ )	160
COLL	ABORATORS	
3.41	Public school district(s) and/or BOCES	1
3.42	Non-public school(s)	0
3.43	Childcare center(s)	0
3.44	Summer camp(s)	0
3.45	Municipality/Municipalities	0
3.46	Literacy provider(s)	0
3.47	Other (describe using the State note)	0
3.48	Total Collaborators (total 3.41 through 3.47)	1
D1		<b>C</b>

Please report information on EARLY LITERACY PROGRAMS for the 2015 calendar year.

# **EARLY LITERACY PROGRAMS**

3.49	Did the library offer early literacy programs? (Enter Y for Yes, N for No)	Y
3.50 - Indicate types of programs offered (check all that apply)		
a.	Focus on birth - school entry	Yes
b.	Focus on parents & caregivers	No

c.	Combined audience	No	
d.	N/A	No	
3.51 -	Number of sessions		
a.	Focus on birth - school entry	9	
b.	Focus on parents & caregivers	0	
c.	Combined audience	0	
d.	N/A	0	
3.52	Total Sessions	9	
3.53 -	Attendance at sessions		
a.	Focus on birth - school entry	24	
b.	Focus on parents & caregivers	0	
c.	Combined audience	0	
d.	N/A	0	
3.54	Total Attendance	24	
3.55 - Collaborators (check all that apply):			
a.	Childcare center(s)	No	
b.	Public School District(s) and/or BOCES	No	
c.	Non-Public School(s)	No	
d.	Health care providers/agencies	No	
e.	Other (describe using the State note)	No	

Please report information on ADULT LITERACY for the 2015 calendar year.

# ADULT LITERACY

3.56	Did the library offer adult literacy programs?	No
3.57	Total group program sessions	N/A
3.58	Total one-on-one program sessions	N/A
3.59	Total group program attendance	N/A
3.60	Total one-on-one program attendance	N/A
3.61 - 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

Please report information on PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL) for the 2015 calendar year.

# PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL)

3.62	Did the library offer programs for English Speakers of Other Languages (ESOL)? (Enter Y for Yes, N for No)	N
3.63	Children's program sessions	0
3.64	Young adult program sessions	0
3.65	Adult program sessions	0
3.66	One-on-one program sessions	0
3.67	Total program sessions (total $3.63 + 3.64 + 3.65$ )	0
3.68	Children's program attendance	0
3.69	Young adult program attendance	0
3.70	Adult program attendance	0
3.71	One-on-one program attendance	0
3.72	Total program attendance (total $3.68 + 3.69 + 3.70$ )	0

3.73 - Collaborators	(check	all	that	app]	ly)	):
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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

Please report information on DIGITAL LITERACY for the 2015 calendar year.

#### **DIGITAL LITERACY**

3.74	Did the library offer digital literacy programs?	Y
3.75	Total group program sessions	0
3.76	Total one-on-one program sessions	40
3.77	Total group program attendance	0
3.78	Total one-on-one program attendance	40

## 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)

938

## CATALOGED BOOK CIRCULATION

4.1	Adult Fiction Books	3,020
4.2	Adult Non-fiction Books	651
4.3	Total Adult Books (Total questions 4.1 & 4.2)	3,671
4.4	Children's Fiction Books	3,045
4.5	Children's Non-fiction Books	420
4.6	Total Children's Books (Total questions 4.4 & 4.5)	3,465
4.7	Total Cataloged Book Circulation (Total question 4.3 & 4.6)	7,136

#### CIRCULATION OF OTHER MATERIALS

Circulation of Adult Other Materials

4.9	Circulation of Children's Other Materials	367
4.10	Circulation of Electronic Materials	453
4.11	Total Circulation of Other Materials (Total questions 4.8, 4.9 & 4.10)	1,758
4.12	Grand Total Circulation Transactions (Total questions 4.7 & 4.11)	8,894
4.13	Grand Total Circulation of Children's Materials (Total questions 4.6 & 4.9)	3,832

#### REFERENCE TRANSACTIONS

4.8

4.14	Total Reference Transactions	850
4.15	Does the library offer virtual reference?	Y

## INTERLIBRARY LOAN - MATERIALS RECEIVED (BORROWED)

4.16	TOTAL MATERIALS RECEIVED	1,671		
INTERLIBRARY LOAN - MATERIALS PROVIDED (LOANED)				
4.17	TOTAL MATERIALS PROVIDED	1,751		

# 5. TECHNOLOGY AND TELECOMMUNICATIONS

Report all information as of December 31, 2015.

## 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	2,494
5.5	Does the library use Internet filtering software on any computer?	N
5.6	Number of uses (sessions) of public Internet computers per year	1,528
5.7	Name of the person responsible for the library's Information Technology (IT) services	Ronnette Councilman
5.8	IT contact's telephone number (enter 10 digits only and hit the Tab key)	(607) 699-3835
5.9	IT contact's email address	clibrary3@stny.rr.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.	25			
BUDG	BUDGETED POSITIONS IN FULL-TIME EQUIVALENTS				
6.2	Library Director (certified)	1			
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			
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	0.3			
6.11	Vacant Other Staff	0			
6.12	TOTAL PAID STAFF (Total questions 6.2, 6.4, 6.6, 6.8 & 6.10)	1.30			
6.13	VACANT TOTAL PAID STAFF (Total questions 6.3, 6.5, 6.7, 6.9 & 6.11)	0.00			
SALA	RY INFORMATION				
6.14	FTE - Entry Level Librarian (certified)	0			
6.15	Salary - Entry Level Librarian (certified)	\$0			
6.16	FTE - Library Director (certified)	1			
6.17	Salary - Library Director (certified)	\$10,500			
6.18	FTE - Library Manager (not certified)	0			
6.19	Salary - Library Manager (not certified)	\$0			

# 7. MINIMUM PUBLIC LIBRARY STANDARDS

Report all information as of December 31, 2015. Please click here to read general instructions before

compl	eting 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.	SY
7.7	7. Is open the minimum standard number of public service hours for population served. (see instructions)	Y
8. Ma	intains a facility to meet community needs, including adeq	uate:
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
	vides equipment and connections to meet community need her electronic information, including but not limited to the	
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. PU	JBLIC SERVICE INFORMATION	
_	t all information as of the end of the fiscal year reported in ctions before completing this section.	Part 1. Please click <u>here</u> to read general
	IC SERVICE OUTLETS - Libraries reporting main librarie Outlets Information in Part 9.	ies, branches and bookmobiles should complete
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

PUBLIC SERVICE HOURS - Report hours to two decimal places.			
8.6	Minimum Weekly Total Hours - Main Library	27.00	
8.7	Minimum Weekly Total Hours - Branch Libraries	0.00	
8.8	Minimum Weekly Total Hours - Bookmobiles	0.00	
8.9	Minimum Weekly Total Hours - Total Hours Open (Total questions 8.6 - 8.8)	27.00	
8.10	Annual Total Hours - Main Library	1,404.00	
8.11	Annual Total Hours - Branch Libraries	0.00	
8.12	Annual Total Hours - Bookmobiles	0.00	
8.13	Annual Hours Open - Total Hours Open (Total questions 8.10 through 8.12)	1,404.00	

# 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.

DOOKII	bookinoones. Complete one record for each main notary, branch of bookinoone.				
1.	Outlet Name	George P. & Susan Platt Cady Library			
2.	Outlet Name Status	00 (for no change)			
3.	Street Address	42 River Street			
4.	Outlet Street Address Status	00 (for no change)			
5.	City	Nichols			
6.	Zip Code	13812			
7.	Phone (enter 10 digits only)	(607) 699-3835			
8.	Fax Number (enter 10 digits only)	(607) 699-3835			
9.	E-mail Address	clibrary3@stny.rrcom			
10.	Outlet URL	http://www.flls.org/memberpages/nichols.htm			
11.	County	Tioga			
12.	School District	Tioga Central			
13.	Library System	Finger Lakes Library System			
14.	Outlet Type Code (select one):	CE			
15.	Public Service Hours Per Year for This Outlet	1,475			
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	6			
20.	Enter the appropriate outlet code (select one):	N/A			
21.	Who owns this outlet building?	Town			
22.	Who owns the land on which this outlet is built?	Town			
23.	Indicate the year this outlet was initially constructed	1828			
24.	Indicate the year this outlet underwent a major renovation costing \$25,000 or more	1987			
25.	Square footage of the outlet	1,500			
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	6 Greater than or equal to 6 mbps and less than 10 mbps
29.	Maximum <u>upload</u> speed of connection on the outlet's public Internet computers	6 Greater than or equal to 6 mbps and less than 10 mbps
30.	Internet Provider	Time Warner Cable
31.	WiFi Access	No restrictions to access
32.	Number of wireless sessions provided by the library wireless service per year	200
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	2400604550
37.	FSCSID	NY0155
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

Report information about trustee meetings as of December 31, 2015. 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, 2015 to December 31, 2015)	10
10.2	Number of voting library board positions stated in the library's charter.	5-11
10.3	Number of current voting positions on library board.	7
10.4	Trustee term length	5 years

#### **BOARD MEMBER SELECTION**

A - board members are appointed by Enter Board Member Selection Code (select one): 10.5 municipality(ies)

List Officers and Board Members as of February 1, 2016. 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**

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

10.7	First Name	Debora
10.8	Last Name	Stubecki
10.9	Mailing Address	622 Roki Blvd
10.10	City	Nichols
10.11	Zip Code (5 digits only)	13812
10.12	Phone (enter 10 digits only)	(607) 699-3862
10.13	F-mail Address	dstubecki@hotmail

dstubecki@hotmail.com 10.13 E-mail Address

10.14 Term Begins - Month January

		2012
	Term Begins - Year (yyyy)	2012
	Term Expires - Month	December
10.17	Term Expires - Year (yyyy)	2016
10.18	The date the Oath of Office was taken (mm/dd/yyyy)	01/15/2013
10.19	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	01/16/2013
10.20	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Karen
3.	Last Name of Board Member	Rathke
4.	Mailing Address	1420 Sibley Road
5.	City	Owego
6.	Zip Code (5 digits only)	13827
7.	E-mail address	N/A
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
9. 10.	Term Begins - Year (year)	2015
		December
11.	Term Expires Very (2000)	2019
12.	Term Expires - Year (yyyy)	1/20/2015
13.	The date the Oath of Office (mm/dd/yyyy) was taken	1/20/2013
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	2/21/2015
15.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	JoAnne
3.	Last Name of Board Member	Stevens
4.	Mailing Address	76 East River Rd.
5.	City	Nichols
6.	Zip Code (5 digits only)	13812
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)	2020
13.	The date the Oath of Office (mm/dd/yyyy) was taken	1/19/2016
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	1/20/2016
15.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Anne
3.	Last Name of Board Member	Howard
4.	Mailing Address	859 Jacobs Road
5.	City	Rome
<i>5</i> . 6.	Zip Code (5 digits only)	18837
0. 7.	E-mail address	N/A
8.	Office Held or Trustee	Trustee
o. 9.	Term Begins - Month	January
2.	Term Degms - Mondi	sanaar y

10.	Term Begins - Year (year)	2012
10. 11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2016
13.	The date the Oath of Office (mm/dd/yyyy) was taken	1/15/2013
13. 14.	The date the Oath of Office was filed with town or	1/13/2013
14.	county clerk (mm/dd/yyyy)	1/16/2013
15.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mr.
2.	First Name of Board Member	David
3.	Last Name of Board Member	Cleveland
4.	Mailing Address	399 RoKi Blvd
5.	City	Nichols
6.	Zip Code (5 digits only)	13812
7.	E-mail address	dcleveland@stny.rr.com
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)	2020
13.	The date the Oath of Office (mm/dd/yyyy) was taken	1/19/2016
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	1/20/2016
15.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Carolyn
3.	Last Name of Board Member	Yost
4.	Mailing Address	211 South Main St.
5.	City	Nichols
6.	Zip Code (5 digits only)	13812
7.	E-mail address	N/A
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)	2019
13.	The date the Oath of Office (mm/dd/yyyy) was taken	1/20/2015
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	1/21/2015
15.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Virginia
3.	Last Name of Board Member	Okrasinski
4.	Mailing Address	85 Codner Road
5.	City	Owego
6.	Zip Code (5 digits only)	13827
7.	E-mail address	ginny@okrasinski.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)	2018
13.	The date the Oath of Office (mm/dd/yyyy) was taken	1/21/14
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	1/22/14
15.	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 <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.

11.1	Does the library receive any local public funds? If yes,	
	complete one record for each funding source; if no, go	Y
	to question 11.3.	

	to question 11.3.	
1.	Source of Funds	County
2.	Name of funding County, Municipality or District	Tioga
3.	Amount	\$8,612
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	School District
2.	Name of funding County, Municipality or District	Tioga Central School Districk
3.	Amount	\$4,000
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	Y
5.	Written Contractual Agreement	N
1.	Source of Funds	Town
2.	Name of funding County, Municipality or District	Town of Nichols
3.	Amount	\$14,000

4.	Subject to public vote held in reporting year or in a	N	
	previous reporting year(s).	11	

Written Contractual Agreement	Y
	Written Contractual Agreement

# 11.2 TOTAL LOCAL PUBLIC FUNDS \$26,612

#### SYSTEM CASH GRANTS TO MEMBER LIBRARY

11.3	Local Library Services Aid (LLSA)	\$1,473
11.4	Central Library Aid (CLDA and/or CBA)	\$0
11.5	Additional State Aid received from the System	\$0
11.6	Federal Aid received from the System	\$0
11.7	Other Cash Grants	\$2,000
11.8	TOTAL SYSTEM CASH GRANTS (Add Questions	\$3,473
	11.3, 11.4, 11.5, 11.6 and 11.7)	Ψ3, τ73

## 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 \$0 grants

## FEDERAL AID FOR LIBRARY OPERATION

11.10 LSTA \$0

11.11	Other Federal Aid	\$0
11.12	TOTAL FEDERAL AID (Add Questions 11.10 and	\$0
	11.11)	ΦU
11.13	CONTRACTS WITH PUBLIC LIBRARIES	Φ0
	AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE	\$0
OTHE	R RECEIPTS	
11.14	Gifts and Endowments	\$1,658
11.15	Fund Raising	\$0
11.16	Income from Investments	\$1
11.17	Library Charges	\$966
11.18	Other	\$187
11.19	TOTAL OTHER RECEIPTS (Add Questions 11.14,	\$2,812
	11.15, 11.16, 11.17 and 11.18)	φ2,012
11.20	TOTAL OPERATING FUND RECEIPTS (Add	\$32,897
	Questions 11.2, 11.8, 11.9, 11.12, 11.13 and 11.19)	Ψ32,071
11.21	BUDGET LOANS	\$0
TRAN	SFERS	
11.22	From Capital Fund (Same as Question 14.8)	\$0
11.23	From Other Funds	\$0
11.24	TOTAL TRANSFERS (Add Questions 11.22 and	\$0
	11.23)	ΨΟ
11.25	BALANCE IN OPERATING FUND - Beginning	
	Balance for Fiscal Year Ending 2015 (Same as Question	\$2,860
	12.40 of previous year if fiscal year has not changed)	
11.26	GRAND TOTAL RECEIPTS, BUDGET LOANS,	¢25.757
	<b>TRANSFERS AND BALANCE</b> (Add Questions 11.20, 11.21, 11.24 and 11.25; Same as Question 12.41)	\$35,757
	11.20, 11.21, 11.24 and 11.23, Same as Question 12.41)	

# 12. OPERATING FUND DISBURSEMENTS STAFF EXPENDITURES

# Salaries & Wages Paid from Library Funds

Please click <u>here</u> to read general instructions before completing this section.			
12.1	Certified Librarians	\$10,500	
12.2	Other Staff	\$3,335	
12.3	<b>Total Salaries &amp; Wages Expenditures</b> (Add Questions 12.1 and 12.2)	\$13,835	
12.4	<b>Employee Benefits Expenditures</b>	\$1,058	
12.5	<b>Total Staff Expenditures (Add Questions 12.3 and 12.4)</b>	\$14,893	
COLL	COLLECTION EXPENDITURES		
12.6	Print Materials Expenditures	\$3,526	
12.7	Electronic Materials Expenditures	\$0	
12.8	Other Materials Expenditures	\$0	
12.9	<b>Total Collection Expenditures</b> (Add Questions 12.6, 12.7 and 12.8)	\$3,526	
CAPITAL EXPENDITURES FROM OPERATING FUNDS			
12.10	From Local Public Funds (71PF)	\$0	

1	2.11	From Other Funds (71OF)	\$0
1	2.12	<b>Total Capital Expenditures</b> (Add Questions 12.10 and 12.11)	\$0
(	PER	ATION AND MAINTENANCE OF BUILDINGS	
F	Repair	rs to Building & Building Equipment	
1	2.13	From Local Public Funds (72PF)	\$0
1	2.14	From Other Funds (72OF)	\$0
1	2.15	<b>Total Repairs</b> (Add Questions 12.13 and 12.14)	\$0
1	2.16	Other Disbursements for Operation & Maintenance of Buildings	\$7,357
1	2.17	<b>Total Operation &amp; Maintenance of Buildings</b> (Add Questions 12.15 and 12.16)	\$7,357
N	AISC:	ELLANEOUS EXPENSES	
1	2.18	Office and Library Supplies	\$472
1	2.19	Telecommunications	\$417
1	2.20	Binding Expenses	\$0
1	2.21	Postage and Freight	\$20
1	2.22	Professional & Consultant Fees	\$0
1	2.23	Equipment	\$0
1	2.24	Other Miscellaneous	\$1,565
1	2.25	<b>Total Miscellaneous Expenses</b> (Add Questions 12.18, 12.19, 12.20, 12.21, 12.22, 12.23 and 12.24)	\$2,474
	2.26	CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE	\$5,623
Ι	EBT	SERVICE	
(	Capita	al Purposes Loans (Principal and Interest)	
1	2.27	From Local Public Funds (73PF)	\$0
1	2.28	From Other Funds (73OF)	\$0
1	2.29	Total (Add Questions 12.27 and 12.28)	\$0
1	2.30	Budget Loans (Principal and Interest)	\$0
1	2.31	Short-Term Loans	\$0
1	2.32	<b>Total Debt Service</b> (Add Questions 12.29, 12.30 and 12.31)	\$0
1	2.33	TOTAL OPERATING FUND DISBURSEMENTS	
		(Add Questions 12.5, 12.9, 12.12, 12.17, 12.25, 12.26	\$33,873
T	RAN	and 12.32) (SFERS	
T	ransi	fers to Capital Fund	
1	2.34	From Local Public Funds (76PF)	\$0
		From Other Funds (76OF)	\$0
1	2.36	<b>Total Transfers to Capital Fund</b> (Add Questions 12.34 and 12.35; same as Question 13.8)	\$0
1		Transfer to Other Funds	\$0
1	2.38	<b>TOTAL TRANSFERS</b> (Add Questions 12.36 and 12.37)	\$0
		TOTAL DISBURSEMENTS AND TRANSFERS	

12.39	(Add Questions 12.33 and 12.38)	\$33,873
12.40	BALANCE IN OPERATING FUND - Ending Balance for the Fiscal Year Ending 2015	\$1,884
12.41	<b>GRAND TOTAL DISBURSEMENTS, TRANSFERS</b> & BALANCE (Add Questions 12.39 and 12.40; same as Question 11.26)	\$35,757
ASSU	RANCE	
	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).	02/16/16
FISCA	AL AUDIT	
12.43	Last audit performed (mm/dd/yyyy)	11/2/1995
12.44	Time period covered by this audit (mm/dd/yyyy) - (mm/dd/yyyy)	1/1/1990-1/1/1995
	Indicate type of audit (select one): <b>FAL FUND</b>	State
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
	<b>APITAL FUND RECEIPTS</b> t financial data based on the fiscal year reported in Part 1.	ROUND TO THE NEAREST DOLLAR Please
click <u>h</u>	ere to read general instructions before completing this sec	
	• • •	
	ere to read general instructions before completing this sec	
<b>REVE</b> 13.1	ere to read general instructions before completing this sec	tion.
<b>REVE</b> 13.1	ere to read general instructions before completing this sec ENUES FROM LOCAL SOURCES  Revenues from Local Government Sources	\$0
REVE 13.1 13.2 13.3	ENUES FROM LOCAL SOURCES  Revenues from Local Government Sources All Other Revenues from Local Sources  Total Revenues from Local Sources (Add Questions	\$0 \$0
REVE 13.1 13.2 13.3 STAT 13.4	CNUES FROM LOCAL SOURCES  Revenues from Local Government Sources All Other Revenues from Local Sources  Total Revenues from Local Sources (Add Questions 13.1 and 13.2)  E AID FOR CAPITAL PROJECTS  State Aid Received for Construction	\$0 \$0 \$0 \$0
REVE 13.1 13.2 13.3 STAT 13.4 13.5	Revenues from Local Government Sources All Other Revenues from Local Sources Total Revenues from Local Sources (Add Questions 13.1 and 13.2) E AID FOR CAPITAL PROJECTS State Aid Received for Construction Other State Aid	\$0 \$0 \$0 \$0 \$0
REVE 13.1 13.2 13.3 STAT 13.4 13.5 13.6	CNUES FROM LOCAL SOURCES  Revenues from Local Government Sources All Other Revenues from Local Sources  Total Revenues from Local Sources (Add Questions 13.1 and 13.2)  E AID FOR CAPITAL PROJECTS  State Aid Received for Construction Other State Aid (Add Questions 13.4 and 13.5)	\$0 \$0 \$0 \$0
REVE 13.1 13.2 13.3 STAT 13.4 13.5 13.6 FEDE	Revenues from Local Government Sources All Other Revenues from Local Sources Total Revenues from Local Sources (Add Questions 13.1 and 13.2) E AID FOR CAPITAL PROJECTS State Aid Received for Construction Other State Aid (Add Questions 13.4 and 13.5) RAL AID FOR CAPITAL PROJECTS	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0
REVE 13.1 13.2 13.3 STAT 13.4 13.5 13.6 FEDE 13.7	CNUES FROM LOCAL SOURCES  Revenues from Local Government Sources All Other Revenues from Local Sources  Total Revenues from Local Sources (Add Questions 13.1 and 13.2)  E AID FOR CAPITAL PROJECTS  State Aid Received for Construction Other State Aid Total State Aid (Add Questions 13.4 and 13.5)  RAL AID FOR CAPITAL PROJECTS  TOTAL FEDERAL AID	\$0 \$0 \$0 \$0 \$0
REVE 13.1 13.2 13.3 STAT 13.4 13.5 13.6 FEDE 13.7 INTE	Revenues from Local Government Sources All Other Revenues from Local Sources Total Revenues from Local Sources (Add Questions 13.1 and 13.2) E AID FOR CAPITAL PROJECTS State Aid Received for Construction Other State Aid (Add Questions 13.4 and 13.5) RAL AID FOR CAPITAL PROJECTS TOTAL FEDERAL AID RFUND REVENUE	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0
REVE 13.1 13.2 13.3 STAT 13.4 13.5 13.6 FEDE 13.7 INTE	Revenues from Local Government Sources All Other Revenues from Local Sources Total Revenues from Local Sources (Add Questions 13.1 and 13.2) E AID FOR CAPITAL PROJECTS State Aid Received for Construction Other State Aid Total State Aid (Add Questions 13.4 and 13.5) RAL AID FOR CAPITAL PROJECTS TOTAL FEDERAL AID RFUND REVENUE Transfer from Operating Fund (Same as Question 12.36)	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0
REVE 13.1 13.2 13.3 STAT 13.4 13.5 13.6 FEDE 13.7 INTE 13.8 13.9	Revenues from Local Government Sources All Other Revenues from Local Sources Total Revenues from Local Sources (Add Questions 13.1 and 13.2) E AID FOR CAPITAL PROJECTS State Aid Received for Construction Other State Aid Total State Aid (Add Questions 13.4 and 13.5) RAL AID FOR CAPITAL PROJECTS TOTAL FEDERAL AID RFUND REVENUE Transfer from Operating Fund (Same as Question 12.36) TOTAL REVENUES (Add Questions 13.3, 13.6, 13.7 and 13.8)	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0
REVE 13.1 13.2 13.3 STAT 13.4 13.5 13.6 FEDE 13.7 INTEL 13.8 13.9	Revenues from Local Government Sources All Other Revenues from Local Sources Total Revenues from Local Sources (Add Questions 13.1 and 13.2) E AID FOR CAPITAL PROJECTS State Aid Received for Construction Other State Aid Total State Aid (Add Questions 13.4 and 13.5) RAL AID FOR CAPITAL PROJECTS TOTAL FEDERAL AID RFUND REVENUE Transfer from Operating Fund (Same as Question 12.36) TOTAL REVENUES (Add Questions 13.3, 13.6, 13.7 and 13.8) NON-REVENUE RECEIPTS	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0
REVE 13.1 13.2 13.3 STAT 13.4 13.5 13.6 FEDE 13.7 INTE 13.8 13.9 13.10 13.11	Revenues from Local Government Sources All Other Revenues from Local Sources All Other Revenues from Local Sources Total Revenues from Local Sources (Add Questions 13.1 and 13.2) E AID FOR CAPITAL PROJECTS State Aid Received for Construction Other State Aid Total State Aid (Add Questions 13.4 and 13.5) RAL AID FOR CAPITAL PROJECTS TOTAL FEDERAL AID RFUND REVENUE Transfer from Operating Fund (Same as Question 12.36) TOTAL REVENUES (Add Questions 13.3, 13.6, 13.7 and 13.8) NON-REVENUE RECEIPTS TOTAL CASH RECEIPTS (Add Questions 13.9 and 13.10)	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0
REVE 13.1 13.2 13.3 STAT 13.4 13.5 13.6 FEDE 13.7 INTEL 13.8 13.9	CNUES FROM LOCAL SOURCES Revenues from Local Government Sources All Other Revenues from Local Sources Total Revenues from Local Sources (Add Questions 13.1 and 13.2) E AID FOR CAPITAL PROJECTS State Aid Received for Construction Other State Aid Total State Aid (Add Questions 13.4 and 13.5) RAL AID FOR CAPITAL PROJECTS TOTAL FEDERAL AID RFUND REVENUE Transfer from Operating Fund (Same as Question 12.36) TOTAL REVENUES (Add Questions 13.3, 13.6, 13.7 and 13.8) NON-REVENUE RECEIPTS TOTAL CASH RECEIPTS (Add Questions 13.9 and	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0

Questions 13.11 and 13.12; same as Question 14.12)

# 14. CAPITAL FUND DISBURSEMENTS

## PROJECT EXPENDITURES

Please click here to read general instructions before completing this section.

1 Icase	ener nere to read general instructions before completing	uns seem
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	<b>TRANSFER TO OPERATING FUND</b> (Same as Question 11.22)	\$0
14.9	NON-PROJECT EXPENDITURES	\$0
14.10	TOTAL CASH DISBURSEMENTS AND TRANSFERS (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 2015	\$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	0.63
16.2	Total Librarians	0.63
16.3	All Other Paid Staff	0.19
16.4	Total Paid Employees	0.82
16.5	State Government Revenue	\$1,473
16.6	Federal Government Revenue	\$0
16.7	Other Operating Revenue	\$4,812
16.8	Total Operating Revenue	\$32,897
16.9	Other Operating Expenditures	\$15,454
16.10	Total Operating Expenditures	\$33,873
16.11	Total Capital Expenditures	\$0
16.12	Print Materials	15,980
16.13	Total Registered Borrowers	838
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

17.1 *LIB ID* 2400604550

17.2 Interlibrary Relationship Code ME

17.3 Legal Basis Code CI

17.4 Administrative Structure Code SO

17.5 FSCS Public Library Definition Y

17.6 Geographic Code OTH

17.7 FSCS ID NY0155

17.8 SED CODE 600903700004

## SUGGESTED IMPROVEMENTS

Library Name: GEORGE P. & SUSAN PLATT CADY

LIBRARY

Library System: Finger Lakes Library System

Name of Person Completing Form: Ronnette Councilman

Phone Number: (607) 699-3835

Please share with us your suggestions for improving the *Annual Report*. When providing feedback, if applicable please indicate the question number each

please indicate the question number each comment/suggestion refers to. Thank you!