Lamont Memorial Free Library Annual Report For Public And Association Libraries - 2017

1. GENERAL LIBRARY INFORMATION

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

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

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

1.1	Library ID Number	2400113810
1.2	Library Name	LAMONT MEMORIAL FREE 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	McGraw
1.6	Beginning Fiscal Reporting Year	01/01/2017
1.7	Ending Fiscal Reporting Year	12/31/2017
1.8	Is the library now reporting on a different fiscal year than it reported on in the previous Annual Report?	No
1.9	If yes, please indicate the beginning date of library's new reporting year. Enter N/A if No was answered to Question 1.8.	N/A
1.10	Please indicate the ending date of library's new reporting year. Enter N/A if No was answered to Question 1.8.	N/A
1.11	Beginning Local Fiscal Year	06/01/2017
1.12	Ending Local Fiscal Year	05/31/2018
1.13	Address Status	00 (for no change from previous
		year)
1.14	Street Address	year) 5 MAIN STREET
1.14 1.15	Street Address City	•
		5 MAIN STREET
1.15	City	5 MAIN STREET MCGRAW
1.15 1.16	City Zip Code	5 MAIN STREET MCGRAW 13101
1.15 1.16 1.17	City Zip Code Mailing Address	5 MAIN STREET MCGRAW 13101 P.O. BOX 559
1.15 1.16 1.17 1.18	City Zip Code Mailing Address City	5 MAIN STREET MCGRAW 13101 P.O. BOX 559 MCGRAW
1.15 1.16 1.17 1.18 1.19	City Zip Code Mailing Address City Zip Code Telephone Number (enter 10 digits only and hit the Tab key; enter	5 MAIN STREET MCGRAW 13101 P.O. BOX 559 MCGRAW 13101
1.15 1.16 1.17 1.18 1.19 1.20	City Zip Code Mailing Address City Zip Code Telephone Number (enter 10 digits only and hit the Tab key; enter N/A if no telephone number) Fax Number (enter 10 digits only and hit the Tab key; enter N/A if	5 MAIN STREET MCGRAW 13101 P.O. BOX 559 MCGRAW 13101 (607) 836-6767
1.15 1.16 1.17 1.18 1.19 1.20	City Zip Code Mailing Address City Zip Code Telephone Number (enter 10 digits only and hit the Tab key; enter N/A if no telephone number) Fax Number (enter 10 digits only and hit the Tab key; enter N/A if no fax number) E-Mail Address to Contact the Library (Enter N/A if no e-mail	5 MAIN STREET MCGRAW 13101 P.O. BOX 559 MCGRAW 13101 (607) 836-6767 (607) 836-8866
1.15 1.16 1.17 1.18 1.19 1.20 1.21	City Zip Code Mailing Address City Zip Code Telephone Number (enter 10 digits only and hit the Tab key; enter N/A if no telephone number) Fax Number (enter 10 digits only and hit the Tab key; enter N/A if no fax number) E-Mail Address to Contact the Library (Enter N/A if no e-mail address)	5 MAIN STREET MCGRAW 13101 P.O. BOX 559 MCGRAW 13101 (607) 836-6767 (607) 836-8866 lmemoria@twcny.rr.com

Lange Lang	1.26	Indicate the area chartered to serve as stated in the library's charter (select one):	Village
1.29 Date the library was granted its absolute charter or the date of the provisional charter if the library does not have an absolute charter 1.30 Date the library was last registered 1.203/1981 1.31 Federal Employer Identification Number 1.50564077 1.32 County CORTLAND 1.33 School District McGraw 1.35 Chiracy System McGraw Pinger Lakes Library System McGraw Finger Lakes Library System Finger Lakes Library Information for the Current library director/Manager Heather Cobb Library Information Science? Physical Packet Finger Lakes Library System Finger Lakes Library Information Science? Physical Packet Finger Lakes Library System Finger Lakes Library Information Science? Physical Packet Finger Lakes Library System Finger Lakes Library Information Science? Physical Packet Finger Lakes Library Lakes Finger Lakes Lib	1.27	legal service area boundaries? Changes must be the result of a	N
provisional charter if the library does not have an absolute charter 1.30 Date the library was last registered 1.31 Pederal Employer Identification Number 1.32 County 1.32 County 1.33 School District 1.34 Town/City 1.35 Library System 1.36 President/CEO Name 1.36 President/CEO Name 1.36 President/CEO Phone Number 1.36 President/CEO Phone Number 1.36 President/CEO Email 1.37 Title of Library Director/Manager (select one): 1.38 First Name of Library Director/Manager 1.39 Last Name of Library Director/Manager 1.30 Last Name of Library Director/Manager 1.31 What is the highest education level of the library manager/director? 1.41 What is the highest education level of the library anager without an active certificate in a Note. 1.42 If the library manager/director holds a Master's Degree, is it a Master's Degree in Library/Information Science? 1.43 Do all staff working in the budgeted Librarian Certificate? If No, list the name and e-mail address of each staff member without an active certificate in a Note. 1.44 E-mail Address of the Director/Manager 1.45 Fax Number of the Director/Manager 1.46 Is the library a member of the New York State and Local Retirement System? 1.47 Does the library charge fees for library cards to people residing outside the system's service area? 1.48 Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. 1. Name of municipality or district holding the public vote 3. Date the vote was held (mm/dd/2017) 4. Was the vote successful? Y/N 5. What type of public vote was it? 6. Proposed increase in appropriation from a public vote. 6. Proposed increase in appropriation as a result of the vote held on the N/A	1.28	Indicate the type of charter the library currently holds (select one):	Absolute
1.31 Federal Employer Identification Number 1.32 County 1.33 School District 1.34 Town/City 1.35 Library System 1.36 Library System 1.36 President/CEO Name 1.36 President/CEO Name 1.36 President/CEO Phone Number 1.36 President/CEO Phone Number 1.36 President/CEO Email NOTE: For questions 1.37 through 1.45, report all information for the current library director/manager. 1.37 Title of Library Director/ Manager (select one): 1.38 First Name of Library Director/Manager 1.40 NYS Public Librarian Certification Number 1.41 What is the highest education level of the library manager/director? 1.42 If the library manager/director holds a Master's Degree, is it a Master's Degree in Library/Information Science? 1.43 Doal Isaff working in the budgeted Librarian (certificate? If No, list the name and e-mail address of each staff member without an active certificate in a Note. 1.44 E-mail Address of the Director/Manager 1.45 Fax Number of the Director/Manager 1.46 Is the library amember of the New York State and Local Retirement System? 1.47 Does the library charge fees for library cards to people residing outside the system's service area? 1.48 Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. 1. Name of municipality or district holding the public vote 1. No Date the vote was held (mm/dd/2017) 1. Name of municipality or district holding the public vote 1. No Date the vote was held (mm/dd/2017) 1. Name of municipality or district holding the public vote 1. No Date the vote was held (mm/dd/2017) 1. No Date the	1.29	• •	12/17/1948
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1.33 School District McGraw 1.34 Town/City Finger Lakes Library System THESE QUESTIONS ARE FOR NYC LIBRARIES ONLY. PLEASE PROCEED TO THE NEXT QUESTION. 1.36a President/CEO Name 1.36b President/CEO Phone Number 1.36c President/CEO Email NOTE: For questions 1.37 through 1.45, report all information for the current library director/manager. 1.37 Title of Library Director/ Manager (select one): 1.38 First Name of Library Director/Manager 1.39 Last Name of Library Director/Manager 1.40 NYS Public Librarian Certification Number 1.41 What is the highest education level of the library manager/director? 1.42 If the library manager/director holds a Master's Degree, is it a Master's Degree in Library/Information Science? 1.43 Do all staff working in the budgeted Librarian (certificate) positions reported in 6.4 have an active NYS Public Librarian Certificate? If No., list the name and e-mail address of each staff member without an active certificate in a Note. 1.44 E-mail Address of the Director/Manager 1.45 Fax Number of the Director/Manager 1.46 Is the library a member of the New York State and Local Retirement System? 1.47 Does the library charge fees for library cards to people residing outside the system's service area? 1.48 Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote form each funding source. If no, go to question 1.49. 1. Name of municipality or district holding the public vote 3. Date the vote was held (mm/dd/2017) 4. Was the vote successful? Y/N 5. What type of public vote was it? 6. Proposed increase in appropriation as a result of the vote held on the N/A	1.31	Federal Employer Identification Number	150564077
1.34 Town/City 1.35 Library System Finger Lakes Library System THESE QUESTIONS ARE FOR NYC LIBRARIES ONLY. PLEASE PROCEED TO THE NEXT QUESTION. 1.36a President/CEO Name 1.36b President/CEO Email NOTE: For questions 1.37 through 1.45, report all information for the current library director/manager. 1.37 Title of Library Director/Manager (select one): 1.38 First Name of Library Director/Manager Heather 1.39 Last Name of Library Director/Manager 1.40 NYS Public Librarian Certification Number 1.41 What is the highest education level of the library manager/director? 1.42 If the library manager/director holds a Master's Degree, is it a Master's Degree in Library/Information Science? 1.43 Do all staff working in the budgeted Librarian (certificate) positions reported in 6.4 have an active NYS Public Librarian Certificate? If No, list the name and e-mail address of each staff member without an active certificate in a Note. 1.44 E-mail Address of the Director/Manager (607) 836-8866 1.45 Fax Number of the Director/Manager (memoria@twcny.rr.com (607) 836-8866 1.46 Is the library a member of the New York State and Local Retirement System's service area? 1.48 Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. 1. Name of municipality or district holding the public vote 3. Date the vote was held (mm/dd/2017) N/A 4. Was the vote was held (mm/dd/2017) N/A 5. What type of public vote was it? 6. Most recent prior year approved appropriation from a public vote. N/A 6. Proposed increase in appropriation as a result of the vote held on the	1.32	County	CORTLAND
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1.40 NYS Public Librarian Certification Number 1.41 What is the highest education level of the library manager/director? 1.42 If the library manager/director holds a Master's Degree, is it a Master's Degree in Library/Information Science? 1.43 Do all staff working in the budgeted Librarian (certified) positions reported in 6.4 have an active NYS Public Librarian Certificate? If No, list the name and e-mail address of each staff member without an active certificate in a Note. 1.44 E-mail Address of the Director/Manager Imemoria@twcny.rr.com (607) 836-8866 1.45 Fax Number of the Director/Manager (607) 836-8866 1.46 Is the library a member of the New York State and Local Retirement System? 1.47 Does the library charge fees for library cards to people residing outside the system's service area? 1.48 Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. 1. Name of municipality or district holding the public vote 2. Indicate the type of municipality or district holding the public vote 3. Date the vote was held (mm/dd/2017) N/A 4. Was the vote successful? Y/N N/A 5. What type of public vote was it? N/A 6a. Most recent prior year approved appropriation from a public vote: N/A 6b. Proposed increase in appropriation as a result of the vote held on the	1.38	First Name of Library Director/Manager	Heather
1.41 What is the highest education level of the library manager/director? 1.42 If the library manager/director holds a Master's Degree, is it a Master's Degree in Library/Information Science? 1.43 Do all staff working in the budgeted Librarian (certified) positions reported in 6.4 have an active NYS Public Librarian Certificate? If No, list the name and e-mail address of each staff member without an active certificate in a Note. 1.44 E-mail Address of the Director/Manager Imemoria@twcny.rr.com (607) 836-8866 1.45 Fax Number of the Director/Manager (607) 836-8866 1.46 Is the library a member of the New York State and Local Retirement System? 1.47 Does the library charge fees for library cards to people residing outside the system's service area? 1.48 Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. 1. Name of municipality or district holding the public vote N/A 1. Name of municipality or district holding the public vote N/A 2. Indicate the type of municipality or district holding the public vote N/A 3. Date the vote was held (mm/dd/2017) N/A 4. Was the vote successful? Y/N N/A 5. What type of public vote was it? N/A 6a. Most recent prior year approved appropriation from a public vote: N/A 6b. Proposed increase in appropriation as a result of the vote held on the N/A 1. N/A	1.39	Last Name of Library Director/Manager	Cobb
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reported in 6.4 have an active NYS Public Librarian Certificate? If No, list the name and e-mail address of each staff member without an active certificate in a Note. 1.44 E-mail Address of the Director/Manager Imemoria@twcny.rr.com (607) 836-8866 1.45 Fax Number of the Director/Manager (607) 836-8866 1.46 Is the library a member of the New York State and Local Retirement System? Y 1.47 Does the library charge fees for library cards to people residing outside the system's service area? N 1.48 Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. 1. Name of municipality or district holding the public vote N/A 2. Indicate the type of municipality or district holding the public vote N/A 3. Date the vote was held (mm/dd/2017) N/A 4. Was the vote successful? Y/N N/A 5. What type of public vote was it? N/A 6a. Most recent prior year approved appropriation from a public vote: N/A 6b. Proposed increase in appropriation as a result of the vote held on the N/A	1.42		N/A
 1.45 Fax Number of the Director/Manager [1.46 Is the library a member of the New York State and Local Retirement System? [1.47 Does the library charge fees for library cards to people residing outside the system's service area? [1.48 Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. [1. Name of municipality or district holding the public vote N/A 2. Indicate the type of municipality or district holding the public vote N/A 3. Date the vote was held (mm/dd/2017) N/A 4. Was the vote successful? Y/N N/A 5. What type of public vote was it? N/A 6a. Most recent prior year approved appropriation from a public vote: N/A 6b. Proposed increase in appropriation as a result of the vote held on the N/A 	1.43	reported in 6.4 have an active NYS Public Librarian Certificate? If No, list the name and e-mail address of each staff member without	N/A
1.46 Is the library a member of the New York State and Local Retirement System? 1.47 Does the library charge fees for library cards to people residing outside the system's service area? 1.48 Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. 1. Name of municipality or district holding the public vote N/A 2. Indicate the type of municipality or district holding the public vote N/A 3. Date the vote was held (mm/dd/2017) N/A 4. Was the vote successful? Y/N N/A 5. What type of public vote was it? N/A 6a. Most recent prior year approved appropriation from a public vote: N/A 6b. Proposed increase in appropriation as a result of the vote held on the	1.44	E-mail Address of the Director/Manager	lmemoria@twcny.rr.com
Retirement System? 1.47 Does the library charge fees for library cards to people residing outside the system's service area? 1.48 Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. 1. Name of municipality or district holding the public vote N/A 2. Indicate the type of municipality or district holding the public vote N/A 3. Date the vote was held (mm/dd/2017) N/A 4. Was the vote successful? Y/N N/A 5. What type of public vote was it? N/A 6a. Most recent prior year approved appropriation from a public vote: N/A	1.45	Fax Number of the Director/Manager	(607) 836-8866
outside the system's service area? 1.48 Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. 1. Name of municipality or district holding the public vote N/A 2. Indicate the type of municipality or district holding the public vote N/A 3. Date the vote was held (mm/dd/2017) N/A 4. Was the vote successful? Y/N N/A 5. What type of public vote was it? N/A 6a. Most recent prior year approved appropriation from a public vote: N/A 6b. Proposed increase in appropriation as a result of the vote held on the N/A	1.46		Y
held during Calendar Year 2017? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49. 1. Name of municipality or district holding the public vote N/A 2. Indicate the type of municipality or district holding the public vote N/A 3. Date the vote was held (mm/dd/2017) N/A 4. Was the vote successful? Y/N N/A 5. What type of public vote was it? N/A 6a. Most recent prior year approved appropriation from a public vote: N/A 6b. Proposed increase in appropriation as a result of the vote held on the N/A	1.47		N
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 Date the vote was held (mm/dd/2017) Was the vote successful? Y/N What type of public vote was it? Most recent prior year approved appropriation from a public vote: Proposed increase in appropriation as a result of the vote held on the N/A 	1.	Name of municipality or district holding the public vote	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 N/A 	2.	Indicate the type of municipality or district holding the public vote	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 N/A 	3.	Date the vote was held (mm/dd/2017)	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 N/A 	4.	Was the vote successful? Y/N	N/A
6b. Proposed increase in appropriation as a result of the vote held on the $_{N/A}$	5.	What type of public vote was it?	N/A
	6a.	Most recent prior year approved appropriation from a public vote:	N/A
	6b.		N/A

oc.	Total proposed appropriation (sum of ou and ob).	- 1/		
This question should only be answered if "No" was answered in Q1.48 OR the library has votes from different municipalities/districts that were held in different years, both current and prior.				
1.49	Did the library receive funding from an appropriation which was approved by public vote in a prior year? (Prior to Calendar Year 2017) Enter Y for Yes, N for No. If Yes, complete one record for the vote from each funding source. If No, go to question 1.50.	Y		
1.	Name of municipality or district holding the public vote	McGraw Central		
2.	Indicate the type of municipality or district holding the public vote	School District		
3.	Date the last successful vote was held (mm/dd/yyyy)	05/20/2014		
4.	What type of public vote was it?	school district ballot proposition (Ed. Law §259(1)(a))		
5.	What was the total dollar amount of the appropriation from tax dollars resulting from the last successful vote?	\$27,500		
1.50	Does the reporting library have a contractual agreement with a municipality or district to provide library services to residents of an area not served by a chartered library? Enter Y for Yes, N for No. If yes, please complete one record for <i>each</i> contract. If no, go to question 1.51.	Y		
1.	Name of contracting municipality or district	Town of Cortlandville		
2.	Is this a written contractual agreement?	Y		
3.	Population of the geographic area served by this contract	8,509		
4.	Dollar amount of contract	\$25,963		
5.	Enter the appropriate code for range of services provided (select one):	Full		
1.	Name of contracting municipality or district	Town of Solon		
2.	Is this a written contractual agreement?	N		
3.	Population of the geographic area served by this contract	1,079		
4.	Dollar amount of contract	\$1,643		
5.	Enter the appropriate code for range of services provided (select one):	Full		
1.51	For the reporting year, has the library experienced any unusual circumstance(s) that affected the statistics reported (e.g., natural disaster, fire, closed for renovations, massive weeding of collection, etc.)? If yes, please annotate explaining the circumstance(s) and the impact on the library using the Note; if no, please go to Part 2,	N		

N/A

Total proposed appropriation (sum of 6a and 6b):

6c.

2. LIBRARY COLLECTION

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

PRINT MATERIALS

Cataloged Books			
2.1	Adult Fiction Books	5,711	
2.2	Adult Non-fiction Books	3,212	
2.3	Total Adult Books (Total questions 2.1 & 2.2)	8,923	
2.4	Children's Fiction Books	4,162	
2.5	Children's Non-fiction Books	1,575	
2.6	Total Children's Books (Total questions 2.4 & 2.5)	5,737	
2.7	Total Cataloged Books (Total questions 2.3 & 2.6)	14,660	
Other	Print Materials		
2.8	Total Uncataloged Books	0	
2.9	Total Print Serials	66	
2.10	All Other Print Materials	15	
2.11	Total Other Print Materials (Total questions 2.8 through 2.10)	81	
2.12	Total Print Materials (Total questions 2.7 and 2.11)	14,741	
ALL	OTHER MATERIALS		
Elect	ronic Materials		
2.13	Electronic Books	9,895	
2.14	Local Electronic Collections	0	
2.15	NOVELny Electronic Collections	16	
2.16	Total Electronic Collections (Total questions 2.14 and 2.15)	16	
2.17	Audio - Downloadable Units	4,412	
2.18	Video - Downloadable Units	21	
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)	14,344	
Non-l	Electronic Materials		
2.21	Audio - Physical Units	212	
2.22	Video - Physical Units	1,002	
2.23	Other Non-Electronic Materials (includes films, slides, etc.)	0	
2.24	Total Other Materials Holdings (Total questions 2.21 through 2.23)	1,214	
2.25	GRAND TOTAL HOLDINGS (Total questions 2.12, 2.20 and 2.24)	30,299	
CUR	RENT SERIAL SUBSCRIPTIONS		
2.26	Current Print Serial Subscriptions	40	
ADD	TIONS TO HOLDINGS - Do <u>not</u> subtract withdrawals or discards.		

2.27	Cataloged Books	586
2.28	All Other Print Materials	0
2.29	Electronic Materials	0
2.30	All Other Materials	211
2.31	Total Additions (Total questions 2.27 through 2.30)	797

3. LIBRARY PROGRAMS, POLICIES, AND SERVICES

Report all information on questions 3.1 through 3.28 as of the end of the <u>fiscal</u> year reported in Part 1; report information on questions 3.29 through 3.80 for the 2017 <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)	9,672
3.2	Registered resident borrowers	464
3.3	Registered non-resident borrowers	245

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

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

3.4	Does the library have an open meeting policy?	Y
3.5	Does the library have a policy protecting the confidentiality of library records?	Y
3.6	Does the library have an Internet use policy?	Y
3.7	Does the library have a disaster plan?	N
3.8	Does the library have a board-approved conflict of interest policy?	N
3.9	Does the library have a board-approved whistle blower policy?	N
Please	e report information on ACCESSIBILITY as of 12/31/17.	

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

3.10	Does the library provide service to persons who cannot visit the	
	library (homebound persons, persons in nursing homes, persons in	N
	jail, etc.)?	

3.11	Does the library have assistive devices for persons who are deaf and	N
	hearing impaired (TTY/TDD)?	11

- 3.12 Does the library have large print books?
- 3.13 Does the library have assistive technology for the blind and visually impaired?

3.14 - If so, what do you have?

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

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

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

LIBRARY SPONSORED PROGRAMS

3.16	Adult Program Sessions	34
3.17	Young Adult Program Sessions	16
3.18	Children's Program Sessions	37
3.19	All Other Program Sessions	3
3.20	Total Number of Program Sessions (Total questions 3.16 through 3.19)	90
3.21	One-on-One Program Sessions	0
3.22	Do library staff, trustees and/or volunteers reach outside of the library to promote library programs and services through group presentations, information tables and/or other similar educational activities sponsored by the Library?	Yes
3.23	Adult Program Attendance	146
3.24	Young Adult Program Attendance	128
3.25	Children's Program Attendance	378
3.26	All Other Program Attendance	274
3.27	Total Program Attendance (Total questions 3.23 through 3.26)	926
3.28	One-on-One Program Attendance	0

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

SUMMER READING PROGRAM

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

a.	Program(s) for children	Yes
b.	Program(s) for young adults	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
3.30	Library outlets offering a summer reading program	3
3.31	Children registered for the library's summer reading program	105
3.32	Young adults registered for the library's summer reading program	29
3.33	Adults registered for the library's summer reading program	14
3.34	Total number registered for the library's summer reading program (total $3.31 + 3.32 + 3.33$)	148
3.35	Children's program sessions - Summer 2017	16
3.36	Young adult program sessions - Summer 2017	7
3.37	Adult program sessions - Summer 2017	8
3.38	Total program sessions - Summer 2017 (total $3.35 + 3.36 + 3.37$)	31
3.39	Children's program attendance - Summer 2017	493
3.40	Young adult program attendance - Summer 2017	156
3.41	Adult program attendance - Summer 2017	42
3.42	$Total\ program\ attendance\ \textbf{-}\ Summer\ 2017\ (total\ 3.39+3.40+3.41)$	691
COLL	ABORATORS	
3.43	Public school district(s) and/or BOCES	1
3.44	Non-public school(s)	0
3.45	Childcare center(s)	0
3.46	Summer camp(s)	0
3.47	Municipality/Municipalities	0

3.48	Literacy provider(s)	0
3.49	Other (describe using the State note)	0
3.50	Total Collaborators (total 3.43 through 3.49)	1
Please	e report information on EARLY LITERACY PROGRAMS for the 20	17 calendar year.
EARI	LY LITERACY PROGRAMS	
3.51	Did the library offer early literacy programs? (Enter Y for Yes, N	Y
	for No)	1
3.52 -	Indicate types of programs offered (check all that apply)	
a.	Focus on birth - school entry (kindergarten)	Yes
b.	Focus on parents & caregivers	No
c.	Combined audience	No
d.	N/A	No
3.53 -	Number of sessions	
a.	Focus on birth - school entry (kindergarten)	36
b.	Focus on parents & caregivers	0
c.	Combined audience	0
d.	N/A	N/A
3.54	Total Sessions	36
3.55 -	Attendance at sessions	
a.	Focus on birth - school entry (kindergarten)	318
b.	Focus on parents & caregivers	0
c.	Combined audience	0
d.	N/A	N/A
3.56	Total Attendance	318
3.57 -	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	e report information on ADULT LITERACY for the 2017 calendar ye	ar.
ADUI	LT LITERACY	
3.58	Did the library offer adult literacy programs?	No
3.59	Total group program sessions	0
3.60	Total one-on-one program sessions	0
3.61	Total group program attendance	0
3.62	Total one-on-one program attendance	0
	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

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

No

PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL)

Other (see instructions and describe using Note)

3.64	Did the library offer programs for English Speakers of Other Languages (ESOL)? (Enter Y for Yes, N for No)	N
3.65	Children's program sessions	0
3.66	Young adult program sessions	0
3.67	Adult program sessions	0
3.68	Total program sessions (total $3.65 + 3.66 + 3.67$)	0
3.69	One-on-one program sessions	0
3.70	Children's program attendance	0
3.71	Young adult program attendance	0
3.72	Adult program attendance	0
3.73	Total program attendance (total $3.70 + 3.71 + 3.72$)	0
3.74	One-on-one program attendance	0
3.75 -	Collaborators (check all that apply):	
a.	Literacy NY (Literacy Volunteers of America)	No
b.	Public School District(s) and/or BOCES	No
c.	Non-Public School(s)	No
d.	Other (describe using the Note)	No
Please	e report information on DIGITAL LITERACY for the 2017 calendar	year.

DIGITAL LITERACY

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

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

CAIA	ALUGED BOOK CIRCULATION	
4.1	Adult Fiction Books	3,578
4.2	Adult Non-fiction Books	754
4.3	Total Adult Books (Total questions 4.1 & 4.2)	4,332
4.4	Children's Fiction Books	2,299
4.5	Children's Non-fiction Books	443
4.6	Total Children's Books (Total questions 4.4 & 4.5)	2,742
4.7	Total Cataloged Book Circulation (Total question 4.3 & 4.6)	7,074
CIRC	CULATION OF OTHER MATERIALS	
4.8	Circulation of Adult Other Materials	2,450
4.9	Circulation of Children's Other Materials	1,231
4.10	Total Circulation of Other Materials (Total questions 4.8, 4.9)	3,681
4.11	Physical Item Circulation (Total questions 4.7 & 4.10)	10,755
ELEC	CTRONIC USE	
4.12	Use of Electronic Material	820
4.13	Successful Retrieval of Electronic Information	0
4.14	Electronic Content Use (Total questions 4.12 & 4.13)	820
4.15	Total Circulation of Materials (Total questions 4.11 & 4.12)	11,575
	•	11,575

4.16	Total Collection Use (Total questions 4.13 & 4.15)	
4.17	Grand Total Circulation of Children's Materials (Total questions 4.6 & 4.9)	3,973
REFE	ERENCE TRANSACTIONS	
4.18	Total Reference Transactions	1,768
4.19	Does the library offer virtual reference?	Y
INTE	RLIBRARY LOAN - MATERIALS RECEIVED (BORROWED)	
4.20	TOTAL MATERIALS RECEIVED	1,689
INTE	RLIBRARY LOAN - MATERIALS PROVIDED (LOANED)	
4.21	TOTAL MATERIALS PROVIDED	2,986

5. TECHNOLOGY AND TELECOMMUNICATIONS

Report all information as of December 31, 2017.

SYSTEMS AND SERVICES

5.1	Automated circulation system?	Y
5.2	Online public access catalog (OPAC)?	Y
5.3	Electronic access to the OPAC from outside the library?	Y
5.4	Annual number of visits to the library's web site	35,762
5.5	Does the library use Internet filtering software on any computer?	Y
5.6	Name of the person responsible for the library's Information Technology (IT) services	Heather Cobb
5.7	IT contact's telephone number (enter 10 digits only and hit the Tab key)	(607) 836-6767
5.8	IT contact's email address	lmemoria@twcny.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.	30
BUDG	SETED POSITIONS IN FULL-TIME EQUIVALENTS	
6.2	Library Director (certified)	0
6.3	Vacant Library Director (certified)	0
6.4	Librarian (certified)	0.2
6.5	Vacant Librarian (certified)	0
6.6	Library Manager (not certified)	1
6.7	Vacant Library Manager (not certified)	0
6.8	Library Specialist/Paraprofessional (not certified)	0
6.9	Vacant Library Specialist/Paraprofessional (not certified)	0
6.10	Other Staff	0.71
6.11	Vacant Other Staff	0
6.12	TOTAL PAID STAFF (Total questions 6.2, 6.4, 6.6, 6.8 & 6.10)	1.91
6.13	VACANT TOTAL PAID STAFF (Total questions 6.3, 6.5, 6.7, 6.9 & 6.11)	0.00

SALARY INFORMATION 0 6.14 FTE - Entry Level Librarian (certified) Salary - Entry Level Librarian (certified) \$0 6.15 0 FTE - Library Director (certified) 6.16 \$0 Salary - Library Director (certified) 6.17 6.18 FTE - Library Manager (not certified) 1 6.19 Salary - Library Manager (not certified) \$26,372 7. MINIMUM PUBLIC LIBRARY STANDARDS Report all information as of December 31, 2017. Please click here to read general instructions before completing this section. 7.1 1. Is governed by board-approved written bylaws which outline the Y responsibilities and procedures of the library board of trustees. Y 7.2 2. Has a board-approved written long range plan of service. 7.3 3. Presents a board-approved annual report to the community on the library's progress in meeting its goals and objectives. 7.4 4. Has board-approved written policies for the operation of the Y library. 7.5 5. Presents annually to appropriate funding agencies a written board-approved budget which would enable the library to meet or Y exceed these standards and to carry out its long-range plan of service. 7.6 6. Periodically evaluates the effectiveness of the library's collection and services in meeting community needs. 7. Is open the minimum standard number of public service hours for $_{\mathbf{Y}}$ 7.7 population served. (see instructions) 8. Maintains a facility to meet community needs, including adequate: Y 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) 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 Y 7.149b. photocopier (see instructions) Y 7.15 9c. microcomputer or terminal Y 7.16 9d. printer Y 7.17 9e. Fax capability (see instructions)

8. PUBLIC SERVICE INFORMATION

Commissioner's Regulation 90.8.

10. Distributes board-approved printed information listing the

library's hours open, borrowing rules, services, location and phone

11. Employs a paid director in accordance with the provisions of

7.18

7.19

number.

Report all information as of the end of the fiscal year reported in Part 1. Please click here to read general

Y

Y

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	C SERVICE HOURS - Report hours to two decimal places.	
8.6	Minimum Weekly Total Hours - Main Library	26.00
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 - $8.8)$	26.00
8.10	Annual Total Hours - Main Library	1,352.00
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)	1,352.00

9. SERVICE OUTLET INFORMATION

1.

Outlet Name

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.

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.

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

Lamont Memorial Free Library

	o direct i tuille	
2.	Outlet Name Status	00 (for no change)
3.	Street Address	5 Main Street
4.	Outlet Street Address Status	00 (for no change)
5.	City	McGraw
6.	Zip Code	13101
7.	Phone (enter 10 digits only)	(607) 836-6767
8.	Fax Number (enter 10 digits only)	(607) 836-8866
9.	E-mail Address	lmemoria@twcny.rr.com
10.	Outlet URL	www.lamontlibrary.org
11.	County	Cortland
12.	School District	McGraw Central
13.	Library System	Finger Lakes Library System
14.	Outlet Type Code (select one):	CE
15.	Public Service Hours Per Year for This Outlet	1,352
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?	N
19.	Total number of non-library sponsored programs, meetings and/or events at this outlet	64
20.	Enter the appropriate outlet code (select one):	LRF
21.	Who owns this outlet building?	Village
22.	Who owns the land on which this outlet is built?	Village
23.	Indicate the year this outlet was initially constructed	1906
24.	Indicate the year this outlet underwent a major renovation costing \$25,000 or more	2004
25.	Square footage of the outlet	2,169
26.	Number of internet computers at this outlet used by general public	6
27.	Number of uses (sessions) of public Internet computers per year	2,049
28.	Type of connection on the outlet's public Internet computers	Cable
29.	Maximum <u>download</u> speed of connection on the outlet's public Internet computers	6 Greater than or equal to 6 mbps and less than 10 mbps
30.	Maximum $\underline{\text{upload}}$ speed of connection on the outlet's public Internet computers	6 Greater than or equal to 6 mbps and less than 10 mbps
31.	Internet Provider	Spectrum/Time Warner Cable
32.	WiFi Access	Available only when the library is open
33.	Number of wireless sessions provided by the library wireless service per year	5,475
	Does the outlet have interactive videoconferencing capability for public use?	N
35.	Does the outlet have a building entrance that is physically accessible to a person in a wheelchair?	Y
36.	Is every public part of the outlet accessible to a person in a wheelchair?	N
37.	LIBID	2400113810
38.	FSCSID	NY0145
39.	Number of Bookmobiles in the Bookmobile Outlet Record	0
40.	Outlet Structure Status	00 (for no change from previous year)

10. OFFICERS AND TRUSTEES

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

BOARD MEETINGS

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

NUMBER OF TRUSTEES AND TERMS

- 10.2 Does your library have a range of trustees stated in the library's charter documents (incorporation)?
- Yes

10.3 If yes, what is the range?

- 5-7 trustees
- 10.4 If your library has a range, how many voting positions are stated in the library's current by-laws?

10.5	If your library does not have a range, how many voting positions are stated in the library's charter documents (incorporation)?	5
10.6	Does your library's charter documents (incorporation) state a specified term for trustees? If no, please explain in a Note.	Yes
10.7	If yes, what is the trustee term length, as stated in your library's charter documents (incorporation)?	5 years
BOAI	RD MEMBER SELECTION	
10.8	Enter Board Member Selection Code (select one):	A - board members are appointed by municipality(ies)
	fficers and Board Members as of February 1, 2018. Complete one recover a record for each voting position, whether filled or vacant. Do not in	
BOAF	RD PRESIDENT	
10.9	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the Note), or Vacant	Mrs.
10.10	First Name	Samantha
	Last Name	Augur
	Mailing Address	4056 State Route 41
10.12	-	McGraw
	Zip Code (5 digits only)	13101
	Phone (enter 10 digits only)	(607) 836-4335
	E-mail Address	dsaugur@verizon.net
	Term Begins - Month	January
	Term Begins - Year (yyyy)	2015
		December
	Term Expires - Month Term Expires - Veer (very)	2019
	Term Expires - Year (yyyy) Is this trustee coming a full term? If No. add a Note (for example	2019
10.21	Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
10.22	The date the Oath of Office was taken (mm/dd/yyyy)	2/17/16
10.23	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	2/17/16
10.24	Is this a brand new trustee?	N
and Ta inform must e	may 1) enter the data for the Officers and Board Members directly into aylor the data for this section to be uploaded into Collect (but do not in nation should still be entered directly into the survey). If you choose to enter the data into the spreadsheet form available here . Complete this fortat@btol.com.	nclude the Board Presidentâ€"this send your data for uploading, you
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Maryalice
3.	Last Name of Board Member	Griffin
4.	Mailing Address	4428 Syrian Hill Road
5.	City	McGraw
6.	Zip Code (5 digits only)	13101
7.	E-mail address	MaryaliceGriffin@cortland.edu
8.	Office Held or Trustee	Vice President
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2015
11.	Term Expires	December
10		2010

2019

Term Expires - Year (yyyy)

12.

13.	Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a	Yes
14.	trustee who resigned their position). The data the Ooth of Office (mm/dd/www) was taken	02/17/2015
14. 15.	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)	02/17/2015
16.	(mm/dd/yyyy) Is this a brand new trustee?	N
10.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Christine
3.	Last Name of Board Member	Buerkle
3. 4.		4056 Carr Hill Road
4. 5.	Mailing Address City	Cortland
5. 6.	Zip Code (5 digits only)	13045
0. 7.	E-mail address	Robjbu@verizon.net
8.	Office Held or Trustee	Financial Officer
6. 9.	Term Begins - Month	January
9. 10.	Term Begins - World Term Begins - Year (year)	2014
10.	Term Expires	December
11.	Term Expires - Year (yyyy)	2018
13.	Is this trustee serving a full term? If No, add a Note (for example,	2010
13.	this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
14.	The date the Oath of Office (mm/dd/yyyy) was taken	02/17/15
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	02/17/15
16.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Teresa
3.	Last Name of Board Member	Ripley
	Last Name of Board Member Mailing Address	Ripley 3738 McGraw Marathon Road
3.		• •
3. 4.	Mailing Address	3738 McGraw Marathon Road
3.4.5.	Mailing Address City	3738 McGraw Marathon Road McGraw
3.4.5.6.	Mailing Address City Zip Code (5 digits only)	3738 McGraw Marathon Road McGraw 13101
3.4.5.6.7.	Mailing Address City Zip Code (5 digits only) E-mail address	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu
3. 4. 5. 6. 7. 8.	Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu Secretary
3. 4. 5. 6. 7. 8. 9.	Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu Secretary January
3. 4. 5. 6. 7. 8. 9.	Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year)	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu Secretary January 2013
3. 4. 5. 6. 7. 8. 9. 10.	Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu Secretary January 2013 December
3. 4. 5. 6. 7. 8. 9. 10. 11.	Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu Secretary January 2013 December 2017
3. 4. 5. 6. 7. 8. 9. 10. 11. 12.	Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu Secretary January 2013 December 2017 Yes
3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the Oath of Office (mm/dd/yyyy) was taken The date the Oath of Office was filed with town or county clerk	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu Secretary January 2013 December 2017 Yes 01/24/12
3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). 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)	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu Secretary January 2013 December 2017 Yes 01/24/12 01/24/12
3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). 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) Is this a brand new trustee?	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu Secretary January 2013 December 2017 Yes 01/24/12 01/24/12 N
3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). 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) Is this a brand new trustee? Title of Board Member (select one):	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu Secretary January 2013 December 2017 Yes 01/24/12 01/24/12 N Mrs.
3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). 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) Is this a brand new trustee? Title of Board Member (select one): First Name of Board Member	3738 McGraw Marathon Road McGraw 13101 teresa.ripley@cortland.edu Secretary January 2013 December 2017 Yes 01/24/12 N Mrs. Mary

5.	City	McGraw
6.	Zip Code (5 digits only)	13101
7.	E-mail address	mbick@verizon.net
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)	2018
13.	Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
14.	The date the Oath of Office (mm/dd/yyyy) was taken	02/17/15
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	02/17/15
16.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Melanie
3.	Last Name of Board Member	Field
4.	Mailing Address	47 Elm Street
5.	City	McGraw
6.	Zip Code (5 digits only)	13101
7.	E-mail address	melanie.field@pall.com
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2017
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2021
13.	Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
16.	Is this a brand new trustee?	Y
1.	Title of Board Member (select one):	Vacant
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	Trustee
9.	Term Begins - Month	
10.	Term Begins - Year (year)	
11.	Term Expires	
12.	Term Expires - Year (yyyy)	
13.	Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	

- 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 (mm/dd/yyyy)
- 16. Is this a brand new trustee?

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 to question 11.3.	Y			
1.	Source of Funds	Town			
2.	Name of funding County, Municipality or District	Cortlandville			
3.	Amount	\$25,963			
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	Solon			
3.	Amount	\$1,643			
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	N			
5.	Written Contractual Agreement	N			
1.	Source of Funds	Village			
2.	Name of funding County, Municipality or District	McGraw			
3.	Amount	\$13,286			
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	N			
5.	Written Contractual Agreement	N			
1.	Source of Funds	School District			
2.	Name of funding County, Municipality or District	McGraw Central			
3.	Amount	\$27,500			
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	Y			
5.	Written Contractual Agreement	N			
11.2	TOTAL LOCAL PUBLIC FUNDS	\$68,392			
SYST	EM CASH GRANTS TO MEMBER LIBRARY				
11.3	Local Library Services Aid (LLSA)	\$1,544			
11.4	Central Library Aid (CLDA and/or CBA)	\$0			
11.5	Additional State Aid received from the System	\$3,000			
11.6	Federal Aid received from the System	\$0			
11.7	Other Cash Grants	\$0			
11.8	TOTAL SYSTEM CASH GRANTS (Add Questions 11.3, 11.4,	\$4.54A			
	11.5, 11.6 and 11.7)	\$4,544			
OTH	OTHER STATE AID				
11.9	State Aid other than LLSA, Central Library Aid (CLDA and/or CBA), or other State Aid reported as system cash grants	\$1,300			

CBA), or other State Aid reported as system cash grants

FEDE	RAL 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
OTHE	CR RECEIPTS	
11.14	Gifts and Endowments	\$7,085
11.15	Fund Raising	\$2,535
11.16	Income from Investments	\$320
11.17	Library Charges	\$1,071
11.18	Other	\$1,214
11.19	TOTAL OTHER RECEIPTS (Add Questions 11.14, 11.15, 11.16, 11.17 and 11.18)	\$12,225
11.20	TOTAL OPERATING FUND RECEIPTS (Add Questions 11.2, 11.8, 11.9, 11.12, 11.13 and 11.19)	\$86,461
11.21	BUDGET LOANS	\$0
TRAN	ISFERS	
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 11.23)	\$0
11.25	BALANCE IN OPERATING FUND - Beginning Balance for Fiscal Year Ending 2017 (Same as Question 12.40 of previous year if fiscal year has not changed)	\$20,279
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)	\$106,740

12. OPERATING FUND DISBURSEMENTS

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.

STAFF EXPENDITURES

Salaries & Wages Paid from Library Funds

12.1	Certified Librarians	\$936	
12.2	Other Staff	\$39,782	
12.3	Total Salaries & Wages Expenditures (Add Questions 12.1 and 12.2)	\$40,718	
12.4	Employee Benefits Expenditures	\$8,232	
12.5	Total Staff Expenditures (Add Questions 12.3 and 12.4)	\$48,950	
COLLECTION EXPENDITURES			
12.6	Print Materials Expenditures	\$9,050	
12.7	Electronic Materials Expenditures	\$559	
12.8	Other Materials Expenditures	\$1,388	
12.9	Total Collection Expenditures (Add Questions 12.6, 12.7 and 12.8)	\$10,997	

CAPITAL EXPENDITURES FROM OPERATING FUNDS

12 10	From Local Dublic Funds (71DE)	\$0
	From Local Public Funds (71PF)	\$0 \$0
	From Other Funds (710F) Total Capital Expenditures (Add Questions 12.10 and 12.11)	\$0 \$0
	ATION AND MAINTENANCE OF BUILDINGS	\$ 0
OFEN	ATION AND MAINTENANCE OF BUILDINGS	
Repair	rs to Building & Building Equipment	
12.13	From Local Public Funds (72PF)	\$0
12.14	From Other Funds (72OF)	\$0
12.15	Total Repairs (Add Questions 12.13 and 12.14)	\$0
12.16	Other Disbursements for Operation & Maintenance of Buildings	\$5,396
12.17	Total Operation & Maintenance of Buildings (Add Questions 12.15 and 12.16)	\$5,396
MISC	ELLANEOUS EXPENSES	
12.18	Office and Library Supplies	\$3,952
12.19	Telecommunications	\$1,399
12.20	Binding Expenses	\$0
12.21	Postage and Freight	\$246
12.22	Professional & Consultant Fees	\$2,720
12.23	Equipment	\$7,019
12.24	Other Miscellaneous	\$938
12.25	Total Miscellaneous Expenses (Add Questions 12.18, 12.19, 12.20, 12.21, 12.22, 12.23 and 12.24)	\$16,274
	CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE	\$5,800
DEBT	SERVICE	
Capita	al Purposes Loans (Principal and Interest)	
12.27	From Local Public Funds (73PF)	\$0
12.28	From Other Funds (73OF)	\$0
12.29	Total (Add Questions 12.27 and 12.28)	\$0
12.30	Budget Loans (Principal and Interest)	\$0
12.31	Short-Term Loans	\$0
12.32	Total Debt Service (Add Questions 12.29, 12.30 and 12.31)	\$0
12.33	TOTAL OPERATING FUND DISBURSEMENTS (Add Questions 12.5, 12.9, 12.12, 12.17, 12.25, 12.26 and 12.32)	\$87,417
TRAN	ISFERS	
Trans	fers to Capital Fund	
12.34	From Local Public Funds (76PF)	\$0
12.35	From Other Funds (76OF)	\$0
12.36	Total Transfers to Capital Fund (Add Questions 12.34 and 12.35; same as Question 13.8)	\$0
12.37	Transfer to Other Funds	\$0
12.38	TOTAL TRANSFERS (Add Questions 12.36 and 12.37)	\$0
12.39	TOTAL DISBURSEMENTS AND TRANSFERS (Add Questions 12.33 and 12.38)	\$87,417
12.40	BALANCE IN OPERATING FUND - Ending Balance for the Fiscal Year Ending 2017	\$19,323

	GRAND TOTAL DISBURSEMENTS, TRANSFERS & BALANCE (Add Questions 12.39 and 12.40; same as Question 11.26)	\$106,740
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).	02/12/2018
FISCA	AL AUDIT	
	Last audit performed (mm/dd/yyyy)	N/A
	Time period covered by this audit (mm/dd/yyyy) - (mm/dd/yyyy)	N/A
	Indicate type of audit (select one):	N/A
CAPIT	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. C	APITAL FUND RECEIPTS	
	financial data based on the fiscal year reported in Part 1. <i>ROUND TO</i> ere to read general instructions before completing this section.	O THE NEAREST DOLLAR. Please
REVE	NUES FROM LOCAL SOURCES	
13.1	Revenues from Local Government Sources	\$0
13.2	All Other Revenues from Local Sources	\$0
13.3	Total Revenues from Local Sources (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	RAL AID FOR CAPITAL PROJECTS	
13.7	TOTAL FEDERAL AID	\$0
INTE	RFUND 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	BALANCE IN CAPITAL FUND - Beginning Balance for Fiscal Year Ending 2017 (Same as Question 14.11 of previous year, if fiscal year has not changed)	\$0
13.13	TOTAL CASH RECEIPTS AND BALANCE (Add Questions 13.11 and 13.12; same as Question 14.12)	\$0

14. CAPITAL FUND DISBURSEMENTS

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.

PROJECT EXPENDITURES

14.1	Construction	\$0
14.2	Incidental Construction	\$0

Other Disbursements 14.3 \$0 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) TOTAL PROJECT EXPENDITURES (Add Questions 14.1, 14.2 14.7 \$0 and 14.6) **TRANSFER TO OPERATING FUND** (Same as Question 11.22) 14.8 \$0 \$0 14.9 NON-PROJECT EXPENDITURES TOTAL CASH DISBURSEMENTS AND TRANSFERS (Add 14.10 \$0 Questions 14.7, 14.8 and 14.9) 14.11 BALANCE IN CAPITAL FUND - Ending Balance for the Fiscal \$0 Year Ending 2017 14.12 TOTAL CASH DISBURSEMENTS AND BALANCE (Add \$0 Questions 14.10 and 14.11; same as Question 13.13)

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	0.15
16.2	Total Librarians	0.90
16.3	All Other Paid Staff	0.53
16.4	Total Paid Employees	1.43
16.5	State Government Revenue	\$5,844
16.6	Federal Government Revenue	\$0
16.7	Other Operating Revenue	\$12,225
16.8	Total Operating Revenue	\$86,461
16.9	Other Operating Expenditures	\$27,470
16.10	Total Operating Expenditures	\$87,417
16.11	Total Capital Expenditures	\$0
16.12	Print Materials	14,726
16.13	Total Registered Borrowers	709
16.14	Other Capital Revenue and Receipts	\$0
16.15	Number of internet computers used by general public	6
16.16	Total Uses (sessions) of Public Internet Computers Per Year	2,049
16.17	Total Wireless Sessions Provided by the Library Wireless Service Per Year	5,475

17. FOR NEW YORK STATE LIBRARY USE ONLY

17.1	LIB ID	2400113810
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
 NY0145

 17.8
 SED CODE
 110304700001

 17.9
 INSTITUTION ID
 800000053599

SUGGESTED IMPROVEMENTS

Library Name: LAMONT MEMORIAL FREE LIBRARY

Library System: Finger Lakes Library System

Name of Person Completing Form: Heather Cobb
Phone Number: (607) 836-6767

I am satisfied that this resource (Collect) is meeting library needs: Applying this resource (Collect) will help improve library services to the public:

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!

Neither Agree nor Disagree

Agree