

Greenville Central School District  
Board of Education  
Minutes  
Senior Citizen and Disabled Tax Exemption Hearing  
and  
Business Meeting  
Thursday  
January 9, 2014

6:00 p.m. Executive Session

MS/HS Library Media Center

7:00 p.m. Senior Citizen and Disabled Tax Exemption Hearing  
And Regular Business Meeting

**I . Call to Order**

A meeting of the Board of Education was held on Thursday, January 9, 2014 in the MS/HS Library Media Center. Gregory Lampman, President, called the meeting to order at 6:0 p.m.

Members present: Gloria Bear  
Ann Holstein  
Jennifer Howard  
Gregory Lampman  
Patricia Macko  
Duncan Macpherson  
Rosanne Stapleton

**II. Executive Session**

At 6:01 p.m. Duncan Macpherson moved, seconded by Gloria Bear and carried unanimously to adjourn to Executive Session to discuss:

- Superintendent's Evaluation

At 6:57 p.m. Duncan Macpherson moved, seconded by Rosanne Stapleton to adjourn and return to public session for the Senior Citizen and Disabled Tax Exemption Hearing and the Business Meeting will begin at 7:00 p.m.

Others present: Cheryl A. Dudley, Superintendent  
Jacqueline O'Halloran, District Clerk  
Donna Accuosti, Director of Human Resources  
Scott Gardiner, Director of Technology  
Todd Hilgendorff, High School Principal  
Peter Mahan, Elementary School Principal  
Brian Mazza, Assistant District Principal  
Brian Reeve, Middle School Principal  
Karen Schrader, Transportation Supervisor  
Robert Schrader, Supervisor of Buildings and Grounds  
Tammy J. Sutherland, Assistant Superintendent for Business  
Brook VanFleet, Director of Special Education & Pupil Personnel Services

**III. Welcome & Pledge of Allegiance**

**IV. Approval of Agenda**

Gloria Bear moved, seconded by Duncan Macpherson to approve the Agenda for the Senior Citizen and Disabled Tax Exemption Hearing and the Business Meeting of January 9, 2014

**V. Senior Citizen and Disabled Tax Exemption Hearing**

By law each municipality must adopt the Senior Citizen Tax Exemption. For the last eight years the Board has adopted the same scale as Greene County (Catskill, Coxsackie-Athens, and Cairo-Durham school districts have also continued to adopt the same scale). Laura J. VanValkenburg, Director, Real

Property Tax Services, Greene County, has indicated that as the district is one entity, it can only adopt one scale. The Board can decide on what the scale is, but cannot, for example, adopt one scale for Greene County residents and one scale for Albany County residents.

By law, each municipality must adopt the Senior Citizen Tax Exemption. The district was notified by Laura J. VanValkenburg, Director of Real Property Tax Service, the recommendation to the Greene County Legislature that the maximum income limit remain the same, at \$22,500, with a sliding scale for 2014.

It is recommended to adopt the same scale as Greene County for the Senior Citizen and Disabled Tax Exemption.

Maximum income limit \$22,500.00	50%
\$23,500.01 - 23,499.99	45%
23,500.00 - 24,499.99	40%
24,500.00 - 25,499.99	35%
25,500.00 - 26,399.99	30%
26,400.00 - 27,299.99	25%
27,300.00 - 28,199.99	20%
28,200.00 - 29,099.99	15%
29,100.00 - 29,999.99	10%
30,000.00 – 30,899.99	5%

*(“Currently, section 467 of the Real Property Tax Law enables school districts to grant persons age 65 or over, by board resolution, the following exemptions:*

- *A 50 percent exemption for those who have up to \$22,500 in personal income, as defined by law [§467(3)].*
- *An exemption of between 5 and 45 percent along a sliding scale for those whose income is above the income ceiling adopted by the school district, as set forth by statute.*

*...In addition, any county, city, town village or school district may adopt a local law, ordinance, or resolution to grant up to a 50 percent tax exemption on the assessed value of real property owned by one or more persons age 65 or over, by a husband, and wife, siblings, a parent and an adult child with a disability one of whom is age 65 or over ... After the hearing....the board then must give a copy of the resolution to the assessor, who prepares the tax roll that will be affected by the tax exemption...”*  
*School Law 33<sup>rd</sup> Edition, Chapter 33 Assessment and Collection of Taxes, Section 33:28.)*

*It is recommended in agenda item VIII. Action D.1. to adopt the same scale as Greene County for the Senior Citizen and Disabled Tax Exemption.)*

There were no public comments during the Senior Citizen and Disabled Tax Exemption Hearing.

## **VI. Accolades**

Congratulations to Kristen Pizarro who has achieved National Board Certification in Early Adolescence/Science. Recognized as the source for the highest standards and practices, National Board Certification leads to improved teaching, learning, and leading. Teachers who pursue National Board Certification must demonstrate advanced teaching knowledge, skills and practices in a specific subject area and developmental level.

Congratulations to the Greenville Boys' Cross-Country Team, led by Sean McAneny, for winning the Patroon Conference Championship, the Greene County Championship. Sean qualified for the New York State Cross-Country Championships for high school athletes who are among the best runners in their section and placed 8th in the Class C race at the State Championships, earning All-State honors.

Congratulations to Brenner Bachman, voted MVP of the Patroon Conference for Varsity Golf, with a season average of 38 in the Patroon conference, ranking as the #1 golfer in the Patroon conference, and undefeated in conference play in 2013. He was the Medalist at the Patroon Conference Tournament with a 76, for the 2<sup>nd</sup> year in a row. With an 83 at the Class C/D sectional qualifiers (cut was 85) he was one of

two Patroon golfers to advance to state qualifiers at Ballston Spa Country Club. He shot 86 at ABCD state qualifiers, where the cut was 83 at Orchard Creek. Congratulations on a great season!

Congratulations to Lady Spartans' Carly Johnson who was named to the Varsity Girls' Soccer class B All State Fifth Team by the NYS Sportswriters Association also named a Section II, Class B All-Star and a Patroon Conference All-Star. The Lady Spartans to their first Patroon conference title in program history and an overall record of 16-3 this year.

## VII. Open Forum

Points of discussion included:

- Budget Advisory Committee participation in Board Workshops
- FFA student updates
- GCSD High School entrance sign

## VIII. Action Items: A – E:

Gloria Bear moved, seconded by Rosanne Stapleton and carried unanimously to approve items (A) & (B):

### A. Accept Minutes:

1. Business Meeting of December 12, 2013
2. Workshop December 18, 2013

### B. Accept Finance Reports for the month ending December 31, 2013: (FY2014-48)

1. Treasurer's Reports
2. Appropriation Reports for General, Federal, Cafeteria, Capital Funds and Student Activities
3. Revenue Reports for the General, Federal, Cafeteria and Capital Funds
4. Cafeteria Profit and Loss Statements
5. Transfer of Funds for General Fund
6. Internal Claims Report

Jennifer Howard moved, seconded by Rosanne Stapleton and carried unanimously to approve item (C):

### C. Approve Personnel Agenda *(Please refer to the Personnel Agenda attachment)*

BE IT RESOLVED that upon the recommendation of Superintendent of Schools, Cheryl A. Dudley, that the Board of Education of the Greenville Central School District approve the following:

#### 1. Unclassified

##### a. Resignations

- |                |  |
|----------------|--|
| 1. Name:       | Janice Lucente   |
| Position:      | Special Education Teacher  |
| Tenure Area:   | Special Education  |
| Certification: | Special Education, Permanent<br>English 7-12, Permanent          |
| Effective:     | June 30, 2014  |
| Contract:      | Greenville Faculty Association                                   |
| Category:      | Retirement   |
|                |  |
| 2. Name:       | Mary Lou Spencer   |
| Position:      | Elementary Teacher   |
| Tenure Area:   | Elementary   |
| Certification: | Nursery, K & Grades 1-6, Permanent<br>Reading Teacher, Permanent |
| Effective:     | June 30, 2014  |
| Contract:      | Greenville Faculty Association                                   |
| Category:      | Retirement   |

3. Name: Kathleen Neuffer  
 Position: Special Education Teacher  
 Tenure Area: Special Education  
 Certification: Nursery, K & Grades 1-6, Permanent  
 Mentally Retarded, Permanent  
 Effective: June 30, 2014  
 Contract: Greenville Faculty Association  
 Category: Retirement
- b. Extra Duty Compensation High School Clubs 2013-2014
1. Name: Margaret Finch (for Julie Woodhull)  
 Position: Advisor Key Club (Interact)  
 Stipend: \$1,402.00 prorated to  
 \$315.45 from November 25, 2013 to  
 January 31, 2014  
 Contract: Greenville Faculty Association  
 Status: Cleared for employment
- c. Create High School After School Help 2013-2014 ~ 1 unit
1. Position: Science 1 unit  
 Effective: 2013-2014  
 3:00pm to 4:10pm  
 The equivalent of one day per week for  
 30 weeks  
 Stipend: \$1,500.00 per unit (1 unit equals 30 days)  
 Prorated
- d. Extra Duty Compensation After School Help 2013-2014
1. Name: Erin Sharkey  
 Position: After School Science Help  
 Stipend: \$1,500 per unit (1 unit equals 30 days  
 prorated)  
 Effective: January 10, 2014  
 Contract: Greenville Faculty Association  
 Status: Cleared for employment
- e. Extra Duty Compensation High School Sports 2013-2014
1. Name: Erica Hamilton  
 Position: Volunteer ~ Cheerleading Coach  
 Stipend: N/A  
 Contract: N/A  
 Status: Cleared for employment
2. Name: Kevin Smith  
 Position: Assistant Basketball Coach Girls'  
 Stipend: \$1,500.00  
 Contract: Greenville Faculty Association  
 Status: Cleared for employment
- f. Extra Duty Compensation Modified Sports 2013-2014
1. Name: Tadgh Russell  
 Position: Volunteer ~ Modified Boys' Basketball  
 Stipend: N/A  
 Contract: N/A  
 Status: Cleared for employment

2. Name: Wendy Ward  
 Position: Volunteer ~ Modified Girls' Basketball  
 Stipend: N/A  
 Contract: N/A  
 Status: Cleared for employment

**2. Classified**

a. Substitute

1. Name: Joseph Welsh  
 Position: Substitute Bus Driver, Custodian, Cleaner, Cleaner/Monitor & Cafeteria  
 Classification: GCCS Non-competitive  
 Effective: January 10, 2014  
 Salary: Bus Driver: \$16.00 per hour  
 Custodian & Cleaner: \$12.00 per hour  
 Cleaner/Monitor: \$11.75 per our  
 Cafeteria: \$9.00 per hour  
 Contract: N/A  
 Status: Cleared for employment

Status: All conditional appointments are subject to receipt of a statement from each individual regarding criminal charges and are contingent upon receipt of criminal background clearance from the Commissioner of Education.

**D. Business Management**

Gloria Bear moved, seconded by Rosanne Stapleton and carried unanimously to approve item (1):

**1. Approve Senior Citizen and Disabled Tax Exemption Rate: (FY2014-49)**

*(BE IT RESOLVED that the Greenville Central School Board of Education establish the Senior Citizen and Disabled Tax Exemption Rates for 2014.*

By law, each municipality must adopt the Senior Citizen Tax Exemption. The district as notified by Laura J. VanValkenburg, Director of Real Property Tax Service, the recommendation to the Greene County Legislature that the maximum income limit remain the same, at \$22,500, with a sliding scale for 2014.

It is recommended to adopt the same scale as Greene County for the Senior Citizen and Disabled Tax Exemption.)

Maximum income limit \$22,500.00	50%
\$23,500.01 - 23,499.99	45%
23,500.00 - 24,499.99	40%
24,500.00 - 25,499.99	35%
25,500.00 - 26,399.99	30%
26,400.00 - 27,299.99	25%
27,300.00 - 28,199.99	20%
28,200.00 - 29,099.99	15%
29,100.00 - 29,999.99	10%
30,000.00 – 30,899.99	5%

Rosanne Stapleton moved, seconded by Jennifer Howard and carried unanimously to approve items (2) and (3):

**2. Approve SEQRA (State Environmental Quality Review Act) Resolution for Capital Construction Project**

*WHEREAS, the Board of Education of the Greenville Central School District (“Board”) is proposing to undertake a project consisting of (1) the installation of a campus-wide sanitary sewer system to be connected to the Town’s proposed new sewer system, (2) roof replacements at the existing elementary, middle school, and high school*

*buildings, (3) various replacements and upgrades to existing building systems and infrastructure, including security, technology, and energy systems, and (4) the construction of an approximately 2,000 square foot addition to its existing Transportation Facility to accommodate a storage bay, together with the installation of a covered walkway (“the Project”); and*

*WHEREAS, the State Environmental Quality Review Act (“SEQRA”) and the regulations thereunder require the Board to undertake a review of the potential environmental impacts, if any, associated with the project before approving same; and*

*WHEREAS, this project is an Unlisted action within the meaning of SEQRA; and*

*WHEREAS, a Short Environmental Assessment Form has been prepared and reviewed in connection with the proposed Project; and*

*WHEREAS, the Short Environmental Assessment Form was transmitted to the New York State Education Department (NYSED), an involved agency, together with notification of the Board’s desire to act as lead agency with respect to the environmental review of the proposed Project; and*

*WHEREAS, the New York State Education Department (NYSED) has consented to the Board acting as lead agency with respect to the environmental review of the proposed Project; and*

*WHEREAS, 6 NYCRR Section 617.7 requires a lead agency to issue a written determination of significance with respect to any proposed Unlisted action; and*

*WHEREAS, the Board has carefully considered the nature and scope of the proposed Project, as set forth in the Short Environmental Assessment Form prepared with respect to such action, and makes the following determinations:*

- 1. The proposed action involves (1) the installation of a campus-wide sanitary sewer system to be connected to the Town’s proposed new sewer system, (2) roof replacements at the existing elementary, middle school, and high school buildings, (3) various replacements and upgrades to existing building systems and infrastructure, including security, technology, and energy systems, and (4) the construction of an approximately 2,000 square foot addition to its existing Transportation Facility to accommodate a storage bay, together with the installation of a covered walkway*
- 2. The proposed action is classified under SEQRA as an unlisted action.*
- 3. Upon consideration of the action, review of the Short Environmental Assessment Forms, the criteria contained in 6 NYCRR § 617.7(c), and all other supporting information, the Board identifies the following relevant areas of environmental concern, as set forth hereafter, and analyzes whether the proposed action may have a significant adverse impact on the environment.*
- 4. The proposed project does not involve, and therefore will not result in, any substantial adverse change in existing air quality, ground or surface water quality or quantity, traffic or noise levels, or a substantial increase in solid waste production, or a substantial increase in potential for erosion, flooding, leaching, or drainage problems.*
- 5. The proposed project does not involve, and therefore will not result in, the removal or destruction of large quantities of vegetation or fauna, a substantial interference with the movement of any resident or migratory fish or wildlife species, impacts on any significant habitat area, substantial adverse impacts on a threatened or endangered species of animal or plant, or the habitat thereof, or other significant adverse impacts to nature resources.*
- 6. The project is not located within a designated Critical Environmental Area.*
- 7. The proposed project will not create a material conflict with the community’s current plans or goals as officially approved or adopted.*

8. *The proposed project will not result in the impairment of the character or quality of any important historical, archeological, or aesthetic resources, or of existing community or neighborhood character.*
9. *The proposed project will not result in any major, adverse, change in the use of either the quantity or type of energy.*
10. *The proposed project will not result in the creation of a hazard to human health.*
11. *The proposed project does not involve, and therefore will not result in, a substantial change in the use, or intensity of use, of land including agricultural, open space, or recreational resources, or in its capacity to support such uses.*
12. *The proposed action will not result in the encouragement or attraction of a large number of people to the site as compared to the number of people that would come absent the action.*
13. *The proposed action will not result in a material demand for other actions, will not result in changes to two or more elements of the environment which together would result in a substantial adverse impact, and will not cumulatively result in a substantial adverse impact when considered with any related actions.*

*NOW, THEREFORE, BE IT RESOLVED, that the Board finds and concludes that the proposed action is an Unlisted action within the meaning of 6 NYCRR 617.2(ak); and it is further*

*RESOLVED that the Board hereby declares itself lead agency with respect to the environmental review of the proposed project; and it is further*

*RESOLVED, that upon consideration of the foregoing, the Board finds and concludes that the proposed action will not result in any significant adverse impacts to the environment; and it is further*

*RESOLVED, that the Board hereby issues a Negative Declaration with respect to the proposed action.*

- 3. BE IT RESOLVED BY THE BOARD OF EDUCATION OF THE GREENVILLE CENTRAL SCHOOL DISTRICT that a special meeting of the qualified voters of the School District be and the same is hereby called to be held in the cafeteria of the Scott M. Ellis Elementary School on Tuesday, March 4, 2014 from 1:00 p.m. until 9:00 p.m. prevailing time for the purpose of voting on the following propositions:**

**PROPOSITION #1**

Shall that the Board of Education be authorized to (1) install a campus-wide sanitary sewer system to be connected to the town, reconstruct various District buildings, including but not limited to, roof replacements, renovations related to security, energy efficiencies and technology upgrades, construct additions related to storage, perform site work, acquire, if needed, original furnishings, equipment, machinery or apparatus required for the purpose for which such areas are to be used, and pay incidental costs related thereto at a cost not to exceed \$10,345,000; (2) expend such sum for such purpose; (3) expend \$902,000 from the Capital Reserve Fund for such purpose; (4) levy the necessary tax therefore, to be levied and collected in annual installments in such years and in such amounts as may be determined by the Board of Education, taking into account state aid received, and (5) in anticipation of the collection of such tax, issue bonds and notes of the District at one time or from time to time in the principal amount not to exceed \$9,443,000 and levy a tax to pay the interest on said obligations when due?

## **PROPOSITION #2**

Shall that the Board of Education be authorized to establish a new Capital Reserve Fund in an amount not to exceed \$2,000,000, with a probable term of ten years, for the purpose of financing additions to and reconstruction of various District buildings, site work, and acquisition of furnishings, equipment, machinery or apparatus, with such Capital Reserve Fund being funded from available general fund monies?

The vote upon such proposition shall be by machine or absentee ballot. The hours during which the polls shall be kept open shall be from 1:00 p.m. until 9:00 p.m. prevailing time or for as long thereafter as necessary to enable qualified voters who are in the polling place at 9:00 p.m. to cast their ballots.

Personal registration of voters is required either pursuant to Section 2014 of the Education Law or Article 5 of the Election Law and no person shall vote whose name does not appear on the register of the School District. If a voter has heretofore registered pursuant to Section 2014 of the Education Law and has voted at an annual or special district meeting within the last four (4) calendar years, he or she is eligible to vote at this meeting; if a voter is registered and eligible to vote under Article 5 of the Election Law, he or she is also eligible to vote at this meeting. All other persons who wish to vote must register.

The Board of Registration shall meet at Scott M. Ellis, 11219 SR 32, Greenville, on Monday, February 24, 2014 from 3:00 p.m. until 7:00 p.m. prevailing time, to prepare the register of voters of the School District. Any person who has not currently registered under the permanent personal registration by the last date found on such registers or list furnished by the board of elections, and has not voted at an intervening election, must, in order to be entitled to vote, present himself personally for registration.

Immediately upon its completion, the register prepared by the Board of Registration shall be filed in the office of the District Clerk, 4972 Route 81, Greenville, New York, and will be open for inspection by any qualified voter of the School District during regular office hours (and from 9:00 a.m. to 11:00 a.m. on Saturday, March 1, 2014) on each day up to and including the day set for the vote, except Sunday, March 2, 2014.

Absentee ballots may be applied for at the office of the District Clerk. Applications for absentee ballots must be received by the District Clerk at least seven days prior to the vote if the ballot is to be mailed to the voter, or on or prior to March 3, 2014, if the ballot is to be delivered personally to the voter. Absentee ballots must be received by the District Clerk not later than 5:00 p.m. on March 4, 2014. A list of all persons to whom absentee ballots shall have been issued will be available in the office of the District Clerk from 9:00 a.m. until 3:00 p.m. prevailing time on each of the five days prior to the day of the election, except Saturday and Sunday, March 1 and March 2, 2014. Any qualified voter may challenge the acceptance of the ballot of any person on such list, by making his challenge and reasons therefor known to the Inspector of Election before the close of the polls.

BE IT FURTHER RESOLVED, that the District Clerk is hereby authorized and directed to publish a notice of such meeting in two newspapers of general circulation within the School District, four (4) times within the seven (7) weeks next preceding such School District meeting, the first publication to be at least forty-five (45) days prior to the date of the meeting.

BE IT FURTHER RESOLVED, that this resolution takes effect immediately upon its adoption.



Ann Holstein moved, seconded by Duncan Macpherson and carried unanimously to approve items (4), (5) and (6):

**4. Approve Change Order #1 (FY2014-50)**

**MS/HS Bus Loop paving Modifications, Sidewalks, FEMA Work**  
(Change Order #1

Scope 1: Install additional yard drain and connect to catch basin, restore lawn along the main entrance road and install additional catch basin in front of student parking lot, pipe to drainage line and regrade for positive drainage

District request \$ 6,850.00

Scope 2: Excavate existing discovered conduit [light pole junction Box near the greenhouse] and install hand hole box

Discovered Condition 1,195.00

Scope 3: Add additional concrete sidewalk, relocate concrete Flagpole base and modify parking lot paving marking

District Request 11,443.30

Total \$19,488.30

*This project has a contingency of \$20,000 to allow for any necessary changes and or additions to the original scope of work. \$15,488.30 has been drawn against this contingency which leaves a balance to date of \$4,511.70. The difference of \$4,000 was related to the FEMA project and was drawn against those remaining funds. All work was reviewed and approved by the districts architects, Stieglitz Snyder Architecture.)*

**5. Accept donation**

- a. Run for Readers for \$2,061.70 to the Greenville Central School District to pay for the stipend for the Advisor for Caring Kids ( Elementary Student Activities Council)
- b. Jog-A-Thon for \$750.00 to the Greenville Central School District to help support the High School Wrestling program competition budget

**6. Create Food Service Committee**

Discussion: The Board of Education approved the following Charge & Membership for the Food Service Committee:

*(Responsibility & Charge of Food Service Committee:*

*The purpose of the Food Services Committee is to serve in an advisory capacity to the Board of Education to provide a food services program for students with offerings which are nutritious, appealing and sustainable in a financially self-supporting manner.*

*Composition of the Committee:*

<i>Gloria Bear</i>	<i>Board of Education</i>
<i>Cheryl A. Dudley, Superintendent</i>	<i>Administration</i>
<i>Patricia Macko</i>	<i>Board of Education</i>
<i>Tammy J. Sutherland</i>	<i>Assistant Superintendent for Business</i>
<i>TBD</i>	<i>Food Service Supervisors</i>
<i>TBD</i>	<i>Student</i>
<i>TBD</i>	<i>Community)</i>

## E. School Management

Gloria Bear moved, seconded by Duncan Macpherson and carried unanimously to approve items (1), (2), (3) and (4):

### 1. Approve tuition contract between the Greenville Central School District and the Never Alone Adolescent Rehabilitation Center (FY2014-51)

*(This contract provides instruction for one [1] district resident student for ten [10] hours of instruction per week for \$39.00 per hour for approximately one [1] year.)*

### 2. Appoint Diana Hinchcliff as a member of the District Planning Committee for 2013-2014

*(Current membership District Planning Committee:*

<i>Rachel Anderson</i>	<i>Greenville Faculty Association</i>
<i>Wilton Bear, Jr.</i>	<i>Community</i>
<i>Barbara Brandon</i>	<i>Greenville Faculty Association</i>
<i>Caroline Caputi</i>	<i>Curriculum Specialist, Greenville Faculty Association</i>
<i>Cheryl A. Dudley</i>	<i>Superintendent of Schools</i>
<i>Eric Herbstritt</i>	<i>Parent Teacher Association</i>
<i>Todd Hilgendorff</i>	<i>Greenville Principals' Association</i>
<i>Diana Hinchcliff</i>	<i>Community</i>
<i>Michaela Kehr</i>	<i>Greenville Faculty Association</i>
<i>Gregory Lampman</i>	<i>Board of Education</i>
<i>Peter Mahan</i>	<i>Greenville Principals' Association</i>
<i>Frank Pigeon</i>	<i>Greenville Paraprofessional Federation</i>
<i>Brian Reeve</i>	<i>Greenville Principals' Association</i>
<i>Robert Schrader</i>	<i>Interim Supervisor of Buildings &amp; Grounds</i>
<i>Tammy Sutherland</i>	<i>Assistant Superintendent for Business</i>
<i>Ex officio</i>	<i>Questar III</i>

### 3. Approve Overnight Field Trip

Trip Destination:	Governmental Awareness Institute, Albany, NY
Dates:	Departing: 8:00am Monday, February 10, 2014 Returning: 5:00pm, Tuesday, February 11, 2014
Students:	Approximately two (2) High School FFA students
Chaperones:	1 TBD

### 4. Accept the NYS Education Department Local Assistance Plan (LAP) Diagnostic Self-Review Document (FY2014-52)

*(The GCSD, a district in "Good Standing" according to NYSED, was required to have Ellis Elementary School complete a Diagnostic Self-Review Document and Report Template. Ellis faculty and administrators utilized the self-review process as an opportunity to identify, plan and implement actions that will be taken to improve the academic results of the identified subgroup of classified students. The plan is posted on the website:*

<http://www.greenville.k12.ny.us/elem/pdf/LAP%20Ellis%2011%201%2013.pdf>

## IX. Discussion

### A. Board Committee Reports

- Quality Education Committee (QEC): Ann Holstein  
No report; next meeting is scheduled for January 15, 2014.
- Greenville Educational Foundation (GEF): Ann Holstein  
No report; next meeting is scheduled for February 6, 2014.

- Technology Committee: Duncan Macpherson  
No report; next meeting is scheduled for February 13, 2014.
- Gifted & Talented Education Committee (GATE): Ann Holstein  
No report; meeting scheduled for January 8, 2014 was cancelled.
- District Planning Committee (DPC): Gregory Lampman  
Stieglitz Snyder Architect, Philip Snyder and BP Donegan, Financial Consultant, Dr. Richard Timbs will be presenting at two public meetings (TBD) regarding the Capital Project Referendum.
- Audit Committee: Gregory Lampman, Patricia Macko  
Audit Committee cancelled for January 9, 2014, next meeting May 8, 2014.
- Budget Advisory Committee (BAC): Patricia Macko, Duncan Macpherson  
BOE Budget Workshops and Budget Advisory Committee: BAC requested a member of the Committee participate in BOE Budget Workshops to encourage an ongoing dialogue between the Committee and the Board during the budget process. Next BAC meeting will be January 14, 2014 to discuss instructional programs
- Greene County School Boards Association (GCSBA): Gloria Bear  
No report, next meeting has not yet been determined.
- Communications Committee: Gloria Bear  
Enews for December highlighted 5<sup>th</sup> Grade Nature’s Classroom field trip and the Superintendent Dudley and the Board of Education thanked Andrea Macko, Editor for the Greenville Mountain Pioneer, for pictures taken when she and Superintendent Dudley visited the students at Nature’s Classroom on November 20, 2013.
- Board Policy Review Committee: Patricia Macko  
Progress continues with over half of the new policy manual material reviewed.

B. Other Committee Reports

- Safety and Health Committee: Tammy Sutherland  
No report
- Wellness Committee: Tammy Sutherland  
No report

*(Committee schedules vary as some do not meet every month. However, the committees are noted on the agenda each month to keep the Board informed.)*

C. Human Resources ~ Donna Accuosti

Recruitment of Supervisor of Buildings & Grounds

Ms. Accuosti provided the following information on this recruitment process:

- According to Civil Service Law there are three levels for this position Level 1, Level 2 & Level 3; the GCSB Falls under Level 3
- There are three (3) options for the District
  1. Approve as a provisional appointment (exam given at a later date)
  2. Transfer of a “grandfathered” candidate to this position
  3. Consider a shared service for this position

D. Annual Professional Performance Review (APPR) Update

Ms. Accuosti highlighted the following in regard to the APPR process:

- APPR is an evaluation of a teacher's or principal's practice
  - A teacher's practice must reflect the NYS teaching standards
  - A principal's practice must reflect the standards for school leaders
- Teacher and principal evaluations include student achievement and growth data
- Teachers and principals are evaluated each year and receive a score between 0-100
- The APPR components include:
  - 20% State Growth Component (score calculated by NYS based State Assessments grades 4-8 or teacher/principal Student Learning Objectives [SLO])
  - 20% Locally Selected measures Component (score calculated based on locally selected tests for particular content areas and grades)
  - 60% Multiple Measures component (observations using a state-approved rubric, minimum of 2 observations required, other measures may include surveys, lesson plans or goal setting)

E. Board of Education Workshop

January 25, 2014

10:00am

F. Board of Education Receptions ~ Recommended schedule

February 13 Recognition with the GEF of contributors to the  
Potter Hollow School House renovations

June 12 Employee recognition for retirement, achievement of tenure and other  
awards as appropriate

**X. Board Members' input for discussion at a later date**

Common Core presentation  
Cheerleading Advisor Qualifications  
Monthly updates Capital Project

**XI. Closing Open Forum**

Points of discussion included:

- Capital Project
- Supervisor Paul Macko presented the timeline for the Town of Greenville Sewer Project
- Lighting for MS/HS Entrance Sign

**XII. Adjournment**

At 9:20 a.m. Patricia Macko moved, seconded by Rosanne Stapleton and carried unanimously to adjourn the meeting.

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District Clerk

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Board of Education President

Greenville Central School District  
Board of Education  
Minutes  
Budget Workshop  
Thursday  
January 23, 2014

7:00 p.m.

MS/HS Library Media Center

**I. Call to Order**

A meeting of the Board of Education was held on Thursday, January 23, 2014 in the MS/HS Library Media Center. Gregory Lampman, President, called the meeting to order at 6:58 p.m.

Members present: Gloria Bear  
Ann Holstein  
Jennifer Howard  
Gregory Lampman  
Patricia Macko  
Duncan Macpherson  
Rosanne Stapleton (7:07pm)

Others present: Cheryl A. Dudley, Superintendent  
Jacqueline O'Halloran, District Clerk  
Donna Accuosti, Director of Human Resources  
Scott Gardiner, Director of Technology  
Todd Hilgendorff, High School Principal  
Peter Mahan, Elementary School Principal  
Brian Mazza, Assistant District Principal  
Brian Reeve, Middle School Principal  
Robert Schrader, Supervisor of Buildings and Grounds  
Tammy J. Sutherland, Assistant Superintendent for Business  
Brook VanFleet, Director of Special Education &  
Pupil Personnel Services

**II. Approval of Agenda**

Gloria Bear moved, seconded by Duncan Macpherson and carried unanimously to approve the Agenda for the Budget Workshop of January 23, 2014

**III. Discussion**

*(On Thursday, January 23, 2014, the Greenville Board of Education will begin the public discussion of the District operating budget for the 2014-2015 school year. The Board of Education Budget Workshops and the Budget Advisory Committee Meetings have been established to ensure transparency in the fiscal process and to provide opportunities for the public, as the budget is actually being developed, to learn about the educational programs and related services as supported by budget expenditures and anticipated revenues. The Board invites public comment throughout the budget development process and encourages you to attend the various meetings as scheduled. The presentation of the required format of the budget (Program, Administrative, and Capital) is detailed further in these discussions in the instructional and non-instructional categories.)*

Board of Education Budget Workshops are scheduled from 7:00 pm to 9:00 pm in the MS/HS Library Media Center on the following dates:

Thursday, January 23	Instructional
Thursday, February 6	Instructional
Thursday, February 27	Operations/Maintenance/District Office
Thursday, March 20	Revenue
Thursday, March 27	BAC Recommendation
Thursday, April 3	General Budget Presentation & Discussion

It is anticipated that the Board will adopt a final budget at the Business Meeting of April 10, 2014.

The remaining Budget Advisory Committee Meetings are scheduled for 6:30 pm in the MS/HS Library as follows:

Tuesday, January 28	Instructional: Special Education & Technology
Tuesday, February 11	Non-Instructional; Transportation, Buildings & Grounds, Food Service
Tuesday, February 25	District Wide Expenditures: Advocacy Forum
Tuesday, March 11	Revenue
Tuesday, March 18	Budget Status to Date ~ Recommendations
Tuesday, March 25	BAC ~ Recommendations if needed
Thursday, March 27	Present Recommendations at Board of Education Workshop

The Budget Vote and Board of Education Election is Tuesday, May 20 from 1:00 pm to 9:00 pm in the Elementary School Cafeteria.)

#### **Instructional Presentation:**

Scott Gardiner, Director of Technology  
Brook VanFleet, Director of Special Education & Pupil Personnel Services  
Brian Mazza, Assistant District Principal  
Peter Mahan, Scott M. Ellis Principal  
Brian Reeve, Middle School Principal  
Todd Hilgendorff, High School Principal

Highlights of the presentation included:

- Technology
  - Provide Current Technology/Teaching Tools
  - Provide for On-line Assessments
  - Improve End User Support
- Special Education
  - Response to Intervention (RTI)
    - Electronic Student Management System
    - Universal Screenings and Assessments
    - Data-based Decision Making Teams at each building level
    - Intervention tools
  - Individual Education Plans (IEPs) are designed to match students' needs in meeting the NYS Learning Standards
  - Transition to IEP/RTIM/Medicaid Direct
  - Clinical model transitioning to a school-based model
- Recommended Staffing
  - Restore 2.0 FTE Classroom Teachers (ES)
  - 0.8 FTE Student Project Design and Implementation Coordinator (HS-QEC proposal)
  - Restore 0.2 FTE Computer (MS)

Restore 0.2 FTE Art (MS, HS)  
Restore 0.2 FTE Family and Consumer Science (HS-QEC proposal)  
0.4 FTE Speech Pathologist (ES-QEC proposal)  
Restore 0.5 FTE Librarian (ES)  
Restore Gifted & Talented program (ES - pending recommendation)

➤ Technology Program Support

1.0 FTE District Network Administrator  
0.6 FTE Integrated Technology Instructional Coach (MS & HS-QEC proposal)

➤ Intervention and Special Education Services

1.0 FTE Special Education Teacher (MS) (restoration of a self-contained classroom)  
1.0 FTE Teaching Assistant (MS)  
0.8 RTI Case Manager (MS, HS)  
Restore after-school support (12 after-school positions) (ES, MS, HS)

➤ Program Support

Support for Interscholastic Athletics (T.B.D.)  
Restore 3.0 FTE 10-month clerical with 12-month clerical (ES, MS, HS)  
Increase summer days of MS guidance (10 existing, add 7 more)  
Restore 20 summer days to 10-month clerical (ES)

**IV. Closing Open Forum**

There were no comments

**V. Adjournment**

At 9:12 p.m. Rosanne Stapleton moved, seconded by Gloria Bear and carried unanimously to adjourn the meeting.

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District Clerk

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Board of Education President

**GREENVILLE CENTRAL SCHOOL DISTRICT**

The Superintendent of Schools hereby recommends the  
Acceptance of the Treasurer's Report  
as of JANUARY 31, 2014

National Bank of Coxsackie Accounts, JP Morgan Chase Account, & Bank of Greene County Account									
General		Federal	Trust & Agency		Cafeteria		Capital		
Savings & Investments	General	Federal	Trust & Agency Savings	Trust & Agency	Cafeteria Savings	Cafeteria	Capital Savings	Capital Checking	
<b>Available Cash Balance as of December 31, 2013</b>	<b>\$12,541,094.20</b>	<b>\$52.00</b>	<b>\$68.09</b>	<b>\$751,202.22</b>	<b>\$35.12</b>	<b>\$6,493.01</b>	<b>\$28.14</b>	<b>\$52,990.85</b>	<b>\$83.09</b>
<b>Add:</b>									
Receipts Collected During the Month:									
Real Property Taxes	-	-	-	-	-	-	-	-	-
Penalties	9.50	-	-	-	-	-	-	-	-
Star Reimbursement	-	-	-	-	-	-	-	-	-
Grants	-	-	-	-	-	-	-	-	-
State, BOCES, & Federal Aid	1,750,760.07	-	-	-	-	-	-	-	-
Interest & Earnings on Investments	3,144.42	-	-	184.51	-	2.41	-	3.82	-
Cafeteria	-	-	-	-	-	25,189.42	-	-	-
Tuition & Charges for Services	18,324.64	122,564.80	-	-	-	-	-	-	-
Medicaid	-	-	-	-	-	-	-	-	-
Erate	-	-	-	-	-	-	-	-	-
Workers' Compensation Account	-	-	-	-	-	-	-	-	-
RCG Health Ins.	-	-	-	-	-	-	-	-	-
Insurance Recovery	1,000.00	-	-	-	-	-	-	-	-
Sales	-	479.00	-	-	-	-	-	-	-
Payroll	-	-	-	-	1,807,058.97	-	-	-	-
Interfund Transfers	-	-	164,250.00	-	496,774.52	119.00	26,000.00	-	-
Miscellaneous Receipts	1,063.19	2,320.11	-	29,009.87	-	-	-	-	-
Redeem/Decrease Investments	-	3,415,050.00	-	-	95,450.00	-	9,700.00	-	40,600.00
<b>Total:</b>	<b>1,774,301.82</b>	<b>3,540,413.91</b>	<b>164,250.00</b>	<b>29,194.38</b>	<b>2,399,283.49</b>	<b>25,310.83</b>	<b>35,700.00</b>	<b>3.82</b>	<b>40,600.00</b>
<b>Less:</b>									
Disbursements During the Month:									
By Check	-	1,353,009.41	100,466.32	-	661,687.18	-	13,317.37	-	40,652.05
By Wire, Payroll, & Interfund Transfer	3,593,300.00	2,187,396.07	63,793.75	95,450.00	1,214,142.21	21,700.00	22,321.10	40,600.00	-
State & Federal Payroll Taxes	-	-	-	-	523,437.57	-	-	-	-
<b>Total:</b>	<b>3,593,300.00</b>	<b>3,540,405.48</b>	<b>164,260.07</b>	<b>95,450.00</b>	<b>2,399,266.96</b>	<b>21,700.00</b>	<b>35,638.47</b>	<b>40,600.00</b>	<b>40,652.05</b>
<b>Available Cash Balance as of Jan. 31, 2014 per General Ledger</b>	<b>\$ 10,722,096.02</b>	<b>\$ 60.43</b>	<b>\$ 58.02</b>	<b>\$ 684,946.60</b>	<b>\$ 51.65</b>	<b>\$ 10,103.84</b>	<b>\$ 89.67</b>	<b>\$ 12,394.67</b>	<b>\$ 31.04</b>
<b>Reconciliation with Bank Statements:</b>	<b>A201-A208</b>	<b>A200</b>	<b>F200</b>	<b>TA201</b>	<b>TA200</b>	<b>C201 &amp; C202</b>	<b>C200</b>	<b>H201</b>	<b>H200</b>
Balance Per Bank Statements:	\$ 10,722,095.92	\$ 338,845.01	\$ 1,254.67	\$ 684,946.60	\$ 318,304.51	\$ 8,302.13	\$ 7,935.56	\$ 12,394.67	\$ 31.04
Less: Outstanding Checks:	-	(341,322.31)	(1,196.65)	-	(318,952.86)	-	(7,845.89)	-	-
Add: Deposits in Transit:	-	-	-	-	-	1,801.81	-	-	-
Less: Other Debits	-	(0.81)	-	-	-	(0.10)	-	-	-
Add: Other Credits	0.10	2,538.54	-	-	700.00	-	-	-	-
<b>Adjusted Bank Balance:</b>	<b>\$10,722,096.02</b>	<b>\$60.43</b>	<b>\$58.02</b>	<b>\$684,946.60</b>	<b>\$51.65</b>	<b>\$10,103.84</b>	<b>\$89.67</b>	<b>\$12,394.67</b>	<b>\$31.04</b>
Unreconciled Difference:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

*I certify that the above balances are in agreement with the bank statements, as reconciled.*

Received by the Board of Education and entered as part of the Board meeting held \_\_\_\_\_

Prepared By: \_\_\_\_\_  
Treasurer

Clerk of the Board of Education

Management



**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
A 1010.400-05-0103	CONFERENCE AND TRAVEL	1,000.00	1,230.00	2,230.00	1,085.00	750.00	395.00
A 1010.400-05-0104	PUBLICATIONS	0.00	595.00	595.00	595.00	0.00	0.00
A 1010.450-05-0000	MATERIAL & SUPPLIES	225.00	0.00	225.00	211.92	0.00	13.08
<b>A 1010....BOARD OF EDUCATION</b>	<b>*</b>	<b>1,225.00</b>	<b>1,825.00</b>	<b>3,050.00</b>	<b>1,891.92</b>	<b>750.00</b>	<b>408.08</b>
A 1040.160-05-0000	SALARIES	6,328.00	0.00	6,328.00	949.20	5,378.80	0.00
A 1040.400-05-0000	WORKSHOP	250.00	0.00	250.00	0.00	0.00	250.00
<b>A 1040....DISTRICT CLERK</b>	<b>*</b>	<b>6,578.00</b>	<b>0.00</b>	<b>6,578.00</b>	<b>949.20</b>	<b>5,378.80</b>	<b>250.00</b>
A 1060.400-05-0000	MACHINE CUSTODIAN	600.00	0.00	600.00	0.00	0.00	600.00
A 1060.400-05-0001	REGISTRATION BOARD	4,400.00	0.00	4,400.00	0.00	0.00	4,400.00
A 1060.400-05-0108	ADVERTISING	450.00	0.00	450.00	0.00	0.00	450.00
<b>A 1060....DISTRICT MEETING</b>	<b>*</b>	<b>5,450.00</b>	<b>0.00</b>	<b>5,450.00</b>	<b>0.00</b>	<b>0.00</b>	<b>5,450.00</b>
<b>A 10....BOARD OF EDUCATION</b>	<b>**</b>	<b>13,253.00</b>	<b>1,825.00</b>	<b>15,078.00</b>	<b>2,841.12</b>	<b>6,128.80</b>	<b>6,108.08</b>
A 1240.150-05-0000	SALARIES(INST.)	153,042.00	0.00	153,042.00	87,955.20	65,086.80	0.00
A 1240.160-05-0000	SALARIES(N/I)	53,921.00	1,500.00	55,421.00	35,489.62	20,394.00	(462.62)
A 1240.400-05-0018	COPIER LEASE/MAINTENANCE	2,500.00	397.23	2,897.23	1,190.92	1,265.67	440.64
A 1240.400-05-0103	CONFERENCES AND TRAVEL	1,000.00	615.00	1,615.00	1,134.14	250.00	230.86
A 1240.450-05-0117	OFFICE SUPPLIES	500.00	271.00	771.00	770.99	0.00	0.01
<b>A 1240....CHIEF SCHOOL ADMINISTRATOR</b>	<b>*</b>	<b>210,963.00</b>	<b>2,783.23</b>	<b>213,746.23</b>	<b>126,540.87</b>	<b>86,996.47</b>	<b>208.89</b>
<b>A 12....CENTRAL ADMINISTRATION</b>	<b>**</b>	<b>210,963.00</b>	<b>2,783.23</b>	<b>213,746.23</b>	<b>126,540.87</b>	<b>86,996.47</b>	<b>208.89</b>
A 1310.160-05-0000	SALARIES	137,418.00	0.00	137,418.00	78,910.05	58,393.45	114.50
A 1310.400-05-0018	COPIER LEASE/MAINTENANCE	2,500.00	397.23	2,897.23	1,387.41	1,265.67	244.15
A 1310.400-05-0103	CONFERENCE AND TRAVEL	1,000.00	0.00	1,000.00	15.00	0.00	985.00
A 1310.400-05-0104	COMPLIANCE SERVICES	3,800.00	0.00	3,800.00	1,197.06	2,022.94	580.00
A 1310.400-05-0105	INTERNAL AUDIT SERVICES	6,800.00	(6,800.00)	0.00	0.00	0.00	0.00
A 1310.400-05-0108	ADVERTISING	1,400.00	0.00	1,400.00	933.08	466.92	0.00
A 1310.400-05-0112	HEALTH & SAFETY SERVICES	8,000.00	0.00	8,000.00	4,125.00	3,875.00	0.00
A 1310.400-05-0114	LONG RANGE FINANCIAL PLAN	0.00	13,529.24	13,529.24	0.00	13,529.24	0.00
A 1310.450-05-0117	OFFICE SUPPLIES	650.00	170.00	820.00	722.15	0.00	97.85
A 1310.490-05-0002	STATE AID PLANNING	3,050.00	0.00	3,050.00	3,050.00	0.00	0.00
A 1310.490-05-0003	POLICY UPDATE	1,030.00	3,370.00	4,400.00	2,200.00	2,200.00	0.00
A 1310.490-05-0005	HEALTH INSURANCE CONSULTANT	7,500.00	0.00	7,500.00	3,750.00	3,750.00	0.00
A 1310.490-05-0007	GASB 45 PLANNING & VALUATION SER	4,700.00	0.00	4,700.00	2,350.00	2,350.00	0.00
A 1310.490-05-0011	W/C COORDINATOR	4,075.00	0.00	4,075.00	2,037.50	2,037.50	0.00
A 1310.490-05-0013	CENTRAL BUSINESS OFFICE	135,795.00	0.00	135,795.00	67,897.40	67,897.40	0.20
A 1310.490-05-0014	GRANT WRITER	0.00	7,688.00	7,688.00	4,001.14	3,686.86	0.00
A 1310.490-05-0016	COOPERATIVE PURCHASING	7,729.00	28.00	7,757.00	3,876.90	3,880.01	0.09
<b>A 1310....BUSINESS ADMINISTRATION</b>	<b>*</b>	<b>325,447.00</b>	<b>18,382.47</b>	<b>343,829.47</b>	<b>176,452.69</b>	<b>165,354.99</b>	<b>2,021.79</b>
A 1320.400-05-0124	AUDITING SERVICE	16,500.00	0.00	16,500.00	10,675.00	0.00	5,825.00
<b>A 1320....AUDITING</b>	<b>*</b>	<b>16,500.00</b>	<b>0.00</b>	<b>16,500.00</b>	<b>10,675.00</b>	<b>0.00</b>	<b>5,825.00</b>
A 1325.160-05-0000	SALARIES	64,945.00	575.00	65,520.00	38,308.95	27,211.05	0.00
A 1325.400-05-0000	WORKSHOP	450.00	0.00	450.00	0.00	0.00	450.00
A 1325.450-05-0000	MATERIALS & SUPPLIES	300.00	0.00	300.00	100.99	0.00	199.01

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION		ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
<b>A 1325....TREASURER</b>		*	<b>65,695.00</b>	<b>575.00</b>	<b>66,270.00</b>	<b>38,409.94</b>	<b>27,211.05</b>	<b>649.01</b>
A 1330.160-05-0000	SALARY		5,213.00	0.00	5,213.00	5,213.00	0.00	0.00
A 1330.400-05-0108	ADVERTISING		130.00	0.00	130.00	0.00	0.00	130.00
A 1330.400-05-0109	TAX BILLING		2,903.00	0.00	2,903.00	2,805.86	0.00	97.14
A 1330.400-05-0110	SOFTWARE MAINTENANCE		1,314.00	0.00	1,314.00	1,227.19	0.00	86.81
<b>A 1330....TAX COLLECTOR</b>		*	<b>9,560.00</b>	<b>0.00</b>	<b>9,560.00</b>	<b>9,246.05</b>	<b>0.00</b>	<b>313.95</b>
<b>A 13....FINANCE</b>		**	<b>417,202.00</b>	<b>18,957.47</b>	<b>436,159.47</b>	<b>234,783.68</b>	<b>192,566.04</b>	<b>8,809.75</b>
A 1420.400-05-0126	SCHOOL ATTORNEY		53,460.00	0.00	53,460.00	9,044.20	4,605.80	39,810.00
<b>A 1420....LEGAL</b>		*	<b>53,460.00</b>	<b>0.00</b>	<b>53,460.00</b>	<b>9,044.20</b>	<b>4,605.80</b>	<b>39,810.00</b>
A 1430.150-07-0000	PERSONNEL SALARIES		78,594.00	2,953.00	81,547.00	46,821.90	34,725.10	0.00
A 1430.160-07-0000	CLERICAL SALARY		0.00	2,000.00	2,000.00	1,560.76	0.00	439.24
A 1430.400-07-0000	CONFERENCE & TRAVEL		1,300.00	1,365.00	2,665.00	1,925.49	250.00	489.51
A 1430.490-05-0001	STUDENT DISC. HEARING OFFICER		1,245.00	0.00	1,245.00	94.17	470.83	680.00
A 1430.490-05-0002	LABOR NEGOTIATIONS		18,540.00	180.00	18,720.00	9,360.00	9,360.00	0.00
A 1430.490-07-0000	RECRUITING SERVICES		3,127.00	(180.00)	2,947.00	1,429.13	1,428.55	89.32
<b>A 1430....PERSONNEL</b>		*	<b>102,806.00</b>	<b>6,318.00</b>	<b>109,124.00</b>	<b>61,191.45</b>	<b>46,234.48</b>	<b>1,698.07</b>
A 1480.400-05-0130	PRINT & MAIL PUBLICATIONS		1,000.00	0.00	1,000.00	0.00	184.78	815.22
A 1480.490-07-0000	PUBLIC INFORMATION(PRINTING)		19,000.00	0.00	19,000.00	7,412.00	7,412.00	4,176.00
A 1480.490-07-0001	WEB SITE DESIGN & MANAGEMENT		8,963.00	0.00	8,963.00	4,481.50	4,481.50	0.00
A 1480.490-07-0002	SCHOOL CONNECTS		3,100.00	0.00	3,100.00	1,414.50	1,414.50	271.00
<b>A 1480....PUBLIC INFORMATION &amp; SERVICES</b>		*	<b>32,063.00</b>	<b>0.00</b>	<b>32,063.00</b>	<b>13,308.00</b>	<b>13,492.78</b>	<b>5,262.22</b>
<b>A 14....STAFF</b>		**	<b>188,329.00</b>	<b>6,318.00</b>	<b>194,647.00</b>	<b>83,543.65</b>	<b>64,333.06</b>	<b>46,770.29</b>
A 1620.160-07-0000	SALARIES		780,925.00	0.00	780,925.00	427,673.27	287,314.14	65,937.59
A 1620.161-07-0000	SUBSTITUTE SALARIES		27,000.00	0.00	27,000.00	19,555.07	7,444.93	0.00
A 1620.200-07-0000	EQUIPMENT		21,500.00	0.00	21,500.00	0.00	0.00	21,500.00
A 1620.200-07-0001	EQUIPMENT-CAFETERIA		10,300.00	10,300.00	20,600.00	0.00	10,300.00	10,300.00
A 1620.400-01-0601	FUEL		250,000.00	(30,220.00)	219,780.00	125,002.34	89,386.66	5,391.00
A 1620.400-01-0602	ELECTRICITY		165,000.00	(320.02)	164,679.98	78,891.84	67,108.16	18,679.98
A 1620.400-01-0604	TELEPHONE		26,000.00	320.02	26,320.02	17,418.39	8,901.63	0.00
A 1620.400-07-0601	LP GAS		1,400.00	0.00	1,400.00	0.00	1,400.00	0.00
A 1620.400-07-0602	WATER USAGE		11,000.00	(18.45)	10,981.55	4,278.07	5,916.18	787.30
A 1620.400-07-0603	WATER TAX		6,400.00	18.45	6,418.45	6,418.45	0.00	0.00
A 1620.400-07-0605	REFUSE COLLECTION		16,000.00	2,087.25	18,087.25	6,633.94	8,737.25	2,716.06
A 1620.400-07-0606	LAUNDRY & DRY CLEANING		100.00	0.00	100.00	0.00	0.00	100.00
A 1620.400-07-0607	SEWER SYSTEM TESTING		700.00	0.00	700.00	0.00	0.00	700.00
A 1620.400-07-0608	MISCELLANEOUS SERVICES		0.00	800.00	800.00	727.44	72.56	0.00
A 1620.400-07-0615	INS. CLAIM-IRENE DAMAGES		0.00	25,000.00	25,000.00	22,000.00	3,000.00	0.00
A 1620.400-07-0628	UNIFORM SERVICE		4,380.00	0.00	4,380.00	2,445.76	1,934.24	0.00
A 1620.400-07-0629	MATS/MOPS - SERVICE		6,300.00	0.00	6,300.00	3,363.05	2,936.95	0.00
A 1620.401-07-0610	STONE, SAND & SOIL		4,000.00	0.00	4,000.00	3,975.00	0.00	25.00
A 1620.401-07-0611	BLACKTOP & CEMENT		10,000.00	37,400.00	47,400.00	37,500.00	0.00	9,900.00
A 1620.401-07-0612	SEED & FERTILIZER		2,000.00	0.00	2,000.00	0.00	0.00	2,000.00

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
A 1620.401-07-0613	ICE MELT-	7,000.00	0.00	7,000.00	3,094.04	3,324.56	581.40
A 1620.401-07-0616	PLAYGROUND EQUIPMENT REPAIR	1,000.00	12,450.00	13,450.00	12,836.50	143.00	470.50
A 1620.402-07-0620	WINDOWS & FRAMES & DOORS	7,000.00	(100.00)	6,900.00	5,716.55	887.20	296.25
A 1620.402-07-0622	SHADES	1,500.00	0.00	1,500.00	0.00	0.00	1,500.00
A 1620.402-07-0624	EXTERIOR REPAIRS	12,000.00	145,320.00	157,320.00	150,473.18	4,429.57	2,417.25
A 1620.402-07-0625	INTER-COM REPAIRS	2,000.00	0.00	2,000.00	0.00	1,500.00	500.00
A 1620.402-07-0626	INTERIOR REPAIRS	13,000.00	9,388.39	22,388.39	18,894.63	2,693.70	800.06
A 1620.402-07-0627	ARCHITECT	3,000.00	12,165.00	15,165.00	12,165.00	0.00	3,000.00
A 1620.403-07-0630	HEATING CONTRACT	15,000.00	(12,880.00)	2,120.00	0.00	0.00	2,120.00
A 1620.403-07-0631	HEATING REPAIR	10,000.00	13,138.00	23,138.00	7,368.75	15,711.25	58.00
A 1620.403-07-0632	MOTORS	2,000.00	(1,300.00)	700.00	0.00	0.00	700.00
A 1620.403-07-0633	BOILER REPAIR	3,000.00	0.00	3,000.00	0.00	200.00	2,800.00
A 1620.403-07-0634	SECURITY ALARM SYSTEM	3,520.00	(400.00)	3,120.00	1,715.00	605.00	800.00
A 1620.403-07-0635	ELECTRICAL REPAIRS	6,000.00	1,122.50	7,122.50	400.00	2,122.50	4,600.00
A 1620.403-07-0636	UNIVENT PARTS	4,700.00	(707.00)	3,993.00	179.18	70.00	3,743.82
A 1620.403-07-0638	PUMPS	3,000.00	9,494.55	12,494.55	6,482.55	700.00	5,312.00
A 1620.403-07-0639	PARTS-PLUMBING	4,000.00	879.00	4,879.00	4,041.72	378.62	458.66
A 1620.403-07-0640	SERVICE CLOCKS/FIRE ALARM	1,500.00	2,400.00	3,900.00	3,705.36	0.00	194.64
A 1620.403-07-0641	STORAGE SPACE	2,200.00	(602.00)	1,598.00	867.79	619.85	110.36
A 1620.403-07-0642	EMERGENCY	2,000.00	(317.00)	1,683.00	0.00	0.00	1,683.00
A 1620.403-07-0643	CAFETERIA EQUIPMENT REPAIRS	7,000.00	10,300.00	17,300.00	4,576.29	11,681.00	1,042.71
A 1620.404-07-0626	REGULATORY CERTIFICATIONS	700.00	100.00	800.00	800.00	0.00	0.00
A 1620.404-07-0650	SEPTIC TANKS CLEANED	5,000.00	2,022.00	7,022.00	5,477.00	1,545.00	0.00
A 1620.404-07-0651	FIRE EXTINGUISHER SERVICE	1,000.00	3,813.05	4,813.05	0.00	3,913.05	900.00
A 1620.404-07-0652	MACHINE REPAIR	11,000.00	0.00	11,000.00	3,510.48	1,888.97	5,600.55
A 1620.404-07-0653	MATS & CARPETS	5,000.00	4,400.00	9,400.00	8,882.80	0.00	517.20
A 1620.404-07-0654	ELEVATOR SERVICE	6,200.00	0.00	6,200.00	1,364.23	851.93	3,983.84
A 1620.404-07-0655	BUILDING ALTERATIONS	18,000.00	(2,595.55)	15,404.45	683.36	300.00	14,421.09
A 1620.404-07-0656	CONFERENCE & TRAVEL	1,000.00	0.00	1,000.00	117.50	0.00	882.50
A 1620.404-07-0657	INSPECTORS-FOLDING DOWN BLEACHER	2,500.00	4,836.00	7,336.00	4,836.00	0.00	2,500.00
A 1620.404-07-0658	BUILDING AUTOMATION SER./CONT.	8,700.00	0.00	8,700.00	0.00	0.00	8,700.00
A 1620.404-07-0659	FIRE SYSTEMS SER./CONT.	6,100.00	1,755.00	7,855.00	1,780.00	0.00	6,075.00
A 1620.404-07-0660	RISK MANAGEMENT SERVICES	12,000.00	0.00	12,000.00	6,905.00	4,375.00	720.00
A 1620.404-07-0661	FIELD REPAIR	5,500.00	500.00	6,000.00	6,000.00	0.00	0.00
A 1620.404-07-0662	HAZARDOUS MATERIALS REMOVAL	0.00	5,400.00	5,400.00	0.00	5,400.00	0.00
A 1620.404-07-0665	PAINTING	3,000.00	5,500.00	8,500.00	6,050.00	2,200.00	250.00
A 1620.404-07-0668	PEST CONTROL SERVICES	2,500.00	(160.00)	2,340.00	1,193.36	852.40	294.24
A 1620.450-07-0654	MISCELANEOUS SUPPLIES	0.00	800.00	800.00	601.47	185.99	12.54
A 1620.450-07-0670	CLEANING/MAIN.SUPPLIES	30,000.00	(1,888.85)	28,111.15	10,364.82	763.43	16,982.90
A 1620.450-07-0671	PAPER SUPPLIES	10,000.00	0.00	10,000.00	4,744.11	0.00	5,255.89
A 1620.450-07-0672	PAINT	1,500.00	3,105.00	4,605.00	4,600.15	0.00	4.85
A 1620.450-07-0673	ELECTRICAL SUPPLIES	7,000.00	(200.00)	6,800.00	2,490.90	1,935.82	2,373.28

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
A 1620.450-07-0674	SEWER SYSTEM SUPPLIES	500.00	0.00	500.00	0.00	0.00	500.00
A 1620.450-07-0675	FURNITURE MAINTENANCE	300.00	0.00	300.00	0.00	0.00	300.00
A 1620.450-07-0676	HAND TOOLS	2,500.00	0.00	2,500.00	805.49	200.00	1,494.51
A 1620.450-07-0677	BOILER SUPPLIES	200.00	0.00	200.00	0.00	100.00	100.00
A 1620.450-07-0678	HARDWARE	600.00	(200.00)	400.00	29.37	95.63	275.00
A 1620.450-07-0679	WORKBOOTS/SHOE ALLOWANCE	2,000.00	150.00	2,150.00	713.38	1,411.62	25.00
A 1620.450-07-0680	OFFICE SUPPLIES	250.00	433.85	683.85	683.66	0.00	0.19
A 1620.450-07-0681	FLAGS	250.00	0.00	250.00	0.00	0.00	250.00
A 1620.450-07-0682	FURNITURE & MATERIALS	0.00	11,574.00	11,574.00	7,359.05	4,000.00	214.95
A 1620.450-07-0683	HEALTH & SAFETY SUPPLIES	1,000.00	(500.00)	500.00	0.00	0.00	500.00
<b>A 1620....OPERATION OF PLANT</b>	<b>*</b>	<b>1,597,725.00</b>	<b>284,563.19</b>	<b>1,882,288.19</b>	<b>1,068,391.29</b>	<b>569,537.79</b>	<b>244,359.11</b>
A 1660.450-07-0001	COPIER PAPER	19,000.00	2,494.15	21,494.15	7,239.95	0.00	14,254.20
A 1660.450-07-0002	POSTAGE	19,000.00	5,900.00	24,900.00	13,468.57	9,620.00	1,811.43
A 1660.450-07-0003	COPIER SUPPLIES	3,500.00	354.00	3,854.00	2,204.00	0.00	1,650.00
A 1660.450-07-0007	LAMINATING	1,000.00	0.00	1,000.00	0.00	0.00	1,000.00
<b>A 1660....CENTRAL STOREROOM</b>	<b>*</b>	<b>42,500.00</b>	<b>8,748.15</b>	<b>51,248.15</b>	<b>22,912.52</b>	<b>9,620.00</b>	<b>18,715.63</b>
A 1680.490-07-0000	ON LINE PROCESSING	4,707.00	(4,707.00)	0.00	0.00	0.00	0.00
A 1680.490-07-0001	ADMIN DATA PROCESSING ITEMS	0.00	6,681.62	6,681.62	3,457.41	3,457.42	(233.21)
A 1680.490-07-0004	FACILITY SERVICES	3,000.00	1,045.00	4,045.00	1,928.45	2,116.55	0.00
A 1680.490-07-0005	FINANCE MANAGER	21,064.00	17,032.00	38,096.00	9,213.45	28,882.55	0.00
A 1680.490-07-0006	E-RATE	2,750.00	0.00	2,750.00	1,375.00	1,375.00	0.00
A 1680.490-07-0007	DATA WAREHOUSE	8,331.00	0.00	8,331.00	4,165.49	4,165.46	0.05
A 1680.490-07-0009	TESTING	10,574.00	(1,236.62)	9,337.38	1,073.20	9,500.80	(1,236.62)
<b>A 1680....CENTRAL DATA PROCESSING</b>	<b>*</b>	<b>50,426.00</b>	<b>18,815.00</b>	<b>69,241.00</b>	<b>21,213.00</b>	<b>49,497.78</b>	<b>(1,469.78)</b>
<b>A 16....CENTRAL SERVICES</b>	<b>**</b>	<b>1,690,651.00</b>	<b>312,126.34</b>	<b>2,002,777.34</b>	<b>1,112,516.81</b>	<b>628,655.57</b>	<b>261,604.96</b>
A 1910.400-07-0001	UMBRELLA INSURANCE	18,715.00	0.00	18,715.00	14,872.50	3,842.50	0.00
A 1910.400-07-0002	PUPIL INSURANCE	8,968.00	0.00	8,968.00	8,044.67	0.00	923.33
A 1910.400-07-0003	MULTI-PERIL INSURANCE	65,770.00	0.00	65,770.00	50,474.25	15,295.75	0.00
<b>A 1910....UNALLOCATED INSURANCE</b>	<b>*</b>	<b>93,453.00</b>	<b>0.00</b>	<b>93,453.00</b>	<b>73,391.42</b>	<b>19,138.25</b>	<b>923.33</b>
A 1920.400-07-0000	SCHOOL ASSOCIATION DUES	8,720.00	7,803.00	16,523.00	15,335.46	636.00	551.54
<b>A 1920....SCHOOL ASSOCIATION DUES</b>	<b>*</b>	<b>8,720.00</b>	<b>7,803.00</b>	<b>16,523.00</b>	<b>15,335.46</b>	<b>636.00</b>	<b>551.54</b>
A 1930.400-07-0000	JUDGMENT AND CLAIMS	2,000.00	0.00	2,000.00	0.00	0.00	2,000.00
<b>A 1930....JUDGMENTS &amp; CLAIMS</b>	<b>*</b>	<b>2,000.00</b>	<b>0.00</b>	<b>2,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2,000.00</b>
A 1964.400-07-0001	PROPERTY TAX REFUND	1,000.00	0.00	1,000.00	0.00	0.00	1,000.00
<b>A 1964....REFUND ON REAL PROPERTY TAXES</b>	<b>*</b>	<b>1,000.00</b>	<b>0.00</b>	<b>1,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>1,000.00</b>
A 1981.490-07-0001	BOCES-ADM CHARGE	189,279.00	0.00	189,279.00	94,639.00	94,639.00	1.00
<b>A 1981....BOCES ADMINISTRATIVE COSTS</b>	<b>*</b>	<b>189,279.00</b>	<b>0.00</b>	<b>189,279.00</b>	<b>94,639.00</b>	<b>94,639.00</b>	<b>1.00</b>
A 1989.400-07-0001	BOND & NOTE ISSUE EXPENSE	13,000.00	0.00	13,000.00	0.00	0.00	13,000.00
<b>A 1989....UNCLASSIFIED</b>	<b>*</b>	<b>13,000.00</b>	<b>0.00</b>	<b>13,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>13,000.00</b>
<b>A 19....SPECIAL ITEMS</b>	<b>**</b>	<b>307,452.00</b>	<b>7,803.00</b>	<b>315,255.00</b>	<b>183,365.88</b>	<b>114,413.25</b>	<b>17,475.87</b>

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
<b>A 1....BOARD OF EDUCATION</b>	<b>***</b>	<b>2,827,850.00</b>	<b>349,813.04</b>	<b>3,177,663.04</b>	<b>1,743,592.01</b>	<b>1,093,093.19</b>	<b>340,977.84</b>
A 2010.150-07-0000	CURRICULUM SUPERVISOR	88,286.00	11,576.00	99,862.00	54,886.53	43,225.21	1,750.26
A 2010.450-01-0007	CURRICULUM DEV. SUPPLIES	300.00	0.00	300.00	0.00	0.00	300.00
<b>A 2010....CURRICULUM DEVEL &amp; SUPERVISION</b>	<b>*</b>	<b>88,586.00</b>	<b>11,576.00</b>	<b>100,162.00</b>	<b>54,886.53</b>	<b>43,225.21</b>	<b>2,050.26</b>
A 2020.150-07-0000	SALARIES (INST.)	344,904.00	(2,031.23)	342,872.77	187,797.23	153,404.43	1,671.11
A 2020.160-07-0000	CLERICAL SALARIES	149,000.00	537.23	149,537.23	79,802.41	69,734.82	0.00
A 2020.161-01-0000	SALARIES ELEMENTARY	2,100.00	0.00	2,100.00	959.90	1,140.10	0.00
A 2020.162-02-0000	SALARIES SECONDARY	3,000.00	0.00	3,000.00	220.40	2,779.60	0.00
A 2020.400-01-0104	PROFESSIONAL LITERATURE	500.00	134.00	634.00	230.40	29.00	374.60
A 2020.450-01-0003	OFFICE SUPPLIES ELEMENTARY	1,000.00	96.67	1,096.67	890.67	178.26	27.74
A 2020.450-02-0003	OFFICE SUPPLIES SECONDARY	500.00	0.00	500.00	499.28	0.00	0.72
A 2020.450-03-0003	OFFICE SUPPLIES (MS)	275.00	0.00	275.00	45.86	0.00	229.14
A 2020.490-07-0001	SUBSTITUTE TEACHER CALLING SVC	10,075.00	0.00	10,075.00	4,940.00	4,940.00	195.00
<b>A 2020....SUPERVISION-REGULAR SCHOOL</b>	<b>*</b>	<b>511,354.00</b>	<b>(1,263.33)</b>	<b>510,090.67</b>	<b>275,386.15</b>	<b>232,206.21</b>	<b>2,498.31</b>
A 2060.490-07-0005	STUDENT DATA REPORTING SVC	20,806.00	0.00	20,806.00	10,100.00	10,100.00	606.00
<b>A 2060....RESEARCH, PLANNING &amp; EVALUAT</b>	<b>*</b>	<b>20,806.00</b>	<b>0.00</b>	<b>20,806.00</b>	<b>10,100.00</b>	<b>10,100.00</b>	<b>606.00</b>
A 2070.400-07-0000	IN-SERVICE EDUCATION	2,000.00	16,874.00	18,874.00	11,991.98	5,646.55	1,235.47
A 2070.490-07-0000	STAFF DEV-SUPT CONF DAYS-PROG	2,000.00	3,334.48	5,334.48	(3,877.65)	9,212.13	0.00
A 2070.490-07-0001	MODEL SCHOOLS	6,592.00	0.00	6,592.00	3,162.00	3,323.00	107.00
A 2070.490-07-0002	TEACHSCAPE	0.00	4,009.00	4,009.00	2,614.69	1,394.27	0.04
A 2070.490-07-0007	REGIONAL SCORING	15,000.00	(3,408.48)	11,591.52	3,135.00	3,135.00	5,321.52
A 2070.490-07-0008	ADMINISTRATOR MENTOR	0.00	10,000.00	10,000.00	0.00	10,000.00	0.00
<b>A 2070....INSERVICE TRAINING-INSTRUCTION</b>	<b>*</b>	<b>25,592.00</b>	<b>30,809.00</b>	<b>56,401.00</b>	<b>17,026.02</b>	<b>32,710.95</b>	<b>6,664.03</b>
<b>A 20....ADMIN &amp; IMPROVEMENT</b>	<b>**</b>	<b>646,338.00</b>	<b>41,121.67</b>	<b>687,459.67</b>	<b>357,398.70</b>	<b>318,242.37</b>	<b>11,818.60</b>
A 2110.120-01-0000	SALARIES K-3	1,889,376.00	(104,808.68)	1,784,567.32	821,660.81	962,906.51	0.00
A 2110.122-01-0000	SALARIES 4-6	1,434,755.00	(708.32)	1,434,046.68	651,654.95	758,566.27	23,825.46
A 2110.130-02-0000	SALARIES 7-12	3,001,722.00	(7,076.00)	2,994,646.00	1,394,280.28	1,497,334.28	103,031.44
A 2110.140-07-0000	CERTIFIED SUBSTITUTES	180,275.00	0.00	180,275.00	83,281.08	95,993.92	1,000.00
A 2110.140-07-0001	SALARIES HOME TUTORING	13,500.00	0.00	13,500.00	1,672.50	7,000.00	4,827.50
A 2110.141-07-0000	UNCERTIFIED SUBSTITUTES	28,841.00	0.00	28,841.00	13,042.05	15,798.95	0.00
A 2110.160-07-0000	SALARIES-N/I AIDES	253,524.00	0.00	253,524.00	112,303.54	127,768.60	13,451.86
A 2110.161-07-0000	SUB TEACHERS AIDE	19,200.00	0.00	19,200.00	17,084.59	2,052.11	63.30
A 2110.200-01-0010	EQUIPMENT-K-5	376.00	0.00	376.00	0.00	301.20	74.80
A 2110.200-01-0011	1ST GRADE/ 2ND GRADE	700.00	0.00	700.00	0.00	679.90	20.10
A 2110.200-01-0032	PHYSICAL EDUCATION	1,000.00	0.00	1,000.00	0.00	860.99	139.01
A 2110.200-01-0050	BUILDING EQUIPMENT	600.00	0.00	600.00	0.00	0.00	600.00
A 2110.200-02-0010	EQUIP 9-12	2,675.00	0.00	2,675.00	0.00	0.00	2,675.00
A 2110.200-03-0010	EQUIPMENT 6-8	2,675.00	0.00	2,675.00	0.00	2,675.00	0.00
A 2110.400-01-0004	BOOKBINDING	300.00	0.00	300.00	0.00	0.00	300.00
A 2110.400-01-0005	REPAIR CLASSROOM EQUIPMENT	400.00	0.00	400.00	0.00	0.00	400.00
A 2110.400-01-0008	REPAIR MUSICAL INSTRUMENTS	800.00	0.00	800.00	102.00	698.00	0.00
A 2110.400-01-0009	ASSEMBLY PROGRAMS	600.00	0.00	600.00	0.00	0.00	600.00

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
A 2110.400-01-0010	AWARDS	300.00	0.00	300.00	151.73	148.27	0.00
A 2110.400-01-0012	EMERGENCY	300.00	0.00	300.00	0.00	0.00	300.00
A 2110.400-01-0016	CHALLENGE	1,400.00	0.00	1,400.00	0.00	0.00	1,400.00
A 2110.400-01-0021	FIELD TRIP FEES	0.00	1,875.85	1,875.85	185.00	927.85	763.00
A 2110.400-02-0004	BOOKBINDING	1,000.00	(1,000.00)	0.00	0.00	0.00	0.00
A 2110.400-02-0005	REPAIR CLASSROOM EQUIP	3,000.00	0.00	3,000.00	0.00	1,451.51	1,548.49
A 2110.400-02-0006	PIANO TUNING	850.00	0.00	850.00	0.00	700.00	150.00
A 2110.400-02-0007	REPAIR MUSICAL INSTRUMENT (MS)	700.00	0.00	700.00	440.00	0.00	260.00
A 2110.400-02-0009	ASSEMBLY PROGRAMS	600.00	0.00	600.00	0.00	0.00	600.00
A 2110.400-02-0010	AWARDS	500.00	500.00	1,000.00	858.00	0.00	142.00
A 2110.400-02-0012	EMERGENCY	500.00	(500.00)	0.00	0.00	0.00	0.00
A 2110.400-02-0014	GRADUATION EXPENSE	1,300.00	0.00	1,300.00	580.25	0.00	719.75
A 2110.400-02-0017	AG. CONF./TRAVEL	1,675.00	252.00	1,927.00	942.27	0.00	984.73
A 2110.400-02-0027	GIFTED AND TALENTED	1,000.00	(888.00)	112.00	0.00	0.00	112.00
A 2110.400-02-0031	BAND UNIFORM MAINTAINENCE	250.00	0.00	250.00	0.00	0.00	250.00
A 2110.400-03-0004	BOOKBINDING	200.00	200.00	400.00	0.00	200.00	200.00
A 2110.400-03-0005	REPAIR CLASSROOM EQUIPMENT	300.00	0.00	300.00	296.39	0.00	3.61
A 2110.400-03-0007	REPAIR MUSICAL EQUIPMENT	600.00	0.00	600.00	0.00	600.00	0.00
A 2110.400-03-0009	ASSEMBLY PROGRAMS	500.00	0.00	500.00	0.00	0.00	500.00
A 2110.400-03-0010	AWARDS	200.00	0.00	200.00	183.06	0.00	16.94
A 2110.400-03-0012	EMERGENCY	500.00	0.00	500.00	84.00	0.00	416.00
A 2110.400-03-0014	GRADUATION EXPENSE (MS)	450.00	0.00	450.00	24.36	300.00	125.64
A 2110.400-03-0027	CHALLENGE	400.00	0.00	400.00	167.50	232.50	0.00
A 2110.400-07-0000	CONFERENCE & TRAVEL DISTRICT WID	2,000.00	7,926.94	9,926.94	4,402.71	691.26	4,832.97
A 2110.400-07-0001	IB DIPLOMA PROGRAM	15,000.00	1,888.00	16,888.00	16,689.62	90.00	108.38
A 2110.450-01-0003	3RD GRADE	0.00	0.00	0.00	0.00	0.00	0.00
A 2110.450-01-0005	5TH GRADE	1,200.00	0.00	1,200.00	1,184.78	1.78	13.44
A 2110.450-01-0007	KINDERGARTEN	1,500.00	0.00	1,500.00	1,482.68	0.00	17.32
A 2110.450-01-0010	K-5	500.00	26,451.56	26,951.56	22,478.72	482.49	3,990.35
A 2110.450-01-0011	1ST GRADE/ 2ND GRADE	2,700.00	165.02	2,865.02	2,865.02	0.00	0.00
A 2110.450-01-0012	3RD GRADE / 4TH GRADE	2,700.00	(0.01)	2,699.99	2,699.98	0.00	0.01
A 2110.450-01-0021	ART	2,100.00	0.00	2,100.00	2,079.39	0.00	20.61
A 2110.450-01-0022	ELEMENTARY CHALLENGE	500.00	0.00	500.00	29.68	109.95	360.37
A 2110.450-01-0031	MUSIC	1,000.00	0.00	1,000.00	339.15	660.85	0.00
A 2110.450-01-0032	PHYSICAL EDUCATION	800.00	28.86	828.86	814.43	0.00	14.43
A 2110.450-01-0033	EARLY LITERACY & MATH	500.00	0.00	500.00	166.10	0.00	333.90
A 2110.450-01-0036	ELEMENTARY MUSICAL	650.00	0.00	650.00	281.20	368.30	0.50
A 2110.450-02-0010	9-12	0.00	6,493.13	6,493.13	4,521.83	387.56	1,583.74
A 2110.450-02-0021	ART	3,975.00	0.00	3,975.00	3,320.20	477.25	177.55
A 2110.450-02-0023	BUSINESS EDUCATION	100.00	0.00	100.00	0.00	100.00	0.00
A 2110.450-02-0024	ENGLISH	300.00	0.00	300.00	177.77	122.23	0.00
A 2110.450-02-0026	HOME/CAREER SKILLS	100.00	641.38	741.38	236.43	504.95	0.00

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
A 2110.450-02-0028	TECHNOLOGY 9-12	900.00	986.30	1,886.30	1,000.90	885.40	0.00
A 2110.450-02-0029	FOREIGN LANGUAGE	200.00	(180.63)	19.37	19.37	0.00	0.00
A 2110.450-02-0030	MATHEMATICS	200.00	559.65	759.65	259.64	500.00	0.01
A 2110.450-02-0031	MUSIC	900.00	522.64	1,422.64	922.64	500.00	0.00
A 2110.450-02-0032	PHYSICAL EDUCATION	2,000.00	170.00	2,170.00	1,265.05	860.76	44.19
A 2110.450-02-0034	SCIENCE	2,600.00	3,359.84	5,959.84	3,412.03	1,863.33	684.48
A 2110.450-02-0035	SOCIAL STUDIES	750.00	(271.32)	478.68	478.68	0.00	0.00
A 2110.450-02-0038	DIPLOMAS	1,500.00	0.00	1,500.00	0.00	0.00	1,500.00
A 2110.450-02-0041	AGRICULTURE	2,000.00	750.00	2,750.00	655.96	2,094.04	0.00
A 2110.450-02-0044	WSLC	125.00	27.44	152.44	149.88	0.00	2.56
A 2110.450-03-0010	SUPPLIES 6-8	2,000.00	5,246.29	7,246.29	1,909.85	1,249.00	4,087.44
A 2110.450-03-0021	ART (MS)	1,200.00	0.00	1,200.00	1,173.96	0.00	26.04
A 2110.450-03-0023	BUSINESS (6-8)	200.00	0.00	200.00	188.99	0.00	11.01
A 2110.450-03-0025	HEALTH EDUCATION (MS)	100.00	0.00	100.00	14.50	38.96	46.54
A 2110.450-03-0026	HOME/CAREER SKILLS (MS)	800.00	(249.89)	550.11	144.21	405.90	0.00
A 2110.450-03-0028	TECHNOLOGY 6-8	3,470.00	259.74	3,729.74	3,419.66	305.95	4.13
A 2110.450-03-0029	FOREIGN LANGUAGE (6-8)	200.00	0.00	200.00	99.22	0.00	100.78
A 2110.450-03-0031	MUSIC (MS)	800.00	0.00	800.00	684.81	106.58	8.61
A 2110.450-03-0052	6 GRADE TEAM	800.00	0.00	800.00	468.76	331.24	0.00
A 2110.450-03-0053	7 GRADE TEAM	800.00	1.24	801.24	51.24	750.00	0.00
A 2110.450-03-0054	8 GRADE TEAM	800.00	(1.24)	798.76	500.81	296.97	0.98
A 2110.450-07-0011	K-12 SUPPLIES	0.00	1,163.06	1,163.06	0.00	0.00	1,163.06
A 2110.450-07-0012	SUPPLIES--DONATIONS	0.00	0.00	0.00	(1,380.00)	0.00	1,380.00
A 2110.450-07-0031	K-12 MUSIC	0.00	1,223.19	1,223.19	549.98	669.73	3.48
A 2110.470-07-0000	TUITION - OTHER DISTRICTS	6,500.00	5,307.40	11,807.40	7,404.49	3,483.38	919.53
A 2110.480-01-0010	K-6	0.00	105,230.83	105,230.83	105,216.77	14.06	0.00
A 2110.480-01-0033	EARLY LITERACY & MATH	5,360.00	(26.39)	5,333.61	1,679.04	3,654.57	0.00
A 2110.480-02-0010	9-12	17,427.00	(16,970.58)	456.42	200.42	256.00	0.00
A 2110.480-02-0023	BUSINESS EDUCATION	0.00	0.00	0.00	0.00	0.00	0.00
A 2110.480-02-0024	ENGLISH	0.00	5,317.99	5,317.99	5,317.99	0.00	0.00
A 2110.480-02-0026	HOME/CAREER SKILLS	0.00	0.00	0.00	0.00	0.00	0.00
A 2110.480-02-0028	TECHNOLOGY 9-12	0.00	1,000.00	1,000.00	448.20	0.00	551.80
A 2110.480-02-0029	FOREIGN LANGUAGE	0.00	1,971.07	1,971.07	1,971.07	0.00	0.00
A 2110.480-02-0030	MATHEMATICS	0.00	1,910.70	1,910.70	1,910.70	0.00	0.00
A 2110.480-02-0031	MUSIC	0.00	1,535.00	1,535.00	1,333.60	0.00	201.40
A 2110.480-02-0034	SCIENCE	0.00	2,371.77	2,371.77	0.00	0.00	2,371.77
A 2110.480-02-0035	SOCIAL STUDIES	0.00	3,158.20	3,158.20	2,996.62	0.00	161.58
A 2110.480-02-0041	AGRICULTURE	0.00	2,000.00	2,000.00	885.40	35.78	1,078.82
A 2110.480-02-0042	WHOLE STUDENT LEARNING CENTER	0.00	800.00	800.00	253.66	20.27	526.07
A 2110.480-03-0010	TEXTBOOKS 6-8	9,000.00	(115.20)	8,884.80	647.59	61.50	8,175.71
A 2110.480-03-0026	HOME & CAREERS (6-8)	650.00	0.00	650.00	0.00	0.00	650.00
A 2110.480-03-0029	FOREIGN LANGUAGE (6-8)	500.00	0.00	500.00	0.00	500.00	0.00

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
A 2110.480-03-0031	MUSIC (6-8)	1,000.00	0.00	1,000.00	841.63	0.00	158.37
A 2110.480-03-0052	TEAM 6	2,500.00	0.00	2,500.00	1,120.75	1,308.09	71.16
A 2110.480-03-0053	TEAM 7	2,500.00	115.20	2,615.20	259.06	2,356.14	0.00
A 2110.480-03-0054	TEAM 8	2,500.00	0.00	2,500.00	0.00	2,500.00	0.00
A 2110.480-08-0040	PRIVATE SCHOOL TEXTBOOKS	6,500.00	(2,000.00)	4,500.00	0.00	0.00	4,500.00
A 2110.481-01-0005	5TH GRADE	1,800.00	0.00	1,800.00	0.00	1,800.00	0.00
A 2110.481-01-0007	KINDERGARTEN	2,250.00	0.00	2,250.00	1,416.56	161.51	671.93
A 2110.481-01-0010	K-5	10,452.00	0.00	10,452.00	1,368.78	544.39	8,538.83
A 2110.481-01-0011	1ST GRADE/2ND GRADE	4,500.00	0.00	4,500.00	636.38	694.72	3,168.90
A 2110.481-01-0012	3RD GRADE/4TH GRADE	4,500.00	0.00	4,500.00	949.07	399.22	3,151.71
A 2110.481-01-0031	MUSIC	1,000.00	0.00	1,000.00	483.87	507.18	8.95
A 2110.490-00-0001	TEXTBOOK COORD.	3,196.00	(143.00)	3,053.00	1,526.50	1,526.50	0.00
A 2110.490-00-0002	EMERGENCY	4,680.00	(4,680.00)	0.00	0.00	0.00	0.00
A 2110.490-07-0003	ARTS EXCHANGE PROGRAM	17,000.00	16,676.83	33,676.83	1,145.50	13,105.50	19,425.83
A 2110.490-07-0004	MINDS ON WORKSHOP	3,150.00	(3,150.00)	0.00	0.00	0.00	0.00
A 2110.490-07-0005	NATURE'S CLASSROOM	4,800.00	(4,800.00)	0.00	0.00	0.00	0.00
A 2110.490-07-0007	ALTERNATIVE LEARNING PROG-FULL D	10,622.00	(10,622.00)	0.00	0.00	0.00	0.00
A 2110.490-07-0009	ALP ACADEMY PROGRAM	213,426.00	(35,571.00)	177,855.00	88,927.50	88,927.50	0.00
A 2110.490-07-0010	ALTERNATE LEARNING W/ VOTEC	0.00	47,780.00	47,780.00	23,890.00	23,890.00	0.00
A 2110.490-07-0016	HOME INSTRUCTION REVIEW	5,953.00	1,527.00	7,480.00	3,293.75	4,186.25	0.00
A 2110.490-07-0017	PROG ALT TO SCHOOL SUSPENSION	0.00	10,622.00	10,622.00	5,311.00	5,311.00	0.00
A 2110.490-07-0018	CENTER BASED ACADEMICS 1/2 CREDI	0.00	3,696.00	3,696.00	1,848.00	1,848.00	0.00
<b>A 2110....TEACHING-REGULAR SCHOOL</b>	<b>*</b>	<b>7,247,580.00</b>	<b>77,949.86</b>	<b>7,325,529.86</b>	<b>3,442,038.09</b>	<b>3,649,141.90</b>	<b>234,349.87</b>
<b>A 21....TEACHING</b>	<b>**</b>	<b>7,247,580.00</b>	<b>77,949.86</b>	<b>7,325,529.86</b>	<b>3,442,038.09</b>	<b>3,649,141.90</b>	<b>234,349.87</b>
A 2250.150-07-0000	SALARIES	1,898,435.00	83,109.78	1,981,544.78	927,445.44	1,039,958.34	14,141.00
A 2250.160-07-0000	SALARIES	305,190.00	(3,090.78)	302,099.22	140,724.37	148,674.51	12,700.34
A 2250.160-07-0001	SUBSTITUTES	15,000.00	0.00	15,000.00	3,618.72	11,381.28	0.00
A 2250.200-01-0000	ELEMENTARY	2,000.00	34.95	2,034.95	640.94	1,197.00	197.01
A 2250.400-07-0001	TRAVEL & CONFERENCES	800.00	0.00	800.00	94.05	186.55	519.40
A 2250.400-07-0002	ADMINISTRATIVE SHARED SERVICES	11,520.00	(11,520.00)	0.00	0.00	0.00	0.00
A 2250.400-07-0003	STATE SERVICES	1,500.00	199.00	1,699.00	1,699.00	0.00	0.00
A 2250.400-07-0004	MEDICAID REIMBURSEMENT	3,025.00	1,475.00	4,500.00	3,000.00	1,500.00	0.00
A 2250.400-07-0008	PHYSICAL THERAPY	45,000.00	(10,089.00)	34,911.00	10,220.00	16,980.00	7,711.00
A 2250.400-07-0009	SPEECH THERAPY	0.00	8,415.00	8,415.00	255.00	8,160.00	0.00
A 2250.450-01-0000	RESOURCE ROOM (ELEM)	1,400.00	0.00	1,400.00	1,118.30	208.62	73.08
A 2250.450-01-0002	SPEECH	200.00	0.00	200.00	62.23	105.87	31.90
A 2250.450-01-0004	CSE OFFICE	350.00	(32.28)	317.72	106.05	32.45	179.22
A 2250.450-02-0000	RESOURCE ROOM (HS)	500.00	500.00	1,000.00	447.14	239.14	313.72
A 2250.450-03-0000	RESOURCE ROOM (MS)	500.00	0.00	500.00	424.43	0.00	75.57
A 2250.450-07-0006	SUPPLIES-ESL	50.00	32.28	82.28	82.28	0.00	0.00
A 2250.450-07-0008	SUPPLIES-PHYSICAL THERAPY	0.00	1,124.00	1,124.00	1,060.05	0.00	63.95
A 2250.470-09-0000	TUITION-PRIVATE SCHOOLS	668,875.00	(109,132.61)	559,742.39	196,402.61	356,198.02	7,141.76



**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
A 2250.470-09-0002	TUITION - PREVIOUS YEARS ADJ.	10,000.00	(500.00)	9,500.00	2,995.90	0.00	6,504.10
A 2250.471-09-0000	TUITION-PUBLIC SCHOOLS	100,000.00	77,915.00	177,915.00	0.00	142,793.20	35,121.80
A 2250.480-01-0001	ELEMENTARY	2,200.00	0.00	2,200.00	301.78	587.80	1,310.42
A 2250.480-02-0000	SECONDARY	2,500.00	(33.42)	2,466.58	1,789.23	481.48	195.87
A 2250.480-03-0000	MIDDLE SCHOOL	1,200.00	33.42	1,233.42	1,228.80	0.00	4.62
A 2250.490-07-0000	BOCES SERVICES	251,773.00	59,950.00	311,723.00	155,861.50	155,861.50	0.00
A 2250.490-07-0002	ITINERANT/RELATED SERVICES	26,164.00	80,321.00	106,485.00	51,759.17	61,922.53	(7,196.70)
	<b>A 2250....PROGRAMS-STUDENTS W/ DISABIL *</b>	<b>3,348,182.00</b>	<b>178,711.34</b>	<b>3,526,893.34</b>	<b>1,501,336.99</b>	<b>1,946,468.29</b>	<b>79,088.06</b>
A 2280.400-07-0000	OCCUPATIONAL THERAPY	48,000.00	0.00	48,000.00	13,120.00	19,830.00	15,050.00
A 2280.490-07-0000	CAREER & TECH	473,014.00	0.00	473,014.00	236,507.00	236,507.00	0.00
	<b>A 2280....OCCUPATIONAL EDUCATION *</b>	<b>521,014.00</b>	<b>0.00</b>	<b>521,014.00</b>	<b>249,627.00</b>	<b>256,337.00</b>	<b>15,050.00</b>
	<b>A 22....SPECIAL APPORTIONMENT PROGRAMS **</b>	<b>3,869,196.00</b>	<b>178,711.34</b>	<b>4,047,907.34</b>	<b>1,750,963.99</b>	<b>2,202,805.29</b>	<b>94,138.06</b>
A 2330.490-07-0002	ALT HS EQUIV W/SPECIAL NEEDS	37,111.00	37,289.00	74,400.00	38,503.98	35,896.02	0.00
	<b>A 2330....TEACHING-SPECIAL SCHOOLS *</b>	<b>37,111.00</b>	<b>37,289.00</b>	<b>74,400.00</b>	<b>38,503.98</b>	<b>35,896.02</b>	<b>0.00</b>
	<b>A 23....SPECIAL SCHOOLS **</b>	<b>37,111.00</b>	<b>37,289.00</b>	<b>74,400.00</b>	<b>38,503.98</b>	<b>35,896.02</b>	<b>0.00</b>
A 2610.150-07-0000	SALARIES	124,747.00	0.00	124,747.00	54,988.59	67,885.91	1,872.50
A 2610.160-07-0000	SALARIES N/I	133,376.00	0.00	133,376.00	76,652.85	56,723.15	0.00
A 2610.400-01-0007	EQUIPMENT REPAIR	800.00	0.00	800.00	0.00	0.00	800.00
A 2610.400-02-0009	LIBRARY AUTOMATION	2,400.00	0.00	2,400.00	2,380.00	0.00	20.00
A 2610.400-02-0024	STUDENT COIN/COPIER	1,250.00	39.94	1,289.94	526.41	722.79	40.74
A 2610.400-07-0000	COMPUTER SUPPORT	45,000.00	(20,000.00)	25,000.00	23,762.88	0.00	1,237.12
A 2610.450-01-0001	LIBRARY BOOKS	4,400.00	0.00	4,400.00	4,152.16	247.84	0.00
A 2610.450-01-0003	A/V MATERIALS	1,100.00	0.00	1,100.00	559.86	523.10	17.04
A 2610.450-01-0004	PERIODICALS	2,720.00	0.00	2,720.00	2,593.35	126.65	0.00
A 2610.450-01-0005	SUPPLIES	267.00	0.00	267.00	241.20	0.00	25.80
A 2610.450-01-0008	COMPUTER SUPPLIES	17,770.00	9.86	17,779.86	12,353.21	5,386.59	40.06
A 2610.450-02-0001	LIBRARY BOOKS	6,000.00	0.00	6,000.00	0.00	5,981.89	18.11
A 2610.450-02-0002	REFERENCE BOOKS	1,500.00	0.00	1,500.00	0.00	1,469.06	30.94
A 2610.450-02-0003	A/V MATERIALS	500.00	0.00	500.00	182.00	0.00	318.00
A 2610.450-02-0004	PERIODICALS	1,010.00	0.00	1,010.00	549.65	0.00	460.35
A 2610.450-02-0005	SUPPLIES	130.00	0.00	130.00	126.09	0.00	3.91
A 2610.450-02-0007	BOOKBINDING	200.00	0.00	200.00	0.00	200.00	0.00
A 2610.450-02-0008	COMPUTER SUPPLIES	0.00	2,000.00	2,000.00	0.00	2,000.00	0.00
A 2610.490-07-0003	PRO QUEST	1,485.00	0.00	1,485.00	87.60	87.60	1,309.80
	<b>A 2610....SCHOOL LIBRARY &amp; AUDIOVISUAL *</b>	<b>344,655.00</b>	<b>(17,950.20)</b>	<b>326,704.80</b>	<b>179,155.85</b>	<b>141,354.58</b>	<b>6,194.37</b>
A 2620.490-07-0000	BLACKBOARD/CLASS MANAGEMENT	642.00	0.00	642.00	321.00	321.00	0.00
	<b>A 2620....EDUCATIONAL TELEVISION *</b>	<b>642.00</b>	<b>0.00</b>	<b>642.00</b>	<b>321.00</b>	<b>321.00</b>	<b>0.00</b>
A 2630.220-07-0001	COMPUTER HARDWARE	18,000.00	0.00	18,000.00	14,789.16	3,117.19	93.65
A 2630.400-07-0002	COMPUTER REPAIR	6,500.00	0.00	6,500.00	1,843.11	2,524.89	2,132.00
A 2630.450-07-0001	COMPUTER SOFTWARE DONATION	0.00	0.00	0.00	(3,858.80)	0.00	3,858.80
A 2630.460-07-0000	COMPUTER SOFTWARE STATE AIDED	23,000.00	0.00	23,000.00	17,204.47	3,128.84	2,666.69
A 2630.490-07-0000	EQUIPMENT CONTRACT-LEASES	65,000.00	100,000.00	165,000.00	27,878.72	127,878.72	9,242.56

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
A 2630.490-07-0002	COMPUTER SOFTWARE-MICROSOFT	9,086.00	0.00	9,086.00	4,542.73	4,542.71	0.56
A 2630.490-07-0004	INTERNET/NERIC	29,625.00	0.00	29,625.00	14,812.40	14,812.38	0.22
A 2630.490-07-0005	COMPUTER SUPPORT	0.00	20,000.00	20,000.00	3,250.00	3,250.00	13,500.00
A 2630.490-07-0006	COMPUTER LEASE/PURCHASE	80,000.00	(125.00)	79,875.00	39,317.35	39,317.34	1,240.31
A 2630.490-07-0007	INTERNET FILTER-NERIC	4,750.00	125.00	4,875.00	2,437.50	2,437.50	0.00
	<b>A 2630....COMPUTER ASSISTED INSTRUCTION *</b>	<b>235,961.00</b>	<b>120,000.00</b>	<b>355,961.00</b>	<b>122,216.64</b>	<b>201,009.57</b>	<b>32,734.79</b>
	<b>A 26....INSTRUCTIONAL MEDIA **</b>	<b>581,258.00</b>	<b>102,049.80</b>	<b>683,307.80</b>	<b>301,693.49</b>	<b>342,685.15</b>	<b>38,929.16</b>
A 2805.160-07-0000	SALARIES	23,316.00	873.00	24,189.00	12,592.31	11,595.88	0.81
A 2805.451-07-0000	MATERIAL & SUPPLIES	50.00	0.00	50.00	0.00	0.00	50.00
	<b>A 2805....ATTENDANCE-REGULAR SCHOOL *</b>	<b>23,366.00</b>	<b>873.00</b>	<b>24,239.00</b>	<b>12,592.31</b>	<b>11,595.88</b>	<b>50.81</b>
A 2810.150-02-0000	SALARIES(INST.)	294,920.00	3,183.55	298,103.55	140,272.97	154,761.60	3,068.98
A 2810.160-02-0000	SALARIES(N/I)	29,409.00	228.45	29,637.45	15,010.55	14,626.40	0.50
A 2810.400-02-0002	BOOK-PROFESSIONAL	152.00	0.00	152.00	0.00	0.00	152.00
A 2810.400-02-0004	REFERENCE BOOKS	700.00	0.00	700.00	0.00	0.00	700.00
A 2810.400-03-0002	BOOKS PROFESSIONAL (MS)	200.00	0.00	200.00	0.00	0.00	200.00
A 2810.400-03-0004	REFERENCE BOOKS	100.00	73.85	173.85	0.00	73.85	100.00
A 2810.450-01-0007	TESTING SUPPLIES - ELEM	1,700.00	0.00	1,700.00	1,436.49	0.00	263.51
A 2810.450-01-0120	SUPPLIES (ELEM)	500.00	0.00	500.00	470.90	0.00	29.10
A 2810.450-02-0007	TESTING SUPPLIES - HS	2,714.00	0.00	2,714.00	909.00	0.00	1,805.00
A 2810.450-02-0120	OFFICE SUPPLIES	500.00	0.00	500.00	314.66	0.00	185.34
A 2810.450-03-0007	TESTING SUPPLIES (MS)	300.00	0.00	300.00	0.00	0.00	300.00
A 2810.450-03-0120	OFFICE SUPPLIES (MS)	200.00	0.00	200.00	200.00	0.00	0.00
A 2810.490-02-0005	NUTRITION MANAGEMENT W/ALBANY	6,802.00	17,416.10	24,218.10	12,109.05	12,109.05	0.00
A 2810.490-02-0006	MY LEARNING PLAN	4,615.00	(134.00)	4,481.00	2,240.50	2,240.50	0.00
A 2810.490-02-0009	STUDENT MANAGEMENT SYSTEM	31,500.00	(621.42)	30,878.58	15,000.02	15,000.03	878.53
A 2810.490-02-0010	GUIDANCE INFO. SYSTEM	5,838.00	(2,348.00)	3,490.00	1,745.00	1,745.00	0.00
A 2810.490-02-0011	DISTANCE LEARNING	5,000.00	(4,410.40)	589.60	(155.00)	445.00	299.60
A 2810.490-02-0012	CLEARTRACK SOFTWARE/SUPPORT	12,566.00	2,031.82	14,597.82	7,179.95	7,417.87	0.00
A 2810.490-07-0012	CURRICULUM MAPPING SOFTWARE	4,000.00	(1,152.10)	2,847.90	0.00	0.00	2,847.90
	<b>A 2810....GUIDANCE-REGULAR SCHOOL *</b>	<b>401,716.00</b>	<b>14,267.85</b>	<b>415,983.85</b>	<b>196,734.09</b>	<b>208,419.30</b>	<b>10,830.46</b>
A 2815.160-07-0000	SALARIES	190,303.00	7,891.90	198,194.90	97,827.53	96,525.71	3,841.66
A 2815.161-07-0000	NURSES AIDE - SALARIES	30,222.00	(7,981.90)	22,240.10	458.55	10,000.00	11,781.55
A 2815.161-07-0001	SUBSTITUTE NURSES & LPN	4,500.00	3,000.00	7,500.00	4,545.00	0.00	2,955.00
A 2815.400-07-0002	EQUIPMENT REPAIR	500.00	0.00	500.00	0.00	30.00	470.00
A 2815.400-07-0004	SERVICE OTHER DISTRICTS	17,500.00	0.00	17,500.00	0.00	0.00	17,500.00
A 2815.400-07-0005	HEPATITIS B VACCINE	1,000.00	0.00	1,000.00	0.00	0.00	1,000.00
A 2815.400-07-0006	WASTE DISPOSAL	3,700.00	0.00	3,700.00	450.00	2,050.00	1,200.00
A 2815.400-07-0007	SCHOOL PHYSICIAN	7,000.00	0.00	7,000.00	0.00	6,500.00	500.00
A 2815.450-01-0000	ELEMENTARY SUPPLIES	2,800.00	0.00	2,800.00	2,425.15	345.24	29.61
A 2815.450-02-0000	MS/HS SUPPLIES	4,000.00	99.99	4,099.99	2,226.28	1,152.70	721.01

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
<b>A 2815....HEALTH SERVICES-REGULAR SCHOOL *</b>		<b>261,525.00</b>	<b>3,009.99</b>	<b>264,534.99</b>	<b>107,932.51</b>	<b>116,603.65</b>	<b>39,998.83</b>
A 2820.150-07-0000	SALARIES(INST.)	340,831.00	6,569.00	347,400.00	162,308.84	179,996.16	5,095.00
A 2820.450-01-0007	TESTING SUPPLIES	600.00	170.88	770.88	770.88	0.00	0.00
A 2820.450-03-0007	TESTING SUPPLIES	500.00	(170.88)	329.12	228.06	0.00	101.06
A 2820.450-07-0000	SUPPLIES & MATERIALS	300.00	1,700.00	2,000.00	172.15	1,788.08	39.77
A 2820.450-07-0001	TESTING SUPPLIES-APPR	0.00	0.00	0.00	0.00	0.00	0.00
<b>A 2820....PSYCHOLOGICAL SRVC-REG SCHOOL *</b>		<b>342,231.00</b>	<b>8,269.00</b>	<b>350,500.00</b>	<b>163,479.93</b>	<b>181,784.24</b>	<b>5,235.83</b>
A 2850.150-07-0000	SALARIES-ADVISORS	36,052.00	15.50	36,067.50	3,228.07	32,257.60	581.83
A 2850.151-07-0000	CHAPERONES (I)	1,900.00	(800.00)	1,100.00	400.00	700.00	0.00
A 2850.151-07-0001	HEALTH CARE CHAPERONE (I)	0.00	784.50	784.50	0.00	0.00	784.50
A 2850.160-07-0000	CHAPERONES (NI)	1,900.00	(500.00)	1,400.00	280.00	920.00	200.00
A 2850.160-07-0001	HEALTH CARE CHAPERONE (NI)	0.00	500.00	500.00	40.00	0.00	460.00
<b>A 2850....CO-CURRICULAR ACTIV-REG SCHL *</b>		<b>39,852.00</b>	<b>0.00</b>	<b>39,852.00</b>	<b>3,948.07</b>	<b>33,877.60</b>	<b>2,026.33</b>
A 2855.150-07-0000	SALARIES COACHES & DIRECTOR	147,890.00	(2,140.00)	145,750.00	63,274.06	82,312.20	163.74
A 2855.150-07-0001	HEALTH CARE CHAPERONE (I)	0.00	6,600.00	6,600.00	6,600.00	0.00	0.00
A 2855.151-07-0000	CHAPERONE SALARIES (I)	22,200.00	(6,000.00)	16,200.00	3,065.00	13,135.00	0.00
A 2855.160-07-0000	CHAPERONE/SECURITY	8,200.00	(2,000.00)	6,200.00	4,820.00	1,380.00	0.00
A 2855.160-07-0001	HEALTH CARE CHAPERONE (NI)	0.00	3,540.00	3,540.00	3,540.00	0.00	0.00
A 2855.400-07-0001	DIRECTOR OF PHYSICAL EDUCATION	500.00	0.00	500.00	0.00	0.00	500.00
A 2855.400-07-0002	BASEBALL OFFICIALS	3,927.00	0.00	3,927.00	0.00	0.00	3,927.00
A 2855.400-07-0003	BASKETBALL OFFICIALS	5,202.00	0.00	5,202.00	2,181.95	0.00	3,020.05
A 2855.400-07-0004	SOCCER BOYS	3,689.00	(146.11)	3,542.89	2,185.24	0.00	1,357.65
A 2855.400-07-0005	TRACK	1,326.00	0.00	1,326.00	564.70	40.00	721.30
A 2855.400-07-0006	GIRLS SOCCER	3,570.00	0.00	3,570.00	3,379.25	0.00	190.75
A 2855.400-07-0007	GIRLS BASKETBALL	4,386.00	0.00	4,386.00	1,105.95	0.00	3,280.05
A 2855.400-07-0008	GIRLS SOFTBALL	3,927.00	0.00	3,927.00	0.00	0.00	3,927.00
A 2855.400-07-0009	WRESTLING OFFICIALS	918.00	0.00	918.00	433.75	0.00	484.25
A 2855.400-07-0010	EQUIP MAINTENANCE	1,000.00	1,880.00	2,880.00	0.00	1,880.00	1,000.00
A 2855.400-07-0011	CONF./TRAVEL	500.00	0.00	500.00	0.00	164.00	336.00
A 2855.400-07-0012	COACHING IN SERVICE	900.00	0.00	900.00	0.00	600.00	300.00
A 2855.400-07-0013	GIRLS VOLLEYBALL	4,182.00	146.11	4,328.11	4,328.11	0.00	0.00
A 2855.400-07-0014	WRESTLING TOURNAMENT	900.00	0.00	900.00	700.00	200.00	0.00
A 2855.400-07-0015	BOYS VOLLEYBALL	2,958.00	0.00	2,958.00	1,052.39	0.00	1,905.61
A 2855.450-07-0002	BOYS BASEBALL	650.00	0.00	650.00	0.00	0.00	650.00
A 2855.450-07-0003	BOYS BASKETBALL	550.00	0.00	550.00	332.45	0.00	217.55
A 2855.450-07-0004	BOYS SOCCER	588.00	0.00	588.00	0.00	0.00	588.00
A 2855.450-07-0005	TRACK	625.00	0.00	625.00	0.00	0.00	625.00
A 2855.450-07-0006	GIRLS SOCCER	588.00	0.00	588.00	0.00	0.00	588.00
A 2855.450-07-0007	GIRLS BASKETBALL	550.00	0.00	550.00	0.00	0.00	550.00
A 2855.450-07-0008	GIRLS SOFTBALL	650.00	0.00	650.00	0.00	0.00	650.00
A 2855.450-07-0009	CROSS COUNTRY	625.00	0.00	625.00	380.00	0.00	245.00
A 2855.450-07-0010	WRESTLING SUPPLIES	400.00	0.00	400.00	59.99	0.00	340.01

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
A 2855.450-07-0012	CHEERLEADING	375.00	0.00	375.00	40.00	0.00	335.00
A 2855.450-07-0013	GOLF	400.00	0.00	400.00	270.00	0.00	130.00
A 2855.450-07-0014	TENNIS	300.00	0.00	300.00	0.00	0.00	300.00
A 2855.450-07-0015	VOLLEYBALL-GIRLS	400.00	0.00	400.00	0.00	0.00	400.00
A 2855.450-07-0016	TEAMS SUPPLIES	3,250.00	0.00	3,250.00	215.50	219.84	2,814.66
A 2855.450-07-0017	MODIFIED TEAMS	600.00	0.00	600.00	0.00	0.00	600.00
A 2855.450-07-0018	UNIFORMS	3,000.00	3,200.00	6,200.00	1,000.00	2,520.00	2,680.00
A 2855.450-07-0019	VOLLEYBALL-BOYS	400.00	235.00	635.00	0.00	235.00	400.00
<b>A 2855....INTERSCHOL ATHLETICS-REG SCHL</b>	<b>*</b>	<b>230,126.00</b>	<b>5,315.00</b>	<b>235,441.00</b>	<b>99,528.34</b>	<b>102,686.04</b>	<b>33,226.62</b>
<b>A 28....PUPIL SERVICES</b>	<b>**</b>	<b>1,298,816.00</b>	<b>31,734.84</b>	<b>1,330,550.84</b>	<b>584,215.25</b>	<b>654,966.71</b>	<b>91,368.88</b>
<b>A 2....ADMIN &amp; IMPROVEMENT</b>	<b>***</b>	<b>13,680,299.00</b>	<b>468,856.51</b>	<b>14,149,155.51</b>	<b>6,474,813.50</b>	<b>7,203,737.44</b>	<b>470,604.57</b>
A 5510.160-04-0000	MECHANICS & SUPERVISOR	286,142.00	0.00	286,142.00	154,487.17	125,829.12	5,825.71
A 5510.160-04-0001	SALARIES DRIVERS	570,876.00	(12,000.00)	558,876.00	236,726.82	264,869.38	57,279.80
A 5510.160-04-0003	SALARIES-SUB DRIVERS	24,780.00	0.00	24,780.00	8,593.64	16,186.36	0.00
A 5510.160-04-0004	SALARIES-FIELD TRIPS	0.00	0.00	0.00	0.00	0.00	0.00
A 5510.160-04-0005	SALARIES-ATHLETIC TRIPS	20,000.00	0.00	20,000.00	12,810.86	7,189.14	0.00
A 5510.160-04-0007	ASSISTANT DRIVER	17,000.00	0.00	17,000.00	5,106.51	6,892.42	5,001.07
A 5510.160-04-0008	FIELD TRIPS (ELEM)	3,530.00	0.00	3,530.00	2,192.00	0.00	1,338.00
A 5510.160-04-0009	FIELD TRIPS (HS)	3,109.00	(1,647.00)	1,462.00	1,363.25	0.00	98.75
A 5510.160-04-0010	FIELD TRIPS (MS)	673.00	0.00	673.00	0.00	0.00	673.00
A 5510.160-04-0031	FIELD TRIPS MUSIC	0.00	269.50	269.50	269.50	0.00	0.00
A 5510.160-04-0041	FIELD TRIPS AG	0.00	1,377.50	1,377.50	1,377.50	0.00	0.00
A 5510.200-04-0000	EQUIPMENT	2,325.00	2,199.99	4,524.99	4,524.99	0.00	0.00
A 5510.400-04-0001	OUTSIDE LABOR	13,500.00	23,050.00	36,550.00	22,291.61	11,174.60	3,083.79
A 5510.400-04-0004	OIL/WATER TANK CLEANING	0.00	500.00	500.00	0.00	0.00	500.00
A 5510.400-04-0005	INSURANCE LIABILITY	33,500.00	(3,214.52)	30,285.48	23,549.75	6,425.25	310.48
A 5510.400-04-0006	DRIVER PHYSICALS	4,200.00	0.00	4,200.00	3,200.00	120.00	880.00
A 5510.400-04-0007	CONFERENCE & TRAVEL	400.00	500.00	900.00	335.00	216.00	349.00
A 5510.400-04-0008	LIFT MAINTENANCE/INSPECTION	375.00	0.00	375.00	375.00	0.00	0.00
A 5510.400-04-0009	REPEATER RENTAL	2,250.00	0.00	2,250.00	2,100.00	0.00	150.00
A 5510.400-04-0011	UNIFORMS	2,263.00	0.00	2,263.00	1,657.49	542.51	63.00
A 5510.400-04-0012	COPIER SUPPLIES MAINTENANCE	0.00	291.00	291.00	291.00	0.00	0.00
A 5510.400-04-0014	SOFTWARE/MAINTENANCE FEE	3,700.00	0.00	3,700.00	3,403.67	0.00	296.33
A 5510.400-04-0015	RADIO REPAIR	1,000.00	0.00	1,000.00	419.50	580.50	0.00
A 5510.400-04-0016	PROFESSIONAL FEES	1,300.00	0.00	1,300.00	0.00	722.50	577.50
A 5510.400-04-0018	HEPATITIS B VACCINE	400.00	(28.60)	371.40	0.00	0.00	371.40
A 5510.400-04-0019	COPIER LEASE	0.00	2,743.12	2,743.12	1,358.74	1,345.03	39.35
A 5510.400-04-0022	BRIDGE TICKETS-REGULAR & SPORTS	1,900.00	(65.00)	1,835.00	521.05	584.80	729.15
A 5510.400-04-0023	BRIDGE TICKETS-FIELD TRIPS	0.00	125.00	125.00	58.80	0.00	66.20
A 5510.400-04-0108	ADVERTISING	500.00	0.00	500.00	361.56	52.04	86.40
A 5510.400-04-0127	BUS DRIVER TRAINING	150.00	0.00	150.00	109.95	0.00	40.05
A 5510.450-04-0001	PARTS	70,000.00	9,773.13	79,773.13	42,044.10	25,111.83	12,617.20

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
A 5510.450-04-0002	GAS	190,000.00	0.00	190,000.00	69,474.56	105,617.20	14,908.24
A 5510.450-04-0003	OIL & GREASE	5,000.00	0.00	5,000.00	1,525.35	3,202.25	272.40
A 5510.450-04-0004	TIRES	16,500.00	529.00	17,029.00	15,146.90	882.10	1,000.00
A 5510.450-04-0005	BUS CLEANING SUPPLIES	500.00	0.00	500.00	293.47	59.43	147.10
A 5510.450-04-0006	ANTI FREEZE	750.00	0.00	750.00	334.12	0.00	415.88
A 5510.450-04-0007	BUS DRIVER TRAINING	50.00	0.00	50.00	0.00	0.00	50.00
A 5510.450-04-0008	CLEANING-FIRST AID SUPPLIES	250.00	0.00	250.00	247.04	0.00	2.96
A 5510.450-04-0009	SOLVENT	1,200.00	0.00	1,200.00	800.46	155.59	243.95
A 5510.450-04-0010	OFFICE SUPPLIES	200.00	0.00	200.00	187.69	0.00	12.31
A 5510.450-04-0011	WORKBOOTS/SHOES	375.00	0.00	375.00	0.00	375.00	0.00
A 5510.450-04-0013	DIESEL EXHAUST FLUID	950.00	0.00	950.00	314.48	635.52	0.00
A 5510.450-04-0019	SMALL TOOLS	500.00	0.00	500.00	83.40	182.50	234.10
A 5510.490-04-0001	TRANS.DRUG AND ALCOHOL TESTING	2,500.00	0.00	2,500.00	422.29	381.71	1,696.00
<b>A 5510....DISTRICT TRANSPORT</b>	<b>*</b>	<b>1,282,648.00</b>	<b>24,403.12</b>	<b>1,307,051.12</b>	<b>618,359.22</b>	<b>579,332.78</b>	<b>109,359.12</b>
A 5530.400-04-0000	FUEL - BUS GARAGE	15,000.00	(3,600.00)	11,400.00	10,591.25	808.75	0.00
A 5530.400-04-0001	LP GAS	1,000.00	0.00	1,000.00	0.00	1,000.00	0.00
A 5530.400-04-0002	TELEPHONE	3,500.00	0.00	3,500.00	0.00	0.00	3,500.00
A 5530.400-04-0003	ELECTRICITY	6,000.00	0.00	6,000.00	0.00	0.00	6,000.00
A 5530.400-04-0004	GARBAGE REMOVAL	1,000.00	0.00	1,000.00	601.08	398.92	0.00
A 5530.400-04-0005	BUS GARAGE REPAIRS	2,000.00	3,600.00	5,600.00	4,304.11	1,295.89	0.00
A 5530.400-04-0007	FIRE SYSTEM SERVICE CONTRACT & R	700.00	0.00	700.00	0.00	0.00	700.00
A 5530.403-04-0634	SECURITY ALARM	600.00	0.00	600.00	360.00	240.00	0.00
A 5530.404-04-0651	FIRE EXTINGUISHER SERVICE	800.00	893.80	1,693.80	0.00	893.80	800.00
<b>A 5530....GARAGE BUILDING</b>	<b>*</b>	<b>30,600.00</b>	<b>893.80</b>	<b>31,493.80</b>	<b>15,856.44</b>	<b>4,637.36</b>	<b>11,000.00</b>
A 5540.400-04-0001	SPECIAL EDUCATION	400,000.00	(9,384.00)	390,616.00	119,220.90	239,925.60	31,469.50
<b>A 5540....CONTRACT TRANSPORT-MEDICAID</b>	<b>*</b>	<b>400,000.00</b>	<b>(9,384.00)</b>	<b>390,616.00</b>	<b>119,220.90</b>	<b>239,925.60</b>	<b>31,469.50</b>
<b>A 55....PUPIL TRANSPORTATION</b>	<b>**</b>	<b>1,713,248.00</b>	<b>15,912.92</b>	<b>1,729,160.92</b>	<b>753,436.56</b>	<b>823,895.74</b>	<b>151,828.62</b>
<b>A 5....</b>	<b>***</b>	<b>1,713,248.00</b>	<b>15,912.92</b>	<b>1,729,160.92</b>	<b>753,436.56</b>	<b>823,895.74</b>	<b>151,828.62</b>
A 9010.800-07-0000	N/I EMPLOYEE RETIREMENT	762,092.00	(40,000.00)	722,092.00	550,507.35	165,000.00	6,584.65
<b>A 9010....STATE RETIREMENT</b>	<b>*</b>	<b>762,092.00</b>	<b>(40,000.00)</b>	<b>722,092.00</b>	<b>550,507.35</b>	<b>165,000.00</b>	<b>6,584.65</b>
A 9020.800-07-0000	TEACHER RETIREMENT	1,810,000.00	0.00	1,810,000.00	1,643,691.26	160,000.00	6,308.74
<b>A 9020....TEACHERS' RETIREMENT</b>	<b>*</b>	<b>1,810,000.00</b>	<b>0.00</b>	<b>1,810,000.00</b>	<b>1,643,691.26</b>	<b>160,000.00</b>	<b>6,308.74</b>
A 9030.800-07-0000	SOCIAL SECURITY	821,966.00	0.00	821,966.00	396,165.38	410,710.18	15,090.44
A 9030.800-07-0001	MEDICARE	192,234.00	0.00	192,234.00	93,668.80	95,684.01	2,881.19
<b>A 9030....SOCIAL SECURITY</b>	<b>*</b>	<b>1,014,200.00</b>	<b>0.00</b>	<b>1,014,200.00</b>	<b>489,834.18</b>	<b>506,394.19</b>	<b>17,971.63</b>
A 9040.800-07-0000	WORKERS COMPENSATION	179,215.00	(12,300.00)	166,915.00	(50.80)	30,000.00	136,965.80
<b>A 9040....WORKERS' COMPENSATION</b>	<b>*</b>	<b>179,215.00</b>	<b>(12,300.00)</b>	<b>166,915.00</b>	<b>(50.80)</b>	<b>30,000.00</b>	<b>136,965.80</b>
A 9050.800-07-0000	UNEMPLOYMENT INSURANCE	65,000.00	2,709.00	67,709.00	10,597.98	30,549.16	26,561.86
<b>A 9050....UNEMPLOYMENT INSURANCE</b>	<b>*</b>	<b>65,000.00</b>	<b>2,709.00</b>	<b>67,709.00</b>	<b>10,597.98</b>	<b>30,549.16</b>	<b>26,561.86</b>
A 9060.800-07-0000	HOSPITAL & MEDICAL INS.	3,570,028.00	(76,864.00)	3,493,164.00	1,838,306.52	1,622,301.86	32,555.62
A 9060.800-07-0001	DENTAL/OPTOMETRIC	162,500.00	0.00	162,500.00	162,500.00	0.00	0.00
A 9060.800-07-0002	DENTAL/OPTOMETRIC	10,300.00	0.00	10,300.00	3,453.24	1,686.76	5,160.00

**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 06/30/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
A 9060.800-07-0003	RETIREMENT HEALTH FUND	0.00	102,300.00	102,300.00	0.00	102,300.00	0.00
	<b>A 9060....HOSPITAL, MEDICAL &amp; DENTAL INS *</b>	<b>3,742,828.00</b>	<b>25,436.00</b>	<b>3,768,264.00</b>	<b>2,004,259.76</b>	<b>1,726,288.62</b>	<b>37,715.62</b>
	<b>A 90....EMPLOYEE BENEFITS **</b>	<b>7,573,335.00</b>	<b>(24,155.00)</b>	<b>7,549,180.00</b>	<b>4,698,839.73</b>	<b>2,618,231.97</b>	<b>232,108.30</b>
A 9530.900-07-0010	FEDERAL	47,000.00	0.00	47,000.00	40,390.46	0.00	6,609.54
A 9530.900-07-0011	RENOVATIONS	99,000.00	0.00	99,000.00	0.00	99,000.00	0.00
A 9530.900-07-0012	CAFETERIA	80,000.00	0.00	80,000.00	80,000.00	0.00	0.00
	<b>A 9530.... *</b>	<b>226,000.00</b>	<b>0.00</b>	<b>226,000.00</b>	<b>120,390.46</b>	<b>99,000.00</b>	<b>6,609.54</b>
	<b>A 95.... **</b>	<b>226,000.00</b>	<b>0.00</b>	<b>226,000.00</b>	<b>120,390.46</b>	<b>99,000.00</b>	<b>6,609.54</b>
A 9711.600-07-0002	PRINCIPAL 1998 BOND HS/MS	575,000.00	0.00	575,000.00	0.00	575,000.00	0.00
A 9711.600-07-0003	PRINCIPAL 2012 BUS PURCHASES	160,000.00	0.00	160,000.00	0.00	160,000.00	0.00
A 9711.600-07-0004	PRINCIPAL 2004 HS RENOVATION	40,000.00	0.00	40,000.00	40,000.00	0.00	0.00
A 9711.600-07-0007	PRINCIPAL ELEM ELEVATOR	45,000.00	0.00	45,000.00	45,000.00	0.00	0.00
A 9711.600-07-0009	PRINCIPAL 2009 BUS BOND	125,000.00	0.00	125,000.00	0.00	125,000.00	0.00
A 9711.600-07-0011	PRINCIPAL REFUNDING 2013B	380,000.00	0.00	380,000.00	0.00	380,000.00	0.00
A 9711.600-07-0012	PRINCIPAL-2013A REFUNDING BOND	5,000.00	0.00	5,000.00	5,000.00	0.00	0.00
A 9711.700-07-0002	INTEREST 1998 BOND HS/MS	29,029.02	0.00	29,029.02	13,225.00	13,225.00	2,579.02
A 9711.700-07-0003	INTEREST 2012 BUS PURCHASES	9,881.26	0.00	9,881.26	4,940.63	4,940.62	0.01
A 9711.700-07-0004	INTEREST 2004 HS RENOVATION	680.00	0.00	680.00	680.00	0.00	0.00
A 9711.700-07-0007	INTEREST ELEM ELEVATOR	34,745.00	0.00	34,745.00	17,642.50	17,102.50	0.00
A 9711.700-07-0009	INTEREST 2009 BUS BOND	3,875.00	0.00	3,875.00	1,937.50	1,937.50	0.00
A 9711.700-07-0011	INTEREST-REFUNDING 2013B	85,206.26	0.00	85,206.26	42,603.13	42,603.13	0.00
A 9711.700-07-0012	INTEREST-2013A REFUNDING BOND	5,696.46	0.00	5,696.46	5,696.45	0.00	0.01
	<b>A 9711....SERIAL BOND *</b>	<b>1,499,113.00</b>	<b>0.00</b>	<b>1,499,113.00</b>	<b>176,725.21</b>	<b>1,319,808.75</b>	<b>2,579.04</b>
	<b>A 97....Term Bonds - Other(Specify **</b>	<b>1,499,113.00</b>	<b>0.00</b>	<b>1,499,113.00</b>	<b>176,725.21</b>	<b>1,319,808.75</b>	<b>2,579.04</b>
	<b>A 9....EMPLOYEE BENEFITS ***</b>	<b>9,298,448.00</b>	<b>(24,155.00)</b>	<b>9,274,293.00</b>	<b>4,995,955.40</b>	<b>4,037,040.72</b>	<b>241,296.88</b>
	<b>GRAND TOTALS</b>	<b>27,519,845.00</b>	<b>810,427.47</b>	<b>28,330,272.47</b>	<b>13,967,797.47</b>	<b>13,157,767.09</b>	<b>1,204,707.91</b>

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**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 01/31/14 (Detail)**

ACCOUNT	DESCRIPTION		ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
C 2860.160	SALARIES		125,000.00	38,912.90	163,912.90	84,318.22	78,436.01	1,158.67
C 2860.402	SHARED SERVICES		10,000.00	7,036.99	17,036.99	4,757.44	12,279.55	0.00
C 2860.410	FOOD PURCHASES		165,000.00	(31,281.18)	133,718.82	66,597.74	39,870.58	27,250.50
C 2860.450	SUPPLIES		15,000.00	0.00	15,000.00	4,687.66	3,854.43	6,457.91
<b>C 2860....</b>		<b>*</b>	<b>315,000.00</b>	<b>14,668.71</b>	<b>329,668.71</b>	<b>160,361.06</b>	<b>134,440.57</b>	<b>34,867.08</b>
<b>C 28....</b>		<b>**</b>	<b>315,000.00</b>	<b>14,668.71</b>	<b>329,668.71</b>	<b>160,361.06</b>	<b>134,440.57</b>	<b>34,867.08</b>
<b>C 2....</b>		<b>***</b>	<b>315,000.00</b>	<b>14,668.71</b>	<b>329,668.71</b>	<b>160,361.06</b>	<b>134,440.57</b>	<b>34,867.08</b>
C 9010.800	EMPLOYEES' RETIREMENT SYSTEM		28,000.00	0.00	28,000.00	13,526.12	0.00	14,473.88
<b>C 9010....</b>		<b>*</b>	<b>28,000.00</b>	<b>0.00</b>	<b>28,000.00</b>	<b>13,526.12</b>	<b>0.00</b>	<b>14,473.88</b>
C 9030.800	SOCIAL SECURITY		16,000.00	0.00	16,000.00	6,442.79	0.00	9,557.21
<b>C 9030....</b>		<b>*</b>	<b>16,000.00</b>	<b>0.00</b>	<b>16,000.00</b>	<b>6,442.79</b>	<b>0.00</b>	<b>9,557.21</b>
C 9040.800	WORKMAN'S COMP		200.00	0.00	200.00	50.80	0.00	149.20
<b>C 9040....</b>		<b>*</b>	<b>200.00</b>	<b>0.00</b>	<b>200.00</b>	<b>50.80</b>	<b>0.00</b>	<b>149.20</b>
C 9060.800	HEALTH INSURANCE		50,000.00	0.00	50,000.00	39,066.95	0.00	10,933.05
C 9060.801	DENTAL		5,000.00	0.00	5,000.00	2,800.00	0.00	2,200.00
<b>C 9060....</b>		<b>*</b>	<b>55,000.00</b>	<b>0.00</b>	<b>55,000.00</b>	<b>41,866.95</b>	<b>0.00</b>	<b>13,133.05</b>
<b>C 90....</b>		<b>**</b>	<b>99,200.00</b>	<b>0.00</b>	<b>99,200.00</b>	<b>61,886.66</b>	<b>0.00</b>	<b>37,313.34</b>
<b>C 9....</b>		<b>***</b>	<b>99,200.00</b>	<b>0.00</b>	<b>99,200.00</b>	<b>61,886.66</b>	<b>0.00</b>	<b>37,313.34</b>
<b>GRAND TOTALS</b>			<b>414,200.00</b>	<b>14,668.71</b>	<b>428,868.71</b>	<b>222,247.72</b>	<b>134,440.57</b>	<b>72,180.42</b>

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**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 01/31/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
F 2020.150-14-STRE	TEACHING SALARIES-RTTT STLE	59,350.00	6,400.00	65,750.00	30,392.60	29,157.40	6,200.00
F 2020.160-14-STRE	SUPPORT STAFF SALARIES-STLE	3,000.00	0.00	3,000.00	52.03	0.00	2,947.97
F 2020.200-14-STRE	EQUIPMENT-STLE	0.00	0.00	0.00	0.00	0.00	0.00
F 2020.400-14-STRE	PURCHASED SERVICES-STLE	0.00	10,000.00	10,000.00	1,150.00	5,844.13	3,005.87
F 2020.450-14-STRE	SUPPLIES-STLE	5,300.00	3,400.00	8,700.00	6,746.51	0.00	1,953.49
F 2020.490-14-STRE	PURCHASED SERVICES BOCES-STLE	7,000.00	(7,000.00)	0.00	0.00	0.00	0.00
F 2020.800-14-STRE	EMPLOYEE BENEFITS-STLE	0.00	8,329.00	8,329.00	0.00	8,329.00	0.00
<b>F 2020....</b>	<b>*</b>	<b>74,650.00</b>	<b>21,129.00</b>	<b>95,779.00</b>	<b>38,341.14</b>	<b>43,330.53</b>	<b>14,107.33</b>
<b>F 20....</b>	<b>**</b>	<b>74,650.00</b>	<b>21,129.00</b>	<b>95,779.00</b>	<b>38,341.14</b>	<b>43,330.53</b>	<b>14,107.33</b>
F 2110.150-14-MENT	TEACHER SALARIES-MENTOR	18,340.00	0.00	18,340.00	1,747.35	1,952.65	14,640.00
F 2110.150-14-S611	TEACHING SALARIES-SECTION 611	127,604.00	9,135.00	136,739.00	64,226.58	72,512.42	0.00
F 2110.150-14-TIT1	TEACHING SALARIES-TITLE 1	0.00	199,492.00	199,492.00	92,058.78	107,433.22	0.00
F 2110.160-14-S611	SUPPORT STAFF-SECTION 611	46,508.00	0.00	46,508.00	23,307.91	23,199.54	0.55
F 2110.160-14-S619	SUPPORT STAFF-SECTION 619	2,348.00	0.00	2,348.00	804.55	1,460.43	83.02
F 2110.400-13-S611	PURCHASED SERVICES-SECTION 611	1,916.00	0.00	1,916.00	0.00	0.00	1,916.00
F 2110.400-14-MENT	PURCHASED SERVICES-MENTOR	6,000.00	0.00	6,000.00	0.00	0.00	6,000.00
F 2110.400-14-RTTT	PURCHASED SERVICES-RTTT	0.00	29,908.00	29,908.00	14,731.00	0.00	15,177.00
F 2110.400-14-S611	PURCHASED SERVICES-SECTION 611	27,990.00	(4,500.00)	23,490.00	0.00	23,490.00	0.00
F 2110.400-14-S619	PURCHASED SERVICES-SECTION 619	9,045.00	0.00	9,045.00	0.00	9,045.00	0.00
F 2110.450-13-TIT1	SUPPLIES-TITLE 1	66.58	862.27	928.85	928.85	0.00	0.00
F 2110.450-14-MENT	SUPPLIES-MENTOR	500.00	0.00	500.00	0.00	0.00	500.00
F 2110.450-14-TIT1	SUPPLIESL-TITLE 1	0.00	3,211.00	3,211.00	0.00	0.00	3,211.00
F 2110.460-14-MENT	TRAVEL-MENTOR	1,464.00	0.00	1,464.00	0.00	0.00	1,464.00
F 2110.800-14-MENT	EMPLOYEE BENEFITS-MENTOR	4,383.00	0.00	4,383.00	0.00	0.00	4,383.00
F 2110.800-14-S611	EMPLOYEE BENEFITS-SECTION 611	90,156.00	(4,635.00)	85,521.00	0.00	85,521.00	0.00
F 2110.800-14-S619	EMPLOYEE BENEFITS-SECTION 619	662.00	0.00	662.00	0.00	662.00	0.00
F 2110.800-14-TIT1	EMPLOYEE BENEFITS	0.00	14,982.00	14,982.00	9,355.00	5,627.00	0.00
<b>F 2110....</b>	<b>*</b>	<b>336,982.58</b>	<b>248,455.27</b>	<b>585,437.85</b>	<b>207,160.02</b>	<b>330,903.26</b>	<b>47,374.57</b>
<b>F 21....</b>	<b>**</b>	<b>336,982.58</b>	<b>248,455.27</b>	<b>585,437.85</b>	<b>207,160.02</b>	<b>330,903.26</b>	<b>47,374.57</b>
F 2250.150-14-TIIA	TEACHING SALARIES-TITLE IIA	0.00	48,862.00	48,862.00	22,463.52	26,398.48	0.00
F 2250.450-13-TIIA	SUPPLIES-TITLE IIA	106.47	0.00	106.47	106.47	0.00	0.00
F 2250.800-14-TIIA	EMPLOYEE BENEFITS-TITLE IIA	0.00	1,005.00	1,005.00	0.00	1,005.00	0.00
<b>F 2250....</b>	<b>*</b>	<b>106.47</b>	<b>49,867.00</b>	<b>49,973.47</b>	<b>22,569.99</b>	<b>27,403.48</b>	<b>0.00</b>
F 2253.472-03-SHDP	SUMMER HANDICAP-TUITION	160,000.00	(2,310.30)	157,689.70	157,689.56	0.00	0.14
<b>F 2253....</b>	<b>*</b>	<b>160,000.00</b>	<b>(2,310.30)</b>	<b>157,689.70</b>	<b>157,689.56</b>	<b>0.00</b>	<b>0.14</b>
<b>F 22....</b>	<b>**</b>	<b>160,106.47</b>	<b>47,556.70</b>	<b>207,663.17</b>	<b>180,259.55</b>	<b>27,403.48</b>	<b>0.14</b>
F 2510.400-14-PREK	PURCHASED SERVICES-PREK	110,592.00	0.00	110,592.00	39,155.90	71,435.99	0.11
<b>F 2510....</b>	<b>*</b>	<b>110,592.00</b>	<b>0.00</b>	<b>110,592.00</b>	<b>39,155.90</b>	<b>71,435.99</b>	<b>0.11</b>
<b>F 25....</b>	<b>**</b>	<b>110,592.00</b>	<b>0.00</b>	<b>110,592.00</b>	<b>39,155.90</b>	<b>71,435.99</b>	<b>0.11</b>
<b>F 2....</b>	<b>***</b>	<b>682,331.05</b>	<b>317,140.97</b>	<b>999,472.02</b>	<b>464,916.61</b>	<b>473,073.26</b>	<b>61,482.15</b>
F 5510.160-04-SHDP	BUS DRIVER SALARY	15,000.00	6,495.95	21,495.95	21,495.95	0.00	0.00
F 5510.400-04-SHDP	SUMMER HANDICAP-CONTRACT TRANSP	0.00	0.00	0.00	(4,819.57)	0.00	4,819.57



**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 01/31/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
F 5510.450-04-SHDP	MAINTENANCE & GAS	5,000.00	4,876.50	9,876.50	9,876.50	0.00	0.00
F 5510.800-04-SHDP	EMPLOYEE BENEFITS-SUMMER HANDICA	5,000.00	1,137.09	6,137.09	6,137.09	0.00	0.00
<b>F 5510....</b>	<b>*</b>	<b>25,000.00</b>	<b>12,509.54</b>	<b>37,509.54</b>	<b>32,689.97</b>	<b>0.00</b>	<b>4,819.57</b>
F 5540.400-03-SHDP	SUMMER HANDICAP-TRANSPORTATION	0.00	11,572.76	11,572.76	11,572.76	0.00	0.00
<b>F 5540....</b>	<b>*</b>	<b>0.00</b>	<b>11,572.76</b>	<b>11,572.76</b>	<b>11,572.76</b>	<b>0.00</b>	<b>0.00</b>
<b>F 55....</b>	<b>**</b>	<b>25,000.00</b>	<b>24,082.30</b>	<b>49,082.30</b>	<b>44,262.73</b>	<b>0.00</b>	<b>4,819.57</b>
<b>F 5....</b>	<b>***</b>	<b>25,000.00</b>	<b>24,082.30</b>	<b>49,082.30</b>	<b>44,262.73</b>	<b>0.00</b>	<b>4,819.57</b>
F 6292.150-14-CGCC	PROFESSIONAL SALARIES-CGCC	0.00	1,850.00	1,850.00	398.42	1,451.58	0.00
F 6292.400-14-CGCC	NON PROFESSIONAL PERSONNEL	0.00	6,000.00	6,000.00	1,830.00	0.00	4,170.00
F 6292.450-14-CGCC	SUPPLIES-CGCC	0.00	6,207.00	6,207.00	1,068.27	3,484.32	1,654.41
F 6292.460-14-CGCC	TRAVEL EXPENSES-CGCC	0.00	2,100.00	2,100.00	0.00	0.00	2,100.00
F 6292.800-14-CGCC	EMPLOYEE BENEFITS-CGCC	0.00	443.00	443.00	0.00	0.00	443.00
<b>F 6292....</b>	<b>*</b>	<b>0.00</b>	<b>16,600.00</b>	<b>16,600.00</b>	<b>3,296.69</b>	<b>4,935.90</b>	<b>8,367.41</b>
<b>F 62....</b>	<b>**</b>	<b>0.00</b>	<b>16,600.00</b>	<b>16,600.00</b>	<b>3,296.69</b>	<b>4,935.90</b>	<b>8,367.41</b>
<b>F 6....</b>	<b>***</b>	<b>0.00</b>	<b>16,600.00</b>	<b>16,600.00</b>	<b>3,296.69</b>	<b>4,935.90</b>	<b>8,367.41</b>
<b>GRAND TOTALS</b>		<b>707,331.05</b>	<b>357,823.27</b>	<b>1,065,154.32</b>	<b>512,476.03</b>	<b>478,009.16</b>	<b>74,669.13</b>

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**APPROPRIATION STATUS REPORT - BY FUNCTION: FOR PERIOD 07/01/13 - 01/31/14 (Detail)**

ACCOUNT	DESCRIPTION	ORIG BUDGET	ADJUSTMENTS	ADJ BUDGET	EXPENSED	ENCUMBERED	AVAILABLE
H 1620.240-22-1026	ADMIN EXPENSES-ELEM MASON & DOOR	1.00	(1.00)	0.00	0.00	0.00	0.00
H 1620.245-22-8018	ARCHITECTS-MS/HS PAVING	0.00	5,400.00	5,400.00	0.00	5,400.00	0.00
H 1620.293-22-1026	GENERAL CONSTRUCTION-ELEM MASON &	2,298.29	(2,298.29)	0.00	0.00	0.00	0.00
H 1620.293-22-8018	GENERAL CONSTRUCTION-PAVING PROJ	0.00	224,500.00	224,500.00	219,988.30	4,511.70	0.00
<i>H 1620....</i>	<i>*</i>	<b>2,299.29</b>	<b>227,600.71</b>	<b>229,900.00</b>	<b>219,988.30</b>	<b>9,911.70</b>	<b>0.00</b>
<i>H 16....</i>	<b>**</b>	<b>2,299.29</b>	<b>227,600.71</b>	<b>229,900.00</b>	<b>219,988.30</b>	<b>9,911.70</b>	<b>0.00</b>
<i>H 1....</i>	<b>***</b>	<b>2,299.29</b>	<b>227,600.71</b>	<b>229,900.00</b>	<b>219,988.30</b>	<b>9,911.70</b>	<b>0.00</b>
H 9901.900-07-1026	INTERFUND TRANSFER-GENERAL	0.00	2,299.29	2,299.29	2,299.29	0.00	0.00
<i>H 9901....</i>	<i>*</i>	<b>0.00</b>	<b>2,299.29</b>	<b>2,299.29</b>	<b>2,299.29</b>	<b>0.00</b>	<b>0.00</b>
<i>H 99....</i>	<b>**</b>	<b>0.00</b>	<b>2,299.29</b>	<b>2,299.29</b>	<b>2,299.29</b>	<b>0.00</b>	<b>0.00</b>
<i>H 9....</i>	<b>***</b>	<b>0.00</b>	<b>2,299.29</b>	<b>2,299.29</b>	<b>2,299.29</b>	<b>0.00</b>	<b>0.00</b>
<b>GRAND TOTALS</b>		<b>2,299.29</b>	<b>229,900.00</b>	<b>232,199.29</b>	<b>222,287.59</b>	<b>9,911.70</b>	<b>0.00</b>

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**GREENVILLE CENTRAL SCHOOLS**  
**REVENUE SUMMARY**  
January 31, 2014

<i>General Fund</i>	<i>BUDGET</i>	<i>TOTAL REVENUE RECEIVED</i>	<i>ESTIMATED REVENUE</i>	<i>OVER (UNDER) BUDGET</i>
<i>BUDGET 2012/2013</i>	490,000.00			
Balance on Hand July 1	535,000.00			
Carryforward PO's	810,260.04	2,893,703.98	0.00	1,058,443.94
Interest & Penalties on Taxes	37,500.00	35,773.66	0.00	(1,726.34)
Real Estate Taxes	13,888,421.12	13,879,405.72	0.00	(9,015.40)
PILOT Payments	0.00	8,527.78	0.00	8,527.78
Star Reimbursement	1,681,774.42	1,682,766.42	0.00	992.00
Reserve Fund-Retirement	222,613.00	0.00	222,613.00	0.00
Reserve Unemployment	65,000.00	0.00	65,000.00	0.00
Library & Textbook Fines	200.00	105.97	94.03	0.00
Admissions	2,000.00	1,371.36	628.64	0.00
Tuition	190,000.00	58,335.94	139,108.20	7,444.14
Interest on Reserves		2,434.90	(2,434.90)	0.00
Interest on Deposits	30,000.00	16,894.33	13,105.67	0.00
E-Rate	16,000.00	0.00	16,000.00	0.00
Refunds, Commissions,	175,000.00	520,309.35	0.00	345,309.35
Gross State Aid-Basic Formula		1,618,129.75	4,291,875.24	
Lottery Aid		1,027,624.96	0.00	
State Aid Excess		467,903.25	1,404,021.75	
Other State Aid-Lottery VLT		317,303.70	135,987.35	
Other State Aid-		(854.15)	0.00	
Medicaid		8,657.71	0.00	
Other State Aid-		0.00	0.00	
Other State Aid-		0.00	0.00	
Other State Aid-		0.00	0.00	
	9,357,187.00	3,438,765.22	5,831,884.34	(86,537.44)
Interfund Transfers - Other		2,299.29	0.00	2,299.29
Continuing Education		3,560.50	(3,560.50)	0.00
Rental to BOCES	14,000.00	0.00	14,000.00	0.00
State Aid-BOCES	695,183.00	0.00	701,201.00	6,018.00
State Aid-Textbooks/Software/Lib	119,963.00	19,245.00	100,602.00	(116.00)
<b>TOTAL</b>	<b>28,330,101.58</b>	<b>22,563,499.42</b>	<b>7,098,241.48</b>	<b>1,331,639.32</b>

Dated:

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District Treasurer

**REVENUE BUDGET STATUS - FUNDS: A FOR PERIOD COVERED 07/01/13 - 01/31/14**

ACCOUNT	ACCOUNT NAME	BUDGET	ADJUSTMENTS	REVISED BUDGET	REVENUE EARNED	UNEARNED REVENUE
A 1001	REAL PROPERTY TAX	15,570,199.00	0.00	15,570,199.00	13,879,405.72	1,690,793.28
A 1040	APPROPRIATION OF PLANNED	1,312,613.00	0.00	1,312,613.00	0.00	1,312,613.00
A 1081	OTHER PAYMENTS IN LIEU OF	0.00	0.00	0.00	8,527.78	(8,527.78)
A 1085	STAR REIMBURSEMENT	0.00	0.00	0.00	1,682,766.42	(1,682,766.42)
A 1090	INTEREST & PENALTIES ON R	37,500.00	0.00	37,500.00	35,773.66	1,726.34
A 1315	CONTINUING EDUCATION	0.00	0.00	0.00	3,560.50	(3,560.50)
A 1330	TEXTBOOK CHARGES	200.00	0.00	200.00	105.97	94.03
A 1410	ADMISSIONS	2,000.00	0.00	2,000.00	1,371.36	628.64
A 2230	DAY SCHOOL TUITION (OTHER	190,000.00	0.00	190,000.00	58,335.94	131,664.06
A 2401	INTEREST & EARNINGS	30,000.00	0.00	30,000.00	16,894.33	13,105.67
A 2404	INTEREST-CAPITAL RESERVE	0.00	0.00	0.00	1,520.54	(1,520.54)
A 2407	INTEREST-UNEMPLOYMENT RES	0.00	0.00	0.00	330.74	(330.74)
A 2408	INTEREST-RETIREMENT RESER	0.00	0.00	0.00	517.82	(517.82)
A 2409	INTEREST WORKERS COMPENSA	0.00	0.00	0.00	65.80	(65.80)
A 2413	RENTAL REAL PROPERTY,BOCE	14,000.00	0.00	14,000.00	0.00	14,000.00
A 2701	REFUNDS OF PRIOR YEARS EX	175,000.00	0.00	175,000.00	399,575.65	(224,575.65)
A 2703	REFUNDS PRIOR YEAR MIS	0.00	0.00	0.00	120,733.70	(120,733.70)
A 2770	OTHER UNCLASSIFIED REVENU	16,000.00	0.00	16,000.00	0.00	16,000.00
A 3101	BASIC FORMULA	10,172,333.00	0.00	10,172,333.00	1,618,129.75	8,554,203.25
A 3102	LOTTERY AID	0.00	0.00	0.00	1,027,624.96	(1,027,624.96)
A 3102.VLT	LOTTERY GRANTS	0.00	0.00	0.00	317,303.70	(317,303.70)
A 3104	EXCESS COST AID	0.00	0.00	0.00	467,903.25	(467,903.25)
A 3260	TEXTBOOKS	0.00	0.00	0.00	19,245.00	(19,245.00)
A 3289	OTHER STATE AID	0.00	0.00	0.00	(854.15)	854.15
A 4601	MEDICAID ASSISTANCE-SCHOO	0.00	0.00	0.00	8,657.71	(8,657.71)
A 5031	INTERFUND TRANSFERS-OTHER	0.00	0.00	0.00	2,299.29	(2,299.29)
<b>FUND A TOTAL</b>		<b>27,519,845.00</b>	<b>0.00</b>	<b>27,519,845.00</b>	<b>19,669,795.44</b>	<b>7,850,049.56</b>

**REVENUE BUDGET STATUS - FUNDS: C FOR PERIOD COVERED 07/01/13 - 01/31/14**

ACCOUNT	ACCOUNT NAME	BUDGET	ADJUSTMENTS	REVISED BUDGET	REVENUE EARNED	UNEARNED REVENUE
C 1440	SALES TYPE A	114,180.00	0.00	114,180.00	57,800.70	56,379.30
C 1445	OTHER FOOD SALES	75,000.00	14,668.71	89,668.71	38,186.88	51,481.83
C 1447	AFTER SCHOOL PROGRAM	0.00	0.00	0.00	6,047.21	(6,047.21)
C 2401	INTEREST & EARNINGS	20.00	0.00	20.00	11.67	8.33
C 2770	SALES MISC	6,000.00	0.00	6,000.00	1,268.83	4,731.17
C 3190	STATE AID	9,000.00	0.00	9,000.00	4,477.00	4,523.00
C 4190	FEDERAL AID	190,000.00	0.00	190,000.00	98,860.00	91,140.00
C 4190.1	SURPLUS	20,000.00	0.00	20,000.00	11,653.01	8,346.99
C 5031	TRANSFER FROM GENERAL FUN	0.00	0.00	0.00	80,000.00	(80,000.00)
<b>FUND C TOTAL</b>		<b>414,200.00</b>	<b>14,668.71</b>	<b>428,868.71</b>	<b>298,305.30</b>	<b>130,563.41</b>

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**REVENUE BUDGET STATUS - FUNDS: F FOR PERIOD COVERED 07/01/13 - 01/31/14**

ACCOUNT	ACCOUNT NAME	BUDGET	ADJUSTMENTS	REVISED BUDGET	REVENUE EARNED	UNEARNED REVENUE
F 3289.03S.HD.P	SUMMER HANDICAP	185,000.00	(18,619.00)	166,381.00	0.00	166,381.00
F 3289.14P.RE.K	UNIVERSAL PRE-K PROGRAM	110,592.00	0.00	110,592.00	82,944.00	27,648.00
F 4126.13T.IT.1	TITLE 1	66.58	0.00	66.58	66.58	0.00
F 4126.14T.IT.1	TITLE 1	0.00	217,685.00	217,685.00	60,184.00	157,501.00
F 4256.13S.61.1	SECTION 611	1,916.00	0.00	1,916.00	0.00	1,916.00
F 4256.14S.61.1	SECTION 611	292,258.00	0.00	292,258.00	0.00	292,258.00
F 4256.14S.61.9	SECTION 619	12,055.00	0.00	12,055.00	0.00	12,055.00
F 4285.14R.TT.T	RACE TO THE TOP	0.00	29,908.00	29,908.00	0.00	29,908.00
F 4289.13T.II.A	TITLE IIA	106.47	0.00	106.47	106.47	0.00
F 4289.14M.EN.T	MENTOR	30,687.00	0.00	30,687.00	0.00	30,687.00
F 4289.14S.TR.E	RTTT-STRENGTH LEADER	74,650.00	21,129.00	95,779.00	47,890.00	47,889.00
F 4289.14T.II.A	TITLE IIA	0.00	49,867.00	49,867.00	23,271.00	26,596.00
F 4790.14C.GC.C	CGCC 1314	0.00	16,600.00	16,600.00	353.00	16,247.00
F 5031	TRANSFER FOR SUMMER HANDI	0.00	40,391.00	40,391.00	40,390.46	0.54
<b>FUND F TOTAL</b>		<b>707,331.05</b>	<b>356,961.00</b>	<b>1,064,292.05</b>	<b>255,205.51</b>	<b>809,086.54</b>

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**Greenville Central School**  
**Cafeteria Fund Income Statement**  
1/31/2014

	Current Month		Year To Date
Sales	21,667.46	41%	95,987.58
After School Sales	2,125.55	4%	6,047.21
Misc. Sales	119.00	0%	1,268.83
State Aid Receivables	29,348.68	55%	114,990.01
<b>Total Sales:</b>	53,260.69	100%	218,293.63
Less Food Costs:			
Food Purchases	11,965.48	22%	66,597.74
<b>Net Profit (Loss):</b>	41,295.21		151,695.89
Less Operating Expenses:			
Shared Services	1,805.26		4,757.44
Conference	0.00		0.00
Uniform	0.00		0.00
Non-Food	219.91	4%	9,445.10
	2,025.17		4,687.66
Less Personnel Cost:			
Payroll	22,321.10		84,318.22
Fringe Benefits	11,527.35	64%	146,204.88
	33,848.45		61,886.66
<b>Net Operating Cost:</b>	47,839.10	90%	222,247.72
<b>Profit or (Loss) from Sales:</b>	5,421.59	10%	(3,954.09)
Other Income	2.41		11.67
Transfer from General	-		80,000.00
<b>Overall Profit or (Loss):</b>	5,424.00		76,057.58

Dated:

\_\_\_\_\_  
Janet Maassmann  
Treasurer

Greenville Central School  
Transfer of Funds  
Month of January 2013

FROM:		TO:		AMOUNT:		
1	2820 150 07 0000	Salaries - Psychologists	\$ 1,700	2820 450 07 0000	Supplies & Materials	\$ 1,700 *
2	5510 160 04 0001	Salaries - Drivers	\$ 12,000	5510 400 04 0001	Outside Labor	\$ 12,000 *
3	2250 470 09 0000	Tuition - Private Schools	\$ 1,000	2110 470 07 0000	Tuition - Regular School	\$ 1,000 *
4	2020 150 07 0000	Salaries	\$ 2,500	1240 160 05 0000	Salaries	\$ 2,500
5	2110 490 07 0000	Arts Exchange Program	\$ 8,667	1680 490 07 0000	Testing	\$ 1,470
				2250 490 07 0002	Itinerant/ Related Services	\$ 7,197
		Totals	\$ 25,867		Totals	\$ 25,867

- 1 Transfer to purchase evaluation kits to include examiner manual, stimulus books, forms, reading & writing supplement for the psychologists.
- 2 Additional funds required for outside labor - work charged to the outside labor code this year includes body repairs (rust, doors, frames, step wells) and front end alignments. (Transportation)
- 3 Transfer among tuition codes - Tuition regular school under budgeted (foster student billing)
- 4 Transfer among salaries - Increase to cover payment for evening Board Meetings (Clerk)
- 5 Transfer among Questar III Codes - Itinerant/Related services are special education costs related to IEP's (Individual Education Plans)

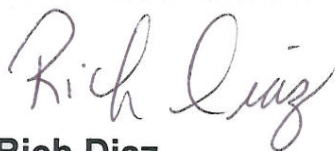


**Greenville Central School District  
Claims Audit Report  
January 1 to January 31, 2014**

<b>Fund</b>	<b>Check Dates</b>	<b>Amount</b>	<b>Checks Issued</b>	<b>Check Series</b>
<b>Fund A – Warrant 21</b>	01/01-01/03/14	967,508	80	347 & 350, 29895-29972
<b>Fund TA – Warrant 13</b>	01/01-01/03/14	889,242	15	1061-1064, 2908-2918
<b>Fund C – Warrant 11</b>	01/01-01/03/14	10,492	5	348, 2045-2047
<b>Fund F – Warrant 4</b>	01/01-01/03/14	97,020	4	349, 1998-2000
<b>Fund H – Warrant 3</b>	01/01-01/03/14	40,652	1	590
<b>Fund A – Warrant 22</b>	01/04-01/17/14	932,825	51	351 & 352, 29973-30021
<b>Fund TA – Warrant 14</b>	01/04-01/17/14	595,292	15	1065-1068, 2919-2929
<b>Fund C – Warrant 12</b>	01/04-01/17/14	9,681	6	353, 2048-2052
<b>Fund F – Warrant 14</b>	01/04-01/17/14	44,461	2	354 & 2001
<b>Fund A – Warrant 23</b>	01/18-01/31/14	1,640,072	91	355-357, 30022-30109
<b>Fund C – Warrant 13</b>	01/18-01/31/14	15,466	11	358 & 2053-2062
<b>Fund TA – Warrant 15</b>	01/18-01/31/14	914,734	11	1069-1072 & 2930-2936
<b>Fund F – Warrant 15</b>	01/18-01/31/14	22,779	3	359 & 2002-2003
<b>Fiscal Totals</b>		<b>\$6,180,224</b>	<b>295</b>	

**Recommendation:**

**There were no issues with this month's claims audit.**



**Rich Diaz  
Claims Auditor**

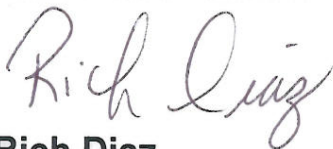
**February 6, 2014**

**Greenville Central School District  
Claims Audit Report  
January 1 to January 31, 2014**

<b>Fund</b>	<b>Check Dates</b>	<b>Amount</b>	<b>Checks Issued</b>	<b>Check Series</b>
<b>Fund A – Warrant 21</b>	01/01-01/03/14	967,508	80	347 & 350, 29895-29972
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<b>Fund C – Warrant 13</b>	01/18-01/31/14	15,466	11	358 & 2053-2062
<b>Fund TA – Warrant 15</b>	01/18-01/31/14	914,734	11	1069-1072 & 2930-2936
<b>Fund F – Warrant 15</b>	01/18-01/31/14	22,779	3	359 & 2002-2003
<b>Fiscal Totals</b>		<b>\$6,180,224</b>	<b>295</b>	

**Recommendation:**

**There were no issues with this month's claims audit.**



**Rich Diaz  
Claims Auditor**

**February 6, 2014**

**Board Action Sheet**  
**Meeting Date: 12/12/2013**  
**Greenville Central School District**

Printed: 02/04/2014 9:12

*Committee : Greenville CSE*

ID	Disability				Meeting	Mtg Date	Ref Date	Outcome	12 Mth
000010863	Non-disabled				New Referral	12/12/13	10/16/13	Not Eligible	
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>		
900000747	Other health impairment				New Referral	12/12/13	10/15/13	Initial Placement	
CURRENT YEAR	Yes	01/06/2014	06/27/2014	8:1:1 Class	5/Weekly 360 Minutes		Greenville Elementary School Special Education Classroom		
CURRENT YEAR	No	01/06/2014	06/27/2014	Counseling	1/Weekly 30 Minutes	Individual	Greenville Elementary School Classroom/Office (pull-out services)		
CURRENT YEAR	No	01/06/2014	06/27/2014	Counseling	1/Weekly 30 Minutes	Group	Greenville Elementary School Classroom/Office (pull-out services)		

**Board Action Sheet**  
**Meeting Date: 12/12/2013**  
**Greenville Central School District**

Printed: 02/04/2014 9:12

*Committee : Greenville CSE Sub-Committee*

ID	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
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000100075	Learning disability	Program Review	12/12/13		IEP Change: Remains Classified	
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	Primary Service	Start Date	Fut. End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 30 Minutes		Greenville Elementary School Special Education Classroom
CURRENT YEAR	No	12/13/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 30 Minutes	Direct	Greenville Elementary School Math class
CURRENT YEAR	No	12/13/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 30 Minutes	Direct	Greenville Elementary School English Classroom
CURRENT YEAR	No	12/13/2013	06/27/2014	Physical Therapy	2/Weekly 30 Minutes	Group	Greenville Elementary School Classroom/Office (pull-out services)

000010837	Speech or language impairment	Program Review	12/12/13		IEP Change: Remains Classified	
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	Primary Service	Start Date	Fut. End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
CURRENT YEAR	No	09/04/2013	06/27/2014	Occupational Therapy	1/Weekly 30 Minutes	Group	Greenville Elementary School Classroom/Office (pull-out services)
CURRENT YEAR	Yes	01/06/2014	06/27/2014	8:1:1 Class	5/Weekly 360 Minutes		Greenville Elementary School Special Education Classroom
CURRENT YEAR	No	01/06/2014	06/27/2014	Counseling	1/Weekly 30 Minutes	Group	Greenville Elementary School Classroom/Office (pull-out services)
CURRENT YEAR	No	01/06/2014	06/27/2014	Counseling	1/Weekly 30 Minutes	Individual	Greenville Elementary School Classroom/Office (pull-out services)

**Board Action Sheet**  
**Meeting Date: 12/12/2013**  
**Greenville Central School District**

Printed: 02/04/2014 9:12

*Committee : Greenville MS/HS CSE Committee*

ID	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
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010500076	Learning disability	New Referral	12/12/13	09/23/13	Initial Placement	
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	Primary Service	Start Date	Fut. End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
CURRENT YEAR	Yes	12/13/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville Middle School Math class
CURRENT YEAR	No	12/13/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville Middle School Math class
CURRENT YEAR	No	12/13/2013	06/27/2014	Resource Room	3/6 Day Cycle 40 Minutes		Greenville Middle School Special Education Classroom

**Board Action Sheet**  
**Meeting Date: 12/12/2013**  
**Greenville Central School District**

Printed: 02/04/2014 9:12

*Committee : Greenville MS/HS CSE Sub-Committee*

ID	Disability			Meeting	Mtg Date	Ref Date	Outcome	12 Mth
010500180	Speech or language impairment			Amendment with No Meeting Held	12/12/13		IEP Change: Remains Classified	
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>	
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Resource Room	
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville Middle School English Classroom	
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville Middle School Math class	
CURRENT YEAR	No	09/04/2013	11/02/2013	Speech/Language Therapy	2/Weekly 30 Minutes	Group	Greenville High School Push into Resource Room	
010801018	Other health impairment			Amendment with No Meeting Held	12/12/13		IEP Change: Remains Classified	
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>	
CURRENT YEAR	Yes	09/04/2013	06/27/2014	8:1:1 ACCES Resource room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom	
CURRENT YEAR	No	09/04/2013	06/27/2014	8:1:1 ACCES ELA	5/Weekly 40 Minutes		Greenville High School Special Education Classroom	
CURRENT YEAR	No	09/04/2013	06/27/2014	Counseling	1/Weekly 30 Minutes	Individual	Greenville High School Classroom/Office (pull-out services)	
CURRENT YEAR	No	09/04/2013	06/27/2014	Counseling	1/Weekly 30 Minutes	Group	Greenville High School Classroom/Office (pull-out services)	

**Board Action Sheet**  
**Meeting Date: 12/12/2013**  
**Greenville Central School District**

Printed: 02/04/2014 9:12

*Committee : Greenville MS/HS CSE Sub-Committee*

ID	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
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900000001	Learning disability	Amendment with No Meeting Held	12/12/13		IEP Change: Remains Classified	
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	Primary Service	Start Date	Fut. End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
CURRENT YEAR	Yes	09/04/2013	12/12/2013	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School English Classroom
CURRENT YEAR	No	09/04/2013	12/12/2013	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School Math class
CURRENT YEAR	No	09/04/2013	12/12/2013	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom
CURRENT YEAR	Yes	12/13/2013	06/30/2015	Consultant Teacher - Indirect	1/Weekly 120 Minutes	Indirect	Greenville High School in classroom

900000494	Learning disability	Program Review	12/12/13		IEP Change: Remains Classified	
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	Primary Service	Start Date	Fut. End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Counseling	1/Weekly 30 Minutes	Group	Greenville Middle School Classroom/Office (pull-out services)
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville Middle School Math class
CURRENT YEAR	No	12/13/2013	06/27/2014	Resource Room	3/6 Day Cycle 40 Minutes		Greenville Middle School Special Education Classroom

**Total Meetings: 9**

**Board Action Sheet**  
**Meeting Date: 01/07/2014**  
**Greenville Central School District**

Printed: 02/04/2014 9:13

*Committee : Greenville MS/HS CSE Sub-Committee*

ID	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
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900000334	Emotional disturbance	Reevaluation/ Annual	01/07/14		IEP Change: Remains Classified	
	<b>Primary Service</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	No	09/04/2013 06/27/2014	Counseling	1/Weekly 40 Minutes	Group	Greenville High School Classroom/Office (pull-out services)
CURRENT YEAR	Yes	10/07/2013 06/27/2014	Consultant Teacher - Indirect	2/Weekly 60 Minutes	indirect	Greenville High School ALP program

010800513	Learning disability	Annual Review	01/07/14		IEP Change: Remains Classified	
	<b>Primary Service</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	10/07/2013 06/27/2014	Consultant Teacher - Indirect	2/Weekly 60 Minutes	Indirect	Greenville High School ALP program

010800815	Learning disability	Annual Review	01/07/14		IEP Change: Remains Classified	
	<b>Primary Service</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	10/07/2013 06/27/2014	Consultant Teacher - Indirect	2/Weekly 60 Minutes	Indirect	Greenville High School ALP program

Total Meetings: 3



**Board Action Sheet**  
**Meeting Date: 01/08/2014**  
**Greenville Central School District**

Printed: 02/04/2014 9:13

*Committee : Greenville MS/HS CSE Sub-Committee*

ID	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth	
010700088	Emotional disturbance	Annual Review	01/08/14		Continuation of IEP		
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom
CURRENT YEAR	No	09/04/2013	06/27/2014	Counseling	1/Weekly 40 Minutes	Individual	Greenville High School Classroom/Office (pull-out services)
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	1/Weekly 90 Minutes	Direct	Questar III class in LEA setti General education classroom
010700292	Learning disability	Annual Review	01/08/14		Continuation of IEP		
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Consultant Teacher services direct/indirect	1/Weekly 120 Minutes	Indirect	Greenville High School General education classroom
900000111	Learning disability	Annual Review	01/08/14		Continuation of IEP		
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School English Classroom

**Board Action Sheet**  
**Meeting Date: 01/08/2014**  
**Greenville Central School District**

Printed: 02/04/2014 9:13

*Committee : Greenville MS/HS CSE Sub-Committee*

ID	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
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CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School Math class
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010700290				Learning disability		Annual Review	01/08/14	Continuation of IEP
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	Primary Service	Start Date	Fut. End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom

**Total Meetings: 4**

**Board Action Sheet**  
**Meeting Date: 01/09/2014**  
**Greenville Central School District**

Printed: 02/04/2014 9:14

*Committee : Greenville MS/HS CSE Sub-Committee*

ID			Disability			Meeting	Mtg Date	Ref Date	Outcome	12 Mth
010800832			Learning disability			Annual Review	01/09/14		Continuation of IEP	
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>			
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom			
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School English Classroom			
010800867			Learning disability			Reevaluation/ Annual	01/09/14		IEP Change: Remains Classified	
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>			
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom			
010500025			Learning disability			Reevaluation/ Annual	01/09/14		Continuation of IEP	
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>			
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Consultant Teacher services direct/indirect	1/Weekly 120 Minutes	Indirect	Greenville High School General education classroom			

**Board Action Sheet**  
**Meeting Date: 01/09/2014**  
**Greenville Central School District**

Printed: 02/04/2014 9:14

*Committee : Greenville MS/HS CSE Sub-Committee*

ID	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
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010800814	Learning disability	Annual Review	01/09/14		Continuation of IEP	
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	Primary Service	Start Date	Fut. End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Resource Room
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School English Classroom

010500008	Learning disability	Reevaluation/ Annual	01/09/14		Continuation of IEP	
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	Primary Service	Start Date	Fut. End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Consultant Teacher services direct/indirect	1/Weekly 120 Minutes	Indirect	Greenville High School General education classroom

**Total Meetings: 5**

**Board Action Sheet**  
**Meeting Date: 01/14/2014**  
**Greenville Central School District**

Printed: 02/04/2014 12:05

*Committee : Greenville MS/HS CSE Sub-Committee*

ID	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth	
900000203	Other health impairment	Annual Review	01/14/14		IEP Change: Remains Classified		
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	10/15/2013	06/30/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom
CURRENT YEAR	No	10/15/2013	06/30/2014	Counseling	1/Weekly 30 Minutes	Group	Greenville High School Classroom/Office (pull-out services)
NEXT YEAR	Yes	09/01/2014	06/30/2015	Resource Room	5/Weekly 40 Minutes		Greenville High School Resource Room
010600109	Learning disability	Reevaluation/ Annual	01/14/14		IEP Change: Remains Classified		
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Resource Room
NEXT YEAR	Yes	09/01/2014	06/30/2015	Resource Room	5/Weekly 40 Minutes		Greenville High School Resource Room
010800955	Learning disability	Reevaluation/ Annual	01/14/14		IEP Change: Remains Classified		
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	09/04/2013	10/18/2013	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom

**Board Action Sheet**  
**Meeting Date: 01/14/2014**  
**Greenville Central School District**

Printed: 02/04/2014 12:05

*Committee : Greenville MS/HS CSE Sub-Committee*

<b>ID</b>	<b>Disability</b>	<b>Meeting</b>	<b>Mtg Date</b>	<b>Ref Date</b>	<b>Outcome</b>	<b>12 Mth</b>
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CURRENT YEAR	Yes	10/18/2013	06/27/2014	Consultant Teacher - Indirect	1/Weekly 120 Minutes	Indirect	Greenville High School in classroom
NEXT YEAR	Yes	09/01/2014	06/30/2015	Consultant Teacher - Indirect	2/Weekly 60 Minutes	Indirect	Greenville High School General education classroom

010801014 Learning disability Annual Review 01/14/14 IEP Change: Remains Classified

	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	3/6 Day Cycle 40 Minutes		Greenville High School Special Education Classroom
NEXT YEAR	Yes	09/01/2014	06/30/2015	Resource Room	3/6 Day Cycle 40 Minutes		Greenville High School Special Education Classroom
NEXT YEAR	No	09/01/2014	06/30/2015	Consultant Teacher - Indirect	2/Weekly 60 Minutes	Indirect	Greenville High School General education classroom

010801013 Learning disability Reevaluation/ Annual 01/14/14 IEP Change: Remains Classified

	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School English Classroom
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	1/Weekly 120 Minutes	Direct	Questar III class in LEA setti General education classroom
NEXT YEAR	Yes	09/01/2014	06/30/2015	Resource Room	3/6 Day Cycle 40 Minutes		Greenville High School Resource Room

**Board Action Sheet**  
**Meeting Date: 01/14/2014**  
**Greenville Central School District**

Printed: 02/04/2014 12:05

*Committee : Greenville MS/HS CSE Sub-Committee*

ID				Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
NEXT YEAR	No	09/01/2014	06/30/2015	Consultant Teacher - Indirect	2/Weekly 60 Minutes	Indirect	Greenville High School General education classroom		

**Total Meetings: 5**

**Board Action Sheet**  
**Meeting Date: 01/15/2014**  
**Greenville Central School District**

Printed: 02/04/2014 9:14

*Committee : Greenville MS/HS CSE Committee*

D	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
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000010964	Emotional disturbance   As of 09/01/14: Declassified	Annual Review	01/15/14		IEP Change: Declassified	
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Primary Service	Start Date	Fut. End Date	End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
NEXT YEAR Yes	09/01/2014		06/30/2015	Counseling	1/Bi-weekly 30 Minutes	Individual	Greenville High School Classroom/Office (pull-out services)



**Board Action Sheet**  
**Meeting Date: 01/15/2014**  
**Greenville Central School District**

Printed: 02/04/2014 9:14

*Committee : Greenville MS/HS CSE Sub-Committee*

D	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth	
010400166	Other health impairment	Annual Review	01/15/14		No Meeting Held		
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	09/04/2013	10/10/2013	Resource Room	9/6 Day Cycle 40 Minutes		Greenville High School Resource Room
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Consultant Teacher - Indirect	5/Weekly 40 Minutes	Direct	Greenville High School Math class
010700465	Learning disability	Transfer Student/Intake	01/15/14		Initial Placement		
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	01/15/2014	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Resource Room
CURRENT YEAR	No	01/15/2014	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School English Classroom
010700466	Traumatic brain injury	Transfer Student/Intake	01/15/14		Initial Placement		
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>
CURRENT YEAR	Yes	01/15/2014	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville Middle School English Classroom
CURRENT YEAR	No	01/15/2014	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville Middle School Math class

Board Action Sheet  
Meeting Date: 01/15/2014  
Greenville Central School District

Printed: 02/04/2014 9:14

Committee : Greenville MS/HS CSE Sub-Committee

ID	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
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Total Meetings: 4

**Board Action Sheet**  
**Meeting Date: 01/16/2014**  
**Greenville Central School District**

Printed: 02/04/2014 9:15

*Committee : Greenville CSE Sub-Committee*

ID	Disability		Meeting		Mtg Date	Ref Date	Outcome	12 Mth
900000972	Multiple disabilities		Transfer Student/Intake		01/16/14		Initial Placement	
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>	
CURRENT YEAR	Yes	01/16/2014	06/27/2014	12:1:1 class	5/Weekly 120 Minutes		Greenville Elementary School Special Education Classroom	
CURRENT YEAR	No	01/16/2014	06/27/2014	Speech/Language Therapy	2/Weekly 30 Minutes	Group	Greenville Elementary School Classroom/Office (pull-out services)	
CURRENT YEAR	No	01/16/2014	06/27/2014	Physical Therapy	2/Weekly 30 Minutes	Group	Greenville Elementary School Classroom/Office (pull-out services)	
CURRENT YEAR	No	01/16/2014	06/27/2014	Occupational Therapy	2/Weekly 30 Minutes	Group	Greenville Elementary School Classroom/Office (pull-out services)	
CURRENT YEAR	No	01/16/2014	06/27/2014	Speech/Language Therapy	2/Weekly 30 Minutes	Individual	Greenville Elementary School Classroom/Office (pull-out services)	
900000838	Speech or language impairment		Program Review		01/16/14		IEP Change: Remains Classified	X
	<b>Primary Service</b>	<b>Start Date</b>	<b>Fut. End Date</b>	<b>Service Description</b>	<b>Freq / Cycle Minutes</b>	<b>Delivery Recommendations</b>	<b>School/ Location</b>	
CURRENT YEAR	Yes	07/01/2013	08/09/2013	8:1:2 CLASS	5/Weekly 360 Minutes		Questar III class in LEA setti Special Education Classroom	
CURRENT YEAR	No	07/01/2013	08/09/2013	Speech/Language Therapy	3/Weekly 30 Minutes	Group	Questar III class in LEA setti Push In/Pull out	
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 60 Minutes	Direct	Greenville Elementary School English Classroom	
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 60 Minutes	Direct	Greenville Elementary School Math class	

**Board Action Sheet**  
**Meeting Date: 01/16/2014**  
**Greenville Central School District**

Printed: 02/04/2014 9:15

*Committee : Greenville CSE Sub-Committee*

D			Disability		Meeting	Mtg Date	Ref Date	Outcome	12 Mth
CURRENT YEAR	No	09/04/2013	06/27/2014	Special Class Reading	5/Weekly 30 Minutes			Greenville Elementary School in classroom	
CURRENT YEAR	No	09/04/2013	06/27/2014	Speech/Language Therapy	3/Weekly 30 Minutes	Group		Greenville Elementary School Push In/Pull out	
CURRENT YEAR	No	01/27/2014	06/27/2014	Physical Therapy	1/Weekly 30 Minutes	Group		Greenville Elementary School Classroom/Office (pull-out services)	

**Board Action Sheet**  
**Meeting Date: 01/16/2014**  
**Greenville Central School District**

Printed: 02/04/2014 9:15

*Committee : Greenville MS/HS CSE Sub-Committee*

D	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
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010801035	Learning disability	Annual Review	01/16/14	IEP Change: Remains Classified	
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	Primary Service	Start Date	Fut. End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Resource Room
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School English Classroom
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School Math class
NEXT YEAR	Yes	09/01/2014	06/30/2015	Resource Room	5/Weekly 40 Minutes		Greenville High School Resource Room

900000496	Learning disability	Annual Review	01/16/14	IEP Change: Remains Classified	
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	Primary Service	Start Date	Fut. End Date End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
CURRENT YEAR	Yes	11/12/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom
CURRENT YEAR	No	11/12/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School English Classroom
NEXT YEAR	Yes	09/01/2014	06/30/2015	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom

**Board Action Sheet**  
**Meeting Date: 01/16/2014**  
**Greenville Central School District**

Printed: 02/04/2014 9:15

*Committee : Greenville MS/HS CSE Sub-Committee*

D	Disability	Meeting	Mtg Date	Ref Date	Outcome	12 Mth
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010800992	Learning disability	Annual Review	01/16/14		IEP Change: Remains Classified	
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	Primary Service	Start Date	Fut. End Date	Service Description	Freq / Cycle Minutes	Delivery Recommendations	School/ Location
CURRENT YEAR	Yes	09/04/2013	06/27/2014	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom
CURRENT YEAR	No	09/04/2013	06/27/2014	Consultant Teacher Direct	5/Weekly 40 Minutes	Direct	Greenville High School English Classroom
NEXT YEAR	Yes	09/01/2014	06/30/2015	Resource Room	5/Weekly 40 Minutes		Greenville High School Special Education Classroom

**Total Meetings: 5**



TO: Cheryl A. Dudley, Superintendent of Schools  
FROM: Tammy J. Sutherland, Assistant Superintendent for Business  
RE: Health Reimbursement Arrangement  
DATE: January 31, 2014

The Board of Education at the October Board Meeting approved the setup of a Health Reimbursement Arrangement to “cap” the In-Patient and Out-Patient Co-pays for the employees that moved from the 812 to the 815 PPO Health Insurance plan.

This document has been amended by Benetech to clearly represent who is eligible for the Health Reimbursement Arrangement. The amended portion reads:

**ELIGIBLE EMPLOYEES:** Active or Retired Administrative or Non-Affiliated members enrolled in the Blue Shield of NENY Preferred PPO 815 Plan.

Attached are the amended Health Reimbursement Arrangement Basic Plan Documents. Jeffrey Honeywell, counsel for the district has reviewed the documents and recommends that the Board approved them as amended.

RESOLVED, that the **amended** Health Reimbursement Arrangement effective July 1, 2013, presented to this meeting is hereby approved and adopted and that the proper officers of the Employer are hereby authorized and directed to execute and deliver to Benetech, the Administrator of the Plan one or more counterparts of the Plan.

RESOLVED, that Benetech, the Administrator shall be instructed to take such actions that are deemed necessary and proper in order to implement the Plan, and to set up adequate accounting and administrative procedures to provide benefits under the Plan.

I have also attached my September 27, 2013 letter, which explains the arrangement in greater detail.

CERTIFICATE OF ADOPTING RESOLUTION

The undersigned principal of the Greenville Central School District (the Employer) hereby certifies that the following resolutions were duly adopted by the board on February 13, 2014 , and that such resolutions have not been modified or rescinded as of the date hereof:

RESOLVED, that the **amended** Health Reimbursement Arrangement effective July 1, 2013, presented to this meeting is hereby approved and adopted and that the proper officers of the Employer are hereby authorized and directed to execute and deliver to Benetech, the Administrator of the Plan one or more counterparts of the Plan.

RESOLVED, that Benetech, the Administrator shall be instructed to take such actions that are deemed necessary and proper in order to implement the Plan, and to set up adequate accounting and administrative procedures to provide benefits under the Plan.

The undersigned further certifies that attached hereto is a true copy of the Health Reimbursement Arrangement and the Summary Plan Description approved and adopted in the forgoing resolutions.

---

President, Board of Education

---

Date





TO: Cheryl A. Dudley, Superintendent of Schools  
FROM: Tammy J. Sutherland, Assistant Superintendent for Business  
RE: Health Reimbursement Arrangement  
DATE: September 27, 2013

For employees that move from the 812 to the 815 PPO Health Insurance plan, the Board/District agreed to set up a Health Reimbursement Arrangement to “cap” the In-Patient and Out-Patient Co-pays.

*Contract Language:*

*Health Benefit: Effective July, 2013, The District will provide on a full time equivalent basis, health benefit coverage in the form of a Rensselaer-Columbia-Greene Health Insurance Trust Preferred PPO 815 Plan including a Preferred Pharmacy Plan with retail copays of \$10/\$30/\$50 and mail copays of \$20/\$60/\$100.*

*In recognition that such plan requires an in-patient hospital copay of \$250 per confinement, limited to a maximum of 3 copays per year per member, and an out-patient surgery copay of \$200 per occurrence, with no limit on the number of copays per member, and in order to limit the out-of-pocket expense that BSNEY – enrolled member could potentially incur under these specific benefits in the PPO 815, the District will establish a Health Reimbursement Arrangement (HRA) plan that will reimburse members as follows:*

- **In-Patient Hospital Copay**

*Each employee who is enrolled in Single coverage will be responsible to pay the first copay each year. If the employee incurs any additional IP Hospital Copay expenses during the same year, the employee will be responsible to pay the Copay upfront but then, upon submission of suitable documentation, will be reimbursed for that expense from the HRA plan.*

*Each employee who is enrolled in either Two-Person or Family coverage will be responsible to pay the first two copays incurred by all covered family members (including the employee) each year. If the employee and/or covered family members incur any additional IP Hospital Copay expenses, the employee will be responsible to*

*pay the additional copay(s) upfront but then, upon submission of suitable documentation, will be reimbursed for those expenses from the HRA plan.*

- **Out-Patient Surgery Copay**

*Each employee who is enrolled in Single coverage will be responsible to pay the first copay each year. If the employee incurs any additional OP Surgery Copay expenses during the same year, the employee will be responsible to pay the Copay upfront but then, upon submission of suitable documentation, will be reimbursed for that expense from the HRA plan.*

*Each employee who is enrolled in either Two-Person or Family coverage will be responsible to pay the first two copays incurred by all covered family members (including the employee) each year. If the employee and/or covered family members incur any additional OP Surgery Copay expenses, the employee will be responsible to pay the additional copay(s) upfront but then, upon submission of suitable documentation, will be reimbursed for those expenses from the HRA plan.*

Attached are the Health Reimbursement Arrangement Basic Plan Document and the Adoption Agreement for Health Reimbursement Arrangement, which has specific language to Greenville's plan. Jeffrey Honeywell, counsel for the district has reviewed both documents including the needed resolutions. Benetech, RCG Trust Administrators will administrator this arrangement for the district. (Cost: \$1.50 per contract per month)

To move forward with the HRA the following resolutions need to be approved by the Board of Education

RESOLVED, that the Health Reimbursement Arrangement effective July 1, 2013, presented to this meeting is hereby approved and adopted and that the proper officers of the Employer are hereby authorized and directed to execute and deliver to Benetech, the Administrator of the Plan one or more counterparts of the Plan.

RESOLVED, that Benetech, the Administrator shall be instructed to take such actions that are deemed necessary and proper in order to implement the Plan, and to set up adequate accounting and administrative procedures to provide benefits under the Plan

CERTIFICATE OF ADOPTING RESOLUTION

The undersigned principal of the Greenville Central School District (the Employer) hereby certifies that the following resolutions were duly adopted by the board on October 10, 2013, and that such resolutions have not been modified or rescinded as of the date hereof:

RESOLVED, that the Health Reimbursement Arrangement effective July 1, 2013, presented to this meeting is hereby approved and adopted and that the proper officers of the Employer are hereby authorized and directed to execute and deliver to Benetech, the Administrator of the Plan one or more counterparts of the Plan.

RESOLVED, that Benetech, the Administrator shall be instructed to take such actions that are deemed necessary and proper in order to implement the Plan, and to set up adequate accounting and administrative procedures to provide benefits under the Plan.

The undersigned further certifies that attached hereto is a true copy of the Health Reimbursement Arrangement and the Summary Plan Description approved and adopted in the forgoing resolutions.

---

President, Board of Education

---

Date

**ADOPTION AGREEMENT  
FOR  
HEALTH REIMBURSEMENT ARRANGEMENT**

The undersigned Employer adopts this Health Reimbursement Arrangement and elects the following provisions:

**EMPLOYER INFORMATION**

1. EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER

Name: Greenville Central School District

Address: 4976 Route 81  
Street

Greenville                      NY                      12083  
City                                      State                                      Zip

Telephone: (518) 966-5070 \_\_\_\_\_

2. EMPLOYER'S TAXPAYER IDENTIFICATION NUMBER: 14-6001538

3. TYPE OF ENTITY

- a.  Corporation (including Tax-exempt or Non-profit Corporation)
- b.  Professional Service Corporation
- c.  S Corporation
- d.  Limited Liability Company that is taxed as:
  - 1.  a partnership or sole proprietorship
  - 2.  a Corporation
  - 3.  an S Corporation
- e.  Sole Proprietorship or Non-profit Corporation
- f.  Partnership (including Limited Liability)
- g.  Governmental Entity
- h.  Other: \_\_\_\_\_

NOTE: S Corporation shareholders, partners, sole proprietors, and members of a Limited Liability Company generally cannot participate in the Health Reimbursement Arrangement.

**Health Reimbursement Arrangement**

**PLAN INFORMATION**

4. PLAN NAME:  
Greenville CSD Health Reimbursement Account  
\_\_\_\_\_  
\_\_\_\_\_

5. EFFECTIVE DATE  
a.  This is a new Health Reimbursement Arrangement effective as of July 1, 2013  
(hereinafter called the "Effective Date").  
b.  This is an amendment and restatement of a previously established Health  
Reimbursement Arrangement of the Employer which was originally effective  
\_\_\_\_\_ (hereinafter called the "Effective Date"). The effective  
date of this amendment and restatement is \_\_\_\_\_.

6. NUMBER assigned by the Employer  
a.  501  
b.  502  
c.  503  
d.  Other: \_\_\_\_\_

7. PLAN ADMINISTRATOR'S NAME, ADDRESS AND TELEPHONE NUMBER:  
(If none is named, the Employer will become the Administrator.)  
a.  Employer (Use Employer address and telephone number).  
b.  Use name, address and telephone number below:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Street

\_\_\_\_\_  
City State Zip

Telephone: \_\_\_\_\_



## Health Reimbursement Arrangement

### 11. CONDITIONS OF ELIGIBILITY

Any Eligible Employee will be eligible to participate in the Health Reimbursement Arrangement upon satisfaction of the following:

- a.  Date of Hire (No service required)
- b.  Same conditions as Employer's group medical plan
- c.  \_\_\_\_\_ years after date of hire
- d.  \_\_\_\_\_ months after date of hire
- e.  \_\_\_\_\_ days after date of hire
- f.  Other: Enrollment in the Blue Shield of NENY Preferred PPO 815 Plan

### 12. EFFECTIVE DATE OF PARTICIPATION

An Eligible Employee who has satisfied the eligibility requirements will become a Participant on

- a.  the date on which such requirements are satisfied.
- b.  the first day of the month coinciding with or next following the date on which such requirements are satisfied.
- c.  the first day of the calendar quarter coinciding with or next following the date on which such requirements are satisfied.
- d.  the first day of the pay period coinciding with or next following the date on which such requirements are met.
- e.  the first day of the Coverage Period coinciding with or next following the date on which such requirements are satisfied.
- f.  same date as Employer's group medical plan.
- g.  Other: the member's effective date of enrollment in the Blue Shield of NENY Preferred PPO 815 Plan

## BENEFITS

### 13. MAXIMUM BENEFIT PER COVERAGE PERIOD:

- a.  \$ \_\_\_\_\_
- b.  Other: None

### 14. COVERAGE PERIOD is:

- a.  monthly
- b.  quarterly
- c.  yearly
- d.  Other: Calendar Year

**Health Reimbursement Arrangement**

15. THIS ARRANGEMENT SHALL REIMBURSE: (select all that apply)
- a.  co-payments under the Employer's group medical plan
  - b.  deductibles under the Employer's group medical plan
  - c.  all medical expenses within the meaning of Code Section 213
  - d.  medical insurance premiums
  - e.  dental, vision and preventative care only or expenses in excess of the deductible (HSA also provided) with the following further limitations: \_\_\_\_\_  
\_\_\_\_\_
  - f.  the following types of medical expenses ONLY: if incurred under the Blue Shield of NENY Preferred PPO 815 Plan, reimbursement of the Inpatient Hospital Copay (\$250) and the Outpatient Surgery Copay (\$200). For single coverage policies, the reimbursement occurs whenever the policy is subject to more than one of the aforementioned copays in a calendar year. For two person & family coverage policies, reimbursement occurs when the policy is subject to more than two of the aforementioned copays in a calendar year.
  - g.  Other: \_\_\_\_\_  
\_\_\_\_\_
16. IF THE EMPLOYER MAINTAINS A HEALTH FLEXIBLE SPENDING ACCOUNT, WHICH PLAN SHALL PAY EXPENSES FIRST?
- a.  N/A. The Employer does not maintain a Health Flexible Spending Account under a Cafeteria Plan.
  - b.  This Plan (Health Reimbursement Arrangement).
  - c.  The Health Flexible Spending Account under the Employer's Cafeteria Plan.
17. IS THE EMPLOYER SUBJECT TO THE FAMILY AND MEDICAL LEAVE ACT?  
If b. is selected, FMLA will not apply
- a.  Yes.
  - b.  No.
18. IS THE PLAN SUBJECT TO COBRA?  
If b. is selected, COBRA will not apply
- a.  Yes.
  - b.  No.



**Health Reimbursement Arrangement**

19. CARRY FORWARD: Amounts not used during a Coverage Period shall:
- a.  Be carried forward to the next Coverage Period, in an amount up to \$\_\_\_\_\_. However, the maximum accumulation limit for a Coverage Period is \$\_\_\_\_\_.
  - b.  Shall be forfeited.
  - c.  N/A (Reimbursements are driven by incurred claims within a calendar year. If reimbursable claims are not incurred in any given calendar year then no reimbursements are issued and no monies are subject to "carry forward").
20. RETIREES OR OTHER TERMINATED EMPLOYEES SHALL:
- a.  continue to be eligible for reimbursement of any remaining balances.
  - b.  not participate and any unused amounts are forfeited.
21. A CLAIM may be submitted up to 45 days after
- a.  the end of the Coverage Period
  - b.  the end of each calendar year
  - c.
- Other: \_\_\_\_\_
22. DEBIT/CREDIT CARDS shall be provided by the Employer for Medical Expenses:
- a.  Yes
  - b.  No
23. HEALTH SAVINGS ACCOUNT provided by the Employer:
- a.  Yes
  - b.  No
24. QUALIFIED HSA DISTRIBUTION allowed:
- a.  Yes
  - b.  No
25. IS THE PLAN SUBJECT TO HIPAA?
- If b. is selected, HIPAA will not apply
- a.  Yes.
  - b.  No.
26. COVERAGE OF DEPENDENTS: The Plan will cover the following (select all that apply):

**Health Reimbursement Arrangement**

- a.  Participant
- b.  Spouse
- c.  Dependents:
  - 1.  natural and adopted children
  - 2.  stepchildren
  - 3.  foster children
  - 4.  Other: All eligible dependents who are enrolled in the Blue Shield of NENY Preferred PPO 815 Plan

This Adoption Agreement may be used only in conjunction with The Health Reimbursement Arrangement Basic Plan Document. This Adoption Agreement and the Health Reimbursement Arrangement Basic Plan Document shall together be known as the Greenville CSD Preferred PPO 815 Plan Health Reimbursement Arrangement.

EMPLOYER

By: \_\_\_\_\_

## PLAN SPONSOR CERTIFICATION

The Greenville Central School District ("Employer") sponsors a Health Reimbursement Arrangement (the "Plan").

Certain members of Employer's workforce perform service in connection with administration of the Plan. Employer acknowledges and agrees that the Standards for Privacy of Individually Identified Health Information (45 CFR Part 164, the "Privacy Standards"), prohibit the Plan or its Business Associates from disclosing Protected Health Information (as defined in Section 164.501 of the Privacy Standards) to members of the Employer's workforce unless the Employer agrees to the conditions and restrictions set out below. To induce the Plan to disclose Protected Health Information to members of Employer's workforce as necessary for them to perform administrative functions for the Plan, the Employer hereby accepts these conditions and restrictions and certifies that the Plan documents have been amended to reflect these conditions and restrictions. The Employer agrees to:

- (a) Not use or further disclose the information other than as permitted or required by the Plan documents or as required by law;
- (b) Ensure that any agent or subcontractor, to whom it provides Protected Health Information received from the Plan, agrees to the same restrictions and conditions that apply to the Employer with respect to such information;
- (c) Not use or disclose Protected Health Information for employment-related actions and decisions or in connection with any other benefit or employee benefit plan of the Employer;
- (d) Report to the Plan any use or disclosure of the Protected Health Information of which it becomes aware that is inconsistent with the uses or disclosures permitted by the Plan or required by law;
- (e) Make available Protected Health Information to individual Plan members in accordance with Section 164.524 of the Privacy Standards;
- (f) Make available Protected Health Information for amendment by individual Plan members and incorporate any amendments to Protected Health Information in accordance with Section 164.526 of the Privacy Standards;
- (g) Make available the Protected Health Information required to provide an accounting of disclosures to individual Plan members in accordance with Section 164.528 of the Privacy Standards;

- (h) Make its internal practices, books and records relating to the use and disclosure of Protected Health Information received from the Plan available to the Department of Health and Human Services for purposes of determining compliance by the Plan with the Privacy Standards;
- (i) If feasible, return or destroy all Protected Health Information received from the Plan that the Employer still maintains in any form, and retain no copies of such Information when no longer needed for the purpose for which disclosure was made, except that, if such return or destruction is not feasible, limit further uses and disclosures to those purposes that make the return or destruction of the information infeasible; and
- (j) Ensure the adequate separation between the Plan and members of the Employer's workforce, as required by Section 164.504(f)(2)(iii) of the Privacy Standards and Section 7.17 of the Plan.

Adopted this First day of July, 2013

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Plan Sponsor

# HEALTH REIMBURSEMENT ARRANGEMENT

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## HEALTH REIMBURSEMENT ARRANGEMENT

As used in this Plan, the following words and phrases shall have the meanings set forth herein unless a different meaning is clearly required by the context:

### ARTICLE I DEFINITIONS

- 1.1 “Administrator”** means the Employer or the person or persons designated by the Employer to administer the Plan on behalf of the Employer. If the Employer is the Administrator, the Employer may appoint any person, including, but not limited to, the Employees of the Employer, to perform the duties of the Administrator. Any person so appointed shall signify acceptance by filing written acceptance with the Employer. Upon the resignation or removal of any individual performing the duties of the Administrator, the Employer may designate a successor.
- 1.2 “Affiliated Employer”** means any corporation which is a member of a controlled group of corporations (as defined in Code Section 414(b)) which includes the Employer; any trade or business (whether or not incorporated) which is under common control (as defined in Code Section 414(c)) with the Employer; any organization (whether or not incorporated) which is a member of an affiliated service group (as defined in Code Section 414(m)) which includes the Employer; and any other entity required to be aggregated with the Employer pursuant to Treasury regulations under Code Section 414(o).
- 1.3 “Code”** means the Internal Revenue Code of 1986, as amended.
- 1.4 “Coverage Period”** means the time period as set forth in the Adoption Agreement.
- 1.5 “Dependent”** means any individual who qualifies as a dependent under Code Section 152 (as modified by Code Section 105(b)). Any child of a Participant who is an "alternate recipient" under a qualified medical child support order under ERISA Section 609 shall be considered a Dependent under this Arrangement.

Notwithstanding anything in the Plan to the contrary, a Participant's Child may remain on the Plan until the end of the calendar year in which the dependent attains age 26. A Participant's "Child" includes his natural child, and adopted child, or a child placed with the Employee for adoption. It may also include step children and/or foster children if elected on the Adoption Agreement. A Participant's Child will be an eligible Dependent until reaching the limiting age of 26, without regard to student status, marital status, financial dependency or residency status with the Employee or any other person. When the child reaches the applicable limiting age, coverage will end at the end of the calendar year.



The phrase "placed for adoption" refers to a child whom the Employee intends to adopt, whether or not the adoption has become final, who has not attained the age of 18 as of the date of such placement for adoption. The term "placed" means the assumption and retention by such Employee of a legal obligation for total or partial support of the child in anticipation of adoption of the child. The child must be available for adoption and the legal process must have commenced.

**1.6 "Effective Date"** means the date specified in the Adoption Agreement.

**1.7 "Eligible Employee"** means any Eligible Employee as elected in the Adoption Agreement and as provided herein. An individual shall not be an "Eligible Employee" if such individual is not reported on the payroll records of the Employer as a common law employee. In particular, it is expressly intended that individuals not treated as common law employees by the Employer on its payroll records are not "Eligible Employees" and are excluded from Plan participation even if a court or administrative agency determines that such individuals are common law employees and not independent contractors. Furthermore, Employees of an Affiliated Employer will not be treated as "Eligible Employees" prior to the date the Affiliated Employer adopts the Plan as a Participating Employer.

However, a self-employed individual as defined under Code Section 401(c) or a 2-percent shareholder as defined under Code Section 1372(b) shall not be eligible to participate in this Plan.

**1.8 "Employee"** means any person who is employed by the Employer. The term "Employee" shall also include any person who is an employee of an Affiliated Employer and any Leased Employee deemed to be an Employee as provided in Code Section 414(n) or (o).

**1.9 "Employer"** means the entity specified in the Adoption Agreement, any successor which shall maintain this Plan and any predecessor which has maintained this Plan. In addition, unless the context means otherwise, the term "Employer" shall include any Participating Employer which shall adopt this Plan.

**1.10 "Employer Contribution"** means the amounts contributed to the Plan by the Employer.

**1.11 "ERISA"** means the Employee Retirement Income Security Act of 1974, as amended from time to time.

**1.12 "Leased Employee"** means, effective with respect to Plan Years beginning on or after January 1, 1997, any person (other than an Employee of the recipient Employer) who, pursuant to an agreement between the recipient Employer and any other person or entity ("leasing organization"), has performed services for the recipient (or for the recipient and related persons determined in accordance with Code Section 414(n)(6)) on a substantially full time basis for a period of at least one year, and such services are performed under primary direction or control by the recipient Employer. Contributions or benefits provided a Leased Employee by the leasing organization which are attributable to services performed for the recipient Employer shall be treated as provided by the recipient Employer. Furthermore, Compensation for a Leased Employee shall only include Compensation from the leasing organization that is attributable to services performed for the recipient Employer.

A Leased Employee shall not be considered an employee of the recipient Employer if: (a) such employee is covered by a money purchase pension plan providing: (1) a nonintegrated employer contribution rate of at least ten percent (10%) of compensation, as defined in Code Section 415(c)(3), but for Plan Years beginning prior to January 1, 1998, including amounts contributed pursuant to a salary reduction agreement which are excludable from the employee's gross income under Code Sections 125, 402(e)(3), 402(h)(1)(B), 403(b), or for Plan Years beginning on or after January 1, 2001 (or as of a date, no earlier than January 1, 1998, as specified in an addendum to the Adoption Agreement), 132(f)(4), (2) immediate participation, and (3) full and immediate vesting; and (b) leased employees do not constitute more than twenty percent (20%) of the recipient Employer's non-highly compensated workforce.

**1.13 "Participant"** means any Eligible Employee who has satisfied the requirements of Section 2.1 and has not for any reason become ineligible to participate further in the Plan.

**1.14 "Plan"** means this Basic Plan Document and the Adoption Agreement as adopted by the Employer, including all amendments thereto. "Plan" means the "Health Reimbursement Arrangement."

**1.15 "Premiums"** mean the Participant's cost for any health plan coverage.

**1.16 "Qualifying Medical Expenses"** means any expense eligible for reimbursement under the Health Reimbursement Arrangement which would qualify as a "medical expense" (within the meaning of Code Section 213(d) and as allowed under Code Sections 105 and 106 and the rulings and Treasury regulations thereunder) of the Participant, the Participant's spouse or a Dependent and not otherwise used by the Participant as a deduction in determining the Participant's tax liability under the Code or reimbursed under any other health coverage, including a health Flexible Spending Account. Qualifying Medical Expenses covered by this Plan are limited as elected in the Adoption Agreement. Effective January 1, 2011, notwithstanding anything in this Arrangement to the contrary, a Participant may not be reimbursed for the cost of any medicine or drug that is not "prescribed" as defined in Code Section 106(f) or is not insulin. Furthermore, a Participant may not be reimbursed for "qualified long-term care services" as defined in Code Section 7702B(c). If the Employer provides Health Savings Accounts for Participants, Qualifying Medical Expenses reimbursed shall be limited to those allowed under Code Section 223. "Incurred" means when the Participant is provided with the medical care that gives rise to the Qualifying Medical Expense and not when the Participant formally billed or charged for, or pays for, the medical care.

## **ARTICLE II PARTICIPATION**

### **2.1 Eligibility**

Any Eligible Employee shall be eligible to participate hereunder on the date such Employee satisfies the conditions of eligibility elected in the Adoption Agreement.

An Eligible Employee may make or change an election that corresponds with the special enrollment rights provided in Code Section 9801(f), including those authorized under the provisions of the Children's Health Insurance Program Reauthorization Act of 2009 (SCHIP); provided that such Participant meets the sixty (60) day notice requirement imposed by Code Section 9801(f) (or such longer period as may be permitted by the Plan and communicated to Participants). Such change shall take place on a prospective basis, unless otherwise required by Code Section 9801(f) to be retroactive.

## **2.2 Effective Date of Participation**

An Eligible Employee who has satisfied the conditions of eligibility pursuant to Section 2.1 shall become a Participant effective as of the date elected in the Adoption Agreement.

If an Employee, who has satisfied the Plan's eligibility requirements and would otherwise have become a Participant, shall go from a classification of a non-eligible Employee to an Eligible Employee, such Employee shall become a Participant on the date such Employee becomes an Eligible Employee or, if later, the date that the Employee would have otherwise entered the Plan had the Employee always been an Eligible Employee.

If an Employee, who has satisfied the Plan's eligibility requirements and would otherwise become a Participant, shall go from a classification of an Eligible Employee to a non-eligible class of Employees, such Employee shall become a Participant in the Plan on the date such Employee again becomes an Eligible Employee, or, if later, the date that the Employee would have otherwise entered the Plan had the Employee always been an Eligible Employee.

## **2.3 Termination of Participation**

This Section shall be applied and administered consistent with any rights a Participant and the Participant's Dependents may be entitled to pursuant to Code Section 4980B, Section 7.13 of the Plan, or any election on the Adoption Agreement. In the case of the death of the Participant, any remaining balances may only be paid out as reimbursements for Qualifying Medical Expenses of the Participant, his or her spouse and/or his or her dependent, and shall not constitute a death benefit to the Participant's estate and/or the Participant's beneficiaries.

# **ARTICLE III BENEFITS**

## **3.1 Establishment of Plan**

**(a)** This Health Reimbursement Arrangement is intended to qualify as a Health Reimbursement Arrangement under Code Section 105 and shall be interpreted in a manner consistent with such Code Section and the Treasury regulations thereunder.

**(b)** Participants in this Health Reimbursement Arrangement may submit claims for the reimbursement of Qualifying Medical Expenses as defined under the Plan and the Adoption Agreement. Unless otherwise elected in the Adoption Agreement, this Plan shall reimburse any expenses only after amounts in all other Plans that could reimburse the expense have been exhausted.

(c) The Employer shall make available to each Participant an Employer Contribution as elected in the Adoption Agreement, for the reimbursement of Qualifying Medical Expenses. No salary reductions may be made to this Health Reimbursement Arrangement.

(d) This Plan shall not be coordinated or otherwise connected to the Employer's cafeteria plan (as defined in Code Section 125), except as permitted by the Code and the Treasury regulations thereunder, to the extent necessary to maintain this Plan as a Health Reimbursement Arrangement.

(e) If the Employer maintains Health Savings Accounts for Participants, this Arrangement shall be operated in accordance with the restrictions under Code Section 223.

### **3.2 Nondiscrimination Requirements**

(a) It is the intent of this Health Reimbursement Arrangement not to discriminate in violation of the Code and the Treasury regulations thereunder.

(b) If the Administrator deems it necessary to avoid discrimination under this Health Reimbursement Arrangement, it may, but shall not be required to reduce benefits provided to "highly compensated individuals" (as defined in Code Section 105(h)) in order to assure compliance with this Section. Any act taken by the Administrator under this Section shall be carried out in a uniform and nondiscriminatory manner.

### **3.3 Health Reimbursement Arrangement Claims**

(a) The Administrator shall direct the reimbursement to each eligible Participant for all Qualifying Medical Expenses. All Qualifying Medical Expenses eligible for reimbursement pursuant to Section 3.1(b) shall be reimbursed during the Coverage Period, even though the submission of such a claim occurs after his participation hereunder ceases; but provided that the Qualifying Medical Expenses were incurred during a Coverage Period. Claims must include receipts or documentation that the expense being incurred is eligible for reimbursement, in order to claim reimbursement. Expenses may be reimbursed in subsequent Coverage Period, subject to the provisions of Number 21 on the Adoption Agreement and Section 3.3(c) below. However, a Participant may not submit claims incurred prior to beginning participation in the Plan and/or the Effective Date of the Plan, whichever is earlier.

(b) Notwithstanding the foregoing, if elected in the Adoption Agreement, Qualifying Medical Expenses shall not be reimbursable under this Plan if eligible for reimbursement and claimed under the Employer's Health Flexible Spending Account or Health Savings Account, if applicable.

(c) Claims for the reimbursement of Qualifying Medical Expenses incurred in any Coverage Period shall be paid as soon after a claim has been filed as is administratively practicable. However, if a Participant fails to submit a claim within the period elected at Question 21 on the Adoption Agreement immediately following the end of the Coverage Period or calendar year, as selected, those Medical Expense claims shall not be considered for reimbursement by the Administrator.

(d) Reimbursement payments under this Plan shall be made directly to the Participant.

(e) If the maximum amount available for reimbursement for a Coverage Period is not utilized in its entirety, such remainder shall be carried forward to another Coverage Period or forfeited, as elected in the Adoption Agreement.

**ARTICLE IV**  
**ERISA PROVISIONS**

**4.1 Claim for Benefits**

Any claim for Benefits shall be made to the Administrator. The following timetable for claims and rules below apply:

Notification of whether claim is accepted or denied	30 days
Extension due to matters beyond the control of the Plan	15 days
Insufficient information on the Claim:	
Notification of	15 days
Response by Participant	45 days
Review of claim denial	60 days

The Administrator will provide written or electronic notification of any claim denial. The notice will state:

- (1) The specific reason or reasons for the denial.
- (2) Reference to the specific Plan provisions on which the denial was based.
- (3) A description of any additional material or information necessary for the claimant to perfect the claim and an explanation of why such material or information is necessary.
- (4) A description of the Plan's review procedures and the time limits applicable to such procedures.
- (5) A statement that the claimant is entitled to receive, upon request and free of charge reasonable access to, and copies of, all documents, records, and other information relevant to the Claim.
- (6) If the denial was based on an internal rule, guideline, protocol, or other similar criterion, the specific rule, guideline, protocol, or criterion will be provided free of charge. If this is not practical, a statement will be included that such a rule, guideline, protocol, or criterion was relied upon in making the denial and a copy will be provided free of charge to the claimant upon request.

When the Participant receives a denial, the Participant shall have 180 days following receipt of the notification in which to appeal the decision. The Participant may submit written comments, documents, records, and other information relating to the Claim. If the Participant requests, the Participant shall be provided, free of charge, reasonable access to, and copies of, all documents, records, and other information relevant to the Claim.

The period of time within which a denial on review is required to be made will begin at the time an appeal is filed in accordance with the procedures of the Plan. This timing is without regard to whether all the necessary information accompanies the filing.

A document, record, or other information shall be considered relevant to a Claim if it:

- (1) was relied upon in making the claim determination;
- (2) was submitted, considered, or generated in the course of making the claim determination, without regard to whether it was relied upon in making the claim determination;

(3) demonstrated compliance with the administrative processes and safeguards designed to ensure and to verify that claim determinations are made in accordance with Plan documents and Plan provisions have been applied consistently with respect to all claimants; or,

(4) constituted a statement of policy or guidance with respect to the Plan concerning the denied claim.

The review will take into account all comments, documents, records, and other information submitted by the claimant relating to the Claim, without regard to whether such information was submitted or considered in the initial claim determination. The review will not afford deference to the initial denial and will be conducted by a fiduciary of the Plan who is neither the individual who made the adverse determination nor a subordinate of that individual.

#### **4.2 Named Fiduciary**

The “named Fiduciaries” of this Plan are (1) the Employer and (2) the Administrator. The named Fiduciaries shall have only those specific powers, duties, responsibilities, and obligations as are specifically given them under the Plan including, but not limited to, any agreement allocating or delegating their responsibilities, the terms of which are incorporated herein by reference. In general, the Employer shall have the sole responsibility for providing benefits under the Plan; and shall have the sole authority to appoint and remove the Administrator; and to amend the elective provisions of the Adoption Agreement or terminate, in whole or in part, the Plan. The Administrator shall have the sole responsibility for the administration of the Plan, which responsibility is specifically described in the Plan. Furthermore, each named Fiduciary may rely upon any such direction, information or action of another named Fiduciary as being proper under the Plan, and is not required under the Plan to inquire into the propriety of any such direction, information or action. It is intended under the Plan that each named Fiduciary shall be responsible for the proper exercise of its own powers, duties, responsibilities and obligations under the Plan. Any person or group may serve in more than one Fiduciary capacity.

#### **4.3 General Fiduciary Responsibilities**

The Administrator and any other fiduciary under ERISA shall discharge their duties with respect to this Plan solely in the interest of the Participants and their beneficiaries and for the exclusive purpose of providing Benefits to Participants and their beneficiaries and defraying reasonable expenses of administering the Plan; with the care, skill, prudence and diligence under the circumstances then prevailing that a prudent person acting in like capacity and familiar with such matters would use in the conduct of an enterprise of a like character and with like aims; and in accordance with the documents and instruments governing the Plan insofar as such documents and instruments are consistent with ERISA.

#### **4.4 Nonassignability of Rights**

The right of any Participant to receive any reimbursement under the Plan shall not be alienable by the Participant by assignment or any other method, and shall not be subject to the rights of creditors, and any attempt to cause such right to be so subjected shall not be recognized, except to such extent as may be required by law.

## **ARTICLE V ADMINISTRATION**

### **5.1 Plan Administration**

The operation of the Plan shall be under the supervision of the Administrator. It shall be a principal duty of the Administrator to see that the Plan is carried out in accordance with its terms, and for the exclusive benefit of Employees entitled to participate in the Plan. The Administrator shall have full power to administer the Plan in all of its details, and determine all questions arising in connection with the administration, interpretation, and application of the Plan. The Administrator may establish procedures, correct any defect, supply any information, or reconcile any inconsistency in such manner and to such extent as shall be deemed necessary or advisable to carry out the purpose of the Plan.

The Administrator shall have all powers necessary or appropriate to accomplish the Administrator's duties under the Plan. The Administrator shall be charged with the duties of the general administration of the Plan as set forth under the Plan, including, but not limited to, in addition to all other powers provided by this Plan:

- (a)** To make and enforce such procedures, rules and regulations as the Administrator deems necessary or proper for the efficient administration of the Plan;
- (b)** To interpret the provisions of the Plan, the Administrator's interpretations thereof in good faith to be final and conclusive on all persons claiming benefits under the Plan;
- (c)** To decide all questions concerning the Plan and the eligibility of any person to participate in the Plan and to receive benefits provided under the Plan;
- (d)** To limit benefits for certain highly compensated individuals if it deems such to be desirable in order to avoid discrimination under the Plan in violation of applicable provisions of the Code;
- (e)** To review and settle all claims against the Plan, to approve reimbursement requests, and to authorize the payment of benefits if the Administrator determines such shall be paid if the Administrator decides in its discretion that the applicant is entitled to them. This authority specifically permits the Administrator to settle disputed claims for benefits and any other disputed claims made against the Plan;
- (f)** To appoint such agents, counsel, accountants, consultants, and other persons or entities as may be required to assist in administering the Plan.
- (g)** To establish and communicate procedures to determine whether a medical child support order is qualified under ERISA Section 609.
- (h)** To provide Employees with a reasonable notification of their benefits available by operation of the Plan and to assist any Participant regarding the Participant's rights, benefits or elections under the Plan; and
- (i)** To keep and maintain the Plan documents and all other records pertaining to and necessary for the administration of the Plan;

Any procedure, discretionary act, interpretation or construction taken by the Administrator shall be done in a nondiscriminatory manner based upon uniform principles consistently applied and shall be consistent with the intent that the Plan shall continue to comply with the terms of Code Section 105(h) and the Treasury regulations thereunder.

## **5.2 Examination of Records**

The Administrator shall make available to each Participant, Eligible Employee and any other Employee of the Employer such records as pertain to their interest under the Plan for examination at reasonable times during normal business hours.

## **5.3 Indemnification of Administrator**

The Employer agrees to indemnify and to defend to the fullest extent permitted by law any Employee serving as the Administrator or as a member of a committee designated as Administrator (including any Employee or former Employee who previously served as Administrator or as a member of such committee) against all liabilities, damages, costs and expenses (including attorney's fees and amounts paid in settlement of any claims approved by the Employer) occasioned by any act or omission to act in connection with the Plan, if such act or omission is in good faith.

## **5.4 Coordination of Benefits**

When a Participant is covered by this Plan and another plan, or the Participant's Spouse is covered by this Plan and by another plan or the Participant's dependents are covered under two or more plans, the plans will coordinate benefits when a claim is received.

The plan that pays first according to the rules will pay as if there were no other plan involved. The secondary and subsequent plans will pay the balance due up to 100% of the allowable Qualified Medical Expenses.

The plan that pays first according to the rules will pay as if there were no other plan involved. The secondary and subsequent plans will pay the balance up to each one's plan formula minus whatever the primary plan paid (non-duplication of benefits). The total reimbursement will never be more than the amount that would have been paid if the secondary plan had been the primary plan -- 50% or 80% or 100% -- whatever it may be. The balance due, if any, is the responsibility of the Participant.

Benefit plan. This provision will coordinate the medical and dental benefits of a benefit plan. The term benefit plan means this Plan or any one of the following plans:

- (1)** Group or group-type plans, including franchise or blanket benefit plans.
- (2)** Blue Cross and Blue Shield group plans.
- (3)** Group practice and other group prepayment plans.
- (4)** Federal government plans or programs. This includes, but is not limited to, Medicare and Tricare.
- (5)** Other plans required or provided by law. This does not include Medicaid or any benefit plan like it that, by its terms, does not allow coordination.
- (6)** No Fault Auto Insurance, by whatever name it is called, when not prohibited by law.

Automobile limitations. When medical payments are available under vehicle insurance, the Plan shall always be considered the secondary carrier regardless of the individual's election under PIP (personal injury protection) coverage with the auto carrier.

Benefit plan payment order. When two or more plans provide benefits for the same Allowable Charge, benefit payment will follow these rules:

- (1)** Plans that do not have a coordination provision, or one like it, will pay first. Plans



with such a provision will be considered after those without one.

**(2)** Plans with a coordination provision will pay their benefits up to the Allowable Charge:

**(a)** The benefits of the plan which covers the person directly (that is, as an employee, member or subscriber) ("Plan A") are determined before those of the plan which covers the person as a dependent ("Plan B").

**(b)** The benefits of a benefit plan which covers a person as an Employee who is neither laid off nor retired are determined before those of a benefit plan which covers that person as a laid-off or Retired Employee. The benefits of a benefit plan which covers a person as a Dependent of an Employee who is neither laid off nor retired are determined before those of a benefit plan which covers a person as a Dependent of a laid off or Retired Employee. If the other benefit plan does not have this rule, and if, as a result, the plans do not agree on the order of benefits, this rule does not apply.

**(c)** The benefits of a benefit plan which covers a person as an Employee who is neither laid off nor retired are determined before those benefits of a benefit plan which covers that person as a laid-off or Retired Employee. If the other benefit plan does not have this rule, and if, as a result, the plans do not agree on the order of benefits, this rule does not apply.

**(d)** The benefits of a benefit plan which covers a person as an Employee who is neither laid off nor retired or a Dependent of an Employee who is neither laid off nor retired are determined before those of a plan which covers the person as a COBRA beneficiary.

**(e)** When a child is covered as a Dependent and the parents are not separated or divorced, these rules will apply:

**(i)** The benefits of the benefit plan of the parent whose birthday falls earlier in a year are determined before those of the benefit plan of the parent whose birthday falls later in that year;

**(ii)** If both parents have the same birthday, the benefits of the benefit plan which has covered the parent for the longer time are determined before those of the benefit plan which covers the other parent.

**(f)** When a child's parents are divorced or legally separated, these rules will apply:

**(i)** This rule applies when the parent with custody of the child has not remarried. The benefit plan of the parent with custody will be considered before the benefit plan of the parent without custody.

**(ii)** This rule applies when the parent with custody of the child has remarried. The benefit plan of the parent with custody will be considered first. The benefit plan of the stepparent that covers the child as a Dependent will be considered next. The benefit plan of the parent without custody will be considered last.

**(iii)** This rule will be in place of items (i) and (ii) above when it applies. A court decree may state which parent is financially responsible for medical and dental benefits of the child. In this case, the benefit plan of that parent will be considered before other plans that cover the child as a Dependent.

**(iv)** If the specific terms of the court decree state that the parents shall share joint custody, without stating that one of the parents is responsible for the health care expenses of the child, the plans covering the child shall follow

the order of benefit determination rules outlined above when a child is covered as a Dependent and the parents are not separated or divorced.

**(v)** For parents who were never married to each other, the rules apply as set out above as long as paternity has been established.

**(g)** If there is still a conflict after these rules have been applied, the benefit plan which has covered the patient for the longer time will be considered first. When there is a conflict in coordination of benefit rules, the Plan will never pay more than 50% of Allowable Charges when paying secondary.

**(3)** Medicare will pay primary, secondary or last to the extent stated in federal law. When Medicare is to be the primary payer, this Plan will base its payment upon benefits that would have been paid by Medicare under Parts A and B regardless of whether or not the person was enrolled under any of these parts. The Plan reserves the right to coordinate benefits with respect to Medicare Part D. The Plan Administrator will make this determination based on the information available through CMS.

**(4)** If a Plan Participant is under a disability extension from a previous benefit plan, that benefit plan will pay first and this Plan will pay second.

**(5)** The Plan will pay primary to Tricare and a State child health plan to the extent required by federal law.

Claims determination period. Benefits will be coordinated on a Calendar Year basis. This is called the claims determination period.

Right to receive or release necessary information. To make this provision work, this Plan may give or obtain needed information from an insurer or any other organization or person. This information may be given or obtained without the consent of or notice to any other person. A Participant will give this Plan the information it asks for about other plans and their payment of Qualified Medical Expenses.

Facility of payment. This Plan may repay other plans for benefits paid that the Plan Administrator determines it should have paid. That repayment will count as a valid payment under this Plan.

Right of recovery. This Plan may pay benefits that should be paid by another benefit plan. In this case this Plan may recover the amount paid from the other benefit plan or the Participant and his or her dependents. That repayment will count as a valid payment under the other benefit plan.

Further, this Plan may pay benefits that are later found to be greater than the Allowable Charge. In this case, this Plan may recover the amount of the overpayment from the source to which it was paid.

Exception to Medicaid. In accordance with ERISA, the Plan shall not take into consideration the fact that an individual is eligible for or is provided medical assistance through Medicaid when enrolling an individual in the Plan or making a determination about the payments for benefits received by a Participant and his or her dependents under the Plan.

## 5.5 Right of Subrogation and Refund

When this provision applies. The Participant and his or her dependents may incur medical or dental charges due to Injuries which may be caused by the act or omission of a Third Party or a Third Party may be responsible for payment. In such circumstances, the Participant and his or her dependents may have a claim against that Third Party, or insurer, for payment of the medical or dental charges. Accepting benefits under this Plan for those incurred medical or dental expenses automatically assigns to the Plan any rights the Participant and his or her dependents may have to recover payments from any Third Party or insurer. This Subrogation right allows the Plan to pursue any claim which the Participant and his or her dependents has against any Third Party, or insurer, whether or not the Participant and his or her dependents chooses to pursue that claim. The Plan may make a claim directly against the Third Party or insurer, but in any event, the Plan has a lien on any amount Recovered by the Participant and his or her dependents, whether or not designated as payment for medical expenses. This lien shall remain in effect until the Plan is repaid in full.

The payment for benefits received by a Participant and his or her dependents under the Plan shall be made in accordance with the assignment of rights by or on behalf of the Participant and his or her dependents as required by Medicaid.

In any case in which the Plan has a legal liability to make payments for benefits received by a Participant and his or her dependents, to the extent that payment has been made through Medicaid, the payment for benefits under the Plan shall be made in accordance with any state law that has provided that the state has acquired the rights of the Participant and his or her dependents to the payments of those benefits.

The Participant and his or her dependents:

- (1) automatically assigns to the Plan his or her rights against any Third Party or insurer when this provision applies; and
- (2) must repay to the Plan the benefits paid on his or her behalf out of the Recovery made from the Third Party or insurer.

Amount subject to Subrogation or Refund. The Participant and his or her dependents agree to recognize the Plan's right to Subrogation and reimbursement. These rights provide the Plan with a 100%, first dollar priority over any and all Recoveries and funds paid by a Third Party to a Participant and his or her dependents relative to the Injury or Sickness, including a priority over any claim for non-medical or dental charges, attorney fees, or other costs and expenses. Accepting benefits under this Plan for those incurred medical or dental expenses automatically assigns to the Plan any and all rights the Participant and his or her dependents may have to recover payments from any responsible third party. Further, accepting benefits under this Plan for those incurred medical or dental expenses automatically assigns to the Plan the Participant and his or her dependents' Third Party Claims.

Notwithstanding its priority to funds, the Plan's Subrogation and Refund rights, as well as the rights assigned to it, are limited to the extent to which the Plan has made, or will make, payments for medical or dental charges as well as any costs and fees associated with the enforcement of its rights under the Plan. The Plan reserves the right to be reimbursed for its court costs and attorneys' fees if the Plan needs to file suit in order to recover payment for medical or dental expenses from the Participant and his or her dependents. Also, the Plan's right to Subrogation still applies if the Recovery received by the Participant and his or her dependents is less than the claimed damage, and, as a result, the claimant is not made whole.

When a right of Recovery exists, the Participant and his or her dependents will execute and deliver all required instruments and papers as well as doing whatever else is needed to secure the Plan's right of Subrogation as a condition to having the Plan make payments. In addition, the Participant and his or her dependents will do nothing to prejudice the right of the Plan to Subrogate.

Conditions Precedent to Coverage. The Plan shall have no obligation whatsoever to pay medical or dental benefits to a Participant and his or her dependents if a Participant and his or her dependents refuses to cooperate with the Plan's reimbursement and Subrogation rights or refuses to execute and deliver such papers as the Plan may require in furtherance of its reimbursement and Subrogation rights. Further, in the event the Participant and his or her dependents is a minor, the Plan shall have no obligation to pay any medical or dental benefits incurred on account of Injury or Sickness caused by a responsible Third Party until after the Participant and his or her dependents or his authorized legal representative obtains valid court recognition and approval of the Plan's 100%, first dollar reimbursement and Subrogation rights on all Recoveries, as well as approval for the execution of any papers necessary for the enforcement thereof, as described herein.

"Recover," "Recovered," "Recovery" or "Recoveries" means all monies paid to the Participant and his or her dependents by way of judgment, settlement, or otherwise to compensate for all losses caused by the Injury or Sickness, whether or not said losses reflect medical or dental charges covered by the Plan. "Recoveries" further includes, but is not limited to, recoveries for medical or dental expenses, attorneys' fees, costs and expenses, pain and suffering, loss of consortium, wrongful death, lost wages and any other recovery of any form of damages or compensation whatsoever.

"Refund" means repayment to the Plan for medical or dental benefits that it has paid toward care and treatment of the Injury or Sickness.

"Subrogation" means the Plan's right to pursue and place a lien upon the Participant and his or her dependents' claims for medical or dental charges against the other person.

"Third Party" means any Third Party including another person or a business entity.

Recovery from another plan under which the Participant and his or her dependents is covered. This right of Refund also applies when a Participant and his or her dependents recovers under an uninsured or underinsured motorist plan (which will be treated as Third

Party coverage when reimbursement or Subrogation is in order), homeowner's plan, renter's plan, medical malpractice plan or any liability plan.

Rights of Plan Administrator. The Plan Administrator has a right to request reports on and approve of all settlements.

## **ARTICLE VI AMENDMENT OR TERMINATION OF PLAN**

### **6.1 Amendment**

The Employer, at any time or from time to time, may amend any or all of the provisions of the Plan without the consent of any Employee or Participant.

### **6.2 Termination**

The Employer is establishing this Plan with the intent that it will be maintained for an indefinite period of time. Notwithstanding the foregoing, the Employer reserves the right to terminate the Plan, in whole or in part, at any time. In the event the Plan is terminated, no further reimbursements shall be made.

## **ARTICLE VII MISCELLANEOUS**

### **7.1 Plan Interpretation**

All provisions of this Plan shall be interpreted and applied in a uniform, nondiscriminatory manner. This Plan shall be read in its entirety and not severed except as provided in Section 7.11.

### **7.2 Gender and Number**

Wherever any words are used herein in the masculine, feminine or neuter gender, they shall be construed as though they were also used in another gender in all cases where they would so apply, and whenever any words are used herein in the singular or plural form, they shall be construed as though they were also used in the other form in all cases where they would so apply.

### **7.3 Written Document**

This Plan, in conjunction with any separate written document which may be required by law, is intended to satisfy the written Plan requirement of Code Section 105 and any Treasury regulations thereunder.

### **7.4 Exclusive Benefit**

This Plan shall be maintained for the exclusive benefit of the Employees who participate in the Plan.

### **7.5 Participant's Rights**

This Plan shall not be deemed to constitute an employment contract between the Employer and any Participant or to be a consideration or an inducement for the employment of any Participant or Employee. Nothing contained in this Plan shall be deemed to give any Participant or Employee the right to be retained in the service of the

Employer or to interfere with the right of the Employer to discharge any Participant or Employee at any time regardless of the effect which such discharge shall have upon him as a Participant of this Plan.

#### **7.6 Action by the Employer**

Whenever the Employer under the terms of the Plan is permitted or required to do or perform any act or matter or thing, it shall be done and performed by a person duly authorized by its legally constituted authority.

#### **7.7 No Guarantee of Tax Consequences**

Neither the Administrator nor the Employer makes any commitment or guarantee that any amounts paid to or for the benefit of a Participant under the Plan will be excludable from the Participant's gross income for federal or state income tax purposes, or that any other federal or state tax treatment will apply to or be available to any Participant. It shall be the obligation of each Participant to determine whether each payment under the Plan is excludable from the Participant's gross income for federal and state income tax purposes, and to notify the Employer if the Participant has reason to believe that any such payment is not so excludable. Notwithstanding the foregoing, the rights of Participants under this Plan shall be legally enforceable.

#### **7.8 Indemnification of Employer by Participants**

If any Participant receives one or more payments or reimbursements under the Plan that are not for a permitted Medical Expense such Participant shall indemnify and reimburse the Employer for any liability it may incur for failure to withhold federal or state income tax or Social Security tax from such payments or reimbursements. However, such indemnification and reimbursement shall not exceed the amount of additional federal and state income tax (plus any penalties) that the Participant would have owed if the payments or reimbursements had been made to the Participant as regular cash compensation, plus the Participant's share of any Social Security tax that would have been paid on such compensation, less any such additional income and Social Security tax actually paid by the Participant.

#### **7.9 Funding**

Unless otherwise required by law, amounts made available by the Employer need not be placed in trust, but may instead be considered general assets of the Employer. Furthermore, and unless otherwise required by law, nothing herein shall be construed to require the Employer or the Administrator to maintain any fund or segregate any amount for the benefit of any Participant, and no Participant or other person shall have any claim against, right to, or security or other interest in, any fund, account or asset of the Employer from which any payment under the Plan may be made.

#### **7.10 Governing Law**

This Plan and Trust shall be construed and enforced according to the Code, ERISA, and the laws of the state or commonwealth in which the Employer's principal office is located (unless otherwise designated in the Adoption Agreement), other than its laws respecting choice of law, to the extent not pre-empted by ERISA.

### **7.11 Severability**

If any provision of the Plan is held invalid or unenforceable, its invalidity or unenforceability shall not affect any other provisions of the Plan, and the Plan shall be construed and enforced as if such provision had not been included herein.

### **7.12 Headings**

The headings and subheadings of this Plan have been inserted for convenience of reference and are to be ignored in any construction of the provisions hereof.

### **7.13 Continuation of Coverage**

Notwithstanding anything in the Plan to the contrary, in the event any benefit under this Plan subject to the continuation coverage requirement of Code Section 4980B becomes unavailable, each qualified beneficiary (as defined in Code Section 4980B) will be entitled to continuation coverage as prescribed in Code Section 4980B. This Section shall only apply if the Employer employs at least twenty (20) employees on more than 50% of its typical business days in the previous calendar year.

### **7.14 Family and Medical Leave Act**

Notwithstanding anything in the Plan to the contrary, in the event any benefit under this Plan becomes subject to the requirements of the Family and Medical Leave Act and regulations thereunder, this Plan shall be operated in accordance with Regulation 1.125-3.

### **7.15 Health Insurance Portability and Accountability Act**

Notwithstanding anything in this Plan to the contrary, this Plan shall be operated in accordance with HIPAA and regulations thereunder.

### **7.16 Uniformed Services Employment and Reemployment Rights Act**

Notwithstanding any provision of this Plan to the contrary, contributions, benefits and service credit with respect to qualified military service shall be provided in accordance with USERRA and the regulations thereunder.

### **7.17 HIPAA Privacy Standards**

(a) If this Plan is subject to the Standards for Privacy of Individually Identifiable Health Information (45 CFR Part 164, the "Privacy Standards"), then this Section shall apply.

(b) The Plan shall not disclose Protected Health Information to any member of Employer's workforce unless each of the conditions set out in this Section are met. "Protected Health Information" shall have the same definition as set forth in the Privacy Standards but generally shall mean individually identifiable information about the past, present or future physical or mental health or condition of an individual, including information about treatment or payment for treatment.

(c) Protected Health Information disclosed to members of Employer's workforce shall be used or disclosed by them only for purposes of Plan administrative functions. The Plan's administrative functions shall include all Plan payment functions and health care operations. The terms "payment" and "health care operations" shall have the same definitions as set out in the Privacy Standards, but the term "payment" generally shall mean activities taken to determine or fulfill Plan responsibilities with respect to eligibility, coverage, provision of benefits, or reimbursement for health care.

(d) The Plan shall disclose Protected Health Information only to members of the Employer's workforce who are authorized to receive such Protected Health Information,

and only to the extent and in the minimum amount necessary for that person to perform his or her duties with respect to the Plan. "Members of the Employer's workforce" shall refer to all employees and other persons under the control of the Employer. The Employer shall keep an updated list of those authorized to receive Protected Health Information.

**(1)** An authorized member of the Employer's workforce who receives Protected Health Information shall use or disclose the Protected Health Information only to the extent necessary to perform his or her duties with respect to the Plan.

**(2)** In the event that any member of the Employer's workforce uses or discloses Protected Health Information other than as permitted by this Section and the Privacy Standards, the incident shall be reported to the Plan's privacy officer. The privacy officer shall take appropriate action, including:

**(i)** investigation of the incident to determine whether the breach occurred inadvertently, through negligence or deliberately; whether there is a pattern of breaches; and the degree of harm caused by the breach;

**(ii)** appropriate sanctions against the persons causing the breach which, depending upon the nature of the breach, may include oral or written reprimand, additional training, or termination of employment;

**(iii)** mitigation of any harm caused by the breach, to the extent practicable; and,

**(iv)** documentation of the incident and all actions taken to resolve the issue and mitigate any damages.

**(e)** The Employer must provide certification to the Plan that it agrees to:

**(1)** Not use or further disclose the information other than as permitted or required by the Plan documents or as required by law;

**(2)** Ensure that any agent or subcontractor, to whom it provides Protected Health Information received from the Plan, agrees to the same restrictions and conditions that apply to the Employer with respect to such information;

**(3)** Not use or disclose Protected Health Information for employment-related actions and decisions or in connection with any other benefit or employee benefit plan of the Employer;

**(4)** Report to the Plan any use or disclosure of the Protected Health Information of which it becomes aware that is inconsistent with the uses or disclosures permitted by this Section, or required by law;

**(5)** Make available Protected Health Information to individual Plan members in accordance with Section 164.524 of the Privacy Standards;

**(6)** Make available Protected Health Information for amendment by individual Plan members and incorporate any amendments to Protected Health Information in accordance with Section 164.526 of the Privacy Standards;

**(7)** Make available the Protected Health Information required to provide an accounting of disclosures to individual Plan members in accordance with Section 164.528 of the Privacy Standards;

**(8)** Make its internal practices, books and records relating to the use and disclosure of Protected Health Information received from the Plan available to the Department of Health and Human Services for purposes of determining compliance by the Plan with the Privacy Standards;

**(9)** If feasible, return or destroy all Protected Health Information received from the Plan that the Employer still maintains in any form, and retain no copies of such information when no longer needed for the purpose for which disclosure was made,



except that, if such return or destruction is not feasible, limit further uses and disclosures to those purposes that make the return or destruction of the information infeasible; and

(10) Ensure the adequate separation between the Plan and members of the Employer's workforce, as required by Section 164.504(f)(2)(iii) of the Privacy Standards and set out in (d) above.

### **7.18 HIPAA Electronic Security Standards**

If this Plan is subject to the Security Standards for the Protection of Electronic Protected Health Information (45 CFR Part 164.300 et. seq., the "Security Standards"), then this Section shall apply as follows:

(a) The Employer agrees to implement reasonable and appropriate administrative, physical and technical safeguards to protect the confidentiality, integrity and availability of Electronic Protected Health Information that the Employer creates, maintains or transmits on behalf of the Plan. "Electronic Protected Health Information" shall have the same definition as set out in the Security Standards, but generally shall mean Protected Health Information that is transmitted by or maintained in electronic media.

(b) The Employer shall ensure that any agent or subcontractor to whom it provides Electronic Protected Health Information shall agree, in writing, to implement reasonable and appropriate security measures to protect the Electronic Protected Health Information.

(c) The Employer shall ensure that reasonable and appropriate security measures are implemented to comply with the conditions and requirements set forth in Section 7.17.

(d) The Plan shall not disclose Protected Health Information to any member of Employer's workforce unless each of the conditions set out in this Section are met. "Protected Health Information" shall have the same definition as set forth in the Privacy Standards but generally shall mean individually identifiable information about the past, present or future physical or mental health or condition of an individual, including information about treatment or payment for treatment.

(e) Protected Health Information disclosed to members of Employer's workforce shall be used or disclosed by them only for purposes of Plan administrative functions. The Plan's administrative functions shall include all Plan payment functions and health care operations. The terms "payment" and "health care operations" shall have the same definitions as set out in the Privacy Standards, but the term "payment" generally shall mean activities taken to determine or fulfill Plan responsibilities with respect to eligibility, coverage, provision of benefits, or reimbursement for health care.

(f) The Plan shall disclose Protected Health Information only to members of the Employer's workforce, who are authorized to receive such Protected Health Information, and only to the extent and in the minimum amount necessary for that person to perform his or her duties with respect to the Plan. "Members of the Employer's workforce" shall refer to all employees and other persons under the control of the Employer. The Employer shall keep an updated list of those authorized to receive Protected Health Information.

(1) An authorized member of the Employer's workforce who receives Protected Health Information shall use or disclose the Protected Health Information only to the extent necessary to perform his or her duties with respect to the Plan.

(2) In the event that any member of the Employer's workforce uses or discloses Protected Health Information other than as permitted by this Section and the Privacy Standards, the incident shall be reported to the Plan's privacy officer. The privacy officer shall take appropriate action, including:

- (i) investigation of the incident to determine whether the breach occurred inadvertently, through negligence or deliberately; whether there is a pattern of breaches; and the degree of harm caused by the breach;
- (ii) appropriate sanctions against the persons causing the breach which, depending upon the nature of the breach, may include oral or written reprimand, additional training, or termination of employment;
- (iii) mitigation of any harm caused by the breach, to the extent practicable; and,
- (iv) documentation of the incident and all actions taken to resolve the issue and mitigate any damages.

**7.19 Mental Health Parity and Addiction Equity Act**

Notwithstanding anything in the Plan to the contrary, the Plan will comply with the Mental Health Parity and Addiction Equity Act and ERISA Section 712.

**7.20 Genetic Information Nondiscrimination Act (GINA)**

Notwithstanding anything in the Plan to the contrary, the Plan will comply with the Genetic Information Nondiscrimination Act.

**7.21 Women's Health and Cancer Rights Act**

Notwithstanding anything in the Plan to the contrary, the Plan will comply with the Women's Health and Cancer Rights Act of 1998.

**7.22 Newborns' and Mothers' Health Protection Act**

Notwithstanding anything in the Plan to the contrary, the Plan will comply with the Newborns' and Mothers' Health Protection Act.

**CERTIFICATE OF ADOPTING RESOLUTION**

The undersigned principal of The Greenville Central School District (the Employer) hereby certifies that the following resolutions were duly adopted by the board on \_\_\_\_\_, and that such resolutions have not been modified or rescinded as of the date hereof:

RESOLVED, that the Health Reimbursement Arrangement effective July 1, 2013, presented to this meeting is hereby approved and adopted and that the proper officers of the Employer are hereby authorized and directed to execute and deliver to the Administrator of the Plan one or more counterparts of the Plan.

RESOLVED, that the Administrator shall be instructed to take such actions that are deemed necessary and proper in order to implement the Plan, and to set up adequate accounting and administrative procedures to provide benefits under the Plan.

The undersigned further certifies that attached hereto is a true copy of the Health Reimbursement Arrangement and the Summary Plan Description approved and adopted in the foregoing resolutions.

\_\_\_\_\_  
Principal

\_\_\_\_\_  
Date

# HEALTH REIMBURSEMENT ARRANGEMENT

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## SUMMARY PLAN DESCRIPTION

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## INTRODUCTION

We are pleased to establish this Health Reimbursement Arrangement to provide you with additional health coverage benefits. The benefits available under this Plan are outlined in this summary plan description. We will also tell you about other important information concerning the Plan, such as the rules you must satisfy before you become eligible and the laws that protect your rights.

Read this summary plan description carefully so that you understand the provisions of our Plan and the benefits you will receive. You should direct any questions you have to the Administrator. There is a plan document on file, which you may review if you desire. In the event there is a conflict between this summary plan description and the plan document, the plan document will control.

### I

## ELIGIBILITY

### 1. **What Are the Eligibility Requirements for Our Plan?**

Active or Retired Administrative or Non-Affiliated membership will be eligible to join the Plan once you have satisfied the conditions of eligibility for coverage under our Blue Shield of NENY PPO 815 plan.

### 2. **When is My Entry Date?**

You are automatically enrolled in the Plan on the same day that you become covered under the Blue Shield of NENY PPO 815 plan.

### 3. Are There Any Employees Who Are Not Eligible?

Yes. Employees that are not under the Administrative or Non-Affiliated unit or any who are not enrolled in the Blue Shield of NENY PPO 815 plan are not eligible to participate in this Health Reimbursement Arrangement.

## II BENEFITS

### 1. What Benefits Are Available?

The Plan allows you to be reimbursed for certain out-of-pocket medical expenses [i.e., Inpatient Hospital Copay & Outpatient Surgery Copay] which are incurred by you and your covered dependents.

NOTE: in a calendar year,

- **Single policy coverage** under this Plan, each individual will be responsible for paying the first Inpatient Hospital Copay and the first Outpatient Surgery Copay in each calendar year. Reimbursement under this Plan will only be made when a covered individual incurs more than one copay for each of the aforementioned services in a calendar year.
- **Two Person of Family Policy Coverage** under this Plan, each policy will be responsible for paying the first two Inpatient Hospital Copay and the first two Outpatient Surgery Copay in each calendar year. Reimbursement under this Plan will only be made when the policy incurs more than two copays for each of the aforementioned services in a calendar year.

There is no calendar year maximum under this plan. Upon receipt of satisfactory documentation, each covered individual will be reimbursed for each Inpatient Hospital Copay and each Outpatient Surgery Copay they incur when in excess of the copay maximums mentioned above.

These Copays are considered “incurred” when the service is performed, not necessarily when it is paid for. Any amounts reimbursed to you under the Plan may not be claimed as a deduction on your personal income tax return nor reimbursed by other health plan coverage, including our Healthcare Flexible Spending Account (Healthcare FSA).

You may submit requests for reimbursement, along with the required documentation, for eligible Copay expenses incurred by you and/or your covered dependents under the Blue Shield PPO 815 plan. You may be reimbursed for expenses for any child until the end of the calendar year in which the child reaches age 26. A child is a natural child, stepchild, foster child, adopted child, or a child placed with you for adoption

Women's Health and Cancer Rights Act: This Plan, as required by the Women's Health and Cancer Rights Act of 1998, will reimburse up to plan limits for eligible Copay expenses incurred for mastectomy-related services including reconstruction and surgery to achieve



symmetry between the breasts, prostheses, and complications resulting from a mastectomy (including lymphedema). Contact your Plan Administrator for more information.

**2. When Must Expenses Be Incurred?**

You may submit expenses that you incur each "Coverage Period." A new "Coverage Period" begins each calendar year. Expenses under this Plan are treated as being "incurred" when you are provided with the care that gives rise to the expenses, not when you are formally billed or charged, or you pay for the medical care.

**3. When Will I Receive Payments From the Plan?**

During the course of the Coverage Period, you may submit requests for reimbursement of expenses you have incurred. However, you must make your requests for reimbursements no later than 45 days after the end of coverage period [calendar year]. The Administrator will provide you with acceptable forms for submitting these requests for reimbursement. In addition, you must submit to the Administrator proof of the expenses you have incurred and that they have not been paid by any other health plan coverage. If the request qualifies as a benefit or expense that the Plan has agreed to pay, you will receive a reimbursement payment soon thereafter. Remember, reimbursements made from the Plan are generally not subject to federal income tax or withholding. Nor are they subject to Social Security taxes.

**4. Family and Medical Leave Act (FMLA)**

If you take leave under the Family and Medical Leave Act, you may revoke or change your existing elections for health insurance. If your coverage in these benefits terminates, due to your revocation of the benefit while on leave or due to your non-payment of contributions, you will be permitted to reinstate coverage for the remaining part of the Plan Year upon your return.

If you continue your coverage during your unpaid leave, you may pre-pay for the coverage, you may pay for your coverage on an after-tax basis while you are on leave, or you and your Employer may arrange a schedule for you to "catch up" your payments when you return.

**5. Uniformed Services Employment and Reemployment Rights Act (USERRA)**

If you are going into or returning from military service, you may have special rights to health care coverage under your Health Reimbursement Arrangement under the Uniformed Services Employment and Reemployment Rights Act of 1994. These rights can include extended health care coverage. If you may be affected by this law, ask your Administrator for further details.

**6. Newborns' and Mothers' Health Protection Act**

Group health plans generally may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section.

However, Federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under Federal law, require that a provider obtain authorization from the plan or the issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

**7. Qualified Medical Child Support Order**

A medical child support order is a judgment, decree or order (including approval of a property settlement) made under state law that provides for child support or health coverage for the child of a participant. The child becomes an "alternate recipient" and can receive benefits under the health plans of the Employer, if the order is determined to be "qualified." You may obtain, without charge, a copy of the procedures governing the determination of qualified medical child support orders from the Plan Administrator.

**III**

**GENERAL INFORMATION ABOUT OUR PLAN**

This Section contains certain general information which you may need to know about the Plan.

**1. General Plan Information**

Greenville CSD Health Reimbursement Account is the name of the Plan.

Your Employer has assigned Plan Number 501to your Plan.

The provisions of your Plan become effective on the effective date of your coverage under the Blue Shield of NENY PPO 815 plan.

**2. Employer Information**

Your Employer's name, address, and identification number are:

Greenville Central School District  
4976 Route 81  
Greenville NY, 12083

14-6001538

**3. Plan Administrator Information**

The name, address and business telephone number of your Plan's Administrator are:

Greenville Central School District  
4976 Route 81  
Greenville NY, 12083  
(518) 966-5070

The Plan Administrator keeps the records for the Plan and is responsible for the administration of the Plan. The Administrator will also answer any questions you may have about our Plan. The Plan Administrator has the exclusive right to interpret the appropriate plan provisions. Decisions of the Administrator are conclusive and binding. You may contact the Administrator for any further information about the Plan.

**4. Third Party Claims Administrator Information**

The name, address and business telephone number of the Third Party Claims Administrator are:

Benetech Inc  
1 Dodge Street  
Wynantskill, NY 12198  
(518) 283-8500

The Third Party Claims Administrator is responsible for the actual processing of claims on behalf of the Plan Administrator.

**5. Service of Legal Process**

The Employer is the Plan's agent for service of legal process.

**6. Type of Administration**

The Plan is a Health Reimbursement Arrangement [and the administration is provided through a Third Party Claims Administrator]. The Plan is not funded or insured. Benefits are paid from the general assets of the Employer.

**IV  
ADDITIONAL PLAN INFORMATION**

**1. How to Submit a Claim**

When you have a Claim to submit for payment, you must:

- (1) Obtain a claim form from the Plan Administrator.
- (2) Complete the Employee portion of the form.
- (3) Attach copies of all bills from the service provider for which you are requesting reimbursement.

A Claim is defined as any request for a Plan benefit, made by a claimant or by a representative of a claimant that complies with the Plan's reasonable procedure for making benefit Claims. The times listed are maximum times only. A period of time begins at the time the Claim is filed. Decisions will be made within a reasonable period of time appropriate to the circumstances. "Days" means calendar days.

Notification of whether Claim is accepted or denied 30 days

Extension due to matters beyond the control of the Plan	15 days
Insufficient information on the Claim:	
Notification of	15 days
Response by Participant	45 days
Review of Claim denial	60 days

The Plan Administrator will provide written or electronic notification of any Claim denial. The notice will state:

- (1) The specific reason or reasons for the denial.
- (2) Reference to the specific Plan provisions on which the denial was based.
- (3) A description of any additional material or information necessary for the claimant to perfect the Claim and an explanation of why such material or information is necessary.
- (4) A description of the Plan's review procedures and the time limits applicable to such procedures.
- (5) A statement that the claimant is entitled to receive, upon request and free of charge, reasonable access to, and copies of, all documents, records, and other information relevant to the Claim; and
- (6) If the denial was based on an internal rule, guideline, protocol, or other similar criterion, the specific rule, guideline, protocol, or criterion will be provided free of charge. If this is not practical, a statement will be included that such a rule, guideline, protocol, or criterion was relied upon in making the denial and a copy will be provided free of charge to the claimant upon request.

When you receive a denial, you will have 180 days following receipt of the notification in which to appeal the decision. You may submit written comments, documents, records, and other information relating to the Claim. If you request, you will be provided, free of charge, reasonable access to, and copies of, all documents, records, and other information relevant to the Claim.

The period of time within which a denial on review is required to be made will begin at the time an appeal is filed in accordance with the procedures of the Plan. This timing is without regard to whether all the necessary information accompanies the filing.

A document, record, or other information shall be considered relevant to a Claim if it:

- (1) was relied upon in making the Claim determination;
- (2) was submitted, considered, or generated in the course of making the Claim determination, without regard to whether it was relied upon in making the Claim determination;
- (3) demonstrated compliance with the administrative processes and safeguards designed to ensure and to verify that Claim determinations are made in accordance with Plan documents and Plan provisions have been applied consistently with respect to all claimants;

- (4) or constituted a statement of policy or guidance with respect to the Plan concerning the denied Claim.

The review will take into account all comments, documents, records, and other information submitted by the claimant relating to the Claim, without regard to whether such information was submitted or considered in the initial Claim determination. The review will not afford deference to the initial denial and will be conducted by a fiduciary of the Plan who is neither the individual who made the adverse determination nor a subordinate of that individual.

## V

### **CONTINUATION COVERAGE RIGHTS UNDER COBRA**

Under federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), certain employees and their families covered under this Arrangement will be entitled to the opportunity to elect a temporary extension of health coverage (called “COBRA continuation coverage”) where coverage under the Arrangement would otherwise end. This notice is intended to inform Participants and beneficiaries, in summary fashion, of their rights and obligations under the continuation coverage provisions of COBRA, as amended and reflected in final and proposed regulations published by the Department of the Treasury. This notice is intended to reflect the law and does not grant or take away any rights under the law.

The Plan Administrator or its designee is responsible for administering COBRA continuation coverage. Complete instructions on COBRA, as well as election forms and other information, will be provided by the Plan Administrator or its designee to Participants who become Qualified Beneficiaries under COBRA. The Arrangement itself can provide group health benefits and may also be used to provide health benefits through insurance. Whenever “Arrangement” is used in this section, it means any of the health benefits under this Plan.

#### **1. What is COBRA Continuation Coverage?**

COBRA continuation coverage is the temporary extension of group health plan coverage that must be offered to certain Participants and their eligible family members (called “Qualified Beneficiaries”) at group rates. The right to COBRA continuation coverage is triggered by the occurrence of a life event that results in the loss of coverage under the terms of the Arrangement (the “Qualifying Event”). The coverage must be identical to the coverage that the Qualified Beneficiary had immediately before the Qualifying Event, or if the coverage has been changed, the coverage must be identical to the coverage provided to similarly situated active employees who have not experienced a Qualifying Event).

## **2. Who Can Become a Qualified Beneficiary?**

In general, a Qualified Beneficiary can be:

- (1) Any individual who, on the day before a Qualifying Event, is covered under the Arrangement by virtue of being on that day either a covered Employee, the Spouse of a covered Employee, or a Dependent child of a covered Employee. If, however, an individual who otherwise qualifies as a Qualified Beneficiary is denied or not offered coverage under the Arrangement under circumstances in which the denial or failure to offer constitutes a violation of applicable law, then the individual will be considered to have had the coverage and will be considered a Qualified Beneficiary if that individual experiences a Qualifying Event.
- (2) Any child who is born to or placed for adoption with a covered Employee during a period of COBRA continuation coverage, and any individual who is covered by the Arrangement as an alternate recipient under a qualified medical support order. If, however, an individual who otherwise qualifies as a Qualified Beneficiary is denied or not offered coverage under the Arrangement under circumstances in which the denial or failure to offer constitutes a violation of applicable law, then the individual will be considered to have had the coverage and will be considered a Qualified Beneficiary if that individual experiences a Qualifying Event.

The term “covered Employee” includes any individual who is provided coverage under the Arrangement due to his or her performance of services for the employer sponsoring the Arrangement. However, this provision does not establish eligibility of these individuals. Eligibility for Plan coverage shall be determined in accordance with Plan Eligibility provisions.

An individual is not a Qualified Beneficiary if the individual’s status as a covered Employee is attributable to a period in which the individual was a nonresident alien who received from the individual’s Employer no earned income that constituted income from sources within the United States. If, on account of the preceding reason, an individual is not a Qualified Beneficiary, then a Spouse or Dependent child of the individual will also not be considered a Qualified Beneficiary by virtue of the relationship to the individual. A domestic partner is not a Qualified Beneficiary.

Each Qualified Beneficiary (including a child who is born to or placed for adoption with a covered Employee during a period of COBRA continuation coverage) must be offered the opportunity to make an independent election to receive COBRA continuation coverage.

## **3. What is a Qualifying Event?**

A Qualifying Event is any of the following if the Arrangement provided that the participant would lose coverage (i.e., cease to be covered under the same terms and conditions as in effect immediately before the Qualifying Event) in the absence of COBRA continuation coverage:

- (1) The death of a covered Employee.
- (2) The termination (other than by reason of the Employee’s gross misconduct), or reduction of hours, of a covered Employee’s employment.

- (3) The divorce or legal separation of a covered Employee from the Employee's Spouse. If the Employee reduces or eliminates the Employee's Spouse's Plan coverage in anticipation of a divorce or legal separation, and a divorce or legal separation later occurs, then the divorce or legal separation may be considered a Qualifying Event even though the Spouse's coverage was reduced or eliminated before the divorce or legal separation.
- (4) A covered Employee's enrollment in any part of the Medicare program.
- (5) A Dependent child's ceasing to satisfy the Arrangement's requirements for a Dependent child (for example, attainment of the maximum age for dependency under the Arrangement).

If the Qualifying Event causes the covered Employee, or the covered Spouse or a Dependent child of the covered Employee, to cease to be covered under the Arrangement under the same terms and conditions as in effect immediately before the Qualifying Event (or in the case of the bankruptcy of the Employer, any substantial elimination of coverage under the Arrangement occurring within 12 months before or after the date the bankruptcy proceeding commences), the persons losing such coverage become Qualified Beneficiaries under COBRA if all the other conditions of COBRA are also met. For example, any increase in contribution that must be paid by a covered Employee, or the Spouse, or a Dependent child of the covered Employee, for coverage under the Arrangement that results from the occurrence of one of the events listed above is a loss of coverage.

The taking of leave under the Family and Medical Leave Act of 1993 ("FMLA") does not constitute a Qualifying Event. A Qualifying Event will occur, however, if an Employee does not return to employment at the end of the FMLA leave and all other COBRA continuation coverage conditions are present. If a Qualifying Event occurs, it occurs on the last day of FMLA leave and the applicable maximum coverage period is measured from this date (unless coverage is lost at a later date and the Arrangement provides for the extension of the required periods, in which case the maximum coverage date is measured from the date when the coverage is lost.) Note that the covered Employee and family members will be entitled to COBRA continuation coverage even if they failed to pay the employee portion of premiums for coverage under the Arrangement during the FMLA leave.

**4. What Factors Should Be Considered When Determining to Elect COBRA Continuation Coverage?**

You should take into account that a failure to continue your group health coverage will affect your rights under federal law. First, you can lose the right to avoid having pre-existing condition exclusions applied by other group health plans if there is more than a 63-day gap in health coverage and election of COBRA continuation coverage may help you avoid such a gap. Second, if you do not elect COBRA continuation coverage and pay the appropriate premiums for the maximum time available to you, you will lose the right to convert to an individual health insurance policy, which does not impose such pre-existing condition exclusions. Finally, you should take into account that you have special enrollment rights under federal law (HIPAA). You have the right to request special enrollment in another group health plan for which you are otherwise eligible (such as a plan sponsored by your Spouse's employer) within 30 days after Plan coverage ends due to a Qualifying Event listed above. You will also have the same special right at the end of COBRA continuation coverage if you get COBRA continuation coverage for the maximum time available to you.

**5. What is the Procedure for Obtaining COBRA Continuation Coverage?**

The Arrangement has conditioned the availability of COBRA continuation coverage upon the timely election of such coverage. An election is timely if it is made during the election period.

**6. What is the Election Period and How Long Must It Last?**

The election period is the time period within which the Qualified Beneficiary must elect COBRA continuation coverage under the Arrangement. The election period must begin no later than the date the Qualified Beneficiary would lose coverage on account of the Qualifying Event and must not end before the date that is 60 days after the later of the date the Qualified Beneficiary would lose coverage on account of the Qualifying Event or the date notice is provided to the Qualified Beneficiary of her or his right to elect COBRA continuation coverage.

Note: If a covered employee who has been terminated or experienced a reduction of hours qualifies for a trade readjustment allowance or alternative trade adjustment assistance under a federal law called the Trade Act of 2002, and the employee and his or her covered dependents have not elected COBRA coverage within the normal election period, a second opportunity to elect COBRA coverage will be made available for themselves and certain family members, but only within a limited period of 60 days or less and only during the six months immediately after their group health plan coverage ended. Any person who qualifies or thinks that he or she and/or his or her family members may qualify for assistance under this special provision should contact the Plan Administrator or its designee for further information.



The Trade Act of 2002 also created a tax credit for certain TAA-eligible individuals and for certain retired employees who have receiving pension payments from the Pension Benefit Guaranty Corporation (PBGC) (eligible individuals). Under the new tax provisions, eligible individuals can either take a tax credit or get advance payment of a percentage of the premiums paid for qualified health insurance, including continuation coverage. If you have questions about these new tax provisions, you may call the Health Coverage Tax Credit Consumer Contact Center toll-free at 1-866-628-4282. TTD/TTY callers may call toll-free at 1-866-626-4282. More information about the Trade Act is also available at [www.doleta.gov/tradeact/2002act\\_index.asp](http://www.doleta.gov/tradeact/2002act_index.asp).

**7. Is a Covered Employee or Qualified Beneficiary Responsible for Informing the Plan Administrator of the Occurrence of a Qualifying Event?**

The Arrangement will offer COBRA continuation coverage to Qualified Beneficiaries only after the Plan Administrator or its designee has been timely notified that a Qualifying Event has occurred. The Employer will notify the Plan Administrator or its designee of the Qualifying Event within 30 days following the date coverage ends when the Qualifying Event is:

- (1) the end of employment or reduction of hours of employment,
- (2) death of the employee,
- (3) commencement of a proceeding in bankruptcy with respect to the Employer, or
- (4) enrollment of the employee in any part of Medicare,

**IMPORTANT:**

**For the other Qualifying Events (divorce or legal separation of the employee and spouse or a dependent child's losing eligibility for coverage as a dependent child), you or someone on your behalf must notify the Plan Administrator or its designee in writing within 60 days after the Qualifying Event occurs, using the procedures specified below. If these procedures are not followed or if the notice is not provided in writing to the Plan Administrator or its designee during the 60-day notice period, any spouse or dependent child who loses coverage will not be offered the option to elect continuation coverage. You must send this notice to the Plan Administrator or its designee.**

### **NOTICE PROCEDURES:**

Any notice that you provide must be ***in writing***. Oral notice, including notice by telephone, is not acceptable. You must mail, fax or hand-deliver your notice to the person, department or firm listed below, at the following address:

*[Name and address of Plan Administrator or other person administering COBRA claims]*

If mailed, your notice must be postmarked no later than the last day of the required notice period. Any notice you provide must state:

- the **name of the plan or plans** under which you lost or are losing coverage,
- the **name and address of the employee** covered under the plan,
- the **name(s) and address(es) of the Qualified Beneficiary(ies)**, and
- the **Qualifying Event** and the **date** it happened.

If the Qualifying Event is a **divorce or legal separation**, your notice must include **a copy of the divorce decree or the legal separation agreement**.

Be aware that there are other notice requirements in other contexts, for example, in order to qualify for a disability extension.

Once the Plan Administrator or its designee receives ***timely notice*** that a Qualifying Event has occurred, COBRA continuation coverage will be offered to each of the qualified beneficiaries. Each Qualified Beneficiary will have an independent right to elect COBRA continuation coverage. Covered employees may elect COBRA continuation coverage for their spouses, and parents may elect COBRA continuation coverage on behalf of their children. For each Qualified Beneficiary who elects COBRA continuation coverage, COBRA continuation coverage will begin on the date that coverage would otherwise have been lost (if under your coverage the COBRA period begins on the date of the Qualifying Event, even though coverage actually ends later (e.g., at the end of the month) substitute the appropriate language, e.g. "on the date of the Qualifying Event"). If you or your spouse or dependent children do not elect continuation coverage within the 60-day election period described above, the right to elect continuation coverage will be lost.

#### **8. Is a Waiver Before the End of the Election Period Effective to End a Qualified Beneficiary's Election Rights?**

If, during the election period, a Qualified Beneficiary waives COBRA continuation coverage, the waiver can be revoked at any time before the end of the election period. Revocation of the waiver is an election of COBRA continuation coverage. However, if a waiver is later revoked, coverage need not be provided retroactively (that is, from the date of the loss of coverage until the waiver is revoked). Waivers and revocations of waivers are considered made on the date they are sent to the Plan Administrator or its designee, as applicable.

**9. Is COBRA Coverage Available If a Qualified Beneficiary Has Other Group Health Plan Coverage or Medicare?**

Qualified Beneficiaries who are entitled to elect COBRA continuation coverage may do so even if they are covered under another group health plan or are entitled to Medicare benefits on or before the date on which COBRA is elected. However, a Qualified Beneficiary's COBRA coverage will terminate automatically if, after electing COBRA, he or she becomes entitled to Medicare or becomes covered under other group health plan coverage (but only after any applicable preexisting condition exclusions of that other plan have been exhausted or satisfied).

**10. When May a Qualified Beneficiary's COBRA Continuation Coverage Be Terminated?**

During the election period, a Qualified Beneficiary may waive COBRA continuation coverage. Except for an interruption of coverage in connection with a waiver, COBRA continuation coverage that has been elected for a Qualified Beneficiary must extend for at least the period beginning on the date of the Qualifying Event and ending not before the earliest of the following dates:

- (1) The last day of the applicable maximum coverage period.
- (2) The first day for which Timely Payment is not made to the Arrangement with respect to the Qualified Beneficiary.
- (3) The date upon which the Employer ceases to provide any group health plan (including a successor plan) to any employee.
- (4) The date, after the date of the election, that the Qualified Beneficiary first becomes covered under any other Plan that does not contain any exclusion or limitation with respect to any pre-existing condition, other than such an exclusion or limitation that does not apply to, or is satisfied by, the Qualified Beneficiary.
- (5) The date, after the date of the election that the Qualified Beneficiary first enrolls in the Medicare program (either part A or part B, whichever occurs earlier).
- (6) In the case of a Qualified Beneficiary entitled to a disability extension, the later of:
  - (a) (i) 29 months after the date of the Qualifying Event, or (ii) the first day of the month that is more than 30 days after the date of a final determination under Title II or XVI of the Social Security Act that the disabled Qualified Beneficiary whose disability resulted in the Qualified Beneficiary's entitlement to the disability extension is no longer disabled, whichever is earlier; or
  - (b) the end of the maximum coverage period that applies to the Qualified Beneficiary without regard to the disability extension.

The Arrangement can terminate for cause the coverage of a Qualified Beneficiary on the same basis that the Arrangement terminates for cause the coverage of similarly situated non-COBRA beneficiaries, for example, for the submission of a fraudulent claim.

In the case of an individual who is not a Qualified Beneficiary and who is receiving coverage under the Arrangement solely because of the individual's relationship to a Qualified Beneficiary, if the Arrangement's obligation to make COBRA continuation

coverage available to the Qualified Beneficiary ceases, the Arrangement is not obligated to make coverage available to the individual who is not a Qualified Beneficiary.

**11. What Are the Maximum Coverage Periods for COBRA Continuation Coverage?**

The maximum coverage periods are based on the type of the Qualifying Event and the status of the Qualified Beneficiary, as shown below.

- (1) In the case of a Qualifying Event that is a termination of employment or reduction of hours of employment, the maximum coverage period ends 18 months after the Qualifying Event if there is not a disability extension and 29 months after the Qualifying Event if there is a disability extension.
- (2) In the case of a covered Employee's enrollment in the Medicare program before experiencing a Qualifying Event that is a termination of employment or reduction of hours of employment, the maximum coverage period for Qualified Beneficiaries other than the covered Employee ends on the later of:
  - (a) 36 months after the date the covered Employee becomes enrolled in the Medicare program; or
  - (b) 18 months (or 29 months, if there is a disability extension) after the date of the covered Employee's termination of employment or reduction of hours of employment.
- (3) In the case of a Qualified Beneficiary who is a child born to or placed for adoption with a covered Employee during a period of COBRA continuation coverage, the maximum coverage period is the maximum coverage period applicable to the Qualifying Event giving rise to the period of COBRA continuation coverage during which the child was born or placed for adoption.
- (4) In the case of any other Qualifying Event than that described above, the maximum coverage period ends 36 months after the Qualifying Event.

**12. Under What Circumstances Can the Maximum Coverage Period Be Expanded?**

If a Qualifying Event that gives rise to an 18-month or 29-month maximum coverage period is followed, within that 18- or 29-month period, by a second Qualifying Event that gives rise to a 36-months maximum coverage period, the original period is expanded to 36-months, but only for individuals who are Qualified Beneficiaries at the time of and with respect to both Qualifying Events. In no circumstance can the COBRA maximum coverage period be expanded to more than 36-months after the date of the first Qualifying Event. The Plan Administrator must be notified of the second qualifying event within 60 days of the second qualifying event. This notice must be sent to the Plan Administrator or its designee and in accordance with the procedures above.

**13. How Does a Qualified Beneficiary Become Entitled to a Disability Extension?**

A disability extension will be granted if an individual (whether or not the covered Employee) who is a Qualified Beneficiary in connection with the Qualifying Event that is a termination or reduction of hours of a covered Employee's employment, is determined under Title II or XVI of the Social Security Act to have been disabled at any time during the first 60 days of COBRA continuation coverage. To qualify for the disability extension, the Qualified Beneficiary must also provide the Plan Administrator with notice of the disability determination on a date that is both within 60 days after the date of the determination and before the end of the original 18-month maximum coverage. This notice must be sent to the Plan Administrator or its designee and in accordance with the procedures above.

**14. Does the Arrangement Require Payment for COBRA Continuation Coverage?**

For any period of COBRA continuation coverage under the Arrangement, Qualified Beneficiaries who elect COBRA continuation coverage may be required to pay up to 102% of the applicable premium and up to 150% of the applicable premium for any expanded period of COBRA continuation coverage covering a disabled Qualified Beneficiary due to a disability extension. Your Plan Administrator will inform you of any costs. The Arrangement will terminate a Qualified Beneficiary's COBRA continuation coverage as of the first day of any period for which timely payment is not made.

**15. Must the Arrangement Allow Payment for COBRA Continuation Coverage to Be Made in Monthly Installments?**

Yes. The health coverage is also permitted to allow for payment at other intervals.

**16. What is Timely Payment for Payment for COBRA Continuation Coverage?**

Timely Payment means a payment made no later than 30 days after the first day of the coverage period. Payment that is made to the Arrangement by a later date is also considered Timely Payment if either under the terms of the Arrangement, covered employees or Qualified Beneficiaries are allowed until that later date to pay for their coverage for the period or under the terms of an arrangement between the Employer and the entity that provides benefits on the Employer's behalf, the Employer is allowed until that later date to pay for coverage of similarly situated non-COBRA beneficiaries for the period.

Notwithstanding the above paragraph, the Arrangement does not require payment for any period of COBRA continuation coverage for a Qualified Beneficiary earlier than 45 days after the date on which the election of COBRA continuation coverage is made for that Qualified Beneficiary. Payment is considered made on the date on which it is postmarked to those providing coverage.

If Timely Payment is made to the Arrangement in an amount that is not significantly less than the amount the Arrangement requires to be paid for a period of coverage, then the amount paid will be deemed to satisfy the Arrangement's requirement for the amount to be paid, unless the Arrangement notifies the Qualified Beneficiary of the amount of the deficiency and grants a reasonable period of time for payment of the deficiency to be

made. A “reasonable period of time” is 30 days after the notice is provided. A shortfall in a Timely Payment is not significant if it is no greater than the lesser of \$50 or 10% of the required amount.

17. **Must a Qualified Beneficiary Be Given the Right to Enroll in a Conversion Health Plan at the End of the Maximum Coverage Period for COBRA Continuation Coverage?**

If a Qualified Beneficiary’s COBRA continuation coverage under a group health plan ends as a result of the expiration of the applicable maximum coverage period, the Arrangement will, during the 180 day period that ends on that expiration date, provide the Qualified Beneficiary with the option of enrolling under a conversion health plan if such an option is otherwise generally available to similarly situated non-COBRA beneficiaries under the Arrangement. If such a conversion option is not otherwise generally available, it need not be made available to Qualified Beneficiaries.

**IF YOU HAVE QUESTIONS**

If you have questions about your COBRA continuation coverage, you should contact the Plan Administrator or its designee. For more information about your rights under COBRA, the Health Insurance Portability and Accountability Act (HIPAA), and other laws affecting group health plans, contact the nearest Regional or District Office of the U.S. Department of Labor’s Employee Benefits Security Administration (EBSA). Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA’s Web site at [www.dol.gov/ebsa](http://www.dol.gov/ebsa).

**KEEP YOUR PLAN ADMINISTRATOR INFORMED OF ADDRESS CHANGES**

In order to protect your family’s rights, you should keep the Plan Administrator informed of any changes in the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator or its designee.

JAN 31 2014


District Office



**GREENVILLE**  
CENTRAL SCHOOL DISTRICT

## MEMORANDUM

TO: Cheryl A. Dudley/Superintendent of Schools

FROM: Tammy J. Sutherland/Assistant Superintendent for Business 

RE: Tuition Rates  
2012-2013 Actual  
2013-2014 Estimated

DATE: January 30, 2014

The nonresident tuition rates below are estimated rates for billing during the 2013-14 school year. When the actual 2013-14 non-resident tuition rates are available in the 2014-15 school year, refunds or additional charges are to be made in accordance with §174.2 of the Regulations of the Commissioner of Education.

Listed below are both 2012-13 actual rates and the 2013-14 estimated rates.

	2012-2013 Actual Rates	2013-2014 Estimated Rates
Regular Education:		
Grades K – 6:	\$ 7,575	\$ 9,448
Grades 7 – 12:	\$ 8,366	\$ 9,038
Special Education:		
Grades K – 6:	\$ 28,626	\$31,494
Grades 7 – 12:	\$ 29,417	\$31,084

**Note:** These rates are for foster students and/or students that are enrolled in Greenville Central School District under BOE policy. See attached actual 2012/2013 and estimated 2013/2014 non-resident tuition report.

BOARD OF EDUCATION  
February 13, 2014

District Name: GREENVILLE CSD  
 District Code: 190701  
 Data as of: 01/24/2014 12:00 AM

State Aid: 2013-2014  
 Today's Date: 01/24/2014

ESTIMATED NONRESIDENT TUITION REPORT (NRT EST)  
 FOR 2013-14 SCHOOL YEAR ATTENDANCE

Glossary

The nonresident tuition rates below are estimated rates for billing during the 2013-14 school year. When the actual 2013-14 nonresident tuition rates are available in the 2014-15 school year, refunds or additional charges are to be made in accordance with Section 174.2 (a) (6) of the Regulations of the Commissioner of Education.

TUITION CHARGE FOR REGULAR EDUCATION  
 STUDENTS BASED ON NET COST PER STUDENT:

HALF DAY K TUITION FOR REGULAR EDUCATION PUPIL	(ENT 81)	0
FULL DAY K-6 TUITION FOR REGULAR EDUCATION PUPIL	(ENT 82)	9,448
GRADE 7-12 TUITION FOR REGULAR EDUCATION PUPIL	(ENT 83)	9,038
TUITION FOR STUDENTS WITH DISABILITIES WHO ARE ELIGIBLE FOR PUBLIC EXCESS COST AID:		
HALF DAY K TUITION FOR SPECIAL EDUCATION PUPIL	(ENT 85)	0
FULL DAY K-6 TUITION FOR SPECIAL EDUCATION PUPIL	(ENT 86)	31,494
GRADE 7-12 TUITION FOR SPECIAL EDUCATION PUPIL	(ENT 87)	31,084

NONRESIDENT TUITION WORKSHEET FOR IN-DISTRICT PROGRAMS (NOT BOCES) ESTIMATED

NET ALLOWABLE EXPENDITURES/APPROPRIATIONS

1	TOTAL GENERAL FUND APPROPRIATIONS	(ST-3 PRJ_SCH A4C [AT9999.0] ENT 436)	26,670,341
2	MINUS SPECIAL SCHOOLS - SUPERVISION	(ST-3 PRJ_SCH A4B [A2040.0] ENT 148)	0
3	MINUS SPECIAL SCHOOLS - TEACHING	(ST-3 PRJ_SCH A4B [A2330.0] ENT 213)	37,111
4	MINUS SPECIAL SCHOOLS - PUPIL PERSONNEL SERVICES (PPS)	(ST-3 PRJ_SCH A4B [A2830.0] ENT 283)	0
5	MINUS PUPIL TRANSPORTATION	(ST-3 PRJ_SCH A4C [AT5599.0] ENT 318)	1,530,138



6	MINUS COMMUNITY SERVICES	(ST-3 PRJ_SCH A4C [AT8099.0] ENT 346)	0
7	MINUS PUBLIC LIBRARY - GENERAL FUND DEBT SERVICE EXPENSE	(NYSED FS ST-3 CALC ENT #179 EST)	0
8	MINUS GENERAL FUND PRINCIPAL EXPENSE FOR PURCHASE OF BUSES	(NYSED FS ST-3 CALC ENT #168 EST)	285,000
9	MINUS GENERAL FUND INTEREST EXPENSE FOR PURCHASE OF BUSES	(NYSED FS ST-3 CALC ENT #169 EST)	13,757
10	MINUS TUITION EXPENSE - SWD	(NYSED FS ST-3 CALC ENT #280 EST)	650,000
11	MINUS EXPENSE TO BOCES - SWD	(ST-3 PRJ_SCH A4B [A2250.49] ENT 190)	227,937
12	MINUS TUITION PAYMENTS TO OTHER PUBLIC SCHOOLS IN NYS	(ST-3 PRJ_SCH A4B ENT 174 + ENT 175)	6,500
13	MINUS TOTAL INTERFUND TRANSFERS FROM THE GENERAL FUND OTHER THAN SCHOOL CONSTRUCTION	(NYSED FS ST-3 CALC ENT #283 EST)	22,225
14	MINUS REVENUES FROM TEXTBOOK CHARGES (INDIVIDUALS)	(ST-3 PRJ_SCH A3 [A1330] ENT 17)	200
15	MINUS REVENUES FROM OTHER STUDENT FEES AND CHARGES	(ST-3 PRJ_SCH A3 [A1335] ENT 18)	
16	MINUS REVENUES FROM ADMISSIONS (FROM INDIVIDUALS)	(ST-3 PRJ_SCH A3 [A1410] ENT 19)	2,000
17	MINUS REVENUES FROM OTHER CHARGES FOR SERVICES (INDIVIDUALS)	(ST-3 PRJ_SCH A3 [A1489] ENT 20)	
18	MINUS REVENUES FROM DATA PROCESSING FOR OTHER DISTRICTS AND GOVERNMENTS	(ST-3 PRJ_SCH A3 [A2228] ENT 21)	
19	MINUS REVENUES FOR SERVICES TO BOCES (NOT TRANSPORTATION)	(ST-3 PRJ_SCH A3 [A2235] ENT 24)	
20	MINUS REVENUES FOR HEALTH SERVICES TO OTHER DISTRICTS	(ST-3 PRJ_SCH A3 [A2280] ENT 25)	
21	MINUS REVENUES FROM SERVICES TO OTHER GOVERNMENTS, NARCOTICS PROGRAMS	(ST-3 PRJ_SCH A3 [A2290] ENT 26)	
22	MINUS REVENUES FROM NARCOTIC CONTROL SERVICES FOR BOCES	(ST-3 PRJ_SCH A3 [A2291] ENT 27)	

23	MINUS REVENUES FROM YOUTH SERVICES FOR OTHER GOVERNMENTS	(ST-3 PRJ_SCH A3 [A2350] ENT 32)	
24	MINUS OTHER MISC REVENUES	(ST-3 PRJ_SCH A3 [A2389] ENT 34)	
25	MINUS OTHER MISC REVENUES - DISTRICTS IN OTHER STATES	(ST-3 PRJ_SCH A3 [A2395] ENT 37)	
26	MINUS TOTAL REVENUES FROM USE OF MONEY AND PROPERTY	(ST-3 PRJ_SCH A3 [AT2499] ENT 49)	44,000
27	MINUS TOTAL REVENUES FROM SALE OF PROPERTY AND COMPENSATION FOR LOSS	(ST-3 PRJ_SCH A3 [AT2699] ENT 61)	0
28	PLUS REVENUES FROM SALE OF TRANSPORTATION EQUIPMENT	(ST-3 PRJ_SCH A3 [A2666] ENT 55)	
29	PLUS REVENUES FROM INSURANCE RECOVERIES - TRANSPORTATION RELATED	(ST-3 PRJ_SCH A3 [A2680] ENT 57)	
30	MINUS REFUNDS FOR BOCES AIDED SERVICES	(ST-3 PRJ_SCH A3 [A2701] ENT 63)	
31	MINUS REFUNDS OF PRIOR YEARS EXP - OTHER - NOT TRANSPORTATION	(ST-3 PRJ_SCH A3 [A2703] ENT 66)	175,000
32	MINUS GIFTS AND DONATIONS	(ST-3 PRJ_SCH A3 [A2705] ENT 68)	
33	MINUS OTHER UNCLASSIFIED REVENUES	(ST-3 PRJ_SCH A3 [A2770] ENT 70)	16,000
34	MINUS INTERFUND TRANSFERS TO GEN FUND (INDIRECT COSTS)	(PRJ_FB ENT 173)	0
35	MINUS FEDERAL AIDS	(ST-3 PRJ_SCH A3 [A4285 AND A4289] ENTS 97, 98, 99)	0
36	MINUS MEDICAID ASSISTANCE - SCHOOL AGE - SCHOOL YEAR PROGRAMS	(ST-3 PRJ_SCH A3 [A4601] ENT 100)	
37	MINUS PAYMENTS TO CHARTER SCHOOLS	(NYSED FS ST-3 CALC ENT #284 EST)	0
38	NET ALLOWABLE APPROPRIATIONS	((NYSED FS ST-3 CALC ENT #281 EST); (SUM OF ENTS (1, 28, 29) - SUM OF ENTS (2 THRU 27, 30 THRU 37))	23,660,473

GRADE LEVEL PRORATIONS OF EXPENSE BASED ON SALARIES:

39	NOT USED		
40	TOTAL SPECIAL EDUCATION SALARIES - TEACHERS	(ST-3 PRJ_SCH A4B [A2250.15] ENT 181)	1,918,435
41	PRE-K TEACHER SALARIES	(ST-3 PRJ_SCH A4B [A2110.10] ENT 164)	0
42	HALF DAY K TEACHER SALARIES	(ST-3 PRJ_SCH A4B [A2110.11] ENT 165)	
43	FULL DAY K - 6 TEACHER SALARIES	(ST-3 PRJ_SCH A4B [A2110.12] ENT 166 + ENT 167)	3,294,131
44	GRADES 7 - 12 TEACHER SALARIES	(ST-3 PRJ_SCH A4B [A2110.13] ENT 168)	2,981,722
45	CAREER ED TEACHER SALARIES	(ST-3 PRJ_SCH A4B [A2280.15] ENT 192)	0
46	TOTAL SECONDARY SCHOOL SALARIES - TEACHERS	(ENT 44 + ENT 45)	2,981,722
47	TOTAL TEACHER SALARIES FOR PRORATION	(ENT 40 + ENT 41 + ENT 42 + ENT 43 + ENT 46)	8,194,288
48	DECIMAL PORTION OF SALARIES IN SPECIAL EDUCATION	(ENT 40 / ENT 47)	0.23411
49	DECIMAL PORTION OF SALARIES IN HALF DAY K	(ENT 42 / ENT 47)	0.00000
50	DECIMAL PORTION OF SALARIES IN FULL DAY K - 6	(ENT 43 / ENT 47)	0.40200
51	DECIMAL PORTION OF SALARIES IN SECONDARY SCHOOLS	(ENT 46 / ENT 47)	0.36387
52	NET ALLOWABLE COST FOR SPECIAL EDUCATION	(ENT 48 * ENT 38, ROUND)	5,539,154
53	NET ALLOWABLE COST FOR HALF DAY K	(ENT 49 * ENT 38, ROUND)	0
54	NET ALLOWABLE COST FOR FULL DAY K-6	(ENT 50 * ENT 38 , ROUND)	9,511,511
55	NET ALLOWABLE COST FOR SECONDARY SCHOOLS	(ENT 51 * ENT 38 , ROUND)	8,609,337
	STATE AID:		
56	TOTAL STATE AID	(ST-3 PRJ_SCH A3	10,172,333

		[AT3999] ENT 94)	
57	MINUS LOSS OF PUBLIC UTILITY VALUATION	(ST-3 PRJ_SCH A3 [A3017] ENT 74)	
58	NET STATE AID	(ENT 56 - ENT 57)	10,172,333
59	2013-14 TRANSPORTATION AID	(TRA ENT 174)	1,180,672
60	2013-14 CAREER EDUCATION AID BIG 5 CITIES AND BOCES NONCOMPONENTS	(GEN ENT 12)	0
61	2012-13 TOTAL POSSIBLE HOURS OF SUMMER SCHOOL ATTENDANCE	(FORM A ENT 71B)	0
62	WEIGHTED SUMMER SCHOOL ADM	((ENT 61 / 90) * .12)	0.00
63	2013-14 FOUNDATION AID PER PUPIL	(GEN ENT 115)	4,883.90
64	CALCULATED SUMMER SCHOOL AID	(ENT 62 * ENT 63)	0
65	NOT USED		
66	NOT USED		
67	2013-14 EXCESS COSTS AID (INCLUDES 1314 PUBLIC EXCESS COST AID SETASIDE, 1314 PUBLIC EXCESS HIGH COST AID, 1314 PUBLIC EXCESS SUPPLEMENTAL AID AND 1314 PRIVATE EXCESS COST AID)	(ST-3 PRJ_SCH A3 [A3101] ENT 79)	1,934,911
68	NET ALLOWABLE AID	(ENT 58 - ENT 59 - ENT 60 - ENT 64 - ENT 67)	7,056,750
	AIDABLE PUPIL UNITS FOR PRORATING AIDS BY GRADE LEVEL:		
69	2012-13 HALF DAY K AIDABLE PUPIL UNITS	(FORM A SCH A4 ENT 16)	0.00
70	2012-13 FULL DAY K - 6 AIDABLE PUPIL UNITS	(FORM A SCH A4 ENT 17 + ENT 18 + DUAL ENR SCH B PART V ENT 1)	619.69
71	2012-13 GRADES 7 - 12 AIDABLE PUPIL UNITS	(FORM A SCH A4 ENT 19 + DUAL ENR SCH B PART V ENT 2)	583.37
72	TOTAL AIDABLE PUPIL UNITS FOR PRORATING	(ENT 69 + ENT 70 + ENT 71)	1,203.06
	PRORATA STATE AID BY GRADE LEVEL:		
73	AID FOR HALF DAY K	(ENT 68 * (ENT 69 / ENT 72), ROUND)	0
74	AID FOR FULL DAY K-6	(ENT 68 * (ENT 70 /	3,634,896

		ENT 72), ROUND)	
75	AID FOR GRADES 7-12	(ENT 68 * (ENT 71 / ENT 72), ROUND)	3,421,855
76	NOT USED		
	NET COST PER GRADE LEVEL:		
77	NET COST FOR HALF DAY K	(ENT 53 - ENT 73, MIN 0)	0
78	NET COST FOR FULL DAY K-6	(ENT 54 - ENT 74, MIN 0)	5,876,615
79	NET COST FOR GRADES 7-12	(ENT 55 - ENT 60 - ENT 75, MIN 0)	5,187,482
80	NET COST FOR K-12 SPECIAL EDUCATION LESS 1314 PUBLIC SUPPLEMENTAL EXCESS COST AID AND 1314 PUB SETASIDE	(ENT 52 - (2013-14 PUB ENT 9+ ENT 12))IF SUM OF ENTS 41 THRU 45 = 0, THEN (ENT 52 - (2013-14 PUB ENT 9 + ENT 12) - ENT 73 - ENT 74 - ENT 75))	4,078,370
	TUITION CHARGE FOR REGULAR EDUCATION STUDENTS BASED ON NET COST PER STUDENT:		
81	NET COST PER HALF DAY K STUDENT	((ENT 77 / FORM A PRJ SCH A4 ENT 16) *0.5 , ROUND)	0
82	NET COST PER FULL DAY K-6 STUDENT	(ENT 78 / FORM A PRJ SCH A4 ENT 17 + ENT 18 + DUAL ENR SCH B PART V PRJ ENT 1, ROUND)	9,448
83	NET COST PER GRADE 7-12 STUDENT	(ENT 79 / FORM A PRJ SCH A4 ENT 19 + DUAL ENR SCH B PART V PRJ ENT 2, ROUND)	9,038
	TUITION FOR STUDENTS WITH DISABILITIES (SWD) WHO ARE ELIGIBLE FOR PUBLIC EXCESS COST AID:		
84	NET COST PER SWD	(ENT 80 / (NYSED FS ST-3 CALC ENT #282 EST + 1.41 * DUAL ENR SCH B PART V PRJ ENT 6))	15,634.92

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85	HALF DAY K SWD	(IF ENT 81 > 0, ENT 81 + (1.41 * ENT 84), ROUND)	0
86	FULL DAY K-6 SWD	(ENT 82 + (1.41 * ENT 84), ROUND)	31,494
87	GRADE 7-12 SWD	(ENT 83 + (1.41 * ENT 84), ROUND)	31,084

District Name: GREENVILLE CSD  
 District Code: 190701  
 Data as of: 01/30/2014 12:00 AM

State Aid: 2013-2014  
 Today's Date: 01/30/2014

NON RESIDENT TUITION REPORT (NRT)  
 FOR 2012-13 SCHOOL YEAR ATTENDANCE

Glossary

TUITION CHARGE FOR REGULAR EDUCATION  
 STUDENTS BASED ON NET COST PER STUDENT:

NET COST PER HALF DAY K STUDENT	(ENT 82)	0
NET COST PER FULL DAY K-6 STUDENT	(ENT 83)	7,575
NET COST PER GRADE 7-12 STUDENT	(ENT 84)	8,366
TUITION FOR STUDENTS WITH DISABILITIES WHO ARE ELIGIBLE FOR PUBLIC EXCESS COST AID:		
HALF DAY K STUDENT WITH DISABILITIES	(ENT 86)	0
FULL DAY K-6 STUDENT WITH DISABILITIES	(ENT 87)	28,626
GRADE 7-12 STUDENT WITH DISABILITIES	(ENT 88)	29,417

NONRESIDENT TUITION WORKSHEET FOR IN-DISTRICT  
 PROGRAMS (NOT BOCES)

NET ALLOWABLE EXPENDITURES/APPROPRIATIONS

1	TOTAL GENERAL FUND EXPENDITURE (TGFE)	(ST-3 SCH A4C [AT9999.0] ENT 436)	24,740,695
2	MINUS SPECIAL SCHOOLS - SUPERVISION	(ST-3 SCH A4B [A2040.0] ENT 148)	0
3	MINUS SPECIAL SCHOOLS - TEACHING	(ST-3 SCH A4B [A2330.0] ENT 213)	37,282
4	MINUS SPECIAL SCHOOLS - PUPIL PERSONNEL SERVICES (PPS)	(ST-3 SCH A4B [A2830.0] ENT 283)	0
5	MINUS PUPIL TRANSPORTATION	(ST-3 SCH A4C [AT5599.0] ENT 318)	1,436,238
6	MINUS COMMUNITY SERVICES	(ST-3 SCH A4C [AT8099.0] ENT 346)	0
7	MINUS PUBLIC LIBRARY - GENERAL FUND DEBT SERVICE EXPENSE	(NYSED FS ST-3 CALC ENT 179)	0
8	MINUS GENERAL FUND PRINCIPAL EXPENSE FOR PURCHASE OF BUSES	(NYSED FS ST-3 CALC ENT 168)	289,258

9	MINUS GENERAL FUND INTEREST EXPENSE FOR PURCHASE OF BUSES	(NYSED FS ST-3 CALC ENT 169)	14,676
10	MINUS TUITION EXPENSE - STUDENTS WITH DISABILITIES	(NYSED FS ST-3 CALC ENT 280)	576,051
11	MINUS EXPENSE TO BOCES - STUDENTS WITH DISABILITIES	(ST-3 SCH A4B [A2250.49] ENT 190)	292,927
12	MINUS TOTAL INTERFUND TRANSFERS FROM THE GENERAL FUND OTHER THAN SCHOOL CONSTRUCTION	(NYSED FS ST-3 CALC ENT 283)	114,885
13	MINUS TUITION PAYMENTS TO OTHER PUBLIC SCHOOLS IN NYS	(ST-3 SCH A4B ENT 174 + ENT 175)	1,260
14	MINUS REVENUES FROM TEXTBOOK CHARGES (INDIVIDUALS)	(ST-3 SCH A3 [A1330] ENT 17)	247
15	MINUS REVENUES FROM OTHER STUDENT FEES AND CHARGES	(ST-3 SCH A3 [A1335] ENT 18)	
16	MINUS REVENUES FROM ADMISSIONS (FROM INDIVIDUALS)	(ST-3 SCH A3 [A1410] ENT 19)	2,728
17	MINUS REVENUES FROM OTHER CHARGES FOR SERVICES (INDIVIDUALS)	(ST-3 SCH A3 [A1489] ENT 20)	
18	MINUS REVENUES FROM DATA PROCESSING FOR OTHER DISTRICTS AND GOVERNMENTS	(ST-3 SCH A3 [A2228] ENT 21)	
19	MINUS REVENUES FOR SERVICES TO BOCES (NOT TRANSPORTATION)	(ST-3 SCH A3 [A2235] ENT 24)	
20	MINUS REVENUES FOR HEALTH SERVICES TO OTHER DISTRICTS	(ST-3 SCH A3 [A2280] ENT 25)	27,993
21	MINUS REVENUES FROM SERVICES TO OTHER GOVERNMENTS, NARCOTICS PROGRAMS	(ST-3 SCH A3 [A2290] ENT 26)	
22	MINUS REVENUES FROM NARCOTIC CONTROL SERVICES FOR BOCES	(ST-3 SCH A3 [A2291] ENT 27)	
23	MINUS REVENUES FROM YOUTH SERVICES FOR OTHER GOVERNMENTS	(ST-3 SCH A3 [A2350] ENT 32)	
24	MINUS OTHER MISC REVENUES	(ST-3 SCH A3 [A2389] ENT 34)	
25	MINUS OTHER MISC REVENUES - DISTRICTS IN OTHER STATES	(ST-3 SCH A3 [A2395] ENT 37)	
26	MINUS TOTAL REVENUES FROM USE OF MONEY AND PROPERTY	(ST-3 SCH A3 [AT2499] ENT 49)	44,698
27	MINUS TOTAL REVENUES FROM SALE OF PROPERTY	(ST-3 SCH A3	65,606



	AND COMPENSATION FOR LOSS	[AT2699] ENT 61)	
28	PLUS REVENUES FROM SALE OF TRANSPORTATION EQUIPMENT	(ST-3 SCH A3 [A2666] ENT 55)	63,179
29	PLUS REVENUES FROM INSURANCE RECOVERIES - TRANSPORTATION RELATED	(ST-3 SCH A3 [A2680] ENT 57)	
30	MINUS REFUNDS FOR BOCES AIDED SERVICES	(ST-3 SCH A3 [A2701] ENT 63)	70,078
31	MINUS REFUNDS OF PRIOR YEARS EXPENSES - OTHER - NOT TRANSPORTATION	(ST-3 SCH A3 [A2703] ENT 66)	291,238
32	MINUS GIFTS AND DONATIONS	(ST-3 SCH A3 [A2705] ENT 68)	
33	MINUS OTHER UNCLASSIFIED REVENUES	(ST-3 SCH A3 [A2770] ENT 70)	11,276
34	MINUS INTERFUND TRANSFERS TO GEN FUND (INDIRECT COSTS)	(ST-3 SCH B3 [F1988.4] ENT 15)	
35	MINUS FEDERAL AIDS	(ST-3 SCH A3 [A4285 + A4289] ENTS 97 + 98 + 99)	0
36	MINUS MEDICAID ASSISTANCE - SCHOOL AGE - SCHOOL YEAR PROGRAMS	(ST-3 SCH A3 [A4601] ENT 100)	8,113
37	MINUS PAYMENTS TO CHARTER SCHOOLS	(NYSED FS ST-3 CALC ENT 284)	0
38	NET ALLOWABLE EXPENDITURES	((NYSED FS ST-3 CALC ENT 281); (SUM OF ENTS (1, 28, 29) - SUM OF ENTS (2 THRU 27, 30 THRU 37))	21,519,320
	GRADE LEVEL PRORATIONS OF EXPENSE BASED ON SALARIES:		
39	NOT USED		
40	NOT USED		
41	TOTAL SPECIAL EDUCATION SALARIES - TEACHERS	(ST-3 SCH A4B [A2250.15] ENT 181)	1,926,630
42	PRE-K TEACHER SALARIES	(ST-3 SCH A4B [A2110.10] ENT 164)	0
43	HALF DAY K TEACHER SALARIES	(ST-3 SCH A4B [A2110.11] ENT 165)	

44	FULL DAY K - 6 TEACHER SALARIES	(ST-3 SCH A4B [A2110.12] ENT 166 + ENT 167)	2,878,068
45	GRADES 7 - 12 TEACHER SALARIES	(ST-3 SCH A4B [A2110.13] ENT 168)	2,819,821
46	CAREER EDUCATION TEACHER SALARIES	(ST-3 SCH A4B [A2280.15] ENT 192)	0
47	TOTAL SECONDARY SCHOOL SALARIES - TEACHERS	(ENT 45 + ENT 46)	2,819,821
48	TOTAL TEACHER SALARIES FOR PRORATION	(ENT 41 + ENT 42 + ENT 43 + ENT 44 + ENT 47)	7,624,519
49	DECIMAL PORTION OF SALARIES IN SPECIAL EDUCATION	(ENT 41 / ENT 48)	0.25268
50	DECIMAL PORTION OF SALARIES IN HALF DAY K	(ENT 43 / ENT 48)	0.00000
51	DECIMAL PORTION OF SALARIES IN FULL DAY K - 6	(ENT 44 / ENT 48)	0.37747
52	DECIMAL PORTION OF SALARIES IN SECONDARY SCHOOLS	(ENT 47 / ENT 48)	0.36983
53	NET ALLOWABLE COST FOR SPECIAL EDUCATION	(ENT 49 * ENT 38)	5,437,502
54	NET ALLOWABLE COST FOR HALF DAY K	(ENT 50 * ENT 38)	0
55	NET ALLOWABLE COST FOR FULL DAY K-6	(ENT 51 * ENT 38)	8,122,898
56	NET ALLOWABLE COST FOR SECONDARY SCHOOLS	(ENT 52 * ENT 38)	7,958,491
STATE AID:			
57	TOTAL STATE AID	(ST-3 SCH A3 [AT3999] ENT 94)	9,661,866
58	MINUS LOSS OF PUBLIC UTILITY VALUATION	(ST-3 SCH A3 [A3017] ENT 74)	
59	NET STATE AID	(ENT 57 - ENT 58)	9,661,866
60	2012-13 TRANSPORTATION AID	(2012-13 TRA ENT 174)	1,293,541
61	2012-13 CAREER EDUCATION AID, BIG 5 CITIES & BOCES NONCOMPONENTS	(2012-13 GEN ENT 12)	0
62	2011-12 TOTAL POSSIBLE HOURS OF SUMMER SCHOOL ATTENDANCE	(2012-13 FORM A ENT 71B)	0
63	WEIGHTED SUMMER SCHOOL ADM	((ENT 62 / 90) * .12)	0.00
64	2012-13 FOUNDATION AID PER PUPIL	(2012-13 GEN ENT 115)	4,775.65

65	CALCULATED SUMMER SCHOOL AID	(ENT 63 * ENT 64, RND)	0.00
66	NOT USED		
67	NOT USED		
68	2012-13 EXCESS COSTS AID (INCLUDES 2012-13 PUBLIC EXCESS COST AID SETASIDE, 2012-13 PUBLIC EXCESS HIGH COST AID, 2012-13 PUBLIC EXCESS SUPPLEMENTAL AID AND 2012-13 PRIVATE EXCESS COST AID)	(ST-3 SCH A3 [A3101] ENT 79)	1,861,327
69	NET ALLOWABLE AID	(ENT 59 - ENT 60 - ENT 61 - ENT 65 - ENT 68)	6,506,998
	AIDABLE PUPIL UNITS FOR PRORATING AIDS BY GRADE LEVEL:		
70	2011-12 HALF DAY K PUPIL UNITS *	(FORM A SCH A4, SED ENT 16)	0.00
71	2011-12 FULL DAY K - 6 PUPIL UNITS *	(FORM A SCH A4, SED ENT 17 + ENT 18 + DUAL ENR SCH B PART V ENT 1)	656.69
72	2011-12 GRADES 7 - 12 PUPIL UNITS *	(FORM A SCH A4, SED ENT 19+ DUAL ENR SCH B PART V ENT 2)	589.51
	* PUPIL UNITS IS THE COMPUTED AVERAGE DAILY MEMBERSHIP OF STUDENTS BASED ON THE TOTAL POSSIBLE AGGREGATE ATTENDANCE DATA REPORTED ON 2012-13 SAMS FORM A, SCHEDULES A2 ,A4 AND SCHEDULE B DUAL ENROLLMENT ADA.		
73	TOTAL AIDABLE PUPIL UNITS FOR PRORATIONING	(ENT 70 + ENT 71 + ENT 72)	1,246.20
	PRORATA STATE AID BY GRADE LEVEL:		
74	AID FOR HALF DAY K	(ENT 69 * (ENT 70 / ENT 73), ROUND)	0
75	AID FOR FULL DAY K-6	(ENT 69 * (ENT 71 / ENT 73), ROUND)	3,428,889
76	AID FOR GRADES 7-12	(ENT 69 * (ENT 72 / ENT 73), ROUND)	3,078,110
77	NOT USED		

## NET COST PER GRADE LEVEL:

78	NET COST FOR HALF DAY K	(ENT 54 - ENT 74, MIN 0)	0
79	NET COST FOR FULL DAY K-6	(ENT 55 - ENT 75, MIN 0)	4,694,009
80	NET COST FOR GRADES 7-12	(ENT 56 - ENT 61 - ENT 76, MIN 0)	4,880,381
81	NET COST FOR K-12 SPECIAL EDUCATION LESS 1213 PUBLIC SUPPLEMENTAL EXCESS COST AID AND 1213 PUBLIC EXCESS COST AID SETASIDE	((ENT 53 - (2012-13 PUB ENT 9 + ENT 12)) IF SUM OF ENTS 42 THRU 46 = 0, THEN (ENT 53 - (2012-13 PUB ENT 9 + ENT 12) - ENT 74 - ENT 75 - ENT 76))	4,006,530

TUITION CHARGE FOR REGULAR EDUCATION  
STUDENTS BASED ON NET COST PER STUDENT:

82	NET COST PER HALF DAY K STUDENT	((ENT 78 / FORM A SCH A4 ENT 16) * 0.5 )	0
83	NET COST PER FULL DAY K-6 STUDENT	(ENT 79 / (FORM A SCH A4 ENT 17 + ENT 18 + DUAL ENR SCH B PART V ENT 1) )	7,575
84	NET COST PER GRADE 7-12 STUDENT	(ENT 80 / FORM A SCH A4 ENT 19 + DUAL ENR SCH B PART V ENT 2)	8,366

TUITION FOR STUDENTS WITH DISABILITIES WHO ARE  
ELIGIBLE FOR PUBLIC EXCESS COST AID:

85	NET COST PER STUDENT WITH DISABILITIES	(ENT 81 / (NYSED FS ST-3 CALC ENT 282+ 1.41 * DUAL ENR SCH B PART V ENT 6))	14,929.12
86	HALF DAY K STUDENT WITH DISABILITIES	(ENT 82 + (1.41 * ENT 85), ROUND)	0
87	FULL DAY K-6 STUDENT WITH DISABILITIES	(ENT 83 + (1.41 * ENT 85), ROUND)	28,626
88	GRADE 7-12 STUDENT WITH DISABILITIES	(ENT 84 + (1.41 * ENT 85), ROUND)	29,417

## CONTRACT FOR HEALTH AND WELFARE SERVICES

THIS AGREEMENT made in duplicate this \_\_\_\_ day of February 2014, by and between Greenville Central School District as Board of Education of central school district town of Greenville, county of Greene, NY, party of the first part and Bethlehem Central School District, Board of Education, Towns of Bethlehem and New Scotland, County of Albany, NY, party of the second part.

WITNESSETH, That whereas party of the first part has been duly empowered by the provisions of section 912 of the Education Law to enter into a contract for the purpose of providing health and welfare services for children residing in said school district and attending nonpublic schools in Bethlehem Central School District, Towns of Bethlehem and New Scotland, County of Albany, to begin on September 9, 2013, and to end on June 26, 2014.

NOW, Therefore, The said party of the first part hereby agrees to pay the party of the second part the sum of \$730 per child for health and welfare services to be provided under section 912 to children residing in said central school district town of Greenville, New York, and attending nonpublic schools Bethlehem Central School District, Towns of Bethlehem and New Scotland, County of Albany, New York.

And the party of the second part hereby agrees with the party of the first part as follows:

1. That the health and welfare services provided under section 912 shall consist of the following:

- Physician Services
- Nurse Services
- School Psychological Services
- School Social Work Services
- School Speech Correctionist Services

Such services may include, but are not limited to all services performed by a physician, nurse, school psychologist, school social worker or school speech correctionist, and may also include vision and hearing tests, the taking of medical histories and the administration of health screening tests, the maintenance of cumulative health records and the administration of emergency care programs for ill or injured pupils.

2. The party of the second part will also furnish the following equipment to be used in providing such services if requested by the authority in charge of the nonpublic school:

Supplies and equipment for use by physician, school nurse, psychologist, social worker, and speech correctionist (i.e. Scales Vision and Hearing testing devices, Health Record forms, First-Aid supplies, and all other readily transportable equipment and supplies pertaining to delivery of services).

It is expressly agreed by and between the parties hereto that the services agreed to be supplied under this contract shall not include any teaching service.

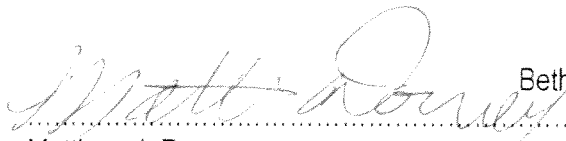
It is mutually agreed that this contract shall not become valid and binding upon either party thereto until the same shall be approved by the Superintendent of Schools.

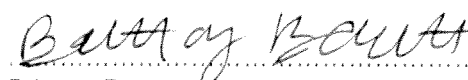
In Witness Whereof, the parties have hereunto set their hands the day and year above written.

.....  
President of Board of Education                      Party of First Part                      Address

.....  
Clerk of Board of Education                      Party of First Part                      Address

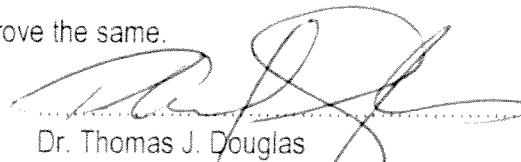
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 .....  
Bethlehem Central S.D.                      700 Delaware Ave., Delmar, NY  
Matthew J. Downey  
President of Board of Education                      Party of Second Part                      Address

 .....  
Bethlehem Central S.D.                      700 Delaware Ave., Delmar, NY  
Brittany Barrett  
Clerk of Board of Education                      Party of Second Part                      Address

APPROVAL OF SUPERINTENDENT

I have examined the above contract and hereby approve the same.

 .....  
Dr. Thomas J. Douglas  
Superintendent of Schools  
Bethlehem Central School District

Sole Supervisory District  
Albany County

Dated 12/18/13 .....

**Bethlehem Central School District**  
**Business Office**  
**700 Delaware Avenue**  
**Delmar, New York 12054**

<b>HEALTH SERVICES</b>			
<b>2013-14 School Year</b>			
<b>ENROLLMENT OCTOBER 2013</b>			
Bethlehem Central School District			4,698
Bethlehem Children's School			17
St. Thomas			198
Mt. Moriah Academy			37
		<b>TOTAL</b>	<b>4,950</b>
<b>PROJECTED COSTS</b>			
Physician Contracted			\$30,000
Nurses Salary (11.0 FTE)			\$515,156
Nurses Office Clerical (1.47 FTE)			\$46,580
Director of SESS (1.0 FTE)			\$119,646
Behavior Specialist (1.0 FTE)			\$61,080
Social Worker Salary (8.0 FTE)			\$549,720
Psychologists (6.00 FTE)			\$393,532
Speech (12.00 FTE)			\$877,430
Health and Dental			\$371,619
FICA	2,563,144	7.65%	\$196,081
TRS	2,001,408	16.25%	\$325,229
ERS	561,736	20.90%	\$117,403
WC	2,593,144	0.5/1000	\$1,297
Supplies and Materials			\$9,845
		<b>Total</b>	<b>\$3,614,617</b>
		Per Pupil Allocation =	\$730





Greenville Central School District  
Contract for Health and Welfare Services

This agreement made this 31<sup>st</sup> day of January 2014, by and between the Board of Education of Greenville Central School District, Town of Greenville, County of Greene, New York, party of the first part, and the Board of Education of Berne-Knox-Westerlo Central School District, Town(s) City of Berne, New York, County of Albany, New York, party of the second part.

**WITNESSETH** that whereas party of the first part has been duly empowered by the provisions of Section 912 of the Education Law to enter into a contract for the purpose of providing health and welfare services for children residing in the district designated as party of the second part and attending nonpublic schools in the Greenville Central School District, Town of Greenville, County of Greene, New York, said services to begin on September 4, 2013 and end June 25, 2014.

Now, therefore, the said party of the second part hereby agrees to pay the party of the first part the cost per pupil of \$510.16 for health and welfare services to be provided under Section 912 to one (1) child residing in said school district Town(s)(City) of Berne, County (Counties) of Albany, New York and attending nonpublic schools in Greenville Central School District, Town of Greenville, County of Greene, New York.

The per-pupil rate has been calculated as follows:

Total cost of School Health Services provided:  
Number of pupils served (including resident and non-resident students)

Average per pupil cost:

Total number of students served from District of Residents:

Total cost due: \$510.16

And the party of the first part hereby agrees with the party of the second part as follows:

1. That the health and welfare services provided under section 912 shall consist of the following:

Physician Services  
School Nurse Services  
School Psychological Services  
School Speech Correctionist Services

Such services include services performed by a physician, school nurse, school psychologist, school speech correctionist, and may also include vision and hearing tests, the taking of medical histories and health records and the administration of emergency care programs for ill or injured pupils while attending school.

2. The party of the first part will also furnish the following equipment to be used in provided such services if requested by the authorities in charge of the non-public school:

Supplies and equipment for use by physicians, school nurse-teacher psychologist, and speech correctionist (i.e., scales, vision and hearing testing devices, health record forms, first-aid supplies and all other readily transportable equipment and supplies pertaining to delivery of services).

It is expressly agreed by and between the parties hereto that the services agreed to be supplied under this contract shall not include any teaching service.

It is mutually agreed that this contract shall not become valid and binding upon either party thereto until the same shall be approved by the District Superintendent of Schools, as required by Education 912.

In Witness, Whereof, the parties have hereunto set their hands the day and year above written.

	Greenville Central School District	PO Box 129 Greenville, NY 12083
_____ (President of Board of Education)	_____ (Party of the First Part)	_____ (Post Office Address)

	Greenville Central School District	PO Box 129 Greenville, NY 12083
_____ (Clerk of Board of Education)	_____ (Party of the First Part)	_____ (Post Office Address)

Approval of Superintendent

_____ Date	_____ Superintendent of Schools
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_____ (President of Board of Education)	_____ (Party of the Second Part)	_____ (Post Office Address)
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_____ (Clerk of Board of Education)	_____ (Party of the Second Part)	_____ (Post Office Address)
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Approval of Superintendent

_____ Date	_____ Superintendent of Schools
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Greenville Central School District  
Contract for Health and Welfare Services

This agreement made this 31<sup>st</sup> day of January 2014, by and between the Board of Education of Greenville Central School District, Town of Greenville, County of Greene, New York, party of the first part, and the Board of Education of Cairo-Durham Central School District, Town(s) City of Cairo, New York, County of Greene, New York, party of the second part.

**WITNESSETH** that whereas party of the first part has been duly empowered by the provisions of Section 912 of the Education Law to enter into a contract for the purpose of providing health and welfare services for children residing in the district designated as party of the second part and attending nonpublic schools in the Greenville Central School District, Town of Greenville, County of Greene, New York, said services to begin on September 4, 2013 and end June 25, 2014.

Now, therefore, the said party of the second part hereby agrees to pay the party of the first part the cost per pupil of \$510.16 for health and welfare services to be provided under Section 912 to twenty-four (24) children residing in said school district Town(s)(City) of Cairo, County of Greene, New York and attending nonpublic schools in Greenville Central School District, Town of Greenville, County of Greene, New York.

The per-pupil rate has been calculated as follows:

Total cost of School Health Services provided:

Number of pupils served (including resident and non-resident students)

Average per pupil cost:

Total number of students served from District of Residents:

Total cost due: \$12,243.84

And the party of the first part hereby agrees with the party of the second part as follows:

1. That the health and welfare services provided under section 912 shall consist of the following:

Physician Services  
School Nurse Services  
School Psychological Services  
School Speech Correctionist Services

Such services include services performed by a physician, school nurse, school psychologist, school speech correctionist, and may also include vision and hearing tests, the taking of medical histories and health records and the administration of emergency care programs for ill or injured pupils while attending school.

2. The party of the first part will also furnish the following equipment to be used in provided such services if requested by the authorities in charge of the non-public school:

Supplies and equipment for use by physicians, school nurse-teacher psychologist, and speech correctionist (i.e., scales, vision and hearing testing devices, health record forms, first-aid supplies and all other readily transportable equipment and supplies pertaining to delivery of services).

It is expressly agreed by and between the parties hereto that the services agreed to be supplied under this contract shall not include any teaching service.

It is mutually agreed that this contract shall not become valid and binding upon either party thereto until the same shall be approved by the District Superintendent of Schools, as required by Education 912.

In Witness, Whereof, the parties have hereunto set their hands the day and year above written.

	Greenville Central School District	PO Box 129 Greenville, NY 12083
(President of Board of Education)	(Party of the First Part)	(Post Office Address)

	Greenville Central School District	PO Box 129 Greenville, NY 12083
(Clerk of Board of Education)	(Party of the First Part)	(Post Office Address)

Approval of Superintendent

_____	_____
Date	Superintendent of Schools

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(President of Board of Education)	(Party of the Second Part)	(Post Office Address)
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(Clerk of Board of Education)	(Party of the Second Part)	(Post Office Address)
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Approval of Superintendent

_____	_____
Date	Superintendent of Schools

Greenville Central School District  
Contract for Health and Welfare Services

This agreement made this 31<sup>st</sup> day of January 2014, by and between the Board of Education of Greenville Central School District, Town of Greenville, County of Greene, New York, party of the first part, and the Board of Education of Catskill Central School District, Town(s) City of Catskill, New York, County of Greene, New York, party of the second part.

**WITNESSETH** that whereas party of the first part has been duly empowered by the provisions of Section 912 of the Education Law to enter into a contract for the purpose of providing health and welfare services for children residing in the district designated as party of the second part and attending nonpublic schools in the Greenville Central School District, Town of Greenville, County of Greene, New York, said services to begin on September 4, 2013 and end June 25, 2014.

Now, therefore, the said party of the second part hereby agrees to pay the party of the first part the cost per pupil of \$510.16 for health and welfare services to be provided under Section 912 to eight (8) children residing in said school district Town(s)(City) of Catskill, County of Greene, New York and attending nonpublic schools in Greenville Central School District, Town of Greenville, County of Greene, New York.

The per-pupil rate has been calculated as follows:

Total cost of School Health Services provided:  
Number of pupils served (including resident and non-resident students)

Average per pupil cost:

Total number of students served from District of Residents:

Total cost due: \$4,081.28

And the party of the first part hereby agrees with the party of the second part as follows:

1. That the health and welfare services provided under section 912 shall consist of the following:

Physician Services  
School Nurse Services  
School Psychological Services  
School Speech Correctionist Services

Such services include services performed by a physician, school nurse, school psychologist, school speech correctionist, and may also include vision and hearing tests, the taking of medical histories and health records and the administration of emergency care programs for ill or injured pupils while attending school.

2. The party of the first part will also furnish the following equipment to be used in provided such services if requested by the authorities in charge of the non-public school:

Supplies and equipment for use by physicians, school nurse-teacher psychologist, and speech correctionist (i.e., scales, vision and hearing testing devices, health record forms, first-aid supplies and all other readily transportable equipment and supplies pertaining to delivery of services).

It is expressly agreed by and between the parties hereto that the services agreed to be supplied under this contract shall not include any teaching service.

It is mutually agreed that this contract shall not become valid and binding upon either party thereto until the same shall be approved by the District Superintendent of Schools, as required by Education 912.

In Witness, Whereof, the parties have hereunto set their hands the day and year above written.

	Greenville Central School District	PO Box 129 Greenville, NY 12083
_____ (President of Board of Education)	_____ (Party of the First Part)	_____ (Post Office Address)

	Greenville Central School District	PO Box 129 Greenville, NY 12083
_____ (Clerk of Board of Education)	_____ (Party of the First Part)	_____ (Post Office Address)

Approval of Superintendent

_____ Date	_____ Superintendent of Schools
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_____ (President of Board of Education)	_____ (Party of the Second Part)	_____ (Post Office Address)
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_____ (Clerk of Board of Education)	_____ (Party of the Second Part)	_____ (Post Office Address)
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Approval of Superintendent

_____ Date	_____ Superintendent of Schools
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Greenville Central School District  
Contract for Health and Welfare Services

This agreement made this 31<sup>st</sup> day of January 2014, by and between the Board of Education of Greenville Central School District, Town of Greenville, County of Greene, New York, party of the first part, and the Board of Education of Coxsackie-Athens Central School District, Town(s) City of Coxsackie, New York, County of Greene, New York, party of the second part.

**WITNESSETH** that whereas party of the first part has been duly empowered by the provisions of Section 912 of the Education Law to enter into a contract for the purpose of providing health and welfare services for children residing in the district designated as party of the second part and attending nonpublic schools in the Greenville Central School District, Town of Greenville, County of Greene, New York, said services to begin on September 4, 2013 and end June 25, 2014.

Now, therefore, the said party of the second part hereby agrees to pay the party of the first part the cost per pupil of \$510.16 for health and welfare services to be provided under Section 912 to fourteen (14) children residing in said school district Town(s)(City) of Coxsackie, County of Greene, New York and attending nonpublic schools in Greenville Central School District, Town of Greenville, County of Greene, New York.

The per-pupil rate has been calculated as follows:

Total cost of School Health Services provided:  
Number of pupils served (including resident and non-resident students)

Average per pupil cost:

Total number of students served from District of Residents:

Total cost due: \$7,142.24

And the party of the first part hereby agrees with the party of the second part as follows:

1. That the health and welfare services provided under section 912 shall consist of the following:

Physician Services  
School Nurse Services  
School Psychological Services  
School Speech Correctionist Services

Such services include services performed by a physician, school nurse, school psychologist, school speech correctionist, and may also include vision and hearing tests, the taking of medical histories and health records and the administration of emergency care programs for ill or injured pupils while attending school.

2. The party of the first part will also furnish the following equipment to be used in provided such services if requested by the authorities in charge of the non-public school:

Supplies and equipment for use by physicians, school nurse-teacher psychologist, and speech correctionist (i.e., scales, vision and hearing testing devices, health record forms, first-aid supplies and all other readily transportable equipment and supplies pertaining to delivery of services).

It is expressly agreed by and between the parties hereto that the services agreed to be supplied under this contract shall not include any teaching service.

It is mutually agreed that this contract shall not become valid and binding upon either party thereto until the same shall be approved by the District Superintendent of Schools, as required by Education 912.

In Witness, Whereof, the parties have hereunto set their hands the day and year above written.

	Greenville Central School District	PO Box 129 Greenville, NY 12083
_____ (President of Board of Education)	_____ (Party of the First Part)	_____ (Post Office Address)

	Greenville Central School District	PO Box 129 Greenville, NY 12083
_____ (Clerk of Board of Education)	_____ (Party of the First Part)	_____ (Post Office Address)

Approval of Superintendent

_____ Date	_____ Superintendent of Schools
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_____ (President of Board of Education)	_____ (Party of the Second Part)	_____ (Post Office Address)
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_____ (Clerk of Board of Education)	_____ (Party of the Second Part)	_____ (Post Office Address)
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Approval of Superintendent

_____ Date	_____ Superintendent of Schools
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Greenville Central School District  
Contract for Health and Welfare Services

This agreement made this 31<sup>st</sup> day of January 2014, by and between the Board of Education of Greenville Central School District, Town of Greenville, County of Greene, New York, party of the first part, and the Board of Education of Hudson City School District, Town(s) City of Hudson, New York, County of Columbia, New York, party of the second part.

**WITNESSETH** that whereas party of the first part has been duly empowered by the provisions of Section 912 of the Education Law to enter into a contract for the purpose of providing health and welfare services for children residing in the district designated as party of the second part and attending nonpublic schools in the Greenville Central School District, Town of Greenville, County of Greene, New York, said services to begin on September 4, 2013 and end June 25, 2014.

Now, therefore, the said party of the second part hereby agrees to pay the party of the first part the cost per pupil of \$510.16 for health and welfare services to be provided under Section 912 to three (3) children residing in said school district Town(s)(City) of Hudson, County of Columbia, New York and attending nonpublic schools in Greenville Central School District, Town of Greenville, County of Greene, New York.

The per-pupil rate has been calculated as follows:

Total cost of School Health Services provided:  
Number of pupils served (including resident and non-resident students)

Average per pupil cost:

Total number of students served from District of Residents:

Total cost due: \$1,530.48

And the party of the first part hereby agrees with the party of the second part as follows:

1. That the health and welfare services provided under section 912 shall consist of the following:

Physician Services  
School Nurse Services  
School Psychological Services  
School Speech Correctionist Services

Such services include services performed by a physician, school nurse, school psychologist, school speech correctionist, and may also include vision and hearing tests, the taking of medical histories and health records and the administration of emergency care programs for ill or injured pupils while attending school.

2. The party of the first part will also furnish the following equipment to be used in provided such services if requested by the authorities in charge of the non-public school:

Supplies and equipment for use by physicians, school nurse-teacher psychologist, and speech correctionist (i.e., scales, vision and hearing testing devices, health record forms, first-aid supplies and all other readily transportable equipment and supplies pertaining to delivery of services).

It is expressly agreed by and between the parties hereto that the services agreed to be supplied under this contract shall not include any teaching service.

It is mutually agreed that this contract shall not become valid and binding upon either party thereto until the same shall be approved by the District Superintendent of Schools, as required by Education 912.

In Witness, Whereof, the parties have hereunto set their hands the day and year above written.

	Greenville Central School District	PO Box 129 Greenville, NY 12083
_____ (President of Board of Education)	_____ (Party of the First Part)	_____ (Post Office Address)

	Greenville Central School District	PO Box 129 Greenville, NY 12083
_____ (Clerk of Board of Education)	_____ (Party of the First Part)	_____ (Post Office Address)

Approval of Superintendent

_____ Date	_____ Superintendent of Schools
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_____ (President of Board of Education)	_____ (Party of the Second Part)	_____ (Post Office Address)
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_____ (Clerk of Board of Education)	_____ (Party of the Second Part)	_____ (Post Office Address)
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Approval of Superintendent

_____ Date	_____ Superintendent of Schools
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Greenville Central School District  
Contract for Health and Welfare Services

This agreement made this 31<sup>st</sup> day of January 2014, by and between the Board of Education of Greenville Central School District, Town of Greenville, County of Greene, New York, party of the first part, and the Board of Education of Middleburgh Central School District, Town(s) City of Middleburgh, New York, County of Schoharie, New York, party of the second part.

**WITNESSETH** that whereas party of the first part has been duly empowered by the provisions of Section 912 of the Education Law to enter into a contract for the purpose of providing health and welfare services for children residing in the district designated as party of the second part and attending nonpublic schools in the Greenville Central School District, Town of Greenville, County of Greene, New York, said services to begin on September 4, 2013 and end June 25, 2014.

Now, therefore, the said party of the second part hereby agrees to pay the party of the first part the cost per pupil of \$510.16 for health and welfare services to be provided under Section 912 to four (4) children residing in said school district Town(s)(City) of Middleburgh, County (Counties) of Schoharie, New York and attending nonpublic schools in Greenville Central School District, Town of Greenville, County of Greene, New York.

The per-pupil rate has been calculated as follows:

Total cost of School Health Services provided:  
Number of pupils served (including resident and non-resident students)

Average per pupil cost:

Total number of students served from District of Residents:

Total cost due: \$2,040.64

And the party of the first part hereby agrees with the party of the second part as follows:

1. That the health and welfare services provided under section 912 shall consist of the following:

Physician Services  
School Nurse Services  
School Psychological Services  
School Speech Correctionist Services

Such services include services performed by a physician, school nurse, school psychologist, school speech correctionist, and may also include vision and hearing tests, the taking of medical histories and health records and the administration of emergency care programs for ill or injured pupils while attending school.

Greenville Central School District  
Contract for Health and Welfare Services

This agreement made this 31<sup>st</sup> day of January 2014, by and between the Board of Education of Greenville Central School District, Town of Greenville, County of Greene, New York, party of the first part, and the Board of Education of Ravena-Coeymans-Selkirk School District, Town(s) City of Selkirk, New York, County of Albany, New York, party of the second part.

**WITNESSETH** that whereas party of the first part has been duly empowered by the provisions of Section 912 of the Education Law to enter into a contract for the purpose of providing health and welfare services for children residing in the district designated as party of the second part and attending nonpublic schools in the Greenville Central School District, Town of Greenville, County of Greene, New York, said services to begin on September 4, 2013 and end June 25, 2014.

Now, therefore, the said party of the second part hereby agrees to pay the party of the first part the cost per pupil of \$510.16 for health and welfare services to be provided under Section 912 to three (3) children residing in said school district Town(s)(City) of Selkirk, County (Counties) of Albany, New York and attending nonpublic schools in Greenville Central School District, Town of Greenville, County of Greene, New York.

The per-pupil rate has been calculated as follows:

Total cost of School Health Services provided:  
Number of pupils served (including resident and non-resident students)

Average per pupil cost:

Total number of students served from District of Residents:

Total cost due: \$1,530.48

And the party of the first part hereby agrees with the party of the second part as follows:

1. That the health and welfare services provided under section 912 shall consist of the following:

Physician Services  
School Nurse Services  
School Psychological Services  
School Speech Correctionist Services

Such services include services performed by a physician, school nurse, school psychologist, school speech correctionist, and may also include vision and hearing tests, the taking of medical histories and health records and the administration of emergency care programs for ill or injured pupils while attending school.

Greenville Central School District

Contract for Health and Welfare Services

This agreement made this 31<sup>st</sup> day of January 2014, by and between the Board of Education of Greenville Central School District, Town of Greenville, County of Greene, New York, party of the first part, and the Board of Education of Ravena-Coeymans-Selkirk School District, Town(s) City of Selkirk, New York, County of Albany, New York, party of the second part.

**WITNESSETH** that whereas party of the first part has been duly empowered by the provisions of Section 912 of the Education Law to enter into a contract for the purpose of providing health and welfare services for children residing in the district designated as party of the second part and attending nonpublic schools in the Greenville Central School District, Town of Greenville, County of Greene, New York, said services to begin on September 4, 2013 and end June 25, 2014.

Now, therefore, the said party of the second part hereby agrees to pay the party of the first part the cost per pupil of \$510.16 for health and welfare services to be provided under Section 912 to three (3) children residing in said school district Town(s)(City) of Selkirk, County (Counties) of Albany, New York and attending nonpublic schools in Greenville Central School District, Town of Greenville, County of Greene, New York.

The per-pupil rate has been calculated as follows:

Total cost of School Health Services provided:  
Number of pupils served (including resident and non-resident students)

Average per pupil cost:

Total number of students served from District of Residents:

Total cost due: \$1,530.48

And the party of the first part hereby agrees with the party of the second part as follows:

1. That the health and welfare services provided under section 912 shall consist of the following:

Physician Services  
School Nurse Services  
School Psychological Services  
School Speech Correctionist Services

Such services include services performed by a physician, school nurse, school psychologist, school speech correctionist, and may also include vision and hearing tests, the taking of medical histories and health records and the administration of emergency care programs for ill or injured pupils while attending school.

2. The party of the first part will also furnish the following equipment to be used in provided such services if requested by the authorities in charge of the non-public school:

Supplies and equipment for use by physicians, school nurse-teacher psychologist, and speech correctionist (i.e., scales, vision and hearing testing devices, health record forms, first-aid supplies and all other readily transportable equipment and supplies pertaining to delivery of services).

It is expressly agreed by and between the parties hereto that the services agreed to be supplied under this contract shall not include any teaching service.

It is mutually agreed that this contract shall not become valid and binding upon either party thereto until the same shall be approved by the District Superintendent of Schools, as required by Education 912.

In Witness, Whereof, the parties have hereunto set their hands the day and year above written.

	Greenville Central School District	PO Box 129 Greenville, NY 12083
_____ (President of Board of Education)	_____ (Party of the First Part)	_____ (Post Office Address)

	Greenville Central School District	PO Box 129 Greenville, NY 12083
_____ (Clerk of Board of Education)	_____ (Party of the First Part)	_____ (Post Office Address)

Approval of Superintendent

_____ Date	_____ Superintendent of Schools
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_____ (President of Board of Education)	_____ (Party of the Second Part)	_____ (Post Office Address)
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_____ (Clerk of Board of Education)	_____ (Party of the Second Part)	_____ (Post Office Address)
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Approval of Superintendent

_____ Date	_____ Superintendent of Schools
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**AGREEMENT**

**By and Between**

**The Greenville Central School District**

**and the**

**Hunter-Tannersville Central School District**

**September 4, 2013 through June 25, 2014**

This Agreement (“Agreement”), made this 4th day of February, 2014, is entered into by and between the Greenville Central School District, (“Greenville”) with offices for the transaction of business located at 4982 State Route 81, Greenville, New York 12083-0129 and the Hunter-Tannersville Central School District, (“Hunter-Tannersville”) with a principal place of business at 6094 Main Street, Tannersville, NY 12485, provides as follows:

WHEREAS, in accordance with the Individuals with Disabilities Education Improvement Act and Article 89 of the New York State Education Law, the Parties recognize the obligation of the Hunter-Tannersville to offer to every eligible resident student with a disability a free appropriate public education; and

WHEREAS, the Hunter-Tannersville Committee on Special Education (“CSE”) has developed an individualized education program (“IEP”) for Student #900000721 (the “Student”), with a recommended placement in a 8:1:1 with mainstream support at Greenville Elementary School; and

WHEREAS, Greenville has space available in that class and is willing to accept the Student as a non-resident student subject to the payment of tuition and terms as set forth herein; and

WHEREAS, in accordance with Education Law §4201(2) (b), a board of education is authorized to contract with neighboring districts for the provision of special education services;

NOW THEREFORE, in consideration of the mutual promises and agreements contained herein, and intending to be legally bound, the parties hereby agree as follows:

1. **Term and Services.**

- a. For the 2013-2014 school year, the Student shall attend the 8:1:1 mainstream support at Greenville Elementary School and other programming as specified in the Student's 2013-2014 IEP, effective September 4, 2013 through June 25, 2014, unless otherwise modified in accordance with paragraph "8", below.
- b. Such services shall be provided on-site at Greenville, on such days and times as may be mutually agreed to by the parties. Provided, however, that services shall not be provided on any days when Greenville is not in session.
- c. Greenville agrees to permit a representative of Hunter-Tannersville to visit the program in which the Student is enrolled on appropriate notice.

2. **Payment.**

- a. Hunter-Tannersville shall pay nonresident tuition to Greenville for the Student in an amount equal to the actual cost of such placement. The annualized cost is presently calculated to be \$24,212. The actual cost of such placement shall be reviewed by Greenville on a quarterly basis. The nonresident tuition rate may be amended retroactive to the date of any change in services or classroom enrollment. Hunter-Tannersville shall be notified in writing of, and agrees to pay, any such amended actual cost nonresident tuition rate.
- b. Payments for said services shall be due commencing thirty (30) days from the submission of payment request by Greenville, but in any event no later than July 8, 2014, whichever comes first.
- c. No parent or guardian or any other person shall be required to make any payments for the services covered by this Agreement.



3. **State Aid.** Hunter-Tannersville, as the student's district of residence, shall be solely and exclusively responsible for claiming all available state aid for the Student, and for submitting all required documentation to the New York State Education Department ("SED") in connection with any claim or application for state aid related to services for the Student. Greenville will not claim or apply for any state aid for the Student.

4. **Medicaid Billing.** If or to the extent that any Medicaid reimbursable services are provided to the Student, Hunter-Tannersville shall be solely and exclusively responsible for billing Medicaid for such services. Greenville staff that provides any Medicaid-reimbursable services to the Student shall timely prepare, maintain and submit to Hunter-Tannersville all documentation required for Medicaid billing, and shall fully comply with all applicable Medicaid billing required in providing services to the Student. Greenville will not bill Medicaid for any services rendered to the Student.

5. **CSE Responsibility.** Hunter-Tannersville shall retain all CSE responsibilities for the Student, including but not limited to development, distribution, and amendment of the IEP, conducting or arranging for all required evaluations, and compliance with applicable due process requirements. Greenville agrees that teachers and/or related services providers who are assigned to the Student shall be required to prepare and maintain all documentation related to such services in compliance with federal and state laws and regulations, and the requirements of including quarterly reports, annual summaries, and assistance as requested for evaluations, and draft portions of the IEP for the Student. Greenville agrees, upon reasonable notice and at mutually convenient dates/times, that teachers and/or related service providers who work with the Student may be required to attend CSE meetings for the Student (to be held on-site at Greenville High School).

6. **Other Responsibilities.** Hunter-Tannersville shall bear all other responsibilities as district of residence for the Student including, but not limited to, registration, transportation, BEDs reports and other mandated reporting for resident students, transcripts and diploma. Greenville agrees that its guidance counselor(s) shall cooperate in developing a schedule and transmitting grades, progress reports, and course credit information for the Student to Hunter-Tannersville

7. **Code of Conduct.** The Student shall be subject to Greenville's Code of Conduct. In the event that the Student violates Greenville's Code of Conduct, the Student may be subject to disciplinary processes and penalties imposed by Greenville pursuant to the Greenville Code of Conduct and NY Education Law §3214, upon notice to the Hunter-Tannersville CSD.

8. **Change of Placement or Program** - If, at any time during the course of the contract, Greenville determines that its placement is no longer appropriate to meet the needs of the Student or determines that it is unable to continue to provide all the services as recommended on the Child's IEP, Greenville shall notify immediately both the Parent and Hunter-Tannersville CSD, in writing, of its concerns and Hunter-Tannersville CSD shall schedule a meeting, if necessary, to review the Student's special education program and make whatever changes and recommendations are determined necessary and appropriate to the student's IEP. In the event of a dispute over a student's placement, nothing in this agreement is intended to create a pendency placement for a student in Greenville.

9. **Other Students.** Nothing herein shall require Greenville to admit any other non-resident student, either upon request of Hunter-Tannersville, or any other school district, or any non-resident parent. Except as provided by this Agreement, Greenville Policy 6.170, regarding residency, shall remain in full force and effect unless and until it is amended or repealed by the Greenville Board of Education.

10. **Record Confidentiality.** Hunter-Tannersville and Greenville agree to maintain the confidentiality of any student records provided by one District to the other in accordance with state and federal law.

11. **Qualifications and Certification.** The services under this Agreement shall be performed only by qualified professionals acting within the scope of their applicable license or certification and the laws and regulations of New York State. Proof of licensure or certification for each individual provider shall be provided to Hunter-Tannersville upon request. The services provided by Greenville pursuant to this Agreement shall at all times comply with all applicable laws and regulations governing the provision

of such services. Greenville shall comply with prevailing standards of care in the community with respect to the provision of services to the Student. It shall further be the responsibility of Greenville to ensure that all required criminal history checks for staff are completed, and to provide Hunter-Tannersville with proof of the same, upon request.

12. **Insurance**. Greenville shall obtain and maintain, during the term of this Agreement or any extension or renewal thereof, professional liability insurance, which shall include coverage for employment practices, on an occurrence basis, in the minimum amount of \$1,000,000 per occurrence and \$3,000,000 in the aggregate. Greenville shall provide proof of such insurance to Hunter-Tannersville, upon request.

13. **Indemnification of Greenville**. Hunter-Tannersville will indemnify Greenville and save it harmless from and against any and all claims, actions, damages, liabilities and expenses in connection with loss of life, personal injury and/or damage to property arising from or out of any occurrence occasioned wholly or in part by an act or omission of Hunter-Tannersville, its agents, employees and/or servants subject to the terms and limits of insurance carried by Hunter-Tannersville. In the event Greenville shall, without fault on its part, be made a party to any litigation commenced by or against Hunter-Tannersville, Hunter-Tannersville shall protect and hold Greenville harmless and pay all costs, expenses and reasonable attorney's fees incurred or paid by Greenville in connection with such litigation. Hunter-Tannersville shall provide written notification to Greenville upon notification or knowledge of any claim being made under this provision.

14. **Indemnification of Hunter-Tannersville**. Greenville will indemnify Hunter-Tannersville and save it harmless from and against any and all claims, actions, damages, liabilities and expenses in connection with loss of life, personal injury and/or damage to property arising from or out of any occurrence occasioned wholly or in part by an act or omission of Greenville, its agents, employees and/or servants subject to the terms and limits of insurance carried by Greenville. In the event Hunter-Tannersville shall, without fault on its part, be made a party to any litigation commenced by or against Greenville, Greenville shall protect and hold Hunter-Tannersville harmless and pay all costs, expenses

and reasonable attorney's fees incurred or paid by Hunter-Tannersville in connection with such litigation. Greenville shall provide written notification to Hunter-Tannersville upon notification or knowledge of any claim being under this provision.

15. **Independent Contractor.** This Agreement does not create an employee-employer relationship between Hunter-Tannersville and any Greenville employee. Staff assigned to provide services to the Student at Greenville shall remain employees of Greenville for all purposes, and shall not be entitled to any of the benefits or terms or conditions of employment accorded to employees of Hunter-Tannersville.

16. **Termination.** This Agreement may be terminated by written notice by either party to the other party upon thirty (30) days written notice. Upon any such termination, the parties shall endeavor in an orderly manner to wind down activities hereunder.

17. **Counterparts; Delivery by Facsimile or Electronically.** This Agreement may be executed in one or more counterparts, each of which shall for all purposes be deemed to be an original and all of which shall constitute the same instrument. Delivery and execution of an executed counterpart of a signature page to this Agreement by facsimile or electronically shall be effective as delivery of a manually executed counterpart of this Agreement.

18. **Headings.** The headings of the sections and paragraphs of this Agreement are inserted for convenience only and shall not be deemed to constitute part of this Agreement or to affect the construction hereof.

19. **Assignment.** The terms and conditions of this Agreement shall not be assigned by any party hereto without the prior written consent of the other party.

20. **Amendment.** Neither this Agreement nor any of its terms may be changed or modified, waived, or terminated (unless as otherwise provided hereunder) except by an instrument in writing signed by an authorized representative of the party against whom the enforcement of the change, waiver, or termination is sought.

21. **Choice of Law.** This Agreement shall be governed by the laws of the State of New York and any dispute arising out of or under this Agreement shall be resolved in an action or proceeding commenced in a court of competent jurisdiction in the County of Greene, State of New York.

22. **Entire Agreement.** This Agreement contains the entire understanding between the parties with reference to the matters contained herein. No amendments to this agreement shall be valid unless made in writing and signed by both parties.

23. **Execution.** This Agreement shall not become final and binding unless and until it is approved by the Boards of Education of Greenville and Hunter-Tannersville. By signing below, the Superintendent of Schools for each district represents that she/he has been authorized by her/his district's Board of Education to enter into this Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed the Agreement the date set forth below.

**GREENVILLE CENTRAL SCHOOL DISTRICT**

Date: \_\_\_\_\_ BY \_\_\_\_\_

**Cheryl A. Dudley  
Superintendent of Schools**

**HUNTER-TANNERSVILLE CENTRAL SCHOOL DISTRICT**

Date: \_\_\_\_\_ BY \_\_\_\_\_

**Dr. Patrick Darfler-Sweeney  
Superintendent of Schools**

To: Donna Accuosti

Date: January 7, 2014

I would recommend the following proposal:

This proposal, in absence of any state-required coaching licensure for cheerleading, is to take effect during the current season and is in addition to the current district guidelines for coaching.

1. Cheerleading advisors shall become certified by the AACCA (American Association of Cheerleading Coaches and Administrators). It is a rigorous safety and coaching certification course for cheerleading advisors that also helps them to organize practices, create safety/emergency plans, work with any age group, and work within the framework of a school district.
2. This course is good for four (4) years and has a \$75 fee.
3. Traditional state-approved CPR and First aid courses are still required to be kept current by the coaches.
4. Coaches shall still complete the yearly CDC "Heads Up" concussion course online.
5. Coaches shall still complete district wellness training, Right to Know, and Blood-Borne Pathogens courses.

The following pages are information from the AACCA website. AACCA is currently endorsed by the NFHS, the national governing body of high school sports. Each state may adopt different mandates and rules, but NFHS rules are used by certain sports in NYS, such as baseball, football, and soccer.

Also, this information gives an in-depth look at the resources that will become available to members who register and achieve AACCA certification. There is much, much more information on the website, but this is a very detailed snapshot of what this organization has to offer our district.

Brian Mazza

Assistant District Principal

Greenville CSD

The **AACCA** Spirit Safety Certification Program is a lecture course, study manual, and timed exam designed to educate cheerleading and dance coaches in all aspects of spirit safety and risk management.

The course is a three-hour lecture and review of the **AACCA** Safety Manual directed by an **AACCA** National Safety Instructor. The course covers such topics as legal and medical responsibilities, spotting, skill progressions, environmental safety concerns, psychological readiness, physical readiness, program evaluation and more. It concludes with a 90-minute, 100-question exam. A score of 70 must be achieved to qualify for certification. The course tuition is \$75, which includes the required **AACCA** Safety Manual.

The minimum age to take the course for certification is 18 years of age. Those under 18 can take the course as a benefit to their safety awareness, but certification will not be given until the age of 18.

The certification is valid for four years, and provides the certified coach with one million dollars of secondary liability insurance coverage for coaches who are employed full time by a school or school district as the primary coach or advisor for the school's cheerleader or dance squad(s) and are at least 21 years of age. Coverage for certified members remains in force for four years, subject to the renewal of the master policy. There is no policy at this time for non-school coaches.

Coaches will receive a certificate attesting that they have successfully completed the **AACCA** Safety Certification Course.

### **About AACCA**

The American Association of Cheerleading Coaches and Administrators, **AACCA**, is a non-profit educational association for the over 70,000 cheerleading coaches across the United States. Founded in 1987, members of the association include: youth, junior high school, high school, all-star, and college or university coaches/advisors, as well as leading national cheerleading instructional companies dedicated to the safe and responsible practice of student cheerleading.



### ***What can an AACCA certification do for you?***



**CHEERLEADERS –**

Cheerleaders who are trained by **AACCA** certified coaches develop a sense of security and confidence! They know that they will practice and perform under the safest conditions possible. Cheerleaders will also learn that the athletic activity of cheerleading is about more than just stunting and tumbling. It's also about community outreach, school spirit, and leadership.



#### **COACHES –**

Coaches who are **AACCA** certified gain the understanding of how to implement the need for safety as their program evolves. They can rest, assured that they are getting the **BEST** safety training from experienced professionals with expert credentials in cheerleading and risk management. Coaches will also enjoy the **AACCA** website! It will provide them with updates, news, cheer related stories and resources!

#### **PARENTS –**

Parents get a sense of relief that their children are under the best supervision and care. They get a sense of security that, with **AACCA**, there is a professional organization looking out for the safety of their children! Parents can read more about the type of safety training **AACCA** provides in A Parent's Guide to Cheerleading Safety!

#### **ADMINISTRATORS –**

Administrators enjoy the fact that the certification is valid for four years, and is reviewed and updated. Administrators also like the fact that **AACCA** provides a certified coach with one million dollars of secondary liability insurance coverage.



## Administrator's Checklist of Cheerleading Programs -

With the proper procedures, safety rules, supervision and equipment in place, cheerleading can be a very rewarding, relatively safe activity for young people. The following checklist is provided for administrators to help them provide a safe environment of the cheerleading program.

It is recommended that the administrator and the cheerleading supervisor meet periodically to discuss needs, objectives and goals of the program.

For more information, please call the **AACCA** office at **800-533-6583**, or visit the **AACCA** web site at <http://www.aacca.org>.

- Is there supervision at all official events (practices, games, etc.?)
- Is adequate matting provided?
- Does the squad follow a conditioning and flexibility program?
- Is the coach trained in proper skill development and safety procedures?
- Are the safety guidelines being followed?
- Are there written, oral and posted warnings concerning the risk involved?
- Is there an "Emergency Plan" in place?
- If competitions are attended, are mats and professional spotters provided?

**RESOLUTION OF THE  
TOWN OF RENSSELAERVILLE  
TOWN BOARD**

WHEREAS, by resolution dated August 9, 2007, the Town Board of the Town of Rensselaerville, Albany County, New York, approved the purchase of a parcel of land in Potter Hollow ("Parcel"), more specifically described in the attached proposed deed; and

WHEREAS, the Town subsequently acquired the Parcel; and

WHEREAS, the Town Board is considering conveyance of the Parcel to the Greenville Central School District without consideration, pursuant to Section 72(h) of the General Municipal Law, under terms set out in the attached proposed deed;

NOW THEREFORE, BE IT RESOLVED by the duly convened Town Board of the Town of Rensselaerville, Albany County, New York, that (1) the Town Attorney is authorized to provide to counsel for the Greenville Central School District the attached proposed deed for discussion purposes; and (2) the Town Board's approval of the conveyance will be subject to a separate resolution and may include the execution of a contract including any other terms desired by the Town Board.

**By motion made by \_\_\_\_\_, and seconded by \_\_\_\_\_, the foregoing resolution was adopted by a majority of the members of the Town Board of the Town of Rensselaerville on the \_\_\_ day of \_\_\_\_\_ 2014 as follows:**

<b>Supervisor Lounsbury</b>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input type="checkbox"/>
<b>Councilwoman Cooke</b>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input type="checkbox"/>
<b>Councilman Bolte</b>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input type="checkbox"/>
<b>Councilwoman Sedlmeir</b>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input type="checkbox"/>
<b>Councilman Wood</b>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input type="checkbox"/>

WARRANTY DEED WITH REVERSION

THIS INDENTURE made the \_\_\_\_\_ day of \_\_\_\_\_, Two Thousand Fourteen,

BETWEEN Town of Rensselaerville, a municipality, having offices at 87 Barger Road, Medusa, New York, 12120 (“Grantor”), party of the first part, and Greenville Central School District, a municipality, having offices at 4976 New York 81, Greenville, New York 12083 (“Grantee”), party of the second part,

WITNESSETH that the party of the first part, in consideration of One and 00/100 (\$1.00) Dollar lawful money of the United States, and other good and valuable consideration paid by the party of the second part, does hereby grant and release unto the party of the second part, its successors and/or assigns forever, all

that certain piece or parcel or lot of land lying and being in the Town of Rensselaerville, County of Albany and State of New York, bounded and described as follows:

Beginning at a point on the west side of Potter Hollow Mountain Road said point being marked by a concrete post driven in the ground on the southwest side of a culvert running along said road, and lying 15 feet from the edge of said road and 18 feet south of the southeast corner of the schoolhouse, and 110 feet on a course of South 40 deg. West from the southwest corner of a bridge crossing said road; and running from said point of beginning North 60 deg. West 240 feet, more or less, to the center of Potter Hollow Creek; running thence South 75 deg. West 90 feet, more or less, to a point marked by an iron stake driven in the ground; running thence South 15 deg. East 300 feet, more or less, to a point marked by an iron stake driven in the ground on the northwest side of said road; and running thence North 55 deg. East 255 feet, more or less, to the point or place of beginning; containing one acre of land, more or less.

Subject to governmental regulations, covenants, easements, restrictions of record and such state of facts as an accurate Survey of the premises may disclose.

Being the same premises conveyed from Donald F. Coupe and Geraldine M. Coupe to Town of Rensselaerville by deed dated October 23, 2007 and recorded in the Albany County Clerk’s Office on December 3, 2007 in Book 2904 of Deeds at page 661.

TOGETHER with the appurtenances and all the estate and rights of the party of the first part in and to said premises,

TO HAVE AND TO HOLD the premises herein granted unto the party of the second part, its successors and/or assigns forever.

AND said party of the first part covenants as follows:

**RECORD AND RETURN TO:**

Thomas R. Fallati, Esq.  
Tabner, Ryan and Keniry, LLP  
18 Corporate Woods Boulevard, Suite 8  
Albany, New York 12211

FIRST, that the party of the second part shall quietly enjoy the said premises;

SECOND, that said party of the first part will forever warrant the title to said premises.

THIRD, that, in compliance with Sec. 13 of the Lien Law, the grantor will receive the consideration for this conveyance and will hold the right to receive such consideration as a trust fund to be applied first for the purpose of paying the cost of the improvement and will apply the same first to the payment of the cost of the improvement before using any part of the total of the same for any other purpose.

Notwithstanding anything herein to the contrary, this conveyance is also made with the express limitation that Grantee's estate in the property conveyed herein (the "Property") shall continue only for as long as all of the Property is owned by Grantee; and at such time as or in the event that the Property or any portion of the Property is conveyed, offered for sale, or a contract is entered into for the sale of the Property, all of the Property, together with all improvements, buildings and fixtures located thereon that are of a permanent nature, and the title thereto shall immediately and automatically revert to Grantor, its successors, and assigns. It being the intent of Grantor to convey hereby a determinable fee which shall terminate, and the title revert, upon the conveyance or offer of sale of the Property to any third party. Notwithstanding the immediately preceding sentence, title to the Property shall not revert to Grantor, its successors and assigns, if Grantor (or its successors and assigns, as appropriate) shall give written notice to Grantee stating that Grantor consents to the sale of the Property or any portion of the Property by Grantee to a third party.

**The word "party" shall be construed as if it read "parties" whenever the sense of this indenture so requires.**

IN WITNESS WHEREOF, the party of the first part has duly executed this deed the day and year first above written.

IN PRESENCE OF

TOWN OF RENSSELAERVILLE

By: \_\_\_\_\_

Name:

Title:

STATE OF NEW YORK)

COUNTY OF )SS.:

On the \_\_\_\_\_ day of \_\_\_\_\_, 2014, before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/their executed the same in his/her/their capacity and that by his/her/their signature(s) on the instrument, the individual(s), or the person(s) upon behalf of which the individual(s) acted, executed the instrument.

*AFFIX STAMP HERE*

\_\_\_\_\_  
Notary Public

Feb. 20, 2014

**EASEMENT AND RIGHT OF WAY**

**THIS INDENTURE** made and entered into on the \_\_\_\_ day of February, 2014, by and between **Greenville Central School** with its principle place of business being located at 11219 State Route 32, Greenville, NY 12083, hereinafter "**School District**", and the **Town of Greenville**, a municipal corporation with its primary place of business being located at Pioneer Hall, PO Box 38, Greenville, NY, 12083, hereinafter "**Town**".

The School District is the owner of a parcel of land situate, lying and being in the Town of Greenville, Greene County, New York, as described in the Greene County Clerk's Office Deeds 425 at Page 68 and further described as bearing tax map number 12.04-4-11, and being located at 11249 State Route 32.

**WITNESSETH:** That the School District, in consideration of One Dollar (\$1.00) lawful money of the United States and other goods and valuable consideration paid by the Town, does hereby remise, release, grant and forever quitclaim unto the Town, an easement, as depicted upon the attached map which is made a part hereof, for the purpose of furnishing, installing, and maintaining a municipal waste water mains/pipes/system, with the right to enter upon the School District's adjoining property, as needed for the construction, maintenance and proper operation of said public utility.

Except as herein granted, the School District shall continue to have the full use and enjoyment of the property.

The Town assumes full responsibility for the restoration of the surface of said property over any installed waste water main, pipe or other system or portion of the infrastructure; with the exception of plantings that may inhibit or limit the function of the waste water system.

No work will begin until the School District has approved, in writing, the date of commencement, completion and scope of work. All work once commenced will be completed within a reasonable period of time and no work may be done at any time or in any manner which will jeopardize the health, safety and welfare of the students of the District.

The Town shall hold the School District harmless for any damage to the Town's real and/or personal property, including its sewer line and/or facilities, due to shutdowns, repairs, maintenance, emergency conditions, malfunctions, or operation of the School District's sewer line.

UTILITY EASEMENT

The Town acknowledges that it is responsible for any costs, fees, taxes, assessments, rentals and or charges assessed by the current or proposed Greenville Sewer District or any other taxing or assessing authority for the installation, use, operation, maintenance, use and/or repair of the sewer line. The Parties acknowledge that this restriction is limited solely to the sewer main and does not apply to the School District's use of the municipal sewer system, including but not limited to hook ups, sewer use and rents.

To have and to hold the easement and right of way herein granted unto the Town forever.

The Town's rights hereunder may not be assigned, except with the express written consent of the School District.

*IN WITNESS WHEREOF*, the School District has set their hand and seal the day and year first above written.

\_\_\_\_\_  
(Name)

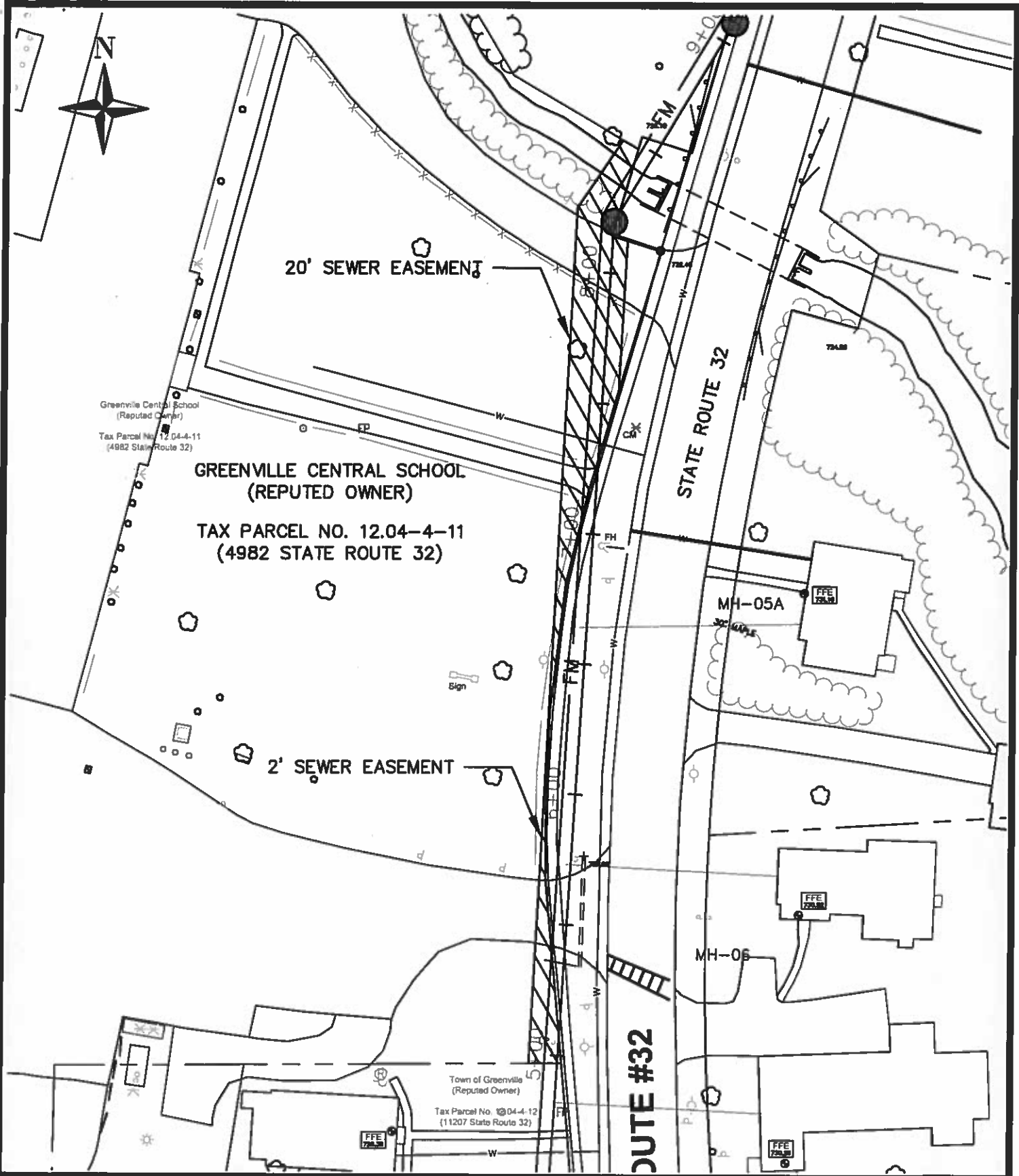
\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Signature)

STATE OF NEW YORK    )  
COUNTY OF            )

On the \_\_\_\_ day of \_\_\_\_\_ in the year 2014 before me, the undersigned, a Notary Public in and for said State, personally appeared \_\_\_\_\_ personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individuals acted, executed the instrument.

\_\_\_\_\_  
Notary Public



REPUTED PROPERTY OWNER: GREENVILLE CENTRAL SCHOOL  
 MAILING ADDRESS: PO BOX 129  
 GREENVILLE, NY 12083


TAX MAP REFERENCE NO: 12.04-4-11 REFERENCE DEED: BOOK 425, PAGE 68  
 PROPERTY ADDRESS: 4982 STATE ROUTE 32

SHEET NO:  
 12.04-4-11

**TOWN OF GREENVILLE  
 GREENE, NY**  
 SHOWING LANDS OVER WHICH A PERMANENT AND/OR TEMPORARY EASEMENT IS TO BE ACQUIRED FOR THE PURPOSE OF INSTALLING AND MAINTAINING A SEWER COLLECTION SYSTEM. PROPERTY LINES DEPICTED ARE BASED ON TOWN OF SHANDAKENTAX MAPS. ACTUAL BOUNDARIES MAY VARY.

DATE: 11-13-2013  
 DRAWN BY: MRT  
 SCALE: 1" = 50'  
 REVIEWED BY: REVIEWER  
 PROJECT NO.: 04-343  
 FILE:

**DELAWARE ENGINEERING, P.C.**  
 ALBANY:  
 25 Madison Avenue Extension - Albany, NY 12203  
 Phone: (518) 452-1250 - Fax: (518) 452-1335  
 ONEONTA:  
 8-12 Dietz Street, Suite 303 - Oneonta, NY 13820  
 Phone: (607) 432-8073 - Fax: (607) 432-0432





# Combined Real Estate Transfer Tax Return, Credit Line Mortgage Certificate, and Certification of Exemption from the Payment of Estimated Personal Income Tax

Recording office time stamp

See Form TP-584-I, Instructions for Form TP-584, before completing this form. Print or type.

**Schedule A — Information relating to conveyance**

Grantor/Transferor <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Estate/Trust <input type="checkbox"/> Single member LLC <input checked="" type="checkbox"/> Other	Name (if individual, last, first, middle initial) ( <input type="checkbox"/> check if more than one grantor ) Greenville Central School  Mailing address PO Box 129  City State ZIP code Greenville NY 12083  Single member's name if grantor is a single member LLC (see instructions)	Social security number       Social security number       Federal EIN       Single member EIN or SSN
Grantee/Transferee <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Estate/Trust <input type="checkbox"/> Single member LLC <input type="checkbox"/> Other	Name (if individual, last, first, middle initial) ( <input type="checkbox"/> check if more than one grantee )  Mailing address   City State ZIP code   Single member's name if grantee is a single member LLC (see instructions)	Social security number       Social security number       Federal EIN       Single member EIN or SSN

**Location and description of property conveyed**

Tax map designation – Section, block & lot (include dots and dashes)	SWIS code (six digits)	Street address	City, town, or village	County
12.04-4-11	193200	4982 State Route 32	Greenville (Town)	Greene

**Type of property conveyed (check applicable box)**

1 <input type="checkbox"/> One- to three-family house 2 <input type="checkbox"/> Residential cooperative 3 <input type="checkbox"/> Residential condominium 4 <input type="checkbox"/> Vacant land	5 <input type="checkbox"/> Commercial/Industrial 6 <input type="checkbox"/> Apartment building 7 <input type="checkbox"/> Office building 8 <input checked="" type="checkbox"/> Other <u>Central School</u>	Date of conveyance <table style="width: 100%; border: 1px solid black;"> <tr> <td style="width: 33%; text-align: center;"> </td> <td style="width: 33%; text-align: center;"> </td> <td style="width: 33%; text-align: center;"> </td> </tr> <tr> <td style="text-align: center; font-size: small;">month</td> <td style="text-align: center; font-size: small;">day</td> <td style="text-align: center; font-size: small;">year</td> </tr> </table>				month	day	year	Percentage of real property conveyed which is residential real property _____% (see instructions)
month	day	year							

**Condition of conveyance (check all that apply)**

a. <input type="checkbox"/> Conveyance of fee interest  b. <input type="checkbox"/> Acquisition of a controlling interest (state percentage acquired _____%)  c. <input type="checkbox"/> Transfer of a controlling interest (state percentage transferred _____%)  d. <input type="checkbox"/> Conveyance to cooperative housing corporation  e. <input type="checkbox"/> Conveyance pursuant to or in lieu of foreclosure or enforcement of security interest (attach Form TP-584.1, Schedule E)	f. <input type="checkbox"/> Conveyance which consists of a mere change of identity or form of ownership or organization (attach Form TP-584.1, Schedule F)  g. <input type="checkbox"/> Conveyance for which credit for tax previously paid will be claimed (attach Form TP-584.1, Schedule G)  h. <input type="checkbox"/> Conveyance of cooperative apartment(s)  i. <input type="checkbox"/> Syndication  j. <input type="checkbox"/> Conveyance of air rights or development rights  k. <input type="checkbox"/> Contract assignment	l. <input type="checkbox"/> Option assignment or surrender  m. <input type="checkbox"/> Leasehold assignment or surrender  n. <input type="checkbox"/> Leasehold grant  o. <input checked="" type="checkbox"/> Conveyance of an easement  p. <input type="checkbox"/> Conveyance for which exemption from transfer tax claimed (complete Schedule B, Part III)  q. <input type="checkbox"/> Conveyance of property partly within and partly outside the state  r. <input type="checkbox"/> Conveyance pursuant to divorce or separation  s. <input type="checkbox"/> Other (describe) _____
--	--	---

For recording officer's use	Amount received Schedule B., Part I \$ _____ Schedule B., Part II \$ _____	Date received	Transaction number
-----------------------------	--	---------------	--------------------



**Schedule B — Real estate transfer tax return (Tax Law, Article 31)**

**Part I – Computation of tax due**

- 1 Enter amount of consideration for the conveyance (if you are claiming a total exemption from tax, check the exemption claimed box, enter consideration and proceed to Part III) .....  **Exemption claimed**
- 2 Continuing lien deduction (see instructions if property is taken subject to mortgage or lien) .....
- 3 Taxable consideration (subtract line 2 from line 1) .....
- 4 Tax: \$2 for each \$500, or fractional part thereof, of consideration on line 3 .....
- 5 Amount of credit claimed for tax previously paid (see instructions and attach Form TP-584.1, Schedule G) .....
- 6 Total tax due\* (subtract line 5 from line 4) .....

1.		0 00
2.		
3.		0 00
4.		0 00
5.		
6.		0 00

**Part II – Computation of additional tax due on the conveyance of residential real property for \$1 million or more**

- 1 Enter amount of consideration for conveyance (from Part I, line 1) .....
- 2 Taxable consideration (multiply line 1 by the percentage of the premises which is residential real property, as shown in Schedule A) ...
- 3 Total additional transfer tax due\* (multiply line 2 by 1% (.01)) .....

1.		
2.		
3.		

**Part III – Explanation of exemption claimed on Part I, line 1 (check any boxes that apply)**

The conveyance of real property is exempt from the real estate transfer tax for the following reason:

- a. Conveyance is to the United Nations, the United States of America, the state of New York, or any of their instrumentalities, agencies, or political subdivisions (or any public corporation, including a public corporation created pursuant to agreement or compact with another state or Canada) ..... a
- b. Conveyance is to secure a debt or other obligation..... b
- c. Conveyance is without additional consideration to confirm, correct, modify, or supplement a prior conveyance..... c
- d. Conveyance of real property is without consideration and not in connection with a sale, including conveyances conveying realty as bona fide gifts ..... d
- e. Conveyance is given in connection with a tax sale..... e
- f. Conveyance is a mere change of identity or form of ownership or organization where there is no change in beneficial ownership. (This exemption cannot be claimed for a conveyance to a cooperative housing corporation of real property comprising the cooperative dwelling or dwellings.) Attach Form TP-584.1, Schedule F..... f
- g. Conveyance consists of deed of partition..... g
- h. Conveyance is given pursuant to the federal Bankruptcy Act ..... h
- i. Conveyance consists of the execution of a contract to sell real property, without the use or occupancy of such property, or the granting of an option to purchase real property, without the use or occupancy of such property ..... i
- j. Conveyance of an option or contract to purchase real property with the use or occupancy of such property where the consideration is less than \$200,000 and such property was used solely by the grantor as the grantor's personal residence and consists of a one-, two-, or three-family house, an individual residential condominium unit, or the sale of stock in a cooperative housing corporation in connection with the grant or transfer of a proprietary leasehold covering an individual residential cooperative apartment..... j
- k. Conveyance is not a conveyance within the meaning of Tax Law, Article 31, section 1401(e) (attach documents supporting such claim) ..... k

\*The total tax (from Part I, line 6 and Part II, line 3 above) is due within 15 days from the date conveyance. Please make check(s) payable to the county clerk where the recording is to take place. If the recording is to take place in the New York City boroughs of Manhattan, Bronx, Brooklyn, or Queens, make check(s) payable to the **NYC Department of Finance**. If a recording is not required, send this return and your check(s) made payable to the **NYS Department of Taxation and Finance**, directly to the NYS Tax Department, RETT Return Processing, PO Box 5045, Albany NY 12205-5045.

**Schedule C – Credit Line Mortgage Certificate (Tax Law, Article 11)**

Complete the following only if the interest being transferred is a fee simple interest.

I (we) certify that: (check the appropriate box)

1.  The real property being sold or transferred is not subject to an outstanding credit line mortgage.
2.  The real property being sold or transferred is subject to an outstanding credit line mortgage. However, an exemption from the tax is claimed for the following reason:
  - The transfer of real property is a transfer of a fee simple interest to a person or persons who held a fee simple interest in the real property (whether as a joint tenant, a tenant in common or otherwise) immediately before the transfer.
  - The transfer of real property is (A) to a person or persons related by blood, marriage or adoption to the original obligor or to one or more of the original obligors or (B) to a person or entity where 50% or more of the beneficial interest in such real property after the transfer is held by the transferor or such related person or persons (as in the case of a transfer to a trustee for the benefit of a minor or the transfer to a trust for the benefit of the transferor).
  - The transfer of real property is a transfer to a trustee in bankruptcy, a receiver, assignee, or other officer of a court.
  - The maximum principal amount secured by the credit line mortgage is \$3,000,000 or more, and the real property being sold or transferred is **not** principally improved nor will it be improved by a one- to six-family owner-occupied residence or dwelling.

**Please note:** for purposes of determining whether the maximum principal amount secured is \$3,000,000 or more as described above, the amounts secured by two or more credit line mortgages may be aggregated under certain circumstances. See TSB-M-96(6)-R for more information regarding these aggregation requirements.

  - Other (attach detailed explanation).
3.  The real property being transferred is presently subject to an outstanding credit line mortgage. However, no tax is due for the following reason:
  - A certificate of discharge of the credit line mortgage is being offered at the time of recording the deed.
  - A check has been drawn payable for transmission to the credit line mortgagee or his agent for the balance due, and a satisfaction of such mortgage will be recorded as soon as it is available.
4.  The real property being transferred is subject to an outstanding credit line mortgage recorded in \_\_\_\_\_ (insert liber and page or reel or other identification of the mortgage). The maximum principal amount of debt or obligation secured by the mortgage is \_\_\_\_\_. No exemption from tax is claimed and the tax of \_\_\_\_\_ is being paid herewith. (Make check payable to county clerk where deed will be recorded or, if the recording is to take place in New York City but not in Richmond County, make check payable to the NYC Department of Finance.)

**Signature (both the grantor(s) and grantee(s) must sign)**

The undersigned certify that the above information contained in schedules A, B, and C, including any return, certification, schedule, or attachment, is to the best of his/her knowledge, true and complete, and authorize the person(s) submitting such form on their behalf to receive a copy for purposes of recording the deed or other instrument effecting the conveyance.

\_\_\_\_\_  
Grantor signature\_\_\_\_\_  
Title\_\_\_\_\_  
Grantee signature\_\_\_\_\_  
Title\_\_\_\_\_  
Grantor signature\_\_\_\_\_  
Title\_\_\_\_\_  
Grantee signature\_\_\_\_\_  
Title

**Reminder:** Did you complete all of the required information in Schedules A, B, and C? Are you required to complete Schedule D? If you checked e, f, or g in Schedule A, did you complete Form TP-584.1? Have you attached your check(s) made payable to the county clerk where recording will take place or, if the recording is in the New York City boroughs of Manhattan, Bronx, Brooklyn, or Queens, to the **NYC Department of Finance**? If no recording is required, send your check(s), made payable to the **Department of Taxation and Finance**, directly to the NYS Tax Department, RETT Return Processing, PO Box 5045, Albany NY 12205-5045.

**Schedule D - Certification of exemption from the payment of estimated personal income tax (Tax Law, Article 22, section 663)**

Complete the following only if a fee simple interest or a cooperative unit is being transferred by an individual or estate or trust.

If the property is being conveyed by a referee pursuant to a foreclosure proceeding, proceed to Part II, and check the second box under *Exemptions for nonresident transferor(s)/seller(s)* and sign at bottom.

**Part I - New York State residents**

If you are a New York State resident transferor(s)/seller(s) listed in Schedule A of Form TP-584 (or an attachment to Form TP-584), you must sign the certification below. If one or more transferors/sellers of the real property or cooperative unit is a resident of New York State, each resident transferor/seller must sign in the space provided. If more space is needed, please photocopy this Schedule D and submit as many schedules as necessary to accommodate all resident transferors/sellers.

**Certification of resident transferor(s)/seller(s)**

This is to certify that at the time of the sale or transfer of the real property or cooperative unit, the transferor(s)/seller(s) as signed below was a resident of New York State, and therefore is not required to pay estimated personal income tax under Tax Law, section 663(a) upon the sale or transfer of this real property or cooperative unit.

Signature	Print full name	Date
Signature	Print full name	Date
Signature	Print full name	Date
Signature	Print full name	Date

**Note:** A resident of New York State may still be required to pay estimated tax under Tax Law, section 685(c), but not as a condition of recording a deed.

**Part II - Nonresidents of New York State**

If you are a nonresident of New York State listed as a transferor/seller in Schedule A of Form TP-584 (or an attachment to Form TP-584) but are not required to pay estimated personal income tax because one of the exemptions below applies under Tax Law, section 663(c), check the box of the appropriate exemption below. If any one of the exemptions below applies to the transferor(s)/seller(s), that transferor(s)/seller(s) is not required to pay estimated personal income tax to New York State under Tax Law, section 663. Each nonresident transferor/seller who qualifies under one of the exemptions below must sign in the space provided. If more space is needed, please photocopy this Schedule D and submit as many schedules as necessary to accommodate all nonresident transferors/sellers.

If none of these exemption statements apply, you must complete Form IT-2663, *Nonresident Real Property Estimated Income Tax Payment Form*, or Form IT-2664, *Nonresident Cooperative Unit Estimated Income Tax Payment Form*. For more information, see *Payment of estimated personal income tax*, on page 1 of Form TP-584-1.

**Exemption for nonresident transferor(s)/seller(s)**

This is to certify that at the time of the sale or transfer of the real property or cooperative unit, the transferor(s)/seller(s) (grantor) of this real property or cooperative unit was a nonresident of New York State, but is not required to pay estimated personal income tax under Tax Law, section 663 due to one of the following exemptions:

- The real property or cooperative unit being sold or transferred qualifies in total as the transferor's/seller's principal residence (within the meaning of Internal Revenue Code, section 121) from \_\_\_\_\_ to \_\_\_\_\_ (see instructions).  
Date Date
- The transferor/seller is a mortgagor conveying the mortgaged property to a mortgagee in foreclosure, or in lieu of foreclosure with no additional consideration.
- The transferor or transferee is an agency or authority of the United States of America, an agency or authority of the state of New York, the Federal National Mortgage Association, the Federal Home Loan Mortgage Corporation, the Government National Mortgage Association, or a private mortgage insurance company.

Signature	Print full name	Date
Signature	Print full name	Date
Signature	Print full name	Date
Signature	Print full name	Date

Feb. 20, 2014

**EASEMENT AND RIGHT OF WAY**

**THIS INDENTURE** made and entered into on the \_\_\_\_ day of February, 2014, by and between **Greenville Central School** with its principle place of business being located at 11219 State Route 32, Greenville, NY 12083, hereinafter "**School District**", and the **Town of Greenville**, a municipal corporation with its primary place of business being located at Pioneer Hall, PO Box 38, Greenville, NY, 12083, hereinafter "**Town**".

The School District is the owner of a parcel of land situate, lying and being in the Town of Greenville, Greene County, New York, as described in the Greene County Clerk's Office Book of Deeds 1221 at Page 205 and further described as bearing tax map number 12.04-4-27, and being located at 4982 State Route 81.

**WITNESSETH:** That the School District, in consideration of One Dollar (\$1.00) lawful money of the United States and other goods and valuable consideration paid by the Town, does hereby remise, release, grant and forever quitclaim unto the Town, an easement, as depicted upon the attached map which is made a part hereof, for the purpose of furnishing, installing, and maintaining a municipal waste water mains/pipes/system, with the right to enter upon the School District's adjoining property, as needed for the construction, maintenance and proper operation of said public utility.

Except as herein granted, the School District shall continue to have the full use and enjoyment of the property.

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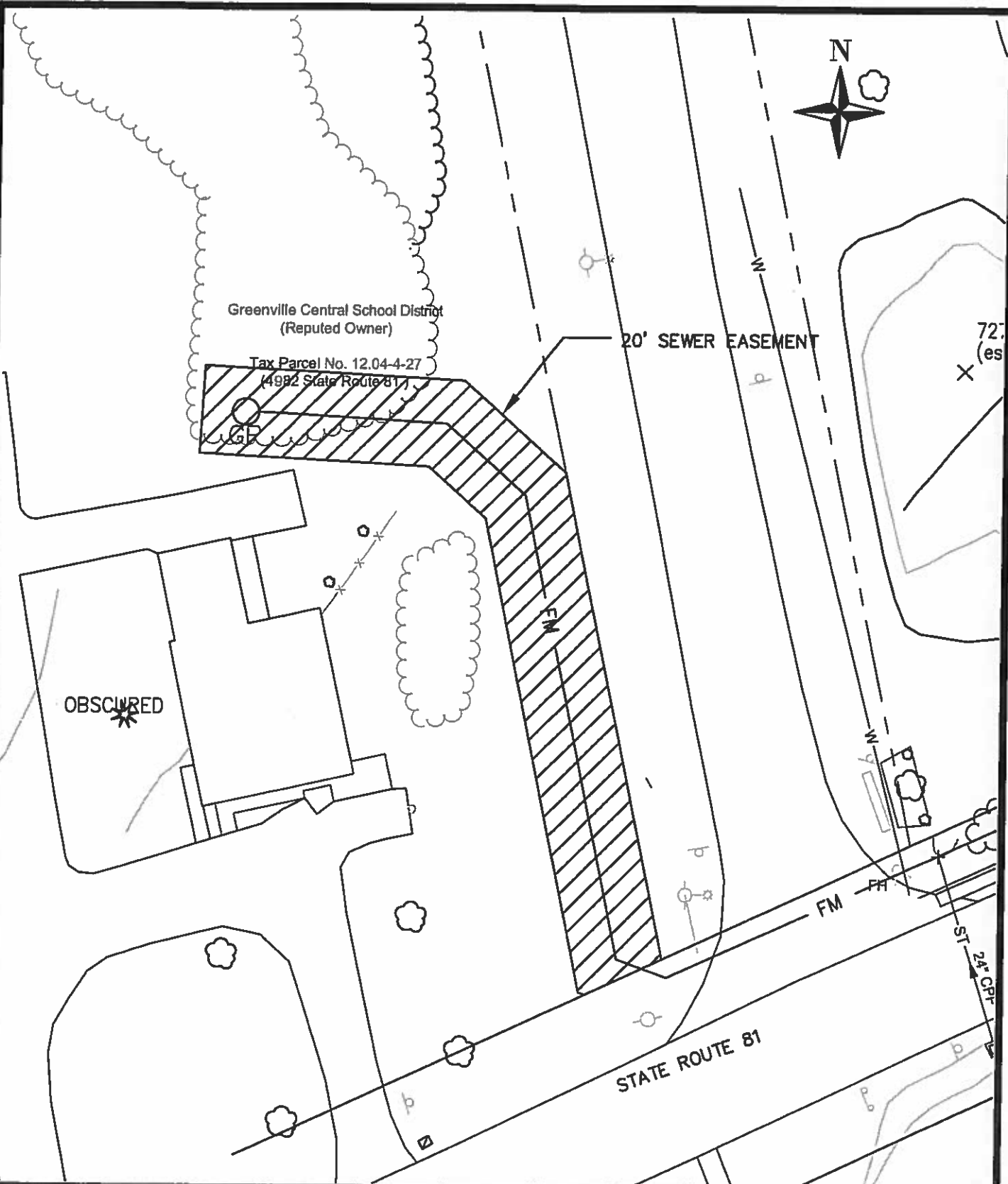
*IN WITNESS WHEREOF*, the School District has set their hand and seal the day and year first above written.

\_\_\_\_\_  
(Name) (Title) (Signature)

STATE OF NEW YORK )  
COUNTY OF )

On the \_\_\_\_ day of \_\_\_\_\_ in the year 2014 before me, the undersigned, a Notary Public in and for said State, personally appeared \_\_\_\_\_ personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individuals acted, executed the instrument.

\_\_\_\_\_  
Notary Public



REPUTED PROPERTY OWNER: GREENVILLE CENTRAL SCHOOL DISTRICT

MAILING ADDRESS: PO BOX 129  
GREENVILLE, NY 12083

TAX MAP REFERENCE NO: 12.04-4-27 REFERENCE DEED: BOOK 1221, PAGE 205

PROPERTY ADDRESS: 4982 STATE ROUTE 81

SHEET NO:

12.04-4-27

**TOWN OF GREENVILLE  
GREENE, NY**

SHOWING LANDS OVER WHICH A PERMANENT AND/OR TEMPORARY EASEMENT IS TO BE ACQUIRED FOR THE PURPOSE OF INSTALLING AND MAINTAINING A SEWER COLLECTION SYSTEM. PROPERTY LINES DEPICTED ARE BASED ON TOWN OF SHANDAKENTAX MAPS. ACTUAL BOUNDARIES MAY VARY.

DATE: 02-10-2014  
DRAWN BY: HRT  
SCALE: 1" = 30'  
REVIEWED BY: REVIEWER  
PROJECT NO.: 04-343  
FILE:

**DELAWARE ENGINEERING, P.C.**



ALBANY:  
26 Mackson Avenue Extension - Albany, NY 12203  
Phone: (518) 452-1290 - Fax: (518) 452-1335  
ONEONTA:  
8-12 Dinez Street, Suite 303 - Oneonta, NY 13870  
Phone: (607) 432-8073 - Fax: (607) 432-0432



# Combined Real Estate Transfer Tax Return, Credit Line Mortgage Certificate, and Certification of Exemption from the Payment of Estimated Personal Income Tax

Recording office time stamp

See Form TP-584-I, Instructions for Form TP-584, before completing this form. Print or type.

**Schedule A — Information relating to conveyance**

<b>Grantor/Transferor</b> <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Estate/Trust <input type="checkbox"/> Single member LLC <input checked="" type="checkbox"/> Other	Name (if individual, last, first, middle initial) ( <input type="checkbox"/> check if more than one grantor ) Greenville Central School Mailing address PO Box 129 City State ZIP code Greenville NY 12083	Social security number  Social security number  Federal EIN Single member EIN or SSN
<b>Grantee/Transferee</b> <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Estate/Trust <input type="checkbox"/> Single member LLC <input type="checkbox"/> Other	Name (if individual, last, first, middle initial) ( <input type="checkbox"/> check if more than one grantee ) Mailing address City State ZIP code Single member's name if grantee is a single member LLC (see instructions)	Social security number  Social security number  Federal EIN Single member EIN or SSN

**Location and description of property conveyed**

Tax map designation – Section, block & lot (include dots and dashes)	SWIS code (six digits)	Street address	City, town, or village	County
12.04-4-27	193200	4982 State Route 32	Greenville (Town)	Greene

**Type of property conveyed (check applicable box)**

1 <input type="checkbox"/> One- to three-family house 2 <input type="checkbox"/> Residential cooperative 3 <input type="checkbox"/> Residential condominium 4 <input type="checkbox"/> Vacant land	5 <input type="checkbox"/> Commercial/Industrial 6 <input type="checkbox"/> Apartment building 7 <input type="checkbox"/> Office building 8 <input checked="" type="checkbox"/> Other <u>Central School</u>	Date of conveyance <table style="width: 100%; border: 1px solid black;"> <tr> <td style="width: 33%; text-align: center;">month</td> <td style="width: 33%; text-align: center;">day</td> <td style="width: 33%; text-align: center;">year</td> </tr> </table>	month	day	year	Percentage of real property conveyed which is residential real property _____ % (see instructions)
month	day	year				

**Condition of conveyance (check all that apply)**

a. <input type="checkbox"/> Conveyance of fee interest  b. <input type="checkbox"/> Acquisition of a controlling interest (state percentage acquired _____ %)	f. <input type="checkbox"/> Conveyance which consists of a mere change of identity or form of ownership or organization (attach Form TP-584.1, Schedule F)  g. <input type="checkbox"/> Conveyance for which credit for tax previously paid will be claimed (attach Form TP-584.1, Schedule G)	i. <input type="checkbox"/> Option assignment or surrender  m. <input type="checkbox"/> Leasehold assignment or surrender  n. <input type="checkbox"/> Leasehold grant  o. <input checked="" type="checkbox"/> Conveyance of an easement  p. <input type="checkbox"/> Conveyance for which exemption from transfer tax claimed (complete Schedule B, Part III)  q. <input type="checkbox"/> Conveyance of property partly within and partly outside the state  r. <input type="checkbox"/> Conveyance pursuant to divorce or separation  s. <input type="checkbox"/> Other (describe) _____
c. <input type="checkbox"/> Transfer of a controlling interest (state percentage transferred _____ %)  d. <input type="checkbox"/> Conveyance to cooperative housing corporation  e. <input type="checkbox"/> Conveyance pursuant to or in lieu of foreclosure or enforcement of security interest (attach Form TP-584.1, Schedule E)	h. <input type="checkbox"/> Conveyance of cooperative apartment(s)  i. <input type="checkbox"/> Syndication  j. <input type="checkbox"/> Conveyance of air rights or development rights  k. <input type="checkbox"/> Contract assignment	

For recording officer's use	Amount received Schedule B., Part I \$ _____ Schedule B., Part II \$ _____	Date received	Transaction number
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**Schedule B — Real estate transfer tax return (Tax Law, Article 31)**

**Part I — Computation of tax due**

- 1 Enter amount of consideration for the conveyance (if you are claiming a total exemption from tax, check the exemption claimed box, enter consideration and proceed to Part III) .....  **Exemption claimed**
- 2 Continuing lien deduction (see instructions if property is taken subject to mortgage or lien) .....
- 3 Taxable consideration (subtract line 2 from line 1) .....
- 4 Tax: \$2 for each \$500, or fractional part thereof, of consideration on line 3 .....
- 5 Amount of credit claimed for tax previously paid (see instructions and attach Form TP-584.1, Schedule G) .....
- 6 Total tax due\* (subtract line 5 from line 4) .....

1.		0 00
2.		
3.		0 00
4.		0 00
5.		
6.		0 00

**Part II — Computation of additional tax due on the conveyance of residential real property for \$1 million or more**

- 1 Enter amount of consideration for conveyance (from Part I, line 1) .....
- 2 Taxable consideration (multiply line 1 by the percentage of the premises which is residential real property, as shown in Schedule A) ...
- 3 Total additional transfer tax due\* (multiply line 2 by 1% (.01)) .....

1.		
2.		
3.		

**Part III — Explanation of exemption claimed on Part I, line 1 (check any boxes that apply)**

The conveyance of real property is exempt from the real estate transfer tax for the following reason:

- a. Conveyance is to the United Nations, the United States of America, the state of New York, or any of their instrumentalities, agencies, or political subdivisions (or any public corporation, including a public corporation created pursuant to agreement or compact with another state or Canada) ..... a
- b. Conveyance is to secure a debt or other obligation..... b
- c. Conveyance is without additional consideration to confirm, correct, modify, or supplement a prior conveyance..... c
- d. Conveyance of real property is without consideration and not in connection with a sale, including conveyances conveying realty as bona fide gifts ..... d
- e. Conveyance is given in connection with a tax sale..... e
- f. Conveyance is a mere change of identity or form of ownership or organization where there is no change in beneficial ownership. (This exemption cannot be claimed for a conveyance to a cooperative housing corporation of real property comprising the cooperative dwelling or dwellings.) Attach Form TP-584.1, Schedule F..... f
- g. Conveyance consists of deed of partition..... g
- h. Conveyance is given pursuant to the federal Bankruptcy Act ..... h
- i. Conveyance consists of the execution of a contract to sell real property, without the use or occupancy of such property, or the granting of an option to purchase real property, without the use or occupancy of such property ..... i
- j. Conveyance of an option or contract to purchase real property with the use or occupancy of such property where the consideration is less than \$200,000 and such property was used solely by the grantor as the grantor's personal residence and consists of a one-, two-, or three-family house, an individual residential condominium unit, or the sale of stock in a cooperative housing corporation in connection with the grant or transfer of a proprietary leasehold covering an individual residential cooperative apartment..... j
- k. Conveyance is not a conveyance within the meaning of Tax Law, Article 31, section 1401(e) (attach documents supporting such claim) ..... k

\*The total tax (from Part I, line 6 and Part II, line 3 above) is due within 15 days from the date conveyance. Please make check(s) payable to the county clerk where the recording is to take place. If the recording is to take place in the New York City boroughs of Manhattan, Bronx, Brooklyn, or Queens, make check(s) payable to the **NYC Department of Finance**. If a recording is not required, send this return and your check(s) made payable to the **NYS Department of Taxation and Finance**, directly to the NYS Tax Department, RETT Return Processing, PO Box 5045, Albany NY 12205-5045.



**Schedule C — Credit Line Mortgage Certificate (Tax Law, Article 11)**

Complete the following only if the interest being transferred is a fee simple interest.

I (we) certify that: (check the appropriate box)

1.  The real property being sold or transferred is not subject to an outstanding credit line mortgage.
2.  The real property being sold or transferred is subject to an outstanding credit line mortgage. However, an exemption from the tax is claimed for the following reason:
  - The transfer of real property is a transfer of a fee simple interest to a person or persons who held a fee simple interest in the real property (whether as a joint tenant, a tenant in common or otherwise) immediately before the transfer.
  - The transfer of real property is (A) to a person or persons related by blood, marriage or adoption to the original obligor or to one or more of the original obligors or (B) to a person or entity where 50% or more of the beneficial interest in such real property after the transfer is held by the transferor or such related person or persons (as in the case of a transfer to a trustee for the benefit of a minor or the transfer to a trust for the benefit of the transferor).
  - The transfer of real property is a transfer to a trustee in bankruptcy, a receiver, assignee, or other officer of a court.
  - The maximum principal amount secured by the credit line mortgage is \$3,000,000 or more, and the real property being sold or transferred is not principally improved nor will it be improved by a one- to six-family owner-occupied residence or dwelling.

**Please note:** for purposes of determining whether the maximum principal amount secured is \$3,000,000 or more as described above, the amounts secured by two or more credit line mortgages may be aggregated under certain circumstances. See TSB-M-96(6)-R for more information regarding these aggregation requirements.

Other (attach detailed explanation).

3.  The real property being transferred is presently subject to an outstanding credit line mortgage. However, no tax is due for the following reason:
  - A certificate of discharge of the credit line mortgage is being offered at the time of recording the deed.
  - A check has been drawn payable for transmission to the credit line mortgagee or his agent for the balance due, and a satisfaction of such mortgage will be recorded as soon as it is available.
4.  The real property being transferred is subject to an outstanding credit line mortgage recorded in \_\_\_\_\_ (insert liber and page or reel or other identification of the mortgage). The maximum principal amount of debt or obligation secured by the mortgage is \_\_\_\_\_. No exemption from tax is claimed and the tax of \_\_\_\_\_ is being paid herewith. (Make check payable to county clerk where deed will be recorded or, if the recording is to take place in New York City but not in Richmond County, make check payable to the NYC Department of Finance.)

**Signature (both the grantor(s) and grantee(s) must sign)**

The undersigned certify that the above information contained in schedules A, B, and C, including any return, certification, schedule, or attachment, is to the best of his/her knowledge, true and complete, and authorize the person(s) submitting such form on their behalf to receive a copy for purposes of recording the deed or other instrument effecting the conveyance.

Grantor signature	Title	Grantee signature	Title
Grantor signature	Title	Grantee signature	Title

**Reminder:** Did you complete all of the required information in Schedules A, B, and C? Are you required to complete Schedule D? If you checked e, f, or g in Schedule A, did you complete Form TP-584.1? Have you attached your check(s) made payable to the county clerk where recording will take place or, if the recording is in the New York City boroughs of Manhattan, Bronx, Brooklyn, or Queens, to the NYC Department of Finance? If no recording is required, send your check(s), made payable to the Department of Taxation and Finance, directly to the NYS Tax Department, RETT Return Processing, PO Box 5045, Albany NY 12205-5045.

**Schedule D - Certification of exemption from the payment of estimated personal income tax (Tax Law, Article 22, section 663)**

Complete the following only if a fee simple interest or a cooperative unit is being transferred by an individual or estate or trust.

If the property is being conveyed by a referee pursuant to a foreclosure proceeding, proceed to Part II, and check the second box under *Exemptions for nonresident transferor(s)/seller(s)* and sign at bottom.

**Part I - New York State residents**

If you are a New York State resident transferor(s)/seller(s) listed in Schedule A of Form TP-584 (or an attachment to Form TP-584), you must sign the certification below. If one or more transferors/sellers of the real property or cooperative unit is a resident of New York State, each resident transferor/seller must sign in the space provided. If more space is needed, please photocopy this Schedule D and submit as many schedules as necessary to accommodate all resident transferors/sellers.

**Certification of resident transferor(s)/seller(s)**

This is to certify that at the time of the sale or transfer of the real property or cooperative unit, the transferor(s)/seller(s) as signed below was a resident of New York State, and therefore is not required to pay estimated personal income tax under Tax Law, section 663(a) upon the sale or transfer of this real property or cooperative unit.

Signature	Print full name	Date
Signature	Print full name	Date
Signature	Print full name	Date
Signature	Print full name	Date

**Note:** A resident of New York State may still be required to pay estimated tax under Tax Law, section 685(c), but not as a condition of recording a deed.

**Part II - Nonresidents of New York State**

If you are a nonresident of New York State listed as a transferor/seller in Schedule A of Form TP-584 (or an attachment to Form TP-584) but are not required to pay estimated personal income tax because one of the exemptions below applies under Tax Law, section 663(c), check the box of the appropriate exemption below. If any one of the exemptions below applies to the transferor(s)/seller(s), that transferor(s)/seller(s) is not required to pay estimated personal income tax to New York State under Tax Law, section 663. Each nonresident transferor/seller who qualifies under one of the exemptions below must sign in the space provided. If more space is needed, please photocopy this Schedule D and submit as many schedules as necessary to accommodate all nonresident transferors/sellers.

If none of these exemption statements apply, you must complete Form IT-2663, *Nonresident Real Property Estimated Income Tax Payment Form*, or Form IT-2664, *Nonresident Cooperative Unit Estimated Income Tax Payment Form*. For more information, see *Payment of estimated personal income tax*, on page 1 of Form TP-584-I.

**Exemption for nonresident transferor(s)/seller(s)**

This is to certify that at the time of the sale or transfer of the real property or cooperative unit, the transferor(s)/seller(s) (grantor) of this real property or cooperative unit was a nonresident of New York State, but is not required to pay estimated personal income tax under Tax Law, section 663 due to one of the following exemptions:

- The real property or cooperative unit being sold or transferred qualifies in total as the transferor's/seller's principal residence (within the meaning of Internal Revenue Code, section 121) from \_\_\_\_\_ Date to \_\_\_\_\_ Date (see instructions).
- The transferor/seller is a mortgagor conveying the mortgaged property to a mortgagee in foreclosure, or in lieu of foreclosure with no additional consideration.
- The transferor or transferee is an agency or authority of the United States of America, an agency or authority of the state of New York, the Federal National Mortgage Association, the Federal Home Loan Mortgage Corporation, the Government National Mortgage Association, or a private mortgage insurance company.

Signature	Print full name	Date
Signature	Print full name	Date
Signature	Print full name	Date
Signature	Print full name	Date

JAN 31 2014

District Office



**GREENVILLE**  
CENTRAL SCHOOL DISTRICT

TO: Cheryl A. Dudley, Superintendent of Schools  
FROM: Tammy J. Sutherland, Assistant Superintendent for Business  
DATE: January 31, 2014  
RE: 13-14 Line Item Capital Project

As part of the 2013/2014 budget, the votes approved a small capital project (\$99,000) for planned Capital Improvements to include:

**Fiber optic site work:** Fiber will be buried and extend from the District office to the school buildings. The current fiber was damaged last April when a tractor trailer turned around, pulling down all the aerial fiber lines. It again needed to be repaired this year. The connection is currently down to only two active fibers out of twelve, so it is important to complete this project ASAP.

**MS/HS Nurses Office:** if funds allow provide handicap accessible bathroom with improvements to the ventilation system. The architects will be bidding this as an alternate, if there is not enough funding, part of the 14/15 annual budget line, will be designated to complete this project.

The districts architects have completed the drawings, and together with legal counsel have prepared the attached SEQRA resolution, which has been determined to be a Type II action having no adverse impact on the environment (*The State Environmental Quality Review Act requires districts to identify and mitigate if any, environmental impacts of projects that they approve*). Once the SEQRA has been approved the architects can submit the documents to the State Education Department for their review and approval.

Maintenance service contracts, building automation, fire systems, heating systems, security alarm system, elevator service	\$	39,320	\$	39,520
Contractual Expenses <i>All other expenses including: painting, interior/exterior repairs, grounds upkeep (stone, sand, soil, seed, fertilizer &amp; blacktop) window &amp; door repairs, boiler &amp; electric repairs, risk management services, uniform/mat service, etc.</i>	\$	205,130	\$	198,980
Supplies & Materials <i>Supplies for general maintenance and upkeep of buildings &amp; grounds including: cleaning and paper supplies, electric &amp; boiler supplies, paint, hand tools, hardware, office supplies, and work boots.</i>	\$	53,325	\$	56,100

<b>OPERATIONS AND MAINTENANCE TOTAL</b>	<b>\$</b>	<b>1,638,985</b>	<b>\$</b>	<b>1,597,725</b>
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		<b>2012-2013 Budget</b>		<b>2013-2014 Budget</b>
<b>SPECIAL ITEMS</b>				
Judgment and Claims	\$	2,000	\$	2,000
Property Tax Refunds	\$	1,000	\$	1,000
<b>SPECIAL ITEMS TOTAL</b>	<b>\$</b>	<b>3,000</b>	<b>\$</b>	<b>3,000</b>

		<b>2012-2013 Budget</b>		<b>2013-2014 Budget</b>
<b>UNDISTRIBUTED</b>				
Payroll taxes and fringe benefits on personnel within the capital component of the budget.				
NYS Employees' Retirement System	\$	150,456	\$	144,729
NYS Teachers' Retirement System	\$	0	\$	0
Social Security.....	\$	50,781	\$	61,806
Worker's Compensation Insurance.....	\$	36,508	\$	37,407
Unemployment Insurance.....	\$	0	\$	0
Health and Dental Insurance.....	\$	247,728	\$	261,642
<b>UNDISTRIBUTED TOTAL</b>	<b>\$</b>	<b>485,473</b>	<b>\$</b>	<b>505,584</b>

		<b>2012-2013 Budget</b>		<b>2013-2014 Budget</b>
<b>INTERFUND TRANSFERS</b>				
Transfer to Capital Account <i>Planned Capital Improvements to include: fiber optic site work, handicap accessible bathroom with improvements to the ventilation system located in the MS/HS Nurse's office. If funding remains, door replacement/upgrades</i>	\$	220,000	\$	99,000


<b>INTERFUND TRANSFERS TOTAL</b>	<b>\$</b>	<b>220,000</b>	<b>\$</b>	<b>99,000</b>
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		<b>2012-2013 Budget</b>		<b>2013-2014 Budget</b>
<b>DEBT SERVICE</b>				
Building Projects	\$	1,219,263	\$	1,200,356



**MEMORANDUM**

TO: Cheryl Dudley, Superintendent of Schools

FROM: Todd Hilgendorff, High School Principal 

DATE: February 3, 2014

SUBJECT: Class of 2014 Senior Trip

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I have met with the class advisors for the Class of 2014, Leona Statham and Lynette Terrell to review this year's senior trip. I approve their plans. I recommend the plans be presented for board approval.

TH:dg

### **Class of 2014 Senior Trip Proposal**

- The Greenville Central School class of 2014 would like to take their senior trip to Dorney Park with New Jersey Beach and Philadelphia PA that would include 3 days and 2 nights
- The trip would be June 6, 7, 8 2014. We would leave at 9:00 a.m. June 6 and return approximately 10:30 Sunday June 8<sup>th</sup>.
- We have approximately 50 % of the class that would like to attend.
- A non-refundable payment will be due shortly after the BOE approval of the trip along with 2 other payments for the cost of the trip.
- The cost of the trip will be offset by funds from some fundraising that will reduce the cost.

#### **The educational components of the trip are:**

- Visiting the National Constitution Center. There will be group oriented exhibits along with video and film projected on a 360 degree screen (per itinerary). The students will experience how the Constitution was created. There will also be a 3 hour guided walking tour of Philadelphia to see sights that include Independence hall, Congress Hall, Franklin Print Shop, Liberty Bell, B. Free Franklin Post Office and many more educational sights and exhibits.

#### **The fellowship and leisure components of the trip are:**

- A day at the New Jersey shore
- 3 hour dinner cruise aboard the Spirit of Philadelphia.
- A day trip to Dorney Park and Wildwater Kingdom in Allentown, PA.

**\*Please see the itinerary for the class of 2014 senior trip**

**Dorney Park with**  
**NJ Beach and Philadelphia, PA**  
**3 days 2 nights**

**Friday, June 6, 2014-Day 1:**

- 9:00 a.m.** **Depart from Greenville High school in Greenville, NY, for Philadelphia, PA.**  
Approx. 4 ½ hrs. driving time depending upon traffic.
- 1:30 p.m.** **Lunch on own at the Bourse food court.**
- 2:30 p.m.** **Entrance to the National Constitution Center, 525 Arch Street, Independence Hall.** With group-oriented exhibits and a dazzling, multi-media program featuring a live actor with video and film projected on a 360-degree surround-screen, the Center offers a participative way to experience the way the Constitution was created. Daily educational programs available: Signers' Hall Guess Who Game, Balance of Powers, Giant Board Game, Memorials: How a National Remembers, Be Heard!, Benched, Hail to the Chief, Capture the Flag, subject to change. Allow 1 ½ - 2 hours.
- 4:00 p.m.** **3 hour Guided walking tour of Philadelphia** to include walk past Independence Hall, Congress Hall, Franklin Print Shop, Liberty Bell, B. Free Franklin Post Office, walk down Elfreth's Alley, past Betsy Ross' House, etc. Time for picture taking on own.
- 7:00 p.m.** **Dinner at the Hard Rock Café**, subject to availability
- 8:30 p.m.** **Depart for a local hotel such as a Hampton Inn or equivalent, subject to availability and subject to park hours.**
- 9:30 p.m.** **Time to check into the hotel.**
- 11pm-5am** **6 hours Extra hotel security (1 guard per night)**

**Saturday, June 7, 2014-Day 2:**

- 8:30 a.m.** **Deluxe Continental Breakfast.**
- 9:30 a.m.** **Depart for Point Pleasant Beach.**
- 10:30 a.m.** **Spend the day at the beach. Enjoy the boardwalk, rides, arcades, concessions, mini-golf etc.**
- NOTE:** **Rides open the weekend before Memorial Day.**
- Option:** For an additional \$9 per person: Admission to Jenkinsons Aquarium which features a touch tank, a live coral reef, exotic birds, seals, sharks, alligators and penguins, subject to availability and change.
- 4:00 p.m.** **Return to the hotel to freshen up.**



domestic & international tours+travel

- 6:00 p.m.** *Depart for Philadelphia.*
- 7:00 p.m.** *Board the Spirit cruise.*
- 7:30 p.m.** *3 hour student dinner DJ Cruise aboard the Spirit of Philadelphia.*
- 10:30 p.m.** *Depart for the hotel.*
- 11:00 p.m.** *Arrive.*
- 11pm-5am** *6 hours Extra hotel security (1 guard per night)*

**Sunday, June 8, 2014-Day 3:**

- 8:00 a.m.** *Deluxe Continental Breakfast.*
- 9:00 a.m.** *Depart for Dorney Park and Wildwater Kingdom in Allentown, PA.*
- 10:00 a.m.** *Spend the day in the park with lunch on own.*
- 6:00 p.m.** *Depart for school.*  
*Highway stop for dinner on own.*
- 10:30 p.m.** *Arrive.*





**THE FOLLOWING PRICING IS BASED ON L&S JOURNEYS BUS COMPANY.  
PRICING FOR OTHER COMPANIES VARY AND ARE MUCH HIGHER.**

<b>Price for QUAD occupancy</b>	<b>Minimum number of students</b>	<b>Complimentary chaperones in double room occupancy</b>
<b>\$385</b>	<b>50</b>	<b>5</b>
<b>\$390</b>	<b>45-49</b>	<b>4</b>
<b>\$399</b>	<b>40-44</b>	<b>4</b>

*If you have less than 40 students in a coach, the cost of the busing will go up.*

*The students are in quad occupancy and the chaperones are in double rooms.  
Any students in a triple room will pay an additional \$26 per person in that room.*

**Note: Due to the uncertainty in the fuel market, there may be an additional cost for fuel.**  
*Prices for Holiday weeks may vary slightly.*

***\* If you add any activities that require further driving, the price will go up.***

**The Tour Includes:**

- Deluxe motorcoach transportation*
- 2 Nights Hotel accommodations at a Hampton Inn or an equivalent hotel, subject to availability*
- 2 Continental Breakfasts*
- 1 dinner at the Hard Rock Café, subject to availability***
- 1 day at Point Pleasant NJ Beach*
- Student dinner DJ cruise aboard the Spirit of Philadelphia based on a Saturday evening, subject to cruise schedule*
- Guided walking tour in Philadelphia*
- Admission to the National Constitution Center*
- Entrance to Dorney Park and Wildwater Kingdom*
- 2 nights Extra hotel security (1 guard per night)*
- Tip for the driver*

**The tour does not include:**

- Tip for guide(s)*
- Meals unless specified*
- Personal expenses*

JAN 27 2014

District Office



**Greenville Central School  
Field Trip Permission Form**

Student Name: \_\_\_\_\_

Teacher Name: Leona Statham/Lynette Terrell Co-Advisors of Class of 2014

Date of Trip: June 6, 7, 8 214

Class(es) taking trip: Class of 2014 Senior Class

Name(s) of Chaperone(s): Leona Statham, Lynette Terrell and 2 other chaperones

\_\_\_\_\_  
\_\_\_\_\_

Destination: Dorney Park with New Jersey Beach and Philadelphia, PA

Departure Time: 6/6/14 @9:00 from school Return Time: 6/8/14 @ 10:30 p.m.

Description of trip: On Friday the students will visit the National Constitutional Center at Independence Hall. They will experience in a unique way how the Constitution was created. There will be educational programs throughout the day. Saturday they will spend the day at the Jersey shore and go on a 3 hour dinner cruise that evening. Sunday will be a fun day at Dorney Park and Wildwater Kingdom in Allentown PA.

Cost: Transportation: included in the cost of trip

Admission: included in the cost of trip

Food: Students will be responsible for their lunch on Friday at the food court, lunch at the beach, lunch and dinner on Sunday and any other personal expenses.

Special Instructions: \_\_\_\_\_  
\_\_\_\_\_

All school rules and regulations printed in the student handbook are in effect during the trip. It is your responsibility to pick up your child if the trip concludes after school is dismissed. You will be notified in the event of an emergency. Thank you.

**Field Trip Medical Release form on back of this form must be completed.**

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Permission Slip due by: \_\_\_\_\_

**Greenville High School  
Field Trip Medical Release Form**

Name of Student: \_\_\_\_\_

To Parents/Guardians:

Please advise if this student has any medical condition including allergies of which we should be aware.

\_\_\_\_\_  
\_\_\_\_\_

Please advise precautions or special procedures to follow in case this problem develops while we are on the field trip.

\_\_\_\_\_  
\_\_\_\_\_

Is it necessary for your child to carry any specific medication?

Yes \_\_\_\_\_ No \_\_\_\_\_

**Please note if you checked yes above, you must have the medication administration form with the necessary medication completed and on file in the nurse's office. Parents are advised to ask the pharmacist for an additional container to be used.**

Name of medication: \_\_\_\_\_

Purpose of medication: \_\_\_\_\_

Please list telephone number(s) where you may be reached in case of an emergency:

Person to contact: \_\_\_\_\_ Phone number: \_\_\_\_\_

Person to contact: \_\_\_\_\_ Phone number: \_\_\_\_\_

Person to contact: \_\_\_\_\_ Phone number: \_\_\_\_\_

In case an emergency occurs, and you are unable to reach any of the people above by phone, I hereby authorize a faculty chaperone on the field trip to obtain proper treatment (first/aid/doctor/hospital) for my child.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**A student who does not have this completed form on file will not be allowed to participate in the field trip.**

Request for approval of new textbooks

District Office

(Submit two of these forms with sample of textbook. One approved form and textbook will be returned.)

Approval is requested for the adoption and purchase of the following textbook:

Davidson and Stoff Present ISBN (9780133231441) (Author) America: History of Our Nation Civil War to the (Title)

Prentice Hall-2014 (Publisher and Year) \$89.97 (Cost) 27 30 # of books to be ordered

To be used in 8th grade social studies (Subject/Grade) Readability level of textbook 8th grade readability

This textbook will replace one purchased in 2005.

List names of all faculty members who have studied the need, the other available textbooks, and recommend this textbook for approval: Stephen Siebrecht, Brian Reeve, Jim Farrell (8th grade social studies teacher at Maple Hill)

Standards of review used to arrive at this recommendation

We need a textbook that is compatible with Common Core Standards. The standards require students to evaluate arguments and draw conclusions and inferences. In addition, we examined the book for readability, visual supports, and supplemental enrichment activities.

Reasons to recommend this selection

This book is compatible with Common Core Standards. The teacher's edition of the book includes activities that require students to evaluate arguments and draw inferences/conclusions. The book is 8th grade appropriate, contains excellent visual supplements, and includes enrichment activities with diagrams and primary source readings. In addition, there is an on-line version of this textbook that the students can access anywhere.

Approval of Grade Level Leaders and/or Department Chairperson [Signature] Date 1/31/2014

Approval of the Respective Principal [Signature] Date 1/31/14

Approval of the Superintendent \_\_\_\_\_ Date \_\_\_\_\_

Date of Adoption by the Board of Education \_\_\_\_\_

Note: Approval is granted with understanding that the principal has made/will make necessary budget provision.

# **GIRVIN & FERLAZZO, P.C.**

20 Corporate Woods  
Albany, New York 12203  
(518) 462-0300  
Kristine A. Lanchantin, Esq.  
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## The Alternative Veterans Exemption

As you may know, a recent amendment to the Real Property Tax Law allows school districts to offer an Alternative Veterans Exemption, which grants taxing municipalities the authority to exempt a percentage portion of properties owned by eligible veterans, up to maximum amounts, for tax purposes. While formerly offered only to Counties, Cities, Towns and Villages, Governor Cuomo authorized an amendment to the law in 2013, extending the opportunity to offer the tax break to school districts. The following shall provide information in regard to this exemption and provide a template resolution for use by Boards of Education.

Real Property Tax Law §458-a, commonly referred to as the Alternative Veterans Exemption, grants a taxing authority the ability to exempt a portion of the taxable assessed value of the primary residence of certain veterans. The exemption provides a reduction in the assessed value of a qualifying property, dependent on the nature of the veteran's service and the local law adopted by the school district.

The basic statutory provisions provide that school districts may adopt a local law which grants a 15% exemption, not to exceed \$12,000 (or the product of \$12,000 multiplied by the latest state equalization rate for the assessing unit, or in the case of a special assessing unit, the latest class ratio, whichever is less), to qualifying veterans (i.e., veterans who were on active duty during a period of war). For those veterans that served in combat zones, an additional 10% exemption is provided, not to exceed \$8,000 (or the product of \$8,000 multiplied by the latest state equalization rate, special equalization rate, or in the case of a special assessing unit, the latest class ratio, whichever is less). Veterans that sustained service related disabilities are also eligible for a percentage exemption equal to one-half of their disability rating received by the Veterans Administration or the Department of Defense, up to \$40,000, (or the product of \$40,000 multiplied by the latest state equalization rate, special equalization rate, or in the case of a special assessing unit, the latest class ratio, whichever is less). School districts may also adopt a law to include Gold Star parents, those who lost a child in the military, as qualified homeowners to whom the exemption is offered, provided the property is their primary residence.

The “basic” exemptions, provided above, may be further increased or decreased by local law. A Board of Education may authorize the following maximums for each class of veterans:

	Decreased		Basic %	Basic Max.	Increased Pursuant to Local Law						
Wartime	\$6k	\$9k	15%	\$15k	\$18k	\$21k	\$24k	\$27k	\$30k	\$33k	\$36k
Combat	\$4k	\$6k	add'l 10%	+\$10k	\$12k	\$14k	\$16k	\$18	\$20k	\$22k	\$24k
Disability	\$20k	\$30k	1/2 disability rating	\$50k	\$60k	\$70k	\$80k	\$90k	\$100k	\$110k	\$120k

In addition, for “high appreciation municipalities”, which include (1) a county for which the Office of Real Property Tax Services has established a sales price differential factor for purposes of the school tax relief (STAR) exemption for three consecutive years, or (2) a city, town, village or school district which is wholly or partly located within such a county, the school may adopt even higher maximum limits, set forth below:

Wartime	\$39k	\$42k	\$45k	\$48k	\$51k	\$54k
Combat	\$26k	\$28k	\$30k	\$32k	\$34k	\$36k
Disability	\$130k	\$140k	\$150k	\$160	\$170k	\$180k

A list of counties considered “high appreciation municipalities” may be found at [www.tax.ny.gov/pit/property/star/diff.htm](http://www.tax.ny.gov/pit/property/star/diff.htm).

Prior to adopting a resolution authorizing this exemption, school districts must first hold a public hearing on the matter. The hearing and the passage of the resolution have to be done in separate “meetings”. We recommend noticing and holding the hearing at a specific time, closing the hearing and then opening a regular meeting to pass the resolution, authorizing the exemption.

If the county and or town assessing unit has adopted the Veteran’s Exemption, then all applications for same must go to that unit and no further action need be taken by the school district. However, if the exemption is not offered by the town or county, then applications will come to the school district for determination. We recommend that you determine whether the assessing town or county has adopted this exemption in making your determination whether to allow the exemption for school taxes.

In addition, given this is the first time school districts are dealing with this exemption, it may be best to adopt the “basic” exemptions to give your district the opportunity to determine the impact it will have on your taxpayers.

Last, if you wish to repeal this local law, you may do so as long as the action is taken at least 90 days before the taxable status date (which is generally March 1<sup>st</sup>).

In sum, to adopt this local law, the District must first hold a public hearing, determine the maximum statutory amounts they desire to exempt, and authorize the exemption by resolution of the Board of Education. School districts are encouraged to contact their local counties and towns to determine the exemptions they offer, if any, and consider whether the school district would like to be consistent with local municipalities or establish their own maximum amounts.

We have attached a notice for your public hearing along with a sample resolution authorizing the veterans exemption. In the event you have any questions on this matter, please do not hesitate to contact our firm at (518) 462-0300.

RESOLUTION AUTHORIZING ALTERNATIVE VETERANS EXEMPTION

WHEREAS, pursuant to Real Property Tax Law Section 458-a, the Board of Education of the \_\_\_\_\_ School District desires to offer an school tax exemption on the primary residence of eligible veterans residing within the school district; and

WHEREAS, a public hearing was held on this matter on \_\_\_\_\_, 2014; and

THEREFORE, BE IT RESOLVED, that pursuant to Real Property Tax Law Section 458-a, the Board of Education hereby adopts the Alternative Veterans Exemption, permitting exemptions of 15%, an additional 10%, and 50% of the veteran’s disability rating as determined by the Veterans Administration or Department of Defense, for wartime veterans, combat veterans and veterans who sustained a service-related disability, respectively, pursuant to the following maximum exemption amounts

Wartime	
Combat	
Disability	

*[OPTIONAL]* BE IT FURTHER RESOLVED, that Gold Star parents, defined as those parents whose child died in the line of duty while serving in the United States Armed Forces during a period of war, shall be considered a “qualified owner” for purposes of eligibility for the Alternative Veterans Exemption; and

BE IT FURTHER RESOLVED, this local law shall be effective immediately, available to eligible veterans for the upcoming school tax year and shall continue until rescinded or amended by resolution of the Board of Education.



**LEGAL NOTICE OF PUBLIC HEARING**

NOTICE IS HEREBY GIVEN, that a Public Hearing on the adoption of the Alternative Veterans Exemption from Real Property Taxation will be held in the \_\_\_\_\_ of the \_\_\_\_\_ School in the **Town/Village/City** of \_\_\_\_\_, New York, on \_\_\_\_\_, 2014 at \_:00 p.m., prevailing time.

Dated: \_\_\_\_\_

\_\_\_\_\_, New York

District Clerk