

Putnam-Westchester BOCES SLS

Annual Report for Library Systems - 2016 (School Library Systems 2016-2017)

1. General System Information

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

1.1	SEDCODE	489000000000
1.2	System Name	Putnam Northern Westchester BOCES School Library System
1.3	Beginning Reporting Year	07/01/2016
1.4	Ending Reporting Year	06/30/2017
1.5	Street Address	200 BOCES Drive
1.6	City	Yorktown Heights
1.7	Zip Code	10598
1.8	Four-Digit Zip Code Extension (enter N/A if unknown)	4321
1.9	Mailing Address	200 BOCES Drive
1.10	City	Yorktown Heights
1.11	Zip Code	10598
1.12	Four-Digit Zip Code Extension (enter N/A if unknown)	4321
1.13	Library System Telephone Number (enter 10 digits only and hit the Tab key)	(914) 248-2391
1.14	Fax Number (enter 10 digits only and hit the Tab key)	(914) 248-2419
1.15	System Home Page URL	http://www.pnwboces.org/library
1.16	URL of the system's complete Plan of Service	https://pnwboces.org/pdf/SLS-Plan-of-Service-2016-2021.aspx
1.18	Area Chartered to Serve (square miles)	523
1.20	County	Westchester
1.21	County (Counties) Served	Putnam, Westchester
1.22	School District	Yorktown

Please report information for the current system director (as of the date the report is being completed).

1.23	Title of System Director: (drop-down): Mr., Mrs., Ms., Mr. Miss, Dr.	
1.24	First Name of System Director	Joseph
1.25	Last Name of System Director	Mannozzi

1.28 - School Library System Director Administrative Certification: Indicate information about the certification currently held Library System Director and the date of the certification. Write N/A for all that do not apply:

- a. School Administrator and
Supervisor Certificate (SAS) - N/A
Certification Date
- b. School Building Leader
(SBL) Certificate - Date of
Provisional Certification N/A

- | | | |
|------|---|------------------------|
| c. | School Building Leader
(SBL) Certificate - Date of
Professional Certification | 02/01/2014 |
| d. | School District Leader (SDL)
Certificate - Date of
Provisional Certification | N/A |
| e. | School District Leader (SDL)
Certificate - Date of
Professional Certification | 02/01/2014 |
| f. | A Variance to Obtain
Certification was Approved
Through the Following Date | N/A |
| 1.31 | Telephone Number of the
System Director, including
area code and extension. | (914) 248-2392 |
| 1.32 | E-Mail Address of the System
Director | jmannozzi@pnwboces.org |
| 1.33 | Fax Number of the System
Director (enter 10 digits only
and hit the Tab key) | (914) 248-2419 |
| 1.35 | Name of Current SLS
Director's Supervisor | Dr. Marla Gardner |
| 1.36 | Mailing Address | 200 BOCES Drive |
| 1.37 | City | Yorktown Heights |
| 1.38 | Zip Code | 10598 |
| 1.39 | Four-Digit Zip Code
Extension (enter N/A if
unknown) | 4399 |
| 1.40 | Telephone Number (enter 10
digits only and hit the Tab
key) | (914) 248-2332 |
| 1.41 | E-Mail Address | mgardner@pnwboces.org |
| 1.42 | Name of BOCES/Big 5 Cities
District Superintendent | Dr. James M. Ryan |
| 1.43 | Mailing Address | 200 BOCES Drive |
| 1.44 | City | Yorktown Heights |
| 1.45 | Zip Code | 10598 |
| 1.46 | Four-Digit Zip Code
Extension (enter N/A if
unknown) | 4399 |
| 1.49 | For the reporting year, has the
system experienced any
unusual circumstance(s) that
affected the statistics and/or
information reported (e.g.
natural disaster, fire, closed
for renovations, massive
weeding of collection, etc.)?
Indicate Y for Yes, N for N | N |

2. Personnel Information

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

- 2.2 FTE (Full-Time Equivalent Calculation)
The number of hours per work week used to compute FTE for all budgeted professional positions 35
- 2.3 FTE (Full-Time Equivalent Calculation)
The number of hours per work week used to compute FTE for all other budgeted staff positions. 35

BUDGETED POSITIONS IN FULL-TIME EQUIVALENTS

(enter to two decimal places; enter decimal point)

- 2.6 School Library System
Director per CR 90.18 (a) (7) - Filled Position FTE 1
- 2.7 School Library System
Director per CR 90.18 (a) (7) - Vacant Position FTE 0
- 2.10 Librarians - Filled Position(s) FTE 0
- 2.11 Librarians - Vacant Position(s) FTE 0
- 2.14 **Total Certified Librarians - Filled Position(s) FTE (total questions 2.6 + 2.10)** 1.00
- 2.15 **Total Certified Librarians - Vacant Position(s) FTE (total questions 2.7 + 2.11)** 0.00
- 2.16 Total Other Professional Staff - Filled Position(s) FTE 0
- 2.17 Total Other Professional Staff - Vacant Position(s) FTE 0
- 2.18 Total Other Staff - Filled Position(s) FTE 1
- 2.19 Total Other Staff - Vacant Position(s) FTE 0
- 2.20 **Total Paid Staff - Filled Position(s) FTE (total questions 2.14 + 2.16 + 2.18)** 2.00
- 2.21 **Total Paid Staff - Vacant Position(s) FTE (total questions 2.15 + 2.17 + 2.19)** 0.00

SALARY INFORMATION

- 2.24 System Director FTE 1
- 2.25 System Director Current Annual Salary \$134,500

3. System Membership, Outlets and Governance

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

PUBLIC SERVICE OUTLETS

3.10	Number of member public school districts	19
3.11	Number of member non-public schools	12
3.12	Total number of members (Total 3.10 + 3.11)	31
3.13	Number of participating school library media centers	93
3.14	Number of school library system participants (buildings)	93
3.15	Main Library/System Headquarters	1

BOARD /COUNCIL MEETINGS

3.22	Total number of school library system council meetings held during reporting year	5
3.23	URL of the Minutes of the SLS Council's meetings for the period July 1, 2016 - June 30, 2017.	https://pnwboces.org/pdf/2016-17-SLS-Minutes.aspx
3.24	Current number of <u>voting</u> positions on system board/council	9
3.25	Board/Council Selection - Enter Board/Council Selection Code (select one; drop-down). If O is selected, please use the State note to explain how members were named to the Board/Council.	A

SYSTEM BOARD/COUNCIL

School Library Systems - enter information for the period July 1, 2017, through June 30, 2018

President/Council Chair

3.26	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
3.27	First Name	Sudha
3.28	Last Name	Narsipur
3.29	Institutional Affiliation	Ossining School District
3.30	Professional Title	HS Library Media Specialist
3.36	Term Expires - Month or N/A	June
3.37	Term Expires - Year (YYYY) or N/A	2019

Board/Council Member - complete one record for each Board/Council Member. For each vacant position, select "Vacant" in q enter N/A in questions 2-10 of the repeating group.

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Ms. Other (specify using the State note), Vacant
2. First Name Patricia
3. Last Name Canini
4. Institutional Affiliation Lakeland School District
5. Professional Title ES Library Media Specialist
6. Mailing Address 10 Lincoln Ave.
7. City Crompond
8. Zip Code (enter five digits only) 10517
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2019

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Mr. Other (specify using the State note), Vacant
2. First Name Ken
3. Last Name Behling
4. Institutional Affiliation Somers School District
5. Professional Title MS Library Media Specialist
6. Mailing Address 250 Route 202
7. City Somers
8. Zip Code (enter five digits only) 10589
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2020

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Ms. Other (specify using the State note), Vacant
2. First Name Dara
3. Last Name Berkwits
4. Institutional Affiliation Mahopac School District
5. Professional Title HS Library Media Specialist
6. Mailing Address 421 Baldwin Place Rd.
7. City Mahopac
8. Zip Code (enter five digits only) 10541
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2020

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant Ms.
2. First Name Teka
3. Last Name McCabe
4. Institutional Affiliation Briarcliff School District
5. Professional Title HS Library Media Specialist
6. Mailing Address 444 Pleasantville Rd.
7. City Briarcliff Manor
8. Zip Code (enter five digits only) 10510
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2019

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant Ms.
2. First Name Juli
3. Last Name Hoffman
4. Institutional Affiliation Katonah-Lewisboro School District
5. Professional Title ES Library Media Specialist
6. Mailing Address Route 138, Box 424
7. City Goldens Bridge
8. Zip Code (enter five digits only) 10526
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2020

1. Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant Ms.
2. First Name Cynthia
3. Last Name Sandler
4. Institutional Affiliation North Salem School District
5. Professional Title HS Library Media Specialist
6. Mailing Address 230 June Rd.
7. City North Salem
8. Zip Code (enter five digits only) 10560
9. Term Expires - Month or N/A June
10. Term Expires - Year (YYYY) or N/A 2018

- | | | |
|-----|---|-----------------------------|
| 1. | Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant | Ms. |
| 2. | First Name | Kaitlin |
| 3. | Last Name | Torp |
| 4. | Institutional Affiliation | Peekskill School District |
| 5. | Professional Title | HS Library Media Specialist |
| 6. | Mailing Address | 1072 Elm St. |
| 7. | City | Peekskill |
| 8. | Zip Code (enter five digits only) | 10566 |
| 9. | Term Expires - Month or N/A | June |
| 10. | Term Expires - Year (YYYY) or N/A | 2018 |
-
- | | | |
|-----|---|-----------------------------|
| 1. | Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant | Ms. |
| 2. | First Name | Sharon |
| 3. | Last Name | Wiggins |
| 4. | Institutional Affiliation | Chappaqua School District |
| 5. | Professional Title | MS Library Media Specialist |
| 6. | Mailing Address | 50 Senter St. |
| 7. | City | Chappaqua |
| 8. | Zip Code (enter five digits only) | 10514 |
| 9. | Term Expires - Month or N/A | June |
| 10. | Term Expires - Year (YYYY) or N/A | 2020 |

5. System Services

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

TECHNOLOGY AND RESOURCE SHARING

UNION CATALOG OF RESOURCES

For this report, a union catalog is defined as a vehicle that can access member and / or non-member catalogs. It can be either print or online (virtual) format.

- 5.13 In what format(s) is the union catalog available? (Check all that apply)
- | | | |
|----|--------------------------|-----|
| a. | Print | No |
| b. | Disc | No |
| c. | Online (virtual catalog) | Yes |
- 5.14 How many libraries participate in (or submit records for) the union catalog?
- | | | |
|--|--|----|
| | | 58 |
|--|--|----|

5.15	Is the system's union catalog shared with any other library system(s)? (Enter Y for Yes, N for No)	Y
5.16	Number of titles in the system's union catalog	315,475
5.17	Number of holdings in the system's union catalog	580,435
5.18	Number of new titles added in the last year	14,809
5.19	Number of holdings added in the last year	36,661
5.20	If the union catalog is online (virtual catalog), indicate the features of the system's virtual catalog (check all that apply):	
a.	Non-member catalogs are included (if checked, please name non-member catalogs using the State note)	No
b.	Non-library catalogs are included (if checked, please name non-library catalogs using the State note)	No
c.	Patron-initiated ILL available and used through this catalog	No

VISITS TO THE SYSTEM'S WEB SITE

5.24	Annual number of visits to the system's web site	4,957
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SYSTEM INTERLIBRARY LOAN ACTIVITY

5.25	Total items provided (loaned)	277
5.26	Total items received (borrowed)	438
5.27	Total requests provided (loaned) unfilled	10
5.28	Total requests received (borrowed) unfilled	23
5.29	Total interlibrary loan activity (total questions 5.25 through 5.28)	748

DELIVERY

5.31 Indicate delivery methods used by the system (check all that apply):

Note: For questions which include a choice of "Other", please add a State Note of explanation when "Other" is chosen. Also pl individual instructions for these questions for any further requirements.

a.	System courier (on the System's payroll)	No
b.	Other system's courier	No
c.	BOCES/Big 5 City courier	Yes
d.	Contracted service (paid by System - not on payroll)	No
e.	U.S. Mail	Yes
f.	Commercial carrier (e.g., UPS, DHL, etc.)	Yes

g. Other (specify using the State No
note)

5.32 Number of stops (pick-up and 0
delivery sites per week)

**CONTINUING EDUCATION/STAFF DEVELOPMENT
Workshops/Meetings/Training Sessions**

Resource sharing (ILL, collection development, etc.)

5.33 Number of sessions 1

5.34 Number of participants 19

5.35 Number of contact hours 2

Technology

5.36 Number of sessions 3

5.37 Number of participants 64

5.38 Number of contact hours 9

Digitization

5.39 Number of sessions 0

5.40 Number of participants 0

5.41 Number of contact hours 0

Leadership

5.42 Number of sessions 4

5.43 Number of participants 28

5.44 Number of contact hours 6

Management & Supervisory

5.45 Number of sessions 0

5.46 Number of participants 0

5.47 Number of contact hours 0

Planning and Evaluation

5.48 Number of sessions 2

5.49 Number of participants 35

5.50 Number of contact hours 4

Awareness and Advocacy

5.51 Number of sessions 1

5.52 Number of participants 14

5.53 Number of contact hours 2

Trustee/Council Training

5.54 Number of sessions 1

5.55 Number of participants 8

5.56 Number of contact hours 1

Special Client Populations

5.57 Number of sessions 1

5.58 Number of participants 35

5.59 Number of contact hours 1

Children's Services/Elementary Grade Levels

5.60 Number of sessions 0

5.61 Number of participants 0

5.62 Number of contact hours 0

Young Adult Services/Middle and High School Grade Levels

5.63	Number of sessions	0
5.64	Number of participants	0
5.65	Number of contact hours	0

Mentoring

5.66	Number of sessions	25
5.67	Number of participants	43
5.68	Number of contact hours	25

Teaching & Learning

5.69	Number of sessions	3
5.70	Number of participants	40
5.71	Number of contact hours	14

E-Resources

5.72	Number of sessions	3
5.73	Number of participants	23
5.74	Number of contact hours	12

5.75 **Other:** Does the system provide other Workshops/Meetings/Training Sessions not listed above?
Enter Y for Yes, N for No. If Yes, complete one record for each topic; if No, enter N/A for questions 1, 2, 3 and 4 of one repeating group.

1.	Topic	N/A
2.	Number of sessions	N/A
3.	Number of participants	N/A
4.	Number of Contact Hours	0

5.76 **Grand Total Sessions** (total questions 5.33, 5.36, 5.39, 5.42, 5.45, 5.48, 5.51, 5.54, 5.57, 5.60, 5.63, 5.66, 5.69, 5.72 and total of question #2 of Repeating Group #5) 44

5.77 **Grand Total Participants** (total questions 5.34, 5.37, 5.40, 5.43, 5.46, 5.49, 5.52, 5.55, 5.58, 5.61, 5.64, 5.67, 5.70, 5.73 and total of question #3 of Repeating Group #5) 309

5.78 **Grand Total of Contact Hours** (total questions 5.35, 5.38, 5.41, 5.44, 5.47, 5.50, 5.53, 5.56, 5.59, 5.62, 5.65, 5.68, 5.71, 5.74 and total of question #4 of Repeating Group #5) 76.00

COORDINATED SERVICES

5.79 Indicate which services the system provides (check all that apply):

Note: For questions which include a choice of "Other", please add a State Note of explanation when "Other" is chosen. Also pl individual instructions for these questions for any further requirements.

- | | | |
|----|--|-----|
| a. | Coordinated purchase of print materials | No |
| b. | Coordinated purchase of non-print materials | Yes |
| c. | Negotiated pricing for licensed electronic collection purchases (not purchasing) | Yes |
| d. | Cataloging | No |
| e. | Materials processing | No |
| f. | Coordinated purchase of office supplies | No |
| g. | Coordinated computer services/purchases | No |
| h. | Virtual reference | No |
| i. | Other (describe using the State note) | No |
| j. | N/A | No |

COSER SERVICES

- | | | |
|------|---|------------------------|
| 5.80 | Names of COSERS managed by the SLS Director | Library Services/Media |
| 5.80 | Names of COSERS managed by the SLS Director | Library Automation |

CONSULTING AND TECHNICAL ASSISTANCE SERVICES

- | | | |
|------|---|-----|
| 5.81 | Number of contacts - Consulting with member libraries on grants, and state and federal funding | 36 |
| 5.82 | Number of contacts - Consulting with member libraries on funding and governance | 42 |
| 5.83 | Number of contacts - Consulting with member libraries on automation and technology | 269 |
| 5.84 | Number of contacts - Consulting with member libraries on physical plant needs | 31 |
| 5.85 | Number of contacts - Consulting with member libraries on personnel and management issues | 44 |
| 5.86 | Number of contacts - Providing information to local, county, and state legislators and their staffs | 0 |

5.87	Number of contacts - Providing system and member library information to the media	0
5.88	Number of contacts - Providing website development and maintenance for member libraries	12
5.89	Does the system provide other Consulting and Technical Assistance Services not listed above? Enter Y for Yes, N for No. If Yes, complete one record for each topic; if No, enter N/A for questions 1 and 2 of one repeating group.	Y
1.	Topic	Consulting with member libraries on pedagogy
2.	Number of contacts (all types)	48
5.90	Total Other Contacts (total of question #2 of Repeating Group #6)	48
5.91	Total Number of Contacts (total of questions 5.81 through 5.88 and 5.90)	482

REFERENCE SERVICES

5.92 Total Reference Transactions 3,850

SERVICES TO SPECIAL CLIENTS (Direct and Contractual)

5.93 Indicate services the system provides to special clients (check all that apply):

a.	Services for patrons with disabilities	Yes
b.	Services for patrons who are educationally disadvantaged	Yes
e.	Services for patrons who are members of ethnic or minority groups in need of special library services	Yes
i.	Other	No

5.94 Number of member libraries
with Job/Education
Information Centers or
collections 44

5.95 Does the system provide other
special client services not
listed above? If yes, complete
one record for each service
provided; if no, enter N/A in
questions 1 and 2 of one
repeating group.

1.	Service provided	N/A
2.	Number of facilities/institutions served	N/A

- 5.96 Does the system charge fees for any program or service? Enter Y for Yes; N for No. If yes, briefly describe using the text box below; if no, enter N/A in Question 5.97. Y
- 5.97 Description of fees Modest fee charged for professional development workshops.

6. Operating Funds Receipts

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

State Aid

- 6.32 Regional Bibliographic Data Bases (RBDB) Grant(s) from 3Rs \$0
- 6.33 School Library Systems Operating Aid \$103,098
- 6.34 School Library Systems Categorical Aid for Automation \$10,310
- 6.35 School Library System Supplementary Operating Aid \$47,770
- 6.36 Special Legislative Grants and Member Items \$0
- 6.42 Does the system receive state funding from other sources? Enter Y for Yes, N for No. (Report Special Legislative Grants and Member Items on Q 6.36). N

Complete one record for each grant. If the system does not receive other state aid, enter N/A on questions 1 and 2 of one repeat

1. Funding Source N/A
2. Amount N/A
- 6.43 **Total Other State Aid (total question #2 of Repeating Group #9 above)** \$0
- 6.44 **Total State Aid Receipts (total questions 6.32 through 6.36, and question 6.43)** \$161,178

FEDERAL AID

- 6.45 Library Services and Technology Act (LSTA) \$0
- 6.46 Does the system receive any other Federal Aid (specify Act and Title) e.g., NEH, NEA, etc.? Enter Y for Yes, N for No. N

Complete one record for each grant. If the system does not receive other federal aid, enter N/A on questions 1 and 2 of one repeat

1. Funding Source N/A
2. Amount N/A

6.47 Total Other Federal Aid (total questions #2 of Repeating Group #10) \$0

6.48 Total Federal Aid (total questions 6.45 and 6.47) \$0

CONTRACTS WITH LIBRARIES and/or LIBRARY SYSTEMS IN NEW YORK STATE

6.49 Does the system contract with libraries and/or library systems in New York State? N
Enter Y for Yes, N for No.

Complete one record for each contract. If the system does not contract, enter N/A on questions 1, 2 and 3 of one repeating group.

1. Contracting Agency N/A
2. Contracted Service N/A
3. Total Contract Amount N/A

6.50 Total Contracts (total question #3 of Repeating Group #11 above) \$0

COSER FUNDS

6.51 COSER Receipts \$141,056

MISCELLANEOUS RECEIPTS

6.57 Does the system have other miscellaneous receipts in categories not listed in questions 6.51 through 6.55? N
Enter Y for Yes, N for No. If Yes, enter source and amount in the State Note field.

Complete one record for each income category. If the system does not have other miscellaneous receipts, enter N/A on question repeating group.

1. Receipt category N/A
2. Amount N/A

6.58 Total Other Miscellaneous Receipts (total question #2 of Repeating Group #12 above) \$0

6.59 Total Miscellaneous Receipts (total questions 6.51 and 6.58) \$141,056

6.60 TOTAL OPERATING FUND RECEIPTS - Total State Aid, Total Federal Aid, Total Contracts, and Total Miscellaneous Receipts (total questions 6.44, 6.48 6.50, and 6.59) \$302,234

6.66 TOTAL SLS ENDING BALANCE - OPERATING (as of July 1, 2016) \$3,838

6.67 TOTAL SLS ENDING BALANCE - AUTOMATION (as of July 1, 2016) \$2,894

6.68	GRAND TOTAL RECEIPTS, BUDGET LOANS, TRANSFERS, AND BALANCE/ROLLOVER	\$308,966
	(School Library Systems - total questions 6.60, 6.66 and 6.67 - must agree with question 7.83)	

7. Operating Fund Disbursements

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

STAFF EXPENDITURES

Salaries

7.1	System Director and Librarians	\$134,500
7.2	Other Staff	\$65,989
7.3	Total Salary and Wages Expenditures (total questions 7.1 and 7.2)	\$200,489
7.4	Employee Benefits Expenditures	\$74,164
7.5	Total Staff Expenditures (total questions 7.3 and 7.4)	\$274,653

COLLECTION EXPENDITURES

7.6	Print Materials Expenditures	\$5,070
7.7	Electronic Materials Expenditures	\$14,222
7.8	Other Materials Expenditures	\$0
7.9	Total Collection Expenditures (total questions 7.6 through 7.8)	\$19,292

GRANTS TO MEMBER LIBRARIES

Cash Grants Paid From

7.15	Other State Aid/Grants (e.g., Special Legislative or Member Grants)	\$0
7.16	Federal Aid	\$0
7.17	Other cash grants paid from system funds	\$0
7.18	Total Cash Grants (total questions 7.15 through 7.17)	\$0
7.19	Book/Library Materials Grants	\$0
7.20	Other Non-Cash Grants	\$0
7.21	Total Grants to Member Libraries (total questions 7.18 through 7.20)	\$0

CAPITAL EXPENDITURES FROM OPERATING FUNDS

7.24	Computer Equipment	\$0
7.25	Furniture/Furnishings	\$0

7.27 **Total Capital Expenditures from Operating Fund** (total questions 7.24 through 7.25) \$0

MISCELLANEOUS EXPENSES

7.37 Office and Library Supplies \$0

7.38 Telecommunications \$0

7.39 Binding Expenses \$0

7.40 Postage and Freight \$0

7.41 Publicity and Printing \$0

7.42 Travel \$420

7.43 Fees for Consultants and Professionals - Please include a State Note with the consultants' or vendors' names and a brief description of the service(s) provided. \$0

7.44 Membership Dues - Please include a State Note listing Professional Organization Memberships for which dues are being paid. \$1,035

7.45 Indirect Costs paid to BOCES or Big 5 Cities (same as Question 13.1.16) \$2,101

7.46 Does the system have other miscellaneous expenses in categories not listed in questions 7.37 through 7.45? Enter Y for Yes, N for No. If Yes is answered, please add a State Note describing these Other Miscellaneous Expenses. N

Complete one record for each expense category. If the system does not have other miscellaneous expenses, enter N/A on quest one repeating group.

1. Expense category N/A

2. Amount N/A

7.47 **Total Other Miscellaneous Expenses** (total question #2 of Repeating Group #13 above) \$0

7.48 **Total Miscellaneous Expenses** (total questions 7.37 through 7.45 and 7.47) \$3,556

CONTRACTS WITH LIBRARIES and/or LIBRARY SYSTEMS IN NEW YORK STATE

7.49 Does the system contract with libraries and/or library systems in New York State? Enter Y for Yes, N for No. N

Complete one record for each contract. If the system does not contract, enter N/A on questions 1 through 3 of one repeating gr

1. Contracting Agency (specify using State note) N/A

2. Contracted Service (specify using State note) N/A

3.	Total Contract Amount	N/A
7.50	Total Contracts (total question #3 of Repeating Group #14 above)	\$0
7.56	TOTAL DISBURSEMENTS - Total Staff Expenditures, Total Collection Expenditures, Total Grants to Member Libraries, Total Capital Expenditures, Total Miscellaneous Expenses and Total Contracts (total questions 7.5, 7.9, 7.21, 7.27, 7.48, and 7.50)	\$297,501
7.62	TOTAL DISBURSEMENTS (total question 7.56)	\$297,501
7.82	TOTAL SLS Ending Balance (as of June 30, 2017)	\$11,465
7.83	GRAND TOTAL DISBURSEMENTS & ENDING BALANCE (total questions 7.62 and 7.82)	\$308,966

Complete one record for each financial account

1.	Name of bank or financial institution	N/A
2.	Amount of funds on deposit	N/A
7.87	Total Bank Balance (total question #2 of Repeating Group #15 above)	\$0

12. Projected Annual Budget For Library Systems

School Library Systems Budget for July 1, 2017 - June 30, 2018

12.1	Total Operating Fund Receipts (include COSER Funds, State Aid, Federal Aid, \$1,217,719 Contracts and Miscellaneous Receipts)	
12.4	Total Ending Balance from the Previous Fiscal Year.	\$11,465
12.5	Grand Total Operating Fund Receipts, Budget Loans, Transfers and Ending Balance (total questions 12.1 through 12.4)	\$1,229,184

PROJECTED OPERATING FUND - DISBURSEMENTS

12.6	Total Operating Fund Disbursements (include Staff Expenditures, Collection Expenditures, Grants to Member Libraries, Capital Expenditures from Operating Funds, Miscellaneous Expenses, Contracts with Libraries and Library Systems in New York State)	\$1,229,184
12.8	Ending Balance in Operating Fund at the end of the current fiscal year (For School Library Systems, ending balance as of June 30, 2018)	\$0
12.9	Grand Total Operating Fund Disbursements and Ending Balance (total questions 12.6 and 12.8)	\$1,229,184

13. State Formula Aid Disbursements

SCHOOL LIBRARY SYSTEMS OPERATING AID AND SUPPLEMENTAL AID

Statutory Reference (Basic Aid): Education Law § 284
Commissioners Regulations 90.18

Statutory Reference (Supplemental): Education Law § 273 (12)
Commissioners Regulations 90.18

School Library Systems are reporting on disbursements for Operating Aid (Basic & Supplemental Aid)

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

13.1.1 **Professional Salaries:** Indicate total FTE and salaries for the system director and for each professional system employee record for each employee.

1.	Title	System Director
2.	Total Full-Time Equivalents (FTE)	
3.	Expenditure	\$24,210

13.1.2 **Total Expenditure - Professional Salaries:** \$24,210

13.1.3 **Other Staff Salaries:** Indicate total FTE and salaries for all other system employees, include all support staff; complete each employee.

1.	Title	Library Clerk
2.	Total Full-Time Equivalents (FTE)	1
3.	Expenditure	\$65,989

13.1.4 **Total Expenditure - Other Staff Salaries** \$65,989

13.1.5 **Employee Benefits:** Indicate the total expenditures for all system employee fringe benefits. \$43,398

13.1.6 **Purchased Services:** Did the system expend funds for purchased services? Enter Y for Yes, N for No. Y

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, 2 and 3 of one repeating group.

1. Expenditure Category Institutional membership
2. Provider of Services METRO
3. Expenditure \$790

13.1.7 **Total Expenditure - Purchased Services** \$790

13.1.8 **Supplies and Materials:** Did the system expend funds for supply items, postage, library materials, or equipment and furnishings with a unit cost less than \$5,000? Enter Y for Yes, N for No. Y

If yes, complete one record for each applicable category; if no, enter N/A for questions 1 and 2 of one repeating group.

1. Expenditure Category Books and other print materials
2. Expenditure \$4,912
1. Expenditure Category Non-print resources (electronic content)
2. Expenditure \$4,598

13.1.9 **Total Expenditure - Supplies and Materials** \$9,510

13.1.10 **Travel Expenditures:** Did the system expend funds for travel? Enter Y for Yes, N for No. N

If yes complete one record for each applicable category; if no enter N/A for questions 1 and 2 of one repeating group.

1. Type of Travel
2. Expenditure

13.1.11 **Total Expenditure - Travel** \$0

13.1.12 **Equipment and Furnishings:** Did the system expend funds for equipment and furnishings with a unit cost of \$5,000 or more and having a useful life of more than one year? Enter Y for Yes, N for No. N

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, 2, 3, and 4 of one repeating group.

1. Type of item N/A
2. Quantity N/A
3. Unit Cost N/A
4. Expenditure N/A

13.1.13 **Total Expenditure - Equipment and Furnishings:** \$0

Grants to Member Libraries

13.1.14 : Did the system expend funds for grants to member libraries? Enter Y for yes, N for no. N

If yes, complete one record for each grant; if no, enter N/A for questions 1,2, and 3 of one repeating group.

1. Recipient N/A
2. Allocation N/A
3. Project Description (no more than 300 words) N/A

13.1.15 **Total Expenditure - Grants to Member Libraries** \$0

Indirect Cost: Computed annually for the Big 5 Cities (New York City, Buffalo, Rochester, Syracuse, and Yonkers) and each New York State Education Department for administrative costs charged to Operating Aid only. BOCES and Big 5 Cities must approved Department indirect cost rate (supplied by the New York State Library) when applying it to the school library system

13.1.16 **Total Indirect Cost** (same as Question 7.45) \$2,101

13.1.17 **Purchased Services with BOCES:** Did the system expend funds to purchase services from or cross-contract with a BOCES or a school library system other than the applicant agency? Enter Y for Yes, N for No. N

If yes, complete one record for each allowable expenditure; if no, enter N/A for questions 1, 2 and 3 of one repeating group.

1. Description of Services
2. Name of BOCES
3. Expenditure

13.1.18 **Total Expenditure - Purchased Services with BOCES** \$0

13.1.19 **Total Expenditure (total 13.1.2, 13.1.4, 13.1.5, 13.1.7, 13.1.9, 13.1.11, 13.1.13, 13.1.15, 13.1.16, and 13.1.18)** \$145,998

13.1.20 **Balance at the Opening of the Fiscal Year**
NOTE: The opening balance must be the same as the closing balance of the previous year. \$3,838

13.1.21 **Total Allocation from 2016-2017 State Aid** \$150,868

13.1.22 **Balance at the End of the 2016-2017 Fiscal Year.** \$8,708

13.1.23 **Budget Narrative:** Provide a brief narrative, no more than fifteen hundred (1500) words, describing the major activities carried out with these State Aid Funds. These funds were used to purchase books for the Professional Library's literacy collection for EBSCO Academic Search, Gale hosting, and for TeachingBooks.net.

13. State Formula Aid Disbursements Cont.

SCHOOL LIBRARY SYSTEMS CATEGORICAL AID FOR AUTOMATION

Statutory Reference Education Law § 284 (1) (g)
(Automation Aid): Commissioners Regulations 90.18

School Library Systems are reporting on disbursements for their Automation Aid

Note: Please add annotations needed to satisfy edit checks in the State Note field of the Survey section, not the Local No

13.2.1 **Professional Salaries:** Indicate total FTE and salaries for the system director and for each professional system employee record for each employee.

- | | | |
|----|-----------------------------------|-----|
| 1. | Title | N/A |
| 2. | Total Full-Time Equivalents (FTE) | N/A |
| 3. | Expenditure | N/A |

13.2.2 **Total Expenditure - Professional Salaries:** \$0

13.2.3 **Other Staff Salaries:** Indicate total FTE and salaries for all other system employees; complete one record for each emp

- | | | |
|----|-----------------------------------|-----|
| 1. | Title | N/A |
| 2. | Total Full-Time Equivalents (FTE) | N/A |
| 3. | Expenditure | N/A |

13.2.4 **Total Expenditure - Other Staff Salaries** \$0

13.2.5 **Employee Benefits:** Indicate the total expenditures for all system employee fringe benefits.

13.2.6 **Purchased Services:** Does the system expend funds for purchased services? Enter Y for Yes, N for No. Y

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, 2 and 3 of one repeating group.

- | | | |
|----|----------------------|--------------------------|
| 1. | Expenditure Category | Institutional membership |
| 2. | Provider of Services | ISTE, NYLA |
| 3. | Expenditure | \$245 |

13.2.7 **Total Expenditure - Purchased Services** \$245

13.2.8 **Supplies and Materials:** Does the system expend funds for supply items, postage, library materials, or equipment and furnishings with a unit cost less than \$5,000? Enter Y for Yes, N for No. Y

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, and 2 of one repeating group.

- | | | |
|----|----------------------|--|
| 1. | Expenditure Category | Books and other print materials |
| 2. | Expenditure | \$158 |
| 1. | Expenditure Category | Non-print resources (electronic content) |

2. Expenditure \$9,624

13.2.9 **Total Expenditure -
Supplies and Materials** \$9,782

13.2.10 **Travel Expenditures:** Did
the system expend funds for
travel? Enter Y for Yes, N for
No. Y

If yes, complete one record for each applicable category; if no enter N/A for questions 1 and 2 of one repeating group.

1. Type of travel System staff

2. Expenditure \$420

13.2.11 **Total Expenditure - Travel** \$420

13.2.12 **Equipment and
Furnishings:** Does the
system expend funds for
equipment and furnishings
with a unit cost of \$5,000 or
more and having a useful life
of more than one year? Enter
Y for Yes, N for No.

If yes, complete one record for each type of item purchased; if no, enter N/A for questions 1, 2, 3, and 4 of one repeating group

1. Type of item N/A

2. Quantity N/A

3. Unit Cost N/A

4. Expenditure N/A

13.2.13 **Total Expenditure -
Equipment and Furnishings** \$0

13.2.14 **Grants to Member
Libraries:** Did the system
expend funds for grants to
member libraries? Enter Y for
yes, N for no. N

If yes, complete one record for each grant; if no, enter N/A for questions 1, 2, and 3 of one repeating group.

1. Recipient N/A

2. Allocation N/A

3. Project Description (no more
than 300 words) N/A

13.2.15 **Total Expenditure - Grants
to Member Libraries** \$0

13.2.16 **Purchased Services with
BOCES:** Did the system
expend funds to purchase
services from or
cross-contract with a BOCES
or a school library system
other than the applicant
agency? Enter Y for Yes, N
for No. N

If yes, complete one record for each allowable expenditure; if no, enter N/A for questions 1, 2 and 3 of one repeating group.

1. Description of Services N/A

2. Name of BOCES N/A

3. Expenditure N/A

13.2.17	Total Expenditure - Purchased Services with BOCES	\$0
13.2.18	Total Expenditure (total 13.2.2, 13.2.4, 13.2.5, 13.2.7, 13.2.9, 13.2.11, 13.2.13, 13.2.15, and 13.2.17)	\$10,447
13.2.19	Balance at the Opening of the Fiscal Year NOTE: The opening balance must be the same as the closing balance of the previous year.	\$2,894
13.2.20	Total Allocation from 2016-2017 State Aid	\$10,310
13.2.21	Balance at the End of the 2016 - 2017 Fiscal Year	\$2,757
13.2.22	Final Narrative: Provide a brief narrative, no more than five hundred (500) words, describing the major activities carried out with these State Aid Funds.	These funds were used to pay for memberships for NYLA and ISTE, to purchase the y school directory, to subscribe to Media Flex Subscription Database Manager & CERF travel expenses to the SLSA Institute.

14. Summary of Library System Accomplishments

Using the goals from Section 5 in the approved 2011-2016 System Plan of Service briefly describe the final results of each element (2015-2016)

14.1	Element 1: Resource Sharing - Results	The School Library System continued a major push to update the records in the union implemented updates to the 24/7/365 subscription database portal.
14.2	Element 2: Special Client Groups - Results	The School Library System continued to partner with GLSEN Hudson Valley, the PN regional ELL support group, and with special education programs offered at PNWBOC
14.3	Element 3: Professional Development and Continuing Education - Results	The School Library System provided high-quality learning sessions and professional d the region, including a collaborative 1.5 day workshop with the Regional Social Studie entitled "Social Studies Framework, Inquiry, and Collaboration," for which teams of L studies teachers learned about the crosswalk between the new social studies standards State Information Fluency Continuum, and co-planned an inquiry.
14.4	Element 4: Consulting and Development Services - Results	The School Library System provided high-quality consulting services to librarians and regarding school libraries and library services, including site visits and inter-visitation administrators. The School Library System provided cost-saving coordinated professic services for its member districts.
14.5	Element 5: Coordinated Services - Results	The School Library System provided discount purchases for databases, video streamin automation. Database subscriptions were enhanced by a Database Management progra component schools were provided with a customized database portal page accessible t and username/password unique to each school building, which includes links to NOVI and resources purchased through the Professional Library CoSer.
14.6	Element 6: Awareness and Advocacy - Results	The School Library System continued to advocate for its member districts through par Curriculum Council, the Westchester Library Association, METRO, NYLA, and AAS Director presented in member districts and met with building and district administrator evolving role of the LMS. Communication among member libraries was facilitated through the PNWBOCES SL

- 14.7 Element 7: Communication among Member Libraries and Library Systems - Results library network meetings, and a publicly posted online directory of member libraries a Communication among library systems took place through the SLSA LISTSERV, SLS Meetings, the SLSA Institute, DLD SLS Director conference calls, and the annual SLS partnership between PNWBOCES SLS and SWBOCES SLS.
- 14.8 Element 8: Cooperative Efforts with Other Library Systems - Results The Westchester Library System Youth Coordinator is a PNWBOCES SLS Council member, SLS Director is a Westchester Library Association Board member, in addition to partn SWBOCES SLS for the annual joint conference.
- 14.9 Element 9: Other Goal(s) - Results The SLS Director chaired the SLS Professional Development Subcommittee. They rev of the professional development needs assessment that was sent out in the spring of 2017-2018.

PARTICIPANT'S EVALUATION OF SYSTEM SERVICES

- 14.11 URL of System's Blank Evaluation Form <https://goo.gl/forms/nCvSQIZNTputhRQ73> AND <https://goo.gl/forms/fZhOIInrIHH9v>;
- 14.12 URL of the Tabulated Results of the System's Evaluation Form <http://www.pnwboces.org/pdf/library/PNW-BOCES-SLS-Evaluation-Survey-2016-20>

15. Assurance and Contact Information

CONTACT INFORMATION

- 15.1 Contact name (person completing report) Joseph A. Mannozi III
- 15.2 Contact telephone number (enter 10 digits only and hit the Tab key) (914) 248-2392
- 15.3 Contact e-mail address jmanozzi@pnwboces.org

ASSURANCE

- 15.4 The Library System operated under its approved Plan of Service in accordance with the provisions of Education Law and the Regulations of the Commissioner, and assures that this "Annual Report" was reviewed and accepted by the System Board/Council on (date - mm/dd/yyyy) 9/26/17

APPROVAL (for New York State Library use only/not a required field)

- 15.5 The Library System's Annual Report was reviewed and approved by the New York State Library on (date - mm/dd/yyyy)

Suggested Improvements

- Library System Putnam-Westchester BOCES SLS
- Name of Person Completing Form Joseph A Mannozi III
- Phone Number and Extension (enter area code, telephone number and extension only): (914) 248-2392

Please share with us your suggestions for improving the *Annual Report*. Thank You!

Continue to communicate with SLSA to improve this report. Updates to help text have
Thank you.