# Springfield Library Annual Report For Public And Association Libraries - 2020

#### 1. GENERAL LIBRARY INFORMATION

Library/Director Information

Library ID Number

Library Name

1.1

1.2

Please note: Bibliostat CollectConnect is now compatible with major browsers including Google Chrome, Mozilla Firefox, Safari and Internet Explorer.

Please be advised Bibliostat CollectConnect is now using a new interface. If you have accessed or if you believe you may have accessed the old Bibliostat Collect, please click the new link <a href="here">here</a> and you will be taken to the new interface. Please be sure you exit and close the old Bibliostat Collect before you begin your survey.

To avoid loss of data, only one person at a time should be logged into a member library report. Multiple people logged into the same report will cause data to be lost.

SPRINGFIELD LIBRARY

Libraries should not have reports from two different years open at the same time.

Report all information in Part 1 as of December 31, 2020, except for questions related to the <u>current</u> library director/manager (questions 1.37 through 1.44).

2800476060

|   | 1.3  | Name Status (State use only)                                                                                              | 00 (for no change from previous year) |
|---|------|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
|   | 1.4  | Structure Status (State use only)                                                                                         | 00 (for no change from previous year) |
|   | 1.5  | Community                                                                                                                 | Springfield Center                    |
|   | 1.6  | Beginning Fiscal Reporting Year                                                                                           | 01/01/2020                            |
|   | 1.7  | Ending Fiscal Reporting Year                                                                                              | 12/31/2020                            |
|   | 1.8  | Is the library now reporting on a different fiscal year than it reported on in the previous Annual Report?                | No                                    |
|   | 1.9  | If yes, please indicate the beginning date of library's new reporting year. Enter N/A if No was answered to Question 1.8. | N/A                                   |
|   | 1.10 | Please indicate the ending date of<br>library's new reporting year. Enter<br>N/A if No was answered to<br>Question 1.8.   | N/A                                   |
|   | 1.11 | Beginning Local Fiscal Year                                                                                               | 01/01/2020                            |
|   | 1.12 | Ending Local Fiscal Year                                                                                                  | 12/31/2020                            |
|   | 1.13 | Address Status                                                                                                            | 00 (for no change from previous year) |
|   | 1.14 | Street Address                                                                                                            | 129 COUNTY ROUTE 29A                  |
|   | 1.15 | City                                                                                                                      | SPRINGFIELD CENTER                    |
|   | 1.16 | Zip Code                                                                                                                  | 13468                                 |
| 1 |      |                                                                                                                           |                                       |

| 1.17  | Mailing Address                                                                                                                                                                                         | P. O. BOX 142                                                         |
|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| 1.18  | City                                                                                                                                                                                                    | SPRINGFIELD CENTER                                                    |
| 1.19  | Zip Code                                                                                                                                                                                                | 13468                                                                 |
| 1.20  | Telephone Number (enter 10 digits only and hit the Tab key; enter N/A if no telephone number)                                                                                                           | (315) 858-5802                                                        |
| 1.21  | Fax Number (enter 10 digits only and hit the Tab key; enter N/A if no fax number)                                                                                                                       | (315) 858-5876                                                        |
| 1.22  | E-Mail Address to Contact the<br>Library (Enter N/A if no e-mail<br>address)                                                                                                                            | sp.ill@4cls.org                                                       |
| 1.23  | Library Home Page URL (Enter<br>N/A if no home page URL)                                                                                                                                                | http://libraries.4cls.org/springfield/                                |
| 1.24  | Population Chartered to Serve (per 2010 Census)                                                                                                                                                         | 1,358                                                                 |
| 1.25  | Indicate the type of library as<br>stated in the library's charter<br>(select one):                                                                                                                     | ASSOCIATION                                                           |
| 1.26  | Indicate the area chartered to serve<br>as stated in the library's charter<br>(select one):                                                                                                             | Town                                                                  |
| 1.27  | During the reporting year, has<br>there been any change to the<br>library's legal service area<br>boundaries? Changes must be the<br>result of a Regents charter action.<br>Answer Y for Yes, N for No. | N                                                                     |
| 1.28  | Indicate the type of charter the library currently holds (select one):                                                                                                                                  | Provisional                                                           |
| 1.29  | Date the library was granted its absolute charter or the date of the provisional charter if the library does not have an absolute charter                                                               | 04/27/1999                                                            |
| 1.30  | Date the library was last registered                                                                                                                                                                    | 02/28/2003                                                            |
| 1.31  | Federal Employer Identification<br>Number                                                                                                                                                               | 16158022                                                              |
| 1.32  | County                                                                                                                                                                                                  | OTSEGO                                                                |
| 1.33  | School District                                                                                                                                                                                         | Cherry Valley-Springfield Central School District                     |
| 1.34  | Town/City                                                                                                                                                                                               | SPRINGFIELD                                                           |
| 1.35  | Library System                                                                                                                                                                                          | Four County Library System                                            |
| THESI | E QUESTIONS ARE FOR NYC L                                                                                                                                                                               | IBRARIES ONLY. PLEASE PROCEED TO THE NEXT QUESTION.                   |
| 1.36a | President/CEO Name                                                                                                                                                                                      | N/A                                                                   |
| 1.36b | President/CEO Phone Number                                                                                                                                                                              | N/A                                                                   |
|       | President/CEO Email                                                                                                                                                                                     | N/A                                                                   |
|       |                                                                                                                                                                                                         | port all information for the <u>current</u> library director/manager. |
| 1.37  | First Name of Library<br>Director/Manager                                                                                                                                                               | Hanna                                                                 |

| 1.38      | Last Name of Library<br>Director/Manager                                                                                                                                                                                                                                                  | Conbeer         |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| 1.39      | NYS Public Librarian Certification<br>Number                                                                                                                                                                                                                                              | N/A             |
| 1.40      | What is the highest education level of the library manager/director?                                                                                                                                                                                                                      | Master's Degree |
| 1.41      | If the library manager/director<br>holds a Master's Degree, is it a<br>Master's Degree in<br>Library/Information Science?                                                                                                                                                                 | Y               |
| 1.42      | Do all staff working in the budgeted Librarian (certified) positions reported in 6.4 have an active NYS Public Librarian Certificate? If No, list the name and e-mail address of each staff member without an active certificate in a Note.                                               | N               |
| 1.43      | E-mail Address of the<br>Director/Manager                                                                                                                                                                                                                                                 | sp.ill@4cls.org |
| 1.44      | Fax Number of the<br>Director/Manager                                                                                                                                                                                                                                                     | (315) 858-5876  |
| 1.45      | Does the library charge fees for<br>library cards to people residing<br>outside the system's service area?                                                                                                                                                                                | N               |
| Public Vo | otes/Contracts                                                                                                                                                                                                                                                                            |                 |
| 1.46      | Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2020? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.47. | N               |
| 1.        | Name of municipality or district<br>holding the public vote                                                                                                                                                                                                                               | N/A             |
| 2.        | Indicate the type of municipality or district holding the public vote                                                                                                                                                                                                                     | N/A             |
| _         |                                                                                                                                                                                                                                                                                           |                 |

3.

4.

5.

6a.

Date the vote was held

Was the vote successful? Y/N

What type of public vote was it?

Most recent prior year approved appropriation from a public vote:

(mm/dd/2020)

N/A

N/A

N/A

N/A

- 6b. Proposed increase in appropriation as a result of the vote held on the date reported in question number 3:
- 6c. Total proposed appropriation (sum of 6a and 6b):

This question should only be answered if "No" was answered in Q1.46 OR the library has votes from different municipalities/districts that were held in different years, both current and prior.

- 1.47 Did the library receive funding from an appropriation which was approved by public vote in a prior year? (Prior to Calendar Year 2020) Enter Y for Yes, N for No. If Yes, complete one record for the vote from each funding source. If No, go to question 1.48.
- Name of municipality or district holding the public vote
- Indicate the type of municipality or district holding the public vote
- Date the last successful vote was held (mm/dd/yyyy)
- 4. What type of public vote was it?
- 5. What was the total dollar amount of the appropriation from tax dollars resulting from the last successful vote?

#### Unusual Circumstances

- 1.48 Does the reporting library have a contractual agreement with a municipality or district to provide library services to residents of an area not served by a chartered library? Enter Y for Yes, N for No. If yes, please complete one record for each contract. If no, go to question 1.49.
- Name of contracting municipality or district
- Is this a written contractual agreement?
- Population of the geographic area served by this contract
- Dollar amount of contract N/A

- Enter the appropriate code for range of services provided (select N/A one):
- 1.49 For the reporting year, has the library experienced any unusual circumstance(s) that affected the statistics reported (e.g., natural disaster, fire, closed for renovations, massive weeding of collection, etc.)? If yes, please annotate explaining the circumstance(s) and the impact on the library using the Note; if no, please go to Part 2, Library Collection.

#### 2. LIBRARY COLLECTION

#### Print/Electronic/Other Holdings

Report holdings, additions, and subscriptions as of the end of the fiscal year reported in Part 1. Please <u>read</u> general information instructions below before completing this section.

NOTE: This section of the survey (2.1-2.25) collects data on selected types of materials.

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

#### PRINT MATERIALS

#### Cataloged Books

| 2.1   | Adult Fiction Books                                | 4,712  |
|-------|----------------------------------------------------|--------|
| 2.2   | Adult Non-fiction Books                            | 1,125  |
| 2.3   | Total Adult Books (Total questions 2.1 & 2.2)      | 5,837  |
| 2.4   | Children's Fiction Books                           | 3,528  |
| 2.5   | Children's Non-fiction Books                       | 1,003  |
| 2.6   | Total Children's Books (Total questions 2.4 & 2.5) | 4,531  |
| 2.7   | Total Cataloged Books (Total questions 2.3 & 2.6)  | 10,368 |
| Other | Print Materials                                    |        |
| 2.8   | Total Uncataloged Books                            | 0      |
| 2.9   | Total Print Serials                                | 0      |

| 2.10                              | All Other Print Materials                                                                                                                                                                                                                                      | 0                                |  |
|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|--|
| 2.11                              | Total Other Print Materials (Total questions 2.8 through 2.10)                                                                                                                                                                                                 | 0                                |  |
| 2.12                              | Total Print Materials (Total questions 2.7 and 2.11)                                                                                                                                                                                                           | 10,368                           |  |
| ALL O                             | THER MATERIALS                                                                                                                                                                                                                                                 |                                  |  |
| Electro                           | nic Materials                                                                                                                                                                                                                                                  |                                  |  |
| 2.13                              | Electronic Books                                                                                                                                                                                                                                               | 12,470                           |  |
| 2.14                              | Local Electronic Collections                                                                                                                                                                                                                                   | 11                               |  |
| 2.15                              | NOVELNY Electronic Collections                                                                                                                                                                                                                                 | 15                               |  |
| 2.16                              | Total Electronic Collections (Total questions 2.14 and 2.15)                                                                                                                                                                                                   | 26                               |  |
| 2.17                              | Audio - Downloadable Units                                                                                                                                                                                                                                     | 2,149                            |  |
| 2.18                              | Video - Downloadable Units                                                                                                                                                                                                                                     | 0                                |  |
| 2.19                              | Other Electronic Materials<br>(Include items that are not<br>included in the above categories,<br>such as e-serials; electronic files;<br>collections of digital photographs;<br>and electronic government<br>documents, reference tools, scores<br>and maps.) | 1                                |  |
| 2.20                              | Total Electronic Materials (Total questions 2.13, 2.16, 2.17, 2.18 and 2.19)                                                                                                                                                                                   | 14,646                           |  |
| Non-El                            | ectronic Materials                                                                                                                                                                                                                                             |                                  |  |
| 2.21                              | Audio - Physical Units                                                                                                                                                                                                                                         | 93                               |  |
| 2.22                              | Video - Physical Units                                                                                                                                                                                                                                         | 810                              |  |
| 2.23                              | Other Non-Electronic Materials<br>(includes films, slides, etc.)                                                                                                                                                                                               | 0                                |  |
| 2.24                              | Total Other Materials Holdings<br>(Total questions 2.21 through 2.23)                                                                                                                                                                                          | 903                              |  |
| Grand Total/Additions to Holdings |                                                                                                                                                                                                                                                                |                                  |  |
| 2.25                              | GRAND TOTAL HOLDINGS                                                                                                                                                                                                                                           |                                  |  |
| 2.23                              | (Total questions 2.12, 2.20 and 2.24)                                                                                                                                                                                                                          | 25,917                           |  |
| ADDIT                             | TIONS TO HOLDINGS - Do <u>not</u> su                                                                                                                                                                                                                           | obtract withdrawals or discards. |  |
| 2.26                              | Cataloged Books                                                                                                                                                                                                                                                | 638                              |  |
| 2.27                              | All Other Print Materials                                                                                                                                                                                                                                      | 0                                |  |
| 2.28                              | Electronic Materials                                                                                                                                                                                                                                           | 1,169                            |  |
| 2.29                              | All Other Materials                                                                                                                                                                                                                                            | 61                               |  |
| 2.30                              | Total Additions (Total questions 2.26 through 2.29)                                                                                                                                                                                                            | 1,868                            |  |
|                                   |                                                                                                                                                                                                                                                                |                                  |  |

## 3. LIBRARY PROGRAMS, POLICIES, AND SERVICES

#### Visits/Borrowers/Policies/Accessibility

Report all information on questions 3.1 through 3.29 as of the end of the fiscal year reported in Part 1; report information on questions 3.30 through 3.83 for the 2020 calendar year. Please click here to read general instructions before completing this section.

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

#### LIBRARY USE

3.4

| 3.1  | Library visits (total annual attendance)                                                                                                 | 621               |
|------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| 3.1a | Regarding the number of Library<br>Visits entered, is this an annual<br>count or an annual estimate based<br>on a typical week or weeks? | CT - Annual Count |
| 3.2  | Registered resident borrowers                                                                                                            | 179               |
| 3.3  | Registered non-resident borrowers                                                                                                        | 12                |

Please report information on WRITTEN POLICIES as of 12/31/20.

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

Does the library have an open

|      | meeting policy?                                                                    | 1 |
|------|------------------------------------------------------------------------------------|---|
| 3.5  | Does the library have a policy protecting the confidentiality of library records?  | Y |
| 3.6  | Does the library have an Internet use policy?                                      | Y |
| 3.7  | Does the library have a disaster plan?                                             | Y |
| 3.8  | Does the library have a board-<br>approved conflict of interest<br>policy?         | Y |
| 3.9  | Does the library have a board-<br>approved whistle blower policy?                  | Y |
| 3.10 | Does the library have a board-<br>approved sexual harassment<br>prevention policy? | Y |
|      |                                                                                    |   |

Please report information on ACCESSIBILITY as of 12/31/20.

#### ACCESSIBILITY (Answer Y for Yes, N for No)

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

| devices for persons who are deaf<br>and hearing impaired (TTY/TDD)?                                                                                                                                                                                           | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Does the library have large print books?                                                                                                                                                                                                                      | Ν                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Does the library have assistive<br>technology for people who are<br>visually impaired or blind?                                                                                                                                                               | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| f so, what do you have?                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| screen reader, such as JAWS,<br>Windoweyes or NVDA                                                                                                                                                                                                            | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| refreshable Braille commonly<br>referred to as a refreshable Braille<br>display                                                                                                                                                                               | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| screen magnification software,<br>such as Zoomtext                                                                                                                                                                                                            | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| electronic scanning and reading<br>software, such as OpenBook                                                                                                                                                                                                 | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Is the library registered for<br>services from either the New York<br>State Talking Book and Braille<br>Library (New York State Library,<br>Albany) or the Andrew Heiskell<br>Braille and Talking Book Library<br>(The New York Public Library,<br>New York)? | N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                                                                                               | and hearing impaired (TTY/TDD)?  Does the library have large print books?  Does the library have assistive technology for people who are visually impaired or blind?  f so, what do you have?  screen reader, such as JAWS, Windoweyes or NVDA  refreshable Braille commonly referred to as a refreshable Braille display  screen magnification software, such as Zoomtext  electronic scanning and reading software, such as OpenBook  Is the library registered for services from either the New York State Talking Book and Braille Library (New York State Library, Albany) or the Andrew Heiskell Braille and Talking Book Library (The New York Public Library, |

Does the library have assistive

3.12

## Library Sponsored Programs/Summer Reading Program

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

## LIBRARY SPONSORED PROGRAMS

Adult Program Sessions

3.17

| 3.18 | Young Adult Program Sessions                                                                                                                                                                                                             | 1  |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 3.19 | Children's Program Sessions                                                                                                                                                                                                              | 0  |
| 3.20 | All Other Program Sessions                                                                                                                                                                                                               | 2  |
| 3.21 | Total Number of Program Sessions (Total questions 3.17 through 3.20)                                                                                                                                                                     | 9  |
| 3.22 | One-on-One Program Sessions                                                                                                                                                                                                              | 0  |
| 3.23 | Do library staff, trustees and/or volunteers reach outside of the library to promote library programs and services through group presentations, information tables and/or other similar educational activities sponsored by the Library? | Ye |
| 3.24 | Adult Program Attendance                                                                                                                                                                                                                 | 49 |
| 3.25 | Young Adult Program Attendance                                                                                                                                                                                                           | 10 |

| 3.26 | Children's Program Attendance                                | 0  |
|------|--------------------------------------------------------------|----|
| 3.27 | All Other Program Attendance                                 | 17 |
| 3.28 | Total Program Attendance (Total questions 3.24 through 3.27) | 76 |
| 3.29 | One-on-One Program Attendance                                | 0  |

Please report information on SUMMER READING PROGRAMS for the 2020 calendar year.

## SUMMER READING PROGRAM

3.30 - Indicate which of the following apply to the summer reading program(s) offered by the library during the summer of 2020 (check all that apply):

| summe | r of 2020 (check all that apply):                                                                              |     |
|-------|----------------------------------------------------------------------------------------------------------------|-----|
| a.    | Program(s) for children                                                                                        | No  |
| b.    | Program(s) for young adults                                                                                    | No  |
| c.    | Program(s) for Adults                                                                                          | No  |
| d.    | Summer Reading at New York<br>Libraries name and/or logo used                                                  | No  |
| e.    | Collaborative Summer Library<br>Program (CSLP Manual, provided<br>through the New York State<br>Library, used) | No  |
| f.    | N/A                                                                                                            | Yes |
| 3.31  | Library outlets offering the summer reading program                                                            | 0   |
| 3.32  | Children registered for the library's summer reading program                                                   | 0   |
| 3.33  | Young adults registered for the library's summer reading program                                               | 0   |
| 3.34  | Adults registered for the library's summer reading program                                                     | 0   |
| 3.35  | Total number registered for the library's summer reading program (total 3.32 + 3.33 + 3.34)                    | 0   |
| 3.36  | Children's program sessions -<br>Summer 2020                                                                   | 0   |
| 3.37  | Young adult program sessions -<br>Summer 2020                                                                  | 0   |
| 3.38  | Adult program sessions - Summer 2020                                                                           | 0   |
| 3.39  | Total program sessions - Summer 2020 (total 3.36 + 3.37 + 3.38)                                                | 0   |
| 3.40  | Children's program attendance -<br>Summer 2020                                                                 | 0   |
| 3.41  | Young adult program attendance -<br>Summer 2020                                                                | 0   |
| 3.42  | Adult program attendance -<br>Summer 2020                                                                      | 0   |
| 3.43  | Total program attendance -<br>Summer 2020 (total 3.40 + 3.41 + 3.42)                                           | 0   |

#### COLLABORATORS 3.44 Public school district(s) and/or BOCES 3.45 Non-public school(s) 0 3.46 Childcare center(s) 3.47 Summer camp(s) 0 3.48 Municipality/Municipalities 0 3.49 Literacy provider(s) 0 3.50 Other (describe using the State 0 note) 3.51 Total Collaborators (total 3.44 0 through 3.50) Early/Adult/English Speaker/Digital Literacy

Please report information on EARLY LITERACY PROGRAMS for the 2020 calendar year.

#### EARLY LITERACY PROGRAMS

| 3.52 | Did the library offer early literacy<br>programs? (Enter Y for Yes, N for | Ν |
|------|---------------------------------------------------------------------------|---|
|      | No)                                                                       |   |
| 2.52 | T. 1: C                                                                   | 1 |

3.53 - Indicate types of programs offered (check all that apply)

|      | indicate types of programs offices (eneci-   |    |  |
|------|----------------------------------------------|----|--|
| a.   | Focus on birth - school entry (kindergarten) | No |  |
| Ъ.   | Focus on parents & caregivers                | No |  |
| c.   | Combined audience                            | No |  |
| d.   | N/A                                          | No |  |
| 3.54 | - Number of sessions                         |    |  |
| a.   | Focus on birth - school entry (kindergarten) | 0  |  |
| Ъ.   | Focus on parents & caregivers                | 0  |  |
| _    | Cambinal andiana                             | ^  |  |

| C.   | Combined audience | 0 |
|------|-------------------|---|
| d.   | N/A               | 0 |
| 3.55 | Total Sessions    | 0 |

#### 3.56 - Attendance at sessions

| a.   | Focus on birth - school entry (kindergarten) | 0 |
|------|----------------------------------------------|---|
| Ъ.   | Focus on parents & caregivers                | 0 |
| c.   | Combined audience                            | 0 |
| d.   | N/A                                          | 0 |
| 3.57 | Total Attendance                             | 0 |

## 3.58 - Collaborators (check all that apply):

| a. | Childcare center(s)                       | No |
|----|-------------------------------------------|----|
| b. | Public School District(s) and/or<br>BOCES | No |

| C. | Non-Public School(s) | No |
|----|----------------------|----|
|    |                      |    |

| d. | Health care providers/agencies  | No |
|----|---------------------------------|----|
| e. | Other (describe using the State | No |

Please report information on ADULT LITERACY for the 2020 calendar year.

## ADULT LITERACY

3.65

| 3.59     | Did the library offer adult literacy programs?   | No |
|----------|--------------------------------------------------|----|
| 3.60     | Total group program sessions                     | 0  |
| 3.61     | Total one-on-one program sessions                | 0  |
| 3.62     | Total group program attendance                   | 0  |
| 3.63     | Total one-on-one program attendance              | 0  |
| 3.64 - 0 | Collaborators (check all that apply)             |    |
| a.       | Literacy NY (Literacy Volunteers of America)     | No |
| b.       | Public School District(s) and/or<br>BOCES        | No |
| c.       | Non-Public Schools                               | No |
| d.       | Other (see instructions and describe using Note) | No |

Please report information on PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL) for the 2020 calendar year.

## PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL)

Ν

|          | Yes, N for No)                                      |    |
|----------|-----------------------------------------------------|----|
| 3.66     | Children's program sessions                         | 0  |
| 3.67     | Young adult program sessions                        | 0  |
| 3.68     | Adult program sessions                              | 0  |
| 3.69     | Total program sessions (total 3.66 + 3.67 + 3.68)   | 0  |
| 3.70     | One-on-one program sessions                         | 0  |
| 3.71     | Children's program attendance                       | 0  |
| 3.72     | Young adult program attendance                      | 0  |
| 3.73     | Adult program attendance                            | 0  |
| 3.74     | Total program attendance (total 3.71 + 3.72 + 3.73) | 0  |
| 3.75     | One-on-one program attendance                       | 0  |
| 3.76 - C | Collaborators (check all that apply):               |    |
| a.       | Literacy NY (Literacy Volunteers of America)        | No |
| b.       | Public School District(s) and/or<br>BOCES           | No |
| c.       | Non-Public School(s)                                | No |
|          |                                                     |    |

Did the library offer programs for

Languages (ESOL)? (Enter Y for

English Speakers of Other

d. Other (describe using the Note) No
Please report information on DIGITAL LITERACY for the 2020 calendar year.

DIGITAL LITERACY

3.77 Did the library offer digital literacy programs?

N

3.78 Total group program sessions 0

3.79 Total one-on-one program sessions 0

0

403

95

277

## 4. LIBRARY TRANSACTIONS

3.80

3.81

3.82

4.1

4.2

4.3

#### Circulation/Electronic Use/Reference Transactions

Total group program attendance

Did your library offer teen-led

activities during the 2020 calendar N

Total one-on-one program

attendance

year?

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

## CATALOGED BOOK CIRCULATION

Adult Non-fiction Books

Total Adult Books (Total questions 498

Adult Fiction Books

4.1 & 4.2

| 4.4   | Children's Fiction Books                                           | 93  |
|-------|--------------------------------------------------------------------|-----|
| 4.5   | Children's Non-fiction Books                                       | 24  |
| 4.6   | Total Children's Books (Total<br>questions 4.4 & 4.5)              | 117 |
| 4.7   | Total Cataloged Book Circulation<br>(Total question 4.3 & 4.6)     | 615 |
| CIRCU | LATION OF OTHER MATERIA                                            | LS  |
| 4.8   | Circulation of Adult Other<br>Materials                            | 81  |
| 4.9   | Circulation of Children's Other<br>Materials                       | 8   |
| 4.10  | Total Circulation of Other<br>Materials (Total questions 4.8, 4.9) | 89  |
| 4.11  | Physical Item Circulation (Total questions 4.7 & 4.10)             | 704 |
| ELECT | TRONIC USE                                                         |     |
| 4.12  | Use of Electronic Material                                         | 277 |
| 4.13  | Successful Retrieval of Electronic Information                     | 0   |
| 4.14  | Electronic Content Use (Total                                      | 277 |

questions 4.12 & 4.13)

| 4.15     | Total Circulation of Materials<br>(Total questions 4.11 & 4.12)                   | 981                        |
|----------|-----------------------------------------------------------------------------------|----------------------------|
| 4.16     | Total Collection Use (Total questions 4.13 & 4.15)                                | 981                        |
| 4.17     | Grand Total Circulation of<br>Children's Materials (Total<br>questions 4.6 & 4.9) | 125                        |
| REFE     | RENCE TRANSACTIONS                                                                |                            |
| 4.18     | Total Reference Transactions                                                      | 191                        |
| 4.18a    | 200 A 40 M ( 2017                                                                 | MARKS 10 PART              |
| 4.19     | Does the library offer virtual reference?                                         | N                          |
| Interlib | rary Loan                                                                         |                            |
| INTER    | RLIBRARY LOAN - MATERIALS                                                         | S RECEIVED (BORROWED)      |
| 4.20     | TOTAL MATERIALS<br>RECEIVED                                                       | 336                        |
| INTER    | RLIBRARY LOAN - MATERIALS                                                         | S PROVIDED (LOANED)        |
| 4.21     | TOTAL MATERIALS<br>PROVIDED                                                       | 287                        |
|          | CHNOLOGY AND TELECON all information as of December 31,                           |                            |
| SYSTI    | EMS AND SERVICES                                                                  |                            |
| 5.1      | Automated circulation system?                                                     | Y                          |
| 5.2      | Online public access catalog (OPAC)?                                              | Y                          |
| 5.3      | Electronic access to the OPAC from outside the library?                           | Y                          |
| 5.4      | Annual number of visits to the library's web site                                 | 152                        |
| 5.5      | Does the library use Internet filtering software on any computer?                 | Y                          |
| 5.6      | Does your library use social media?                                               | Y                          |
| 5.7      | Does the library file for E-rate benefits?                                        | Y                          |
| 5.8      | Is the library part of a consortium for E-rate benefits?                          | Y                          |
| 5.9      | If yes, in which consortium are                                                   | Four County Library System |
|          | you participating?                                                                |                            |

| 5.10 | Name of the person responsible for<br>the library's Information                | Hanna Conbeer   |
|------|--------------------------------------------------------------------------------|-----------------|
|      | Technology (IT) services                                                       |                 |
| 5.11 | IT contact's telephone number<br>(enter 10 digits only and hit the<br>Tab key) | (315) 858-5802  |
| 5.12 | IT contact's email address                                                     | sp ill@4cls org |

#### 6. STAFF INFORMATION

Note: Report figures as of the last day of the fiscal year reported in Part 1. Include the FTE for all positions funded in the library's budget whether those positions are filled or not. This report requires conversion of part-time hours to fulltime equivalents (FTE). To compute the FTE of employees in any category, take the total number of hours worked per week for all budgeted positions in that category and divide that total by the number of hours per week the library considers to be full-time. Report the FTE to two decimal places.

## FTE (FULL-TIME EQUIVALENT CALCULATION)

6.1 The number of hours per workweek used to compute FTE for all paid library personnel in this section.

## BUDGETED POSITIONS IN FULL-TIME EQUIVALENTS

| 6.2   | Library Director (certified)                                        | 0    |
|-------|---------------------------------------------------------------------|------|
| 6.3   | Vacant Library Director (certified)                                 | 0    |
| 6.4   | Librarian (certified)                                               | 0    |
| 6.5   | Vacant Librarian (certified)                                        | 0    |
| 6.6   | Library Manager (not certified)                                     | .5   |
| 6.7   | Vacant Library Manager (not certified)                              | 0    |
| 6.8   | Library Specialist/Paraprofessional (not certified)                 | 0    |
| 6.9   | Vacant Library<br>Specialist/Paraprofessional (not<br>certified)    | 0    |
| 6.10  | Other Staff                                                         | .25  |
| 6.11  | Vacant Other Staff                                                  | 0    |
| 6.12  | TOTAL PAID STAFF (Total questions 6.2, 6.4, 6.6, 6.8 & 6.10)        | 0.75 |
| 6.13  | VACANT TOTAL PAID STAFF (Total questions 6.3, 6.5, 6.7, 6.9 & 6.11) | 0.00 |
| SALAF | RY INFORMATION                                                      |      |
|       |                                                                     |      |

| 6.14 | (certified)                                   | 0   |
|------|-----------------------------------------------|-----|
| 6.15 | Salary - Entry Level Librarian<br>(certified) | \$0 |
| 6.16 | FTE - Library Director (certified)            | 0   |
| 6.17 | Salary - Library Director<br>(certified)      | \$0 |

| 6.18    | FTE - Library Manager (not certified)                                                                                                                                                                                                        | .5                                                                          |
|---------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| 6.19    | Salary - Library Manager (not certified)                                                                                                                                                                                                     | \$3,238                                                                     |
| 7. MI   | NIMUM PUBLIC LIBRARY S                                                                                                                                                                                                                       | STANDARDS (CURRENT)                                                         |
| Report  | all information as of December 31, 2                                                                                                                                                                                                         | 2020. Please click here to read general instructions before completing this |
| section | 1.                                                                                                                                                                                                                                           |                                                                             |
| 7.1     | <ol> <li>Is governed by board-approved<br/>written bylaws which outline the<br/>responsibilities and procedures of<br/>the library board of trustees.</li> </ol>                                                                             | Y                                                                           |
| 7.2     | <ol><li>Has a board-approved written<br/>long range plan of service.</li></ol>                                                                                                                                                               | Y                                                                           |
| 7.3     | <ol> <li>Presents a board-approved<br/>annual report to the community on<br/>the library's progress in meeting its<br/>goals and objectives.</li> </ol>                                                                                      | Y                                                                           |
| 7.4     | <ol> <li>Has board-approved written<br/>policies for the operation of the<br/>library.</li> </ol>                                                                                                                                            | Y                                                                           |
| 7.5     | <ol> <li>Presents annually to appropriate<br/>funding agencies a written board-<br/>approved budget which would<br/>enable the library to meet or<br/>exceed these standards and to carry<br/>out its long-range plan of service.</li> </ol> | Y                                                                           |
| 7.6     | <ol> <li>Periodically evaluates the<br/>effectiveness of the library's<br/>collection and services in meeting<br/>community needs.</li> </ol>                                                                                                | Y                                                                           |
| 7.7     | 7. Is open the minimum standard<br>number of public service hours for<br>population served. (see<br>instructions)                                                                                                                            | Y                                                                           |
| 8. Mai  | ntains a facility to meet community n                                                                                                                                                                                                        | needs, including adequate:                                                  |
| 7.8     | 8a. space                                                                                                                                                                                                                                    | Y                                                                           |
| 7.9     | 8b. lighting                                                                                                                                                                                                                                 | Y                                                                           |
| 7.10    | 8c. shelving                                                                                                                                                                                                                                 | Y                                                                           |
| 7.11    | 8d. seating                                                                                                                                                                                                                                  | Y                                                                           |
| 7.12    | 8e. restroom (see instructions)                                                                                                                                                                                                              | Y                                                                           |
|         |                                                                                                                                                                                                                                              | neet community needs and provide access to other library catalogs and other |
|         | nic information, including but not lin                                                                                                                                                                                                       |                                                                             |
| 7.13    | 9a. telephone                                                                                                                                                                                                                                | Y                                                                           |

7.14

7.15

7.16

7.17

9b. photocopier (see instructions)

9c. microcomputer or terminal

9e. Fax capability (see

9d. printer

instructions)

Υ

Y

Y

Y

- 7.18 10. Distributes board-approved printed information listing the library's hours open, borrowing Y rules, services, location and phone number.
- 7.19 11. Employs a paid director in accordance with the provisions of Y Commissioner's Regulation 90.8.

## 7. MINIMUM PUBLIC LIBRARY STANDARDS (AS OF 2021)

As of January 1, 2021 all public, free association and Indian libraries in New York State will be required to meet the minimum standards listed below. Please indicate which of these standards your library already meets as of **December 31, 2020**. This 2020 data will be helpful in informing statewide and regional efforts to ensure that all of New York's libraries are able to successfully comply with the new minimum standards. Please click <a href="here">here</a> to read general instructions before completing this section. <a href="Helpful information for meeting minimum public library standards">Helpful information for meeting minimum public library standards</a> is available on the State Library's website. Questions about the new standards should be directed to your library system.

- Is governed by written bylaws which define the structure and governing functions of the library board of trustees, and which shall be reviewed and re-approved by the board of trustees at least once every five years or earlier if required by law.
- Has a community-based, boardapproved, written long-range plan of service developed by the library board of trustees and staff
- Provides a board-approved written annual report to the community on the library's progress in meeting its mission, goals and objectives, as outlined in the library's long-range plan of service.
- 4. Has board-approved written
  policies for the operation of the
  library, which shall be reviewed
  and updated at least once every
  five years or earlier if required by
- Annually prepares and publishes a board-approved, written budget, which enables the library to address the community's needs, as outlined in the library's long-range plan of service.

- 6. Periodically evaluates the effectiveness of the library's programs, services and collections to address community needs, as outlined in the library's long-range plan of service.
- Is open the minimum standard number of public service hours for population served. (see instructions)
- 8. Maintains a facility that addresses community needs, as outlined in the library's long-range plan of service, including adequate:

| 8a. | space                | Y |
|-----|----------------------|---|
| 86. | lighting             | Y |
| 8c. | shelving             | Y |
| 8d. | seating              | Y |
| 8e. | power infrastructure | Y |
| 8f. | data infrastructure  | Y |
| 8g. | public restroom      | Y |
| ^   | D :1                 |   |

Provides programming to address community needs, as outlined in the library's long-range plan of service.

Y

#### 10. Provides

- 10a. a circulation system that facilitates access to the local library collection and other library catalogs
- 10b. equipment, technology, and internet connectivity to address community needs and facilitate access to information.
- 11. Provides access to current library information in print and online, facilitating the understanding of library services, operations and governance; information provided online shall include the standards referenced in numbers (1) through (5) above.
- Employs a paid director in accordance with the provisions of Y Commissioner's Regulation 90.8.
- Provides library staff with annual technology training, appropriate to their position, to address community needs, as outlined in the library's long-range plan of service.

Υ

14. Establishes and maintains partnerships with other educational, cultural or community organizations which enable the Y library to address the community's needs, as outlined in the library's long-range plan of service.

#### 8. PUBLIC SERVICE INFORMATION

Report all information as of the end of the fiscal year reported in Part 1. Please click <u>here</u> to read general instructions before completing this section.

PUBLIC SERVICE OUTLETS - Libraries reporting main libraries, branches and bookmobiles should complete Service Outlets Information in Part 9.

| 8.1 | Main Library                                                   | 1 |
|-----|----------------------------------------------------------------|---|
| 8.2 | Branches                                                       | 0 |
| 8.3 | Bookmobiles                                                    | 0 |
| 8.4 | Other Outlets                                                  | 0 |
| 8.5 | TOTAL PUBLIC SERVICE<br>OUTLETS (Total questions 8.1 -<br>8.4) | 1 |

Minimum Weekly Total Hours -

PUBLIC SERVICE HOURS - Report hours to two decimal places.

20.00

|      | Main Library                                                                    |        |
|------|---------------------------------------------------------------------------------|--------|
| 8.7  | Minimum Weekly Total Hours -<br>Branch Libraries                                | 0.00   |
| 8.8  | Minimum Weekly Total Hours -<br>Bookmobiles                                     | 0.00   |
| 8.9  | Minimum Weekly Total Hours -<br>Total Hours Open (Total questions<br>8.6 - 8.8) | 20.00  |
| 8.10 | Annual Total Hours - Main Library                                               | 253.00 |
| 8.11 | Annual Total Hours - Branch<br>Libraries                                        | 0.00   |
| 8.12 | Annual Total Hours - Bookmobiles                                                | 0.00   |
| 8.13 | Annual Hours Open - Total Hours                                                 |        |

Open (Total questions 8.10 through 253.00

#### 8A. COVID

8.12)

NOTE: This section of the survey (8A) collects data on the impact of the COVID-19 pandemic. Report all information in Part 8A from March 7, 2020 to December 31, 2020.

CV1 Were any of the library's outlets physically closed to the public for any period of time due to the Yes Coronavirus (COVID-19) pandemic?

| CV2  | Did library staff continue to<br>provide services to the public<br>during any portion of the period<br>when the building was physically<br>closed to the public due to the<br>Coronavirus (COVID-19) | No  |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| CV3  | pandemic?  Did the library add or increase access to electronic collection materials due to the Coronavirus (COVID-19) pandemic?                                                                     | No  |
| CV4  | Did the library allow users to<br>complete registration for library<br>cards online without having to<br>come to the library before the<br>Coronavirus (COVID-19)<br>pandemic?                       | No  |
| CV5  | Did the library allow users to complete registration for library cards online without having to come to the library during the Coronavirus (COVID-19) pandemic?                                      | Yes |
| CV6  | Did the library provide reference service via the Internet or telephone when the building was physically closed to the public during the Coronavirus (CONAHDEN)c?                                    | No  |
| CV7  | Did the library provide 'outside' service for circulation of physical materials at one or more outlets during the Coronavirus (CONAILDEIN)c?                                                         | No  |
| CV8  | Did the library provide live, virtual programs via the Internet during the Coronavirus (COVID-19) pandemic?                                                                                          | No  |
| CV9  | Did the library create and provide recordings of program content via the Internet during the Coronavirus (COVID-19) pandemic?                                                                        | No  |
| CV10 | Report total number of recordings of program content during COVID-19 pandemic. Optional response. Responses to new questions requiring numerical data may be estimated or left blank the first year. | N/A |

CV11 Did the library provide Wi-Fi
Internet access to users outside the
building at one or more outlets Yes
before the Coronavirus
(COMMEDIA):?

CV12 Did the library intentionally provide Wi-Fi Internet access to users outside the building at one or Yes more outlets during COVID-19 pandemic?

CV13 Did the library increase access to
Wi-Fi Internet access to users
outside the building at one or more No
outlets during the Coronavirus
(COVID-19) pandemic?

CV14 Did library staff work for other government agencies or nonprofit organizations instead of, or in addition to, their normal duties during the Coronavirus (COMMEDIA):

#### 9. SERVICE OUTLET INFORMATION

Outlet Name

Report all information as of the end of the fiscal year reported in Part 1. Please click <u>here</u> to read general instructions before completing this section.

NOTE: Libraries reporting Public Service Outlets in questions 8.1, 8.2 and 8.3 of Part 8 are required to complete this part of the Annual Report. Use this section to enter outlet information on main libraries, branches or bookmobiles. Complete one record for *each* main library, branch or bookmobile.

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

Springfield Library

| 1. | Outlet Name                       | Springheid Library   |
|----|-----------------------------------|----------------------|
| 2. | Outlet Name Status                | 00 (for no change)   |
| 3. | Street Address                    | 129 County Route 29A |
| 4. | Outlet Street Address Status      | 00 (for no change)   |
| 5. | City                              | Springfield Center   |
| 6. | Zip Code                          | 13468                |
| 7. | Phone (enter 10 digits only)      | (315) 858-5802       |
| 8. | Fax Number (enter 10 digits only) | N/A                  |
|    |                                   |                      |

E-mail Address sp.ill@4cls.org

Outlet URL http://libraries.4cls.org/springfield/

County Otsego

School District Cherry Valley-Springfield Central School District

Library System Four County Library System

14. Outlet Type Code (select one): CE

| 15. | Public Service Hours Per Year for<br>This Outlet                                                                                | 253                                                        |
|-----|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| 16. | Number of Weeks This Outlet is<br>Open                                                                                          | 32                                                         |
| 16a | Number of weeks an outlet closed due to COVID-19                                                                                | 20                                                         |
| 16b | Number of weeks an outlet had<br>limited occupancy due to<br>COVID-19                                                           | 22                                                         |
| 17. | Does this outlet have meeting<br>space available for public use<br>(non-library sponsored programs,<br>meetings and/or events)? | N                                                          |
| 18. | Is the meeting space available for public use even when the outlet is closed?                                                   | N                                                          |
| 19. | Total number of non-library<br>sponsored programs, meetings<br>and/or events at this outlet                                     | 0                                                          |
| 20. | Enter the appropriate outlet code (select one):                                                                                 | LR                                                         |
| 21. | Who owns this outlet building?                                                                                                  | Town                                                       |
| 22. | Who owns the land on which this outlet is built?                                                                                | Town                                                       |
| 23. | Indicate the year this outlet was initially constructed                                                                         | N/A                                                        |
| 24. | Indicate the year this outlet<br>underwent a major renovation<br>costing \$25,000 or more                                       | N/A                                                        |
| 25. | Square footage of the outlet                                                                                                    | 1,900                                                      |
| 26. | Number of internet computers at<br>this outlet used by general public                                                           | 2                                                          |
| 27. | Number of uses (sessions) of public Internet computers per year                                                                 | 94                                                         |
| 28. | Type of connection on the outlet's public Internet computers                                                                    | Cable                                                      |
| 29. | Maximum <u>download</u> speed of<br>connection on the outlet's public<br>Internet computers                                     | 10 Greater than or equal to 50 mbps and less than 100 mbps |
| 30. | Maximum <u>upload</u> speed of<br>connection on the outlet's public<br>Internet computers                                       | 10 Greater than or equal to 50 mbps and less than 100 mbps |
| 31. | Internet Provider                                                                                                               | Spectrum/Time Warner Cable                                 |
| 32. | WiFi Access                                                                                                                     | No restrictions to access                                  |
| 33. | Number of wireless sessions<br>provided by the library wireless<br>service per year                                             | 2,190                                                      |

| 34. | Does the outlet have a building entrance that is physically accessible to a person in a wheelchair? | Y                                     |
|-----|-----------------------------------------------------------------------------------------------------|---------------------------------------|
| 35. | Is every public part of the outlet accessible to a person in a wheelchair?                          | Y                                     |
| 36. | Does your <b>outlet</b> have a Makerspace?                                                          | N                                     |
| 37. | LIBID                                                                                               | 2800476060                            |
| 38. | FSCSID                                                                                              | NY9006                                |
| 39. | Number of Bookmobiles in the<br>Bookmobile Outlet Record                                            | 0                                     |
| 40. | Outlet Structure Status                                                                             | 00 (for no change from previous year) |

#### 10. OFFICERS AND TRUSTEES

#### Trustees and Terms/Board President/Trustee Names

Report information about trustee meetings as of December 31, 2020. All public and association libraries are required by Education Law to hold at least four meetings a year.

#### BOARD MEETINGS

10.1 Total number of board meetings held during calendar year (January 10 1, 2020 to December 31, 2020)

#### NUMBER OF TRUSTEES AND TERMS

- 10.2 Does your library have a range of trustees stated in the library's charter documents (incorporation)?
- 10.5 If your library does not have a range, how many voting positions are stated in the library's charter documents (incorporation)?
- 10.6 Does your library's charter documents (incorporation) state a Yes specified term for trustees? If no, please explain in a Note.
- 10.7 If yes, what is the trustee term length, as stated in your library's 3 years charter documents (incorporation)?

#### BOARD MEMBER SELECTION

10.8 Enter Board Member Selection EA - board members are elected by the library association membership Code (select one):

List Officers and Board Members as of February 1, 2021. Complete one record for each board member. There must be a record for each voting position, whether filled or vacant. Do not include non-voting positions.

#### BOARD PRESIDENT

| 10.9  | First Name | Marilyn  |
|-------|------------|----------|
| 10.10 | Last Name  | Marshall |

| 10.12 | City                                                                                                                                                                                                                                                                                                                                                    | Cooperstown                |
|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| 10.13 | Zip Code (5 digits only)                                                                                                                                                                                                                                                                                                                                | 13326                      |
| 10.14 | Phone (enter 10 digits only)                                                                                                                                                                                                                                                                                                                            | (607) 264-3160             |
| 10.15 | E-mail Address                                                                                                                                                                                                                                                                                                                                          | springfield.4cls@yahoo.com |
| 10.16 | Term Begins - Month                                                                                                                                                                                                                                                                                                                                     | January                    |
| 10.17 | Term Begins - Year (yyyy)                                                                                                                                                                                                                                                                                                                               | 2019                       |
| 10.18 | Term Expires - Month                                                                                                                                                                                                                                                                                                                                    | December                   |
| 10.19 | Term Expires - Year (yyyy)                                                                                                                                                                                                                                                                                                                              | 2021                       |
| 10.20 | Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date. | Yes                        |
| 10.21 | The date the Oath of Office was taken (mm/dd/yyyy)                                                                                                                                                                                                                                                                                                      | N/A                        |
| 10.22 | The date the Oath of Office was<br>filed with town or county clerk<br>(mm/dd/yyyy)                                                                                                                                                                                                                                                                      | N/A                        |
| 10.23 | Is this a brand new trustee?                                                                                                                                                                                                                                                                                                                            | Y                          |
|       | 1) 1 1 0 1 000                                                                                                                                                                                                                                                                                                                                          | 15 137 1 1: 1:             |

10.11 Mailing Address

1.

Status

P.O. Box 644

You may 1) enter the data for the Officers and Board Members directly into the survey as usual or 2) send Baker and Taylor the data for this section to be uploaded into CollectConnect (but do not include the Board Presidentâ€"this information should still be entered directly into the survey). If you choose to send your data for uploading, you must enter the data into the spreadsheet form available <a href="here">here</a>. Complete this form and email it to <a href="collectconnect@baker-taylor.com">collectconnect@baker-taylor.com</a>.

Filled

| 2.  | First Name of Board Member | Jonathan                 |
|-----|----------------------------|--------------------------|
| 3.  | Last Name of Board Member  | Miller                   |
| 4.  | Mailing Address            | 160 Public Landing Road  |
| 5.  | City                       | Springfield Center       |
| 6.  | Zip Code (5 digits only)   | 13468                    |
| 7.  | E-mail address             | leeann.captain@gmail.com |
| 8.  | Office Held or Trustee     | Vice President           |
| 9.  | Term Begins - Month        | January                  |
| 10. | Term Begins - Year (year)  | 2021                     |
| 11. | Term Expires               | December                 |
| 12. | Term Expires - Year (yyyy) | 2023                     |

| 13.                  | Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date. | Yes                         |
|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| 14.                  | The date the Oath of Office<br>(mm/dd/yyyy) was taken                                                                                                                                                                                                                                                                                                   | N/A                         |
| 15.                  | The date the Oath of Office was<br>filed with town or county clerk<br>(mm/dd/yyyy)                                                                                                                                                                                                                                                                      | N/A                         |
| 16.                  | Is this a brand new trustee?                                                                                                                                                                                                                                                                                                                            | N                           |
|                      |                                                                                                                                                                                                                                                                                                                                                         | F:44 4                      |
| 1.                   | Status CD 134 1                                                                                                                                                                                                                                                                                                                                         | Filled                      |
| 2.<br>3.             | First Name of Board Member<br>Last Name of Board Member                                                                                                                                                                                                                                                                                                 | Rebecca                     |
| 3.<br>4.             |                                                                                                                                                                                                                                                                                                                                                         | Fitzgerald<br>619 Mill Road |
| <del>4</del> .<br>5. | Mailing Address                                                                                                                                                                                                                                                                                                                                         |                             |
| 6.                   | City Zin Code (5 digits only)                                                                                                                                                                                                                                                                                                                           | Cooperstown<br>13326        |
| 7.                   | Zip Code (5 digits only)<br>E-mail address                                                                                                                                                                                                                                                                                                              | rlfitz12@hotmail.com        |
| 8.                   | Office Held or Trustee                                                                                                                                                                                                                                                                                                                                  | Secretary                   |
| 9.                   | Term Begins - Month                                                                                                                                                                                                                                                                                                                                     | January                     |
| 10.                  | Term Begins - Year (year)                                                                                                                                                                                                                                                                                                                               | 2021                        |
| 11.                  | Term Expires                                                                                                                                                                                                                                                                                                                                            | December                    |
| 12.                  | Term Expires - Year (yyyy)                                                                                                                                                                                                                                                                                                                              | 2023                        |
| 13.                  | Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date. |                             |
| 14.                  | The date the Oath of Office<br>(mm/dd/yyyy) was taken                                                                                                                                                                                                                                                                                                   | N/A                         |
| 15.                  | The date the Oath of Office was<br>filed with town or county clerk<br>(mm/dd/yyyy)                                                                                                                                                                                                                                                                      | N/A                         |
| 16.                  | Is this a brand new trustee?                                                                                                                                                                                                                                                                                                                            | N                           |
| 1.                   | Status                                                                                                                                                                                                                                                                                                                                                  | Filled                      |
| 2.                   | First Name of Board Member                                                                                                                                                                                                                                                                                                                              | Jordan                      |
| i                    |                                                                                                                                                                                                                                                                                                                                                         |                             |

| 3.  | Last Name of Board Member                                                                                                                                                                                                                                                                                                                               | Clements                         |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| 4.  | Mailing Address                                                                                                                                                                                                                                                                                                                                         | 8039 State Highway 80            |
| 5.  | City                                                                                                                                                                                                                                                                                                                                                    | Springfield Center               |
| 6.  | Zip Code (5 digits only)                                                                                                                                                                                                                                                                                                                                | 13468                            |
| 7.  | E-mail address                                                                                                                                                                                                                                                                                                                                          | clementsj@otsegosoilandwater.com |
| 8.  | Office Held or Trustee                                                                                                                                                                                                                                                                                                                                  | Trustee                          |
| 9.  | Term Begins - Month                                                                                                                                                                                                                                                                                                                                     | January                          |
| 10. | Term Begins - Year (year)                                                                                                                                                                                                                                                                                                                               | 2019                             |
| 11. | Term Expires                                                                                                                                                                                                                                                                                                                                            | December                         |
| 12. | Term Expires - Year (yyyy)                                                                                                                                                                                                                                                                                                                              | 2021                             |
| 13. | Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date. | Yes                              |
| 14. | The date the Oath of Office<br>(mm/dd/yyyy) was taken                                                                                                                                                                                                                                                                                                   | N/A                              |
| 15. | The date the Oath of Office was<br>filed with town or county clerk<br>(mm/dd/yyyy)                                                                                                                                                                                                                                                                      | N/A                              |
| 16. | Is this a brand new trustee?                                                                                                                                                                                                                                                                                                                            | Y                                |
|     |                                                                                                                                                                                                                                                                                                                                                         |                                  |
| 1.  | Status                                                                                                                                                                                                                                                                                                                                                  | Filled                           |
| 2.  | First Name of Board Member                                                                                                                                                                                                                                                                                                                              | Dennis                           |
| 3.  | Last Name of Board Member                                                                                                                                                                                                                                                                                                                               | Dorn                             |
| 4.  | Mailing Address                                                                                                                                                                                                                                                                                                                                         | 220 Texas Road                   |
| 5.  | City                                                                                                                                                                                                                                                                                                                                                    | Springfield Center               |
| 6.  | Zip Code (5 digits only)                                                                                                                                                                                                                                                                                                                                | 13468                            |
| 7.  | E-mail address                                                                                                                                                                                                                                                                                                                                          | texas_220@yahoo.com              |
| 8.  | Office Held or Trustee                                                                                                                                                                                                                                                                                                                                  | Trustee                          |
| 9.  | Term Begins - Month                                                                                                                                                                                                                                                                                                                                     | January                          |
| 10. | Term Begins - Year (year)                                                                                                                                                                                                                                                                                                                               | 2021                             |
| 11. | Term Expires                                                                                                                                                                                                                                                                                                                                            | December                         |
| 12. | Term Expires - Year (yyyy)                                                                                                                                                                                                                                                                                                                              | 2023                             |
|     |                                                                                                                                                                                                                                                                                                                                                         |                                  |

| 13. | Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date. | Yes                     |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| 14. | The date the Oath of Office (mm/dd/yyyy) was taken                                                                                                                                                                                                                                                                                                      | N/A                     |
| 15. | The date the Oath of Office was<br>filed with town or county clerk<br>(mm/dd/yyyy)                                                                                                                                                                                                                                                                      | N/A                     |
| 16. | Is this a brand new trustee?                                                                                                                                                                                                                                                                                                                            | N                       |
| 1.  | Status                                                                                                                                                                                                                                                                                                                                                  | Filled                  |
| 2.  | First Name of Board Member                                                                                                                                                                                                                                                                                                                              | Megan                   |
| 3.  | Last Name of Board Member                                                                                                                                                                                                                                                                                                                               | Culbert                 |
| 4.  | Mailing Address                                                                                                                                                                                                                                                                                                                                         | 7619 State Highway 80   |
| 5.  | City                                                                                                                                                                                                                                                                                                                                                    | Cooperstown             |
| 6.  | Zip Code (5 digits only)                                                                                                                                                                                                                                                                                                                                | 13326                   |
| 7.  | E-mail address                                                                                                                                                                                                                                                                                                                                          | megan.culbert@gmail.com |
| 8.  | Office Held or Trustee                                                                                                                                                                                                                                                                                                                                  | Trustee                 |
| 9.  | Term Begins - Month                                                                                                                                                                                                                                                                                                                                     | March                   |
| 10. | Term Begins - Year (year)                                                                                                                                                                                                                                                                                                                               | 2019                    |
| 11. | Term Expires                                                                                                                                                                                                                                                                                                                                            | December                |
| 12. | Term Expires - Year (yyyy)                                                                                                                                                                                                                                                                                                                              | 2021                    |
| 13. | Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date. | No                      |
| 14. | The date the Oath of Office (mm/dd/yyyy) was taken                                                                                                                                                                                                                                                                                                      | N/A                     |
| 15. | The date the Oath of Office was<br>filed with town or county clerk<br>(mm/dd/yyyy)                                                                                                                                                                                                                                                                      | N/A                     |
| 16. | Is this a brand new trustee?                                                                                                                                                                                                                                                                                                                            | Y                       |
| 1.  | Status                                                                                                                                                                                                                                                                                                                                                  | Filled                  |
| 2.  | First Name of Board Member                                                                                                                                                                                                                                                                                                                              | John                    |
|     |                                                                                                                                                                                                                                                                                                                                                         |                         |

| 3.  | Last Name of Board Member                                                                                                                                                                                                                                                                                                                               | Marchev                    |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| 4.  | Mailing Address                                                                                                                                                                                                                                                                                                                                         | 361 Griggs Road            |
| 5.  | City                                                                                                                                                                                                                                                                                                                                                    | Springfield Center         |
| 6.  | Zip Code (5 digits only)                                                                                                                                                                                                                                                                                                                                | 13468                      |
| 7.  | E-mail address                                                                                                                                                                                                                                                                                                                                          | jmarchev@yahoo.com         |
| 8.  | Office Held or Trustee                                                                                                                                                                                                                                                                                                                                  | Trustee                    |
| 9.  | Term Begins - Month                                                                                                                                                                                                                                                                                                                                     | September                  |
| 10. | Term Begins - Year (year)                                                                                                                                                                                                                                                                                                                               | 2019                       |
| 11. | Term Expires                                                                                                                                                                                                                                                                                                                                            | December                   |
| 12. | Term Expires - Year (yyyy)                                                                                                                                                                                                                                                                                                                              | 2021                       |
| 13. | Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date. | No                         |
| 14. | The date the Oath of Office (mm/dd/yyyy) was taken                                                                                                                                                                                                                                                                                                      | N/A                        |
| 15. | The date the Oath of Office was<br>filed with town or county clerk<br>(mm/dd/yyyy)                                                                                                                                                                                                                                                                      | N/A                        |
| 16. | Is this a brand new trustee?                                                                                                                                                                                                                                                                                                                            | Y                          |
| 1.  | Status                                                                                                                                                                                                                                                                                                                                                  | Filled                     |
| 2.  | First Name of Board Member                                                                                                                                                                                                                                                                                                                              | Kaitlyn                    |
| 3.  | Last Name of Board Member                                                                                                                                                                                                                                                                                                                               | Forbes                     |
| 4.  | Mailing Address                                                                                                                                                                                                                                                                                                                                         | 107 County Highway 29A     |
| 5.  | City                                                                                                                                                                                                                                                                                                                                                    | Springfield Center         |
| 6.  | Zip Code (5 digits only)                                                                                                                                                                                                                                                                                                                                | 13468                      |
| 7.  | E-mail address                                                                                                                                                                                                                                                                                                                                          | kaitlyn.graham85@gmail.com |
| 8.  | Office Held or Trustee                                                                                                                                                                                                                                                                                                                                  | Trustee                    |
| 9.  | Term Begins - Month                                                                                                                                                                                                                                                                                                                                     | November                   |
| 10. | Term Begins - Year (year)                                                                                                                                                                                                                                                                                                                               | 2020                       |
| 11. | Term Expires                                                                                                                                                                                                                                                                                                                                            | December                   |
| 10  | E - 11 /                                                                                                                                                                                                                                                                                                                                                | 2022                       |

2022

Term Expires - Year (yyyy)

12.

| 13. | Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date. | No                      |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| 14. | The date the Oath of Office<br>(mm/dd/yyyy) was taken                                                                                                                                                                                                                                                                                                   | N/A                     |
| 15. | The date the Oath of Office was<br>filed with town or county clerk<br>(mm/dd/yyyy)                                                                                                                                                                                                                                                                      | N/A                     |
| 16. | Is this a brand new trustee?                                                                                                                                                                                                                                                                                                                            | Y                       |
| 620 | <b>-</b> 200                                                                                                                                                                                                                                                                                                                                            | 200 0                   |
| 1.  | Status                                                                                                                                                                                                                                                                                                                                                  | Filled                  |
| 2.  | First Name of Board Member                                                                                                                                                                                                                                                                                                                              | Cheryl                  |
| 3.  | Last Name of Board Member                                                                                                                                                                                                                                                                                                                               | Zamelis                 |
| 4.  | Mailing Address                                                                                                                                                                                                                                                                                                                                         | 7639 State Highway 80   |
| 5.  | City                                                                                                                                                                                                                                                                                                                                                    | Cooperstown             |
| 6.  | Zip Code (5 digits only)                                                                                                                                                                                                                                                                                                                                | 13326                   |
| 7.  | E-mail address                                                                                                                                                                                                                                                                                                                                          | zamelis4@windstream.net |
| 8.  | Office Held or Trustee                                                                                                                                                                                                                                                                                                                                  | Trustee                 |
| 9.  | Term Begins - Month                                                                                                                                                                                                                                                                                                                                     | January                 |
| 10. | Term Begins - Year (year)                                                                                                                                                                                                                                                                                                                               | 2020                    |
| 11. | Term Expires                                                                                                                                                                                                                                                                                                                                            | December                |
| 12. | Term Expires - Year (yyyy)                                                                                                                                                                                                                                                                                                                              | 2022                    |
| 13. | Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date. | No                      |
| 14. | The date the Oath of Office<br>(mm/dd/yyyy) was taken                                                                                                                                                                                                                                                                                                   | N/A                     |
| 15. | The date the Oath of Office was<br>filed with town or county clerk<br>(mm/dd/yyyy)                                                                                                                                                                                                                                                                      | N/A                     |
| 16. | Is this a brand new trustee?                                                                                                                                                                                                                                                                                                                            | Y                       |
|     |                                                                                                                                                                                                                                                                                                                                                         |                         |

#### Trustee Education

Complete one record for each person serving as a trustee as of December 31, 2020. These trustees will not be exactly the same as the trustees listed in the section above.

|    | ne as the trustees listed in the section                                                  |                    |
|----|-------------------------------------------------------------------------------------------|--------------------|
| 1. | Trustee Name                                                                              | Marilyn Marshall   |
| 2. | Has the trustee participated in<br>trustee education in the last<br>calendar year (2020)? | N                  |
| 1. | Trustee Name                                                                              | Jonathan Miller    |
| 2. | Has the trustee participated in<br>trustee education in the last<br>calendar year (2020)? | N                  |
| 1. | Trustee Name                                                                              | Rebecca Fitzgerald |
| 2. | Has the trustee participated in<br>trustee education in the last<br>calendar year (2020)? | N                  |
| 1. | Trustee Name                                                                              | Jordan Clements    |
| 2. | Has the trustee participated in<br>trustee education in the last<br>calendar year (2020)? | N                  |
| 1. | Trustee Name                                                                              | Megan Culbert      |
| 2. | Has the trustee participated in<br>trustee education in the last<br>calendar year (2020)? | N                  |
| 1. | Trustee Name                                                                              | Dennis Dorn        |
| 2. | Has the trustee participated in<br>trustee education in the last<br>calendar year (2020)? | N                  |
| 1. | Trustee Name                                                                              | Kaitlyn Forbes     |
| 2. | Has the trustee participated in<br>trustee education in the last<br>calendar year (2020)? | N                  |
| 1. | Trustee Name                                                                              | John Marchev       |
| 2. | Has the trustee participated in<br>trustee education in the last<br>calendar year (2020)? | N                  |
| 1. | Trustee Name                                                                              | Cheryl Zamelis     |

2. Has the trustee participated in trustee education in the last calendar year (2020)?

Ν

### 11. OPERATING FUNDS RECEIPTS

#### Local Public Funds/System Cash Grants/Other State

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

#### LOCAL PUBLIC FUNDS

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

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

| C CT 1          | -    |
|-----------------|------|
| Source of Funds | Town |
|                 |      |
|                 |      |
|                 |      |

2. Name of funding County, Springfield Center Municipality or School District

3. Amount \$15,000

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

5. Written Contractual Agreement Ν

1 Source of Funds School District

2. Name of funding County, Cherry Valley Springfield Central School District Municipality or School District

\$0

3. Amount \$750

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

5. Written Contractual Agreement Ν

#### TOTAL LOCAL PUBLIC 11.2 \$15,750 FUNDS

#### SYSTEM CASH GRANTS TO MEMBER LIBRARY

| 11.3 | Local Library Services Aid<br>(LLSA)          | \$1,137 |
|------|-----------------------------------------------|---------|
| 11.4 | Central Library Aid (CLDA and/or CBA)         | ••      |
| 11.5 | Additional State Aid received from the System | \$0     |
| 11.6 | Federal Aid received from the<br>System       | \$0     |

Other Cash Grants

11.7

| 11.8      | TOTAL SYSTEM CASH<br>GRANTS (Add Questions 11.3,<br>11.4, 11.5, 11.6 and 11.7)                                                                                 | \$1,137  |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| OTHE      | R STATE AID                                                                                                                                                    |          |
| 11.9      | State Aid other than LLSA, Central<br>Library Aid (CLDA and/or CBA),<br>or other State Aid reported as<br>system cash grants                                   | \$0      |
| Federal A | Aid/Other Receipts                                                                                                                                             |          |
| FEDEF     | RAL AID FOR LIBRARY OPERA                                                                                                                                      | TION     |
| 11.10     | LSTA                                                                                                                                                           | \$0      |
| 11.11     | Other Federal Aid                                                                                                                                              | \$0      |
| 11.12     | TOTAL FEDERAL AID (Add<br>Questions 11.10 and 11.11)                                                                                                           | \$0      |
| 11.13     | CONTRACTS WITH PUBLIC<br>LIBRARIES AND/OR PUBLIC<br>LIBRARY SYSTEMS IN NEW<br>YORK STATE                                                                       | \$0      |
| OTHE      | R RECEIPTS                                                                                                                                                     |          |
| 11.14     | Gifts and Endowments                                                                                                                                           | \$1,811  |
| 11.15     | Fund Raising                                                                                                                                                   | \$5,845  |
| 11.16     | Income from Investments                                                                                                                                        | \$308    |
| 11.17     | Library Charges                                                                                                                                                | \$46     |
| 11.18     | Other                                                                                                                                                          | \$19     |
| 11.19     | TOTAL OTHER RECEIPTS<br>(Add Questions 11.14, 11.15,<br>11.16, 11.17 and 11.18)                                                                                | \$8,029  |
| 11.20     | TOTAL OPERATING FUND<br>RECEIPTS (Add Questions 11.2,<br>11.8, 11.9, 11.12, 11.13 and 11.19)                                                                   | \$24,916 |
| 11.21     | BUDGET LOANS                                                                                                                                                   | \$0      |
| Transfer  | s/Grant Total                                                                                                                                                  |          |
| TRANS     | SFERS                                                                                                                                                          |          |
| 11.22     | From Capital Fund (Same as<br>Question 14.8)                                                                                                                   | \$0      |
| 11.23     | From Other Funds                                                                                                                                               | \$0      |
| 11.24     | TOTAL TRANSFERS (Add<br>Questions 11.22 and 11.23)                                                                                                             | \$0      |
| 11.25     | BALANCE IN OPERATING<br>FUND - Beginning Balance for<br>Fiscal Year Ending 2020 (Same as<br>Question 12.40 of previous year if<br>fiscal year has not changed) | \$4,594  |

11.26 GRAND TOTAL RECEIPTS, BUDGET LOANS, TRANSFERS AND BALANCE (Add Questions 11.20, 11.21, 11.24 and 11.25; Same as Question 12.41) \$29,510

## 12. OPERATING FUND DISBURSEMENTS

Staff/Collection/Capital/Operation and Maintenance

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

## STAFF EXPENDITURES

## Salaries & Wages Paid from Library Funds

| 12.1                                   | Certified Librarians                  | \$0           |  |  |
|----------------------------------------|---------------------------------------|---------------|--|--|
| 12.2                                   | Other Staff                           | \$5,440       |  |  |
| 12.3                                   | Total Salaries & Wages                |               |  |  |
|                                        | Expenditures (Add Questions           | \$5,440       |  |  |
|                                        | 12.1 and 12.2)                        |               |  |  |
| 12.4                                   | <b>Employee Benefits Expenditures</b> | \$4,514       |  |  |
| 12.5                                   | Total Staff Expenditures (Add         | 60.054        |  |  |
|                                        | Questions 12.3 and 12.4)              | \$9,954       |  |  |
| COLL                                   | ECTION EXPENDITURES                   |               |  |  |
| 12.6                                   | Print Materials Expenditures          | \$418         |  |  |
| 12.7                                   | Electronic Materials Expenditures     | \$346         |  |  |
| 12.8                                   | Other Materials Expenditures          | \$200         |  |  |
| 12.9                                   | Total Collection Expenditures         |               |  |  |
|                                        | (Add Questions 12.6, 12.7 and         | \$964         |  |  |
|                                        | 12.8)                                 |               |  |  |
| CAPIT                                  | TAL EXPENDITURES FROM OP              | ERATING FUNDS |  |  |
| 12.10                                  | From Local Public Funds (71PF)        | \$0           |  |  |
| 12.11                                  | From Other Funds (710F)               | \$0           |  |  |
| 12.12                                  | Total Capital Expenditures (Add       | \$0           |  |  |
|                                        | Questions 12.10 and 12.11)            | <b>9</b> 0    |  |  |
| OPERATION AND MAINTENANCE OF BUILDINGS |                                       |               |  |  |
|                                        |                                       |               |  |  |

## Repairs to Building & Building Equipment

| 12.13 | From Local Public Funds (72PF)                               | \$0   |
|-------|--------------------------------------------------------------|-------|
| 12.14 | From Other Funds (72OF)                                      | \$0   |
| 12.15 | <b>Total Repairs</b> (Add Questions 12.13 and 12.14)         | \$0   |
| 12.16 | Other Disbursements for Operation & Maintenance of Buildings | \$827 |

| 12.17                     | Total Operation & Maintenance                               |          |  |  |
|---------------------------|-------------------------------------------------------------|----------|--|--|
|                           | of Buildings (Add Questions<br>12.15 and 12.16)             | \$827    |  |  |
| MISCI                     | ELLANEOUS EXPENSES                                          |          |  |  |
| 12.18                     | Office and Library Supplies                                 | \$1,045  |  |  |
| 12.19                     | Telecommunications                                          | \$594    |  |  |
| 12.20                     | Binding Expenses                                            | \$0      |  |  |
| 12.21                     | Postage and Freight                                         | \$21     |  |  |
| 12.22                     | Professional & Consultant Fees                              | \$100    |  |  |
| 12.23                     | Equipment                                                   | \$1,185  |  |  |
| 12.24                     | Other Miscellaneous                                         | \$4,533  |  |  |
| 12.25                     | Total Miscellaneous Expenses                                |          |  |  |
|                           | (Add Questions 12.18, 12.19,                                | \$7,478  |  |  |
|                           | 12.20, 12.21, 12.22, 12.23 and                              | 07,170   |  |  |
|                           | 12.24)                                                      |          |  |  |
| Contrac                   | ts/Debt Service/Transfers/Grand Total                       |          |  |  |
| Contrac                   | is/Dest service/Halisters/Orang Total                       |          |  |  |
| 12.26                     | CONTRACTS WITH PUBLIC                                       |          |  |  |
| 12.20                     | LIBRARIES AND/OR PUBLIC                                     | 04.556   |  |  |
|                           | LIBRARY SYSTEMS IN NEW                                      | \$4,556  |  |  |
|                           | YORK STATE                                                  |          |  |  |
|                           | SERVICE                                                     |          |  |  |
|                           | l Purposes Loans (Principal and In                          | 550      |  |  |
|                           | From Local Public Funds (73PF)                              | \$0      |  |  |
| 12.28                     |                                                             | \$0      |  |  |
| 12.29                     | Total (Add Questions 12.27 and 12.28)                       | \$0      |  |  |
| Other I                   | coans                                                       |          |  |  |
| 12.30                     | Budget Loans (Principal and<br>Interest)                    | \$0      |  |  |
| 12.31                     | Short-Term Loans                                            | \$0      |  |  |
| 12.32                     |                                                             | \$0      |  |  |
|                           | Questions 12.29, 12.30 and 12.31)                           | 30       |  |  |
| 12.33                     | TOTAL OPERATING FUND                                        |          |  |  |
|                           | DISBURSEMENTS (Add                                          | \$23,779 |  |  |
|                           | Questions 12.5, 12.9, 12.12, 12.17, 12.25, 12.26 and 12.32) |          |  |  |
| TRAN                      | SFERS                                                       |          |  |  |
| Transfers to Capital Fund |                                                             |          |  |  |
| 12.34                     | From Local Public Funds (76PF)                              | \$0      |  |  |
| 12.35                     | From Other Funds (760F)                                     | \$0      |  |  |
|                           | Total Transfers to Capital Fund                             |          |  |  |
| (28.91)(120.11)           | (Add Questions 12.34 and 12.35;                             | \$0      |  |  |
|                           | same as Question 13.8)                                      |          |  |  |
| 12.37                     | Transfer to Other Funds                                     | \$0      |  |  |
| 12.38                     | TOTAL TRANSFERS (Add                                        | \$0      |  |  |
|                           | Questions 12.36 and 12.37)                                  |          |  |  |
|                           |                                                             |          |  |  |

| 12.39        | TOTAL DISBURSEMENTS<br>AND TRANSFERS (Add<br>Questions 12.33 and 12.38)                                                                                                                                                      | \$23,779                             |
|--------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| 12.40        | BALANCE IN OPERATING<br>FUND - Ending Balance for the<br>Fiscal Year Ending 2020                                                                                                                                             | \$5,731                              |
| 12.41        | GRAND TOTAL<br>DISBURSEMENTS,<br>TRANSFERS & BALANCE<br>(Add Questions 12.39 and 12.40;<br>same as Question 11.26)                                                                                                           | \$29,510                             |
| ASSUI        | RANCE                                                                                                                                                                                                                        |                                      |
| 12.42        | The Library operated in accordance with all provisions of Education Law and the Regulations of the Commissioner, and assures that the "Annual Report" was reviewed and accepted by the Library Board on (date - mm/dd/yyyy). | 03/10/2021                           |
| FISCA        | L AUDIT                                                                                                                                                                                                                      |                                      |
| 12.43        | Last audit performed<br>(mm/dd/yyyy)                                                                                                                                                                                         | 12/31/2019                           |
| 12.44        | Time period covered by this audit (mm/dd/yyyy) - (mm/dd/yyyy)                                                                                                                                                                | 1/1/2016-12/31/2019                  |
| 12.45        | Indicate type of audit (select one):                                                                                                                                                                                         | Other (specify using the State note) |
| CAPITAL FUND |                                                                                                                                                                                                                              |                                      |
| 12.46        | Does the library have a Capital<br>Fund? Enter Y for Yes, N for No. It<br>No, stop here. If Yes, complete the                                                                                                                | f <sub>N</sub>                       |

## 13. CAPITAL FUND RECEIPTS

Capital Fund Report.

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

#### REVENUES FROM LOCAL SOURCES

| 13.1 | Revenues from Local Government Sources                       | \$0 |
|------|--------------------------------------------------------------|-----|
| 13.2 | All Other Revenues from Local<br>Sources                     | \$0 |
| 13.3 | Total Revenues from Local<br>Sources (Add Questions 13.1 and | \$0 |

### STATE AID FOR CAPITAL PROJECTS

| 13.4 | State Aid Received for<br>Construction        | \$0 |
|------|-----------------------------------------------|-----|
| 13.5 | Other State Aid                               | \$0 |
| 13.6 | Total State Aid (Add Questions 13.4 and 13.5) | \$0 |

#### FEDERAL AID FOR CAPITAL PROJECTS

|                   | 13.7  | TOTALTEDERALAID                                                                                                                                               | Ψυ  |
|-------------------|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| INTERFUND REVENUE |       |                                                                                                                                                               |     |
|                   | 13.8  | Transfer from Operating Fund (Same as Question 12.36)                                                                                                         | \$0 |
|                   | 13.9  | TOTAL REVENUES (Add<br>Questions 13.3, 13.6, 13.7 and<br>13.8)                                                                                                | \$0 |
|                   | 13.10 | NON-REVENUE RECEIPTS                                                                                                                                          | \$0 |
|                   | 13.11 | TOTAL CASH RECEIPTS (Add Questions 13.9 and 13.10)                                                                                                            | \$0 |
|                   | 13.12 | BALANCE IN CAPITAL FUND -<br>Beginning Balance for Fiscal Year<br>Ending 2020 (Same as Question<br>14.11 of previous year, if fiscal<br>year has not changed) | \$0 |
|                   | 13.13 | TOTAL CASH RECEIPTS AND<br>BALANCE(Add Questions 13.11<br>and 13.12; same as Question<br>14.12)                                                               | \$0 |
|                   |       |                                                                                                                                                               |     |

TOTAL FEDERAL AID

13.7

## 14. CAPITAL FUND DISBURSEMENTS

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

\$0

\$0

## PROJECT EXPENDITURES

Construction

14.1

| 14.2                | Incidental Construction                                                    | \$0 |  |
|---------------------|----------------------------------------------------------------------------|-----|--|
| Other Disbursements |                                                                            |     |  |
| 14.3                | Purchase of Buildings                                                      | \$0 |  |
| 14.4                | Interest                                                                   | \$0 |  |
| 14.5                | Collection Expenditures                                                    | \$0 |  |
| 14.6                | Total Other Disbursements (Add<br>Questions 14.3, 14.4 and 14.5)           | \$0 |  |
| 14.7                | TOTAL PROJECT<br>EXPENDITURES (Add<br>Questions 14.1, 14.2 and 14.6)       | \$0 |  |
| 14.8                | TRANSFER TO OPERATING<br>FUND (Same as Question 11.22)                     | \$0 |  |
| 14.9                | NON-PROJECT<br>EXPENDITURES                                                | \$0 |  |
| 14.10               | TOTAL CASH DISBURSEMENTS AND TRANSFERS (Add Questions 14.7, 14.8 and 14.9) | \$0 |  |
| 14.11               | BALANCE IN CAPITAL FUND - Ending Balance for the Fiscal Year Ending 2020   | \$0 |  |

14.12 TOTAL CASH
DISBURSEMENTS AND
BALANCE (Add Questions 14.10 \$0
and 14.11; same as Question
13.13)

## 15. CENTRAL LIBRARIES

PART 15 EXISTS FOR THE CENTRAL/CO-CENTRAL LIBRARIES ONLY. PLEASE PROCEED TO SECTION 16. FEDERAL TOTALS AND CONTINUE ON WITH YOUR SURVEY

## 16. FEDERAL TOTALS

16.1 Total AT A-MLS

All questions in Part 16 are calculated, locked fields.

Note: See instructions for definitions and calculations of each of these Federal Totals.

0.00

| 16.1  | Total ALA-NILS                                                                  | 0.00     |
|-------|---------------------------------------------------------------------------------|----------|
| 16.2  | Total Librarians                                                                | 0.50     |
| 16.3  | All Other Paid Staff                                                            | 0.25     |
| 16.4  | Total Paid Employees                                                            | 0.75     |
| 16.5  | State Government Revenue                                                        | \$1,137  |
| 16.6  | Federal Government Revenue                                                      | \$0      |
| 16.7  | Other Operating Revenue                                                         | \$8,029  |
| 16.8  | Total Operating Revenue                                                         | \$24,916 |
| 16.9  | Other Operating Expenditures                                                    | \$12,861 |
| 16.10 | Total Operating Expenditures                                                    | \$23,779 |
| 16.11 | Total Capital Expenditures                                                      | \$0      |
| 16.12 | Print Materials                                                                 | 10,368   |
| 16.13 | Total Registered Borrowers                                                      | 191      |
| 16.14 | Other Capital Revenue and<br>Receipts                                           | \$0      |
| 16.15 | Total Number of Internet<br>Terminals Used by the General<br>Public             | 2        |
| 16.16 | Total Uses (sessions) of Public<br>Internet Computers Per Year                  | 94       |
| 16.17 | Total Wireless Sessions Provided<br>by the Library Wireless Service<br>Per Year | 2,190    |
| 16.18 | Total Capital Revenue                                                           | \$0      |
|       |                                                                                 |          |

## 17. FOR NEW YORK STATE LIBRARY USE ONLY

| 17.1 | LIB ID                         | 2800476060 |
|------|--------------------------------|------------|
| 17.2 | Interlibrary Relationship Code | ME         |
| 17.3 | Legal Basis Code               | NP         |
| 17.4 | Administrative Structure Code  | SO         |
| 17.5 | FSCS Public Library Definition | Y          |
| 17.6 | Geographic Code                | OTH        |
| 17.7 | FSCS ID                        | NY9006     |

17.8 SED CODE 800000056481 17.9 INSTITUTION ID 800000056481

#### SUGGESTED IMPROVEMENTS

Library Name: SPRINGFIELD LIBRARY
Library System: Four County Library System

Name of Person Completing Form: Marilyn Marshall Phone Number: (914) 833-0747

I am satisfied that this resource (Collect) is meeting library needs:

Strongly Agree

Applying this resource (Collect)

will help improve library services Strongly Agree

to the public:

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

Thank you!