

SOUTHERN ADIRONDACK LIBRARY SYSTEM

FOR BOARD PERUSAL

Warrants & Payroll Expense For June 2025

General Fund - June 2025		
Approved	Warrant #	Amount
6/10/2025	2025-15	\$ 102,511.30
6/10/2025	PAY#12-2025	\$ 38,473.54
6/24/2025	2025-16	\$ 12,210.00
6/24/2025	2025-17	\$ 20,394.02
6/24/2025	PAY#13-2025	\$ 56,498.20
		<u>\$ 230,087.06</u>

Trust & Agency - June 2025		
Approved	Warrant #	Amount
6/10/2025	TA25-12	\$ 201.92
6/13/2025	ACH-NYS DC	\$ 1,484.39
5/27/2025	ACH-NYS Ret (May)	\$ 1,393.35
6/24/2025	TA25-13	\$ 19,027.23
6/27/2025	ACH-NYS DC	\$ 1,484.39
		<u>\$ 23,591.28</u>

Employee Benefit - June 2025		
Date		
Approved	Warrant #	Amount
8/5/2025	FSA 05/16 - 05/30/25	\$ 403.84
		<u>\$ 403.84</u>

Southern Adirondack Library System
Warrant for Payment 2025-15
Authorized Expenditures as Approved: 6/10/2025

Date: 6/10/2025

Vou #	Claimant	Account	Amount	Check #
166	Arnoff			
		A433A - Delivery	11,210.04	
		A433A - Delivery	10,096.03	
		A433A - Delivery	11,217.04	
	Total for Arnoff		<u>\$32,523.11</u>	15258
167	Casella			
		A452 - Building Maint. & Repair	64.21	
	Total for Casella		<u>\$64.21</u>	15259
168	Dell Technologies			
		A203 - Equipment	1,698.28	
	Total for Dell Technologies		<u>\$1,698.28</u>	15260
169	FedEx			
		A433 - Postage and Shipping	6.20	
	Total FedEx		<u>\$6.20</u>	15261
170	FirstLight			
		A431 - Telecommunications	997.82	
	Total FirstLight		<u>\$997.82</u>	15262
171	June Garcia LLC			
		A437 - Professional Fees	3,500.00	
	Total June Garcia LLC		<u>\$3,500.00</u>	15263
172	MVLS/SALS Joint Automation Project			
		A445-2 - Mbr Lib Purchases	64.34	
		A445-2 - Mbr Lib Purchases	117.00	
		A437 - Professional Fees	581.25	
		A445-JA - Joint Automation Fees-01	42,131.96	
	Total for MVLS/SALS Joint Automation Project		<u>\$42,894.55</u>	15264
173	MVLS/SALS Joint Automation Project			
		A410 - Books/Print Materials	599.83	
	Total for MVLS/SALS Joint Automation Project		<u>\$599.83</u>	15265
174	Jeffords			
		A437 - Professional Fees	500.12	
	Total for Jeffords		<u>\$500.12</u>	15266
175	National Grid			
		A450 - Utilities	4,130.12	
	Total National Grid		<u>\$4,130.12</u>	15267
176	NYLA			
		A438 - Membership	1,535.00	
	Total for NYLA		<u>\$1,535.00</u>	15268
177	NYSID			

		A430 - Supplies	198.00	
	Total for NYSID		\$198.00	15269
178	OverDrive			
		A445-1 - MembLib E-Content Contribution	2,260.51	
		A445-1 - MembLib E-Content Contribution	2,209.77	
		A445-1 - MembLib E-Content Contribution	1,852.44	
		A445-1 - MembLib E-Content Contribution	2,037.73	
		A445-1 - MembLib E-Content Contribution	3,212.71	
		A445-1 - MembLib E-Content Contribution	1,806.72	
	Total for OverDrive		\$13,379.88	15270
179	Pitney Bowes			
		A439 - Equipment Maintenance & Repair	89.97	
	Total for Pitney Bowes		\$89.97	15271
180	Priority One Payroll, LLC			
		A437 - Professional Fees	102.40	
	Total for Priority One Payroll, LLC		\$102.40	ACH 5/29/25
181	Scott, Jack			
		A435 - Travel & CE - Employee & Board	135.80	
	Total for Scott, Jack		\$135.80	15272
182	Verizon			
		A431 - Telecommunications	76.02	
	Total for Verizon		\$76.02	15273
183	WB Mason			
		A430 - Supplies	7.99	
	Total for WB Mason		\$7.99	15274
184	Whalley Computer Associates, Inc.			
		A410M - Software	72.00	
	Total for Whalley Computer Associates, Inc.		\$72.00	15275
		TOTAL	\$102,511.30	

Authorized Signature

TRUST & AGENCY FUND
Journal Entry for Set Up of Payroll

PAY#12-2025

	<u>Acct.#</u>	<u>Debit</u>	<u>Credit</u>
Cash	TA200	\$ 38,473.54	
Net Payroll	TA10		24,844.35
Deferred Compensation 457	TA17		1,484.39
ROTH 457	TA17A		
NYS Empl Retire.Contribution	TA18		295.00
NYS Empl Retire.Arrears	TA18A		
NYS Empl Retire.Loans	TA18B		145.00
Group Insurance	TA20A		613.69
NYS Income Tax	TA21		1,625.11
Federal Income Tax	TA22		3,881.30
Income Executions	TA23		
Social Security	TA26		5,347.16
Disability Insurance	TA27		
Annuity 403 (b)	TA29		
URM Med FSA	TA30		201.92
DDC Child Care	TA31		
AFLAC Cancer	TA32A		
AFLAC Accident	TA32B		
NYCON Dental	TA32C		35.62
AFLAC DBL	TA33		
AFLAC Life Ins.	TA33A		
To set up payroll for period			
Including employer's social security, hospitalization and disability.			30,282.95 .141
Check # 15257	Total	\$ 38,473.54	6/10/2025 3,388.64 .142
<u>Expense</u>		<u>Total</u>	<u>2,128.37 .144</u>
FICA	9030.8	2,673.58	35,799.96
HOSPITALIZATION	9060.8	-	
RETIREMENT ARREARS			

\$38,473.54

Priority One Cash Req'd

Southern Adirondack Library System
Warrant for Payment 2025-16
Authorized Expenditures as Approved: 6/24/2025

Date 6/24/2025

Vou #	Claimant	Account	Amount	Check #
185	Baker, Elaine			
		A90608 · Employee Health Insurance	1,110.00	
	Total Baker, Elaine		1,110.00	15276
186	Bowen, Nancy-V			
		A90608 · Employee Health Insurance	1,110.00	
	Total Bowen, Nancy-V		1,110.00	15277
187	Bunse, Barbara			
		A90608 · Employee Health Insurance	1,110.00	
	Total Bunse, Barbara		1,110.00	15278
188	Hanley, Mary			
		A90608 · Employee Health Insurance	1,110.00	
	Total Hanley, Mary		1,110.00	15279
189	Leonelli, Elayne			
		A90608 · Employee Health Insurance	1,110.00	
	Total Leonelli, Elayne		1,110.00	15280
190	Martz, Jill			
		A90608 · Employee Health Insurance	1,110.00	
	Total Martz, Jill		1,110.00	15281
191	Meier, Miriam			
		A90608 · Employee Health Insurance	1,110.00	
	Total Meier, Miriam		1,110.00	15282
192	O'Connor, Edward M.			
		A90608 · Employee Health Insurance	1,110.00	
	Total O'Connor, Edward M.		1,110.00	15283
193	Orton, Catherine			
		A90608 · Employee Health Insurance	1,110.00	
	Total Orton, Catherine		1,110.00	15284
194	Phillips, Norma			
		A90608 · Employee Health Insurance	1,110.00	
	Total Phillips, Norma		1,110.00	15285
195	Robinson, Diane			
		A90608 · Employee Health Insurance	1,110.00	
	Total Robinson, Diane		1,110.00	15286
TOTAL			12,210.00	

Authorized Signature

Southern Adirondack Library System
Warrant for Payment 2025-17
Authorized Expenditures as Approved: 6/24/2025

Date: 6/24/2025

Vou #	Claimant	Account	Amount	Check #
	Arnoff Moving & Storage		10,103.03	
196	Total for Arnoff Moving & Storage		\$10,103.03	15287
	Electronic Office Products		51.59	
197	Total for Electronic Office Products		\$51.59	15288
	FirstLight Fiber		997.82	
198	Total for FirstLight Fiber		\$997.82	15289
	MVLS/SALS Joint Automation Project		604.24	
199	Total for MVLS/SALS Joint Automation Project		\$604.24	15290
	NYLA		510.00	
200	Total for NYLA		\$510.00	15291
	NYSID		51.94	
201	Total for NYSID		\$51.94	15292
	OverDrive		2,447.07	
202	Total for OverDrive		\$2,447.07	15293
	Overhead Door Co. of Glens Falls, Inc.		381.00	
203	Total for Overhead Door Co. of Glens Falls, Inc.		\$381.00	15294
	Ozo Edu, Inc.		2,600.00	
204	Total for Ozo Edu, Inc.		\$2,600.00	15295
	VISA		2,584.38	
205	Total for VISA		\$2,584.38	15296
	WB Mason Co., Inc.		80.95	
206	Total for WB Mason Co., Inc.		\$62.95	15297
	TOTAL		\$20,394.02	

Authorized Signature

TRUST & AGENCY FUND
Journal Entry for Set Up of Payroll

PAY#13-2025

	<u>Acct.#</u>	<u>Debit</u>	<u>Credit</u>
Cash	TA200	\$ 56,498.20	
Net Payroll	TA10		25,055.61
Deferred Compensation 457	TA17		1,484.39
ROTH 457	TA17A		
NYS Empl Retire.Contribution	TA18		330.39
NYS Empl Retire.Arrears	TA18A		
NYS Empl Retire.Loans	TA18B		145.00
Group Insurance	TA20A		18,342.32
NYS Income Tax	TA21		1,634.73
Federal Income Tax	TA22		3,879.00
Income Executions	TA23		
Social Security	TA26		5,389.22
Disability Insurance	TA27		
Annuity 403 (b)	TA29		
URM Med FSA	TA30		201.92
DDC Child Care	TA31		
AFLAC Cancer	TA32A		
AFLAC Accident	TA32B		
NYCON Dental	TA32C		35.62
AFLAC DBL	TA33		
AFLAC Life Ins.	TA33A		
To set up payroll for period			
Including employer's social security, hospitalization and disability.			30,282.95 .141
Check # 15298	Total	\$ 56,498.20	6/24/2025 3,663.64 .142
<u>Expense</u>			<u>Total</u> 2,128.37 .144
FICA	9030.8	2,694.61	36,074.96
HOSPITALIZATION	9060.8	17,728.63	
RETIREMENT ARREARS			

\$38,769.57

Priority One Cash Req'd

SALS Payroll Account
TTA25-12 Warrant for Payment TA25-12
Authorized Expenditures as Approved: 6/10/2025

				Date 6/10/2025
<u>Vou #</u>	<u>Claimaint</u>	<u>Account</u>	<u>Amount</u>	<u>Check #</u>
22	SALS Employee			
		TA30 · UnReimbursed Medical - 125	201.92	
	Total SALS Employee		201.92	2236
TOTAL			201.92	

Authorized Signature



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FastPay

Payroll detail payment submission

[+] Feedback

Plan name	NEW YORK STATE DEFERRED COMPENSATION PLAN
Plan number	0045420001
Pay Center	SOUTHERN ADIRONDACK LIBRARY SYSTEM (DCP)
Submission date	06-09-2025
Submission time	2:32:18 PM
Pay date	06-13-2025
Payment amount	\$1,484.39
Debit ACH account	THE ADIRONDACK TRUST CO
Bank routing number	*****2884
Bank account number	***2565
Debit account type	Checking
Debit ACH draft date	06-13-2025



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FastPay

Payroll detail payment submission

[+] Feedback

Plan name	NEW YORK STATE DEFERRED COMPENSATION PLAN
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Submission date	06-09-2025
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Payment amount	\$1,484.39
Debit ACH account	THE ADIRONDACK TRUST CO
Bank routing number	*****2884
Bank account number	***2565
Debit account type	Checking
Debit ACH draft date	06-13-2025

Report Summary | Report Details | Warnings | New Hire Summary

Location 50780 S ADIRONDACK LIBRARY SYSTEM Report Date 05/31/2025 Report Format Enhanced [Return to Dashboard](#)
 Report ID 202505507802 Report Status Posted Report Type Regular

Report Summary

Employer Reported:

Total Days Reported 322.01
 Total Earnings Reported \$111,200.32
 Contributions
 Pre Tax \$958.35
 Post Tax \$0.00
 Loans
 Post Tax \$435.00
 Service Credit Purchase
 Pre Tax \$0.00
 Post Tax \$0.00
 Total Withholding Reported \$1,393.35
 Excess Withholdings

NYSLRS Accepted:

Total Days Accepted 322.01
 Contributions
 Pre Tax \$958.35
 Post Tax \$0.00
 Loans
 Post Tax \$435.00
 Service Credit Purchase
 Pre Tax \$0.00
 Post Tax \$0.00
 Total Withholdings Accepted \$1393.35

Comments

Errors and Warnings Count

Message

Type

☒ I agree the submission of this Employer Report.

6/3/2025 11:03:33 AM

~~CONFIDENTIAL~~

Submit

SALS Payroll Account
T&A Warrant for Payment TA25-13
Authorized Expenditures as Approved: 6/24/2025

				Date 6/24/2025
<u>Vou #</u>	<u>Claimaint</u>	<u>Account</u>	<u>Amount</u>	<u>Check #</u>
23	NYCON, Inc.			
		TA20A · Health Insurance	18,956.01	
	Total NYCON, Inc.		18,956.01	2238
24	NYCON, Inc.			
		TA32D · NYCON Dental	71.22	
	Total NYCON, Inc.		71.22	2239
25	SALS Employee			
		TA30 · UnReimbursed Medical - 125	201.92	
	Total SALS Employee		201.92	2240
TOTAL			19,027.23	

Authorized Signature



Contact us at 1-877-496-1630 or NRSPlan@nationwide.com.

FastPay

Payroll detail payment submission

Plan name	NEW YORK STATE DEFERRED COMPENSATION
	PLAN
Plan number	0045420001
Pay Center	SOUTHERN ADIRONDACK LIBRARY SYSTEM (DCP)
Submission date	06-24-2025
Submission time	1:22:04 PM
Pay date	06-27-2025
Payment amount	\$1,484.39
Debit ACH account	THE ADIRONDACK TRUST CO
Bank routing number	*****2884
Bank account number	***2565
Debit account type	Checking
Debit ACH draft date	06-27-2025

[+] Feedback

SOUTHERN ADIRONDACK LIBRARY SYSTEM

~~22~~ WHITNEY PLACE

SARATOGA SPRINGS, NY 12866

(518) 584-7300 Fax (518) 587-5589

NYCON, Inc.-Group Employee Benefit Plan

272 Broadway

Albany, NY 12204

Company #268

Withdrawals for FSA Funding

Payroll date	Amount
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5/16/2025	201.92
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5/30/2025	201.92
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\$	403.84
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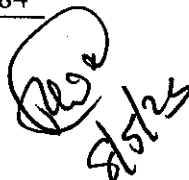


AUTHORIZED SIGNATURE

ACH DATE	6/6/2025
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DATE	8/5/2025
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ACCOUNT CODE	TA30	403.84
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8/5/25