



City of Albany

Board of Estimate & Apportionment

Tuesday, July 19, 2022

1:30 P.M.

Regular Meeting via Zoom Conference

Peatros Haile
Deputy Chief City Auditor

Darius Shahinfar
Treasurer

Joel Stetson
Chief Financial Manager

Sonia Frederick
Common Council

Corey Ellis
Common Council President

The next regular meeting of the Board of Estimate & Apportionment will be on Tuesday, August 2, 2022

2022

Offered the following:

Budget Transfers

Department	Transfer From Account	Transfer From Amount	Transfer To Account	Transfer To Amount	Explanation
Administrative Services	Marketing/Promotions		Contracted Services		
	A.7560.7426	\$ 15,000.00	A.1430.1600.7440	\$ 15,000.00	To cover a study of the Urban Heat Island Effect in certain City neighborhoods
DGS	Post Closure Care Landfill		Contracted Services		
	A.1494.8161.7477	\$ 27,870.00	A.1494.8161.7440	\$ 27,870.00	To cover an installation of a fence for the landfill
Police	Supplies & Materials		Other Equipment		
	A.3120.2940.44.7410	\$ 23,155.00	A.3120.2940.44.7250	\$ 23,155.00	To correct PO and cover forensics equipment (hard drives, cameras, etc.)
Police	Supplies & Materials		Other Equipment		
	A.3120.2980.7410	\$ 250.00	A.3120.2980.7250	\$ 250.00	To fund a pending purchase order
Treasurer's Office	Miscellaneous		Office Equipment		
	A.1325.7460	\$ 600.00	A.1325.7220	\$ 600.00	To cover the replacement of cashier printers
Water	Contracted Services (Sewer Maintenance)		Contracted Services (Transmission & Dist.)		
	BW.8120.7440	\$ 530,000.00	BW.8340.7440	\$ 500,000.00	To cover future spending on William Keller Maintenance contract and vehicle repairs
			Motor Vehicle Expense (Transmission & Dist.)		
			BW.8340.7429	\$ 20,000.00	
			Motor Vehicle Expense (Sewer Maintenance)		
		BW.8120.7429	\$ 10,000.00		
	Total	\$ 530,000.00	Total	\$ 530,000.00	
Water	Contingency Account		Contracted Services		
	BW.1900.7448	\$ 96,290.00	BW.8310.7440	\$ 96,290.00	To cover the installation of security system at 35 Erie Blvd
Water	Salaries		Longevity Pay		
	BW.8340.7000	\$ 10,000.00	BW.8310.7192	\$ 10,000.00	To cover deficit balance in longevity account

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CITY OF ALBANY

BUDGET TRANSFER REQUEST FORM (Revised 6/2018)

Department:

Contact Person:

Budget Year for this Transfer:

Date Submitted:

<p>TRANSFER FROM:</p> <p>Account Name: <input type="text" value="Cultural Affairs > Marketing/Promotions"/></p> <p>Account Number: <input type="text" value="A.7560.7426"/></p> <p>Amount to Transfer: <input type="text" value="\$15,000"/></p> <p>Current Account Balance: <input type="text" value="\$31,723.44"/></p>	<p>TRANSFER TO:</p> <p>Account Name: <input type="text" value="Admin Svs > Contracted Services"/></p> <p>Account Number: <input type="text" value="A.1430.1600.7440"/></p> <p>Amount to Receive in Transfer: <input type="text" value="\$15,000"/></p> <p>Current Account Balance: <input type="text" value="\$35,162.99"/></p>
<p>TRANSFER FROM:</p> <p>Account Name: <input type="text"/></p> <p>Account Number: <input type="text"/></p> <p>Amount to Transfer: <input type="text"/></p> <p>Current Account Balance: <input type="text"/></p>	<p>TRANSFER TO:</p> <p>Account Name: <input type="text"/></p> <p>Account Number: <input type="text"/></p> <p>Amount to Receive in Transfer: <input type="text"/></p> <p>Current Account Balance: <input type="text"/></p>
<p>TRANSFER FROM:</p> <p>Account Name: <input type="text"/></p> <p>Account Number: <input type="text"/></p> <p>Amount to Transfer: <input type="text"/></p> <p>Current Account Balance: <input type="text"/></p>	<p>TRANSFER TO:</p> <p>Account Name: <input type="text"/></p> <p>Account Number: <input type="text"/></p> <p>Amount to Receive in Transfer: <input type="text"/></p> <p>Current Account Balance: <input type="text"/></p>
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TOTAL TRANSFER AMOUNT =

Reason for Transfer:

Back-up information included?
Is this a Salary Change Request?

If this is a salary change, fill out the below information:

SALARY CHANGE INFORMATION

Title of Employee Receiving Salary Change:

Reason for Salary Change:

Department Head e-Signature:

Budget Office e-Signature: Date:

Please return this form to: budgettransfers@albanyny.gov



CITY OF ALBANY

BUDGET TRANSFER REQUEST FORM (Revised 6/2018)

Department:

Contact Person:

Budget Year for this Transfer:

Date Submitted:

<p>TRANSFER FROM:</p> <p>Account Name: <input type="text" value="Post Closure"/></p> <p>Account Number: <input type="text" value="1494.8161.7477"/></p> <p>Amount to Transfer: <input type="text" value="\$27,870.00"/></p> <p>Current Account Balance: <input type="text" value="\$83,111.58"/></p>	<p>TRANSFER TO:</p> <p>Account Name: <input type="text" value="Contracted Services"/></p> <p>Account Number: <input type="text" value="1494.8161.7440"/></p> <p>Amount to Receive in Transfer: <input type="text" value="\$27,870.00"/></p> <p>Current Account Balance: <input type="text" value="\$23,931.72"/></p>
<p>TRANSFER FROM:</p> <p>Account Name: <input type="text"/></p> <p>Account Number: <input type="text"/></p> <p>Amount to Transfer: <input type="text"/></p> <p>Current Account Balance: <input type="text"/></p>	<p>TRANSFER TO:</p> <p>Account Name: <input type="text"/></p> <p>Account Number: <input type="text"/></p> <p>Amount to Receive in Transfer: <input type="text"/></p> <p>Current Account Balance: <input type="text"/></p>
<p>TRANSFER FROM:</p> <p>Account Name: <input type="text"/></p> <p>Account Number: <input type="text"/></p> <p>Amount to Transfer: <input type="text"/></p> <p>Current Account Balance: <input type="text"/></p>	<p>TRANSFER TO:</p> <p>Account Name: <input type="text"/></p> <p>Account Number: <input type="text"/></p> <p>Amount to Receive in Transfer: <input type="text"/></p> <p>Current Account Balance: <input type="text"/></p>
<p>TRANSFER FROM:</p> <p>Account Name: <input type="text"/></p> <p>Account Number: <input type="text"/></p> <p>Amount to Transfer: <input type="text"/></p> <p>Current Account Balance: <input type="text"/></p>	<p>TRANSFER TO:</p> <p>Account Name: <input type="text"/></p> <p>Account Number: <input type="text"/></p> <p>Amount to Receive in Transfer: <input type="text"/></p> <p>Current Account Balance: <input type="text"/></p>

TOTAL TRANSFER AMOUNT =

Reason for Transfer:

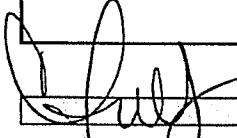
Back-up information included?
Is this a Salary Change Request?

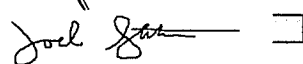
If this is a salary change, fill out the below information:

SALARY CHANGE INFORMATION

Title of Employee Receiving Salary Change:

Reason for Salary Change:

Department Head e-Signature: 

Budget Office e-Signature: 

Date:

Please return this form to: budgettransfers@albanyny.gov

CITY OF ALBANY
BUDGET TRANSFER REQUEST FORM (Revised 6/2018)

Department:
 Contact Person:
 Budget Year for this Transfer:
 Date Submitted:

TRANSFER FROM:
 Account Name:
 Account Number:
 Amount to Transfer:
 Current Account Balance:

TRANSFER TO:
 Account Name:
 Account Number:
 Amount to Receive in Transfer:
 Current Account Balance:

TRANSFER FROM:
 Account Name:
 Account Number:
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 Current Account Balance:

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TRANSFER FROM:
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TRANSFER TO:
 Account Name:
 Account Number:
 Amount to Receive in Transfer:
 Current Account Balance:

TRANSFER FROM:
 Account Name:
 Account Number:
 Amount to Transfer:
 Current Account Balance:

TRANSFER TO:
 Account Name:
 Account Number:
 Amount to Receive in Transfer:
 Current Account Balance:

TOTAL TRANSFER AMOUNT =

Reason for Transfer:

To ensure forensics equipment such as hard drives and cameras are purchased out of the correct G/L account. This equipment will assist the forensics unit in investigations.

Back-up information included?
 Is this a Salary Change Request?

If this is a salary change, fill out the below information:

SALARY CHANGE INFORMATION

Title of Employee Receiving Salary Change:

Reason for Salary Change:

Department Head e-Signature:

Eric Hawkins

Budget Office e-Signature:

Joel [Signature]

Date:

Please return this form to: budgettransfers@albanyny.gov

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CITY OF ALBANY

BUDGET TRANSFER REQUEST FORM (Revised 6/2018)

Department:

Contact Person:

Budget Year for this Transfer:

Date Submitted:

TRANSFER FROM:

Account Name:

Account Number:

Amount to Transfer:

Current Account Balance:

TRANSFER TO:

Account Name:

Account Number:

Amount to Receive in Transfer:

Current Account Balance:

TRANSFER FROM:

Account Name:

Account Number:

Amount to Transfer:

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Amount to Receive in Transfer:

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TRANSFER FROM:

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Account Number:

Amount to Transfer:

Current Account Balance:

TRANSFER TO:

Account Name:

Account Number:

Amount to Receive in Transfer:

Current Account Balance:

TOTAL TRANSFER AMOUNT

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Reason for Transfer:

Back-up information included?
Is this a Salary Change Request?

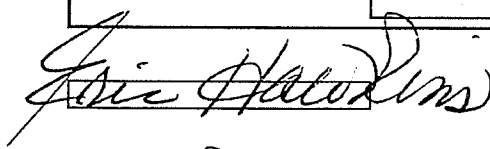
If this is a salary change, fill out the below information:

SALARY CHANGE INFORMATION

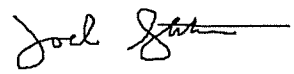
Title of Employee Receiving Salary Change:

Reason for Salary Change:

Department Head e-Signature:



Budget Office e-Signature:



Date:

Please return this form to: budgettransfers@albanyny.gov

CITY OF ALBANY

BUDGET TRANSFER REQUEST FORM (Revised 6/2018)

Department:

Contact Person:

Budget Year for this Transfer:

Date Submitted:

TRANSFER FROM:

Account Name:

Account Number:

Amount to Transfer:

Current Account Balance:

TRANSFER TO:

Account Name:

Account Number:

Amount to Receive in Transfer:

Current Account Balance:

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TRANSFER FROM:

Account Name:

Account Number:

Amount to Transfer:

Current Account Balance:

TRANSFER TO:

Account Name:

Account Number:

Amount to Receive in Transfer:

Current Account Balance:

TRANSFER FROM:

Account Name:

Account Number:

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Account Name:

Account Number:

Amount to Transfer:

Current Account Balance:

TRANSFER TO:

Account Name:

Account Number:

Amount to Receive in Transfer:

Current Account Balance:

TOTAL TRANSFER AMOUNT

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Reason for Transfer:

Back-up information included?
Is this a Salary Change Request?

If this is a salary change, fill out the below information:

SALARY CHANGE INFORMATION

Title of Employee Receiving Salary Change:

Reason for Salary Change:

Department Head e-Signature:

Budget Office e-Signature:

Date:

Please return this form to: budgettransfers@albanyny.gov

CITY OF ALBANY
BUDGET TRANSFER REQUEST FORM (Revised 6/2018)

Department: Water
 Contact Person: Tom Dufresne
 Budget Year for this Transfer: 2022
 Date Submitted: 7/15/2022

TRANSFER FROM:
 Account Name: T&D - Salaries
 Account Number: BW.8340.7000
 Amount to Transfer: \$10,000
 Current Account Balance: \$1,473,751.35

TRANSFER TO:
 Account Name: Longevity
 Account Number: BW.8310.7192
 Amount to Receive in Transfer: \$10,000
 Current Account Balance: -\$2,750.00

TRANSFER FROM:
 Account Name:
 Account Number:
 Amount to Transfer:
 Current Account Balance:

TRANSFER TO:
 Account Name:
 Account Number:
 Amount to Receive in Transfer:
 Current Account Balance:

TRANSFER FROM:
 Account Name:
 Account Number:
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TRANSFER TO:
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TRANSFER FROM:
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 Account Number:
 Amount to Transfer:
 Current Account Balance:

TRANSFER TO:
 Account Name:
 Account Number:
 Amount to Receive in Transfer:
 Current Account Balance:

TOTAL TRANSFER AMOUNT =

Reason for Transfer: To cover deficit balance in longevity account.

Back-up information included?
 is this a Salary Change Request?

If this is a salary change, fill out the below information:

SALARY CHANGE INFORMATION

Title of Employee Receiving Salary Change:

Reason for Salary Change:

Department Head e-Signature:

W. Dufresne 7-15-22

Budget Office e-Signature:

Date:

Please return this form to: budgettransfers@albanyny.gov