



**GOVERNMENT SERVICES COMMITTEE**

**February 19, 2015 – 10:00 AM**

**Committee Members: Kitty Vetter (Chair), Cora Edwards (Vice Chair), Gene Benson, Cindy Kurpil Gieger, Alan Sorensen**

**AGENDA**

**DISCUSSION ITEMS:**

1. **Earth Day- Diana Weiner, Sullivan Renaissance**

**PRESENTATION:**

1. **Higher Ed Achievement Matching Tuition Program between County of Sullivan/SUNY Sullivan**

**REPORTS:**

1. Purchasing & Central Services - Monthly Report
2. Board of Elections - Monthly Report
3. Cornell Cooperative/Consumer Affairs - Monthly Report
4. County Clerk
5. Sullivan County Community College

**RESOLUTIONS:**

1. **To modify Resolution NO. 447-14 with Prime Rehabilitation Services.**
2. **To authorize award and execute agreement with Capital Appraisal Group.**
3. **To modify agreement with Catholic Charities Community Services of Orange County.**
4. **To authorize award and execute agreement with Lyric Audiology, PLLC.**
5. **To authorize modification agreement with the Chazen Companies.**

**PUBLIC COMMENT:**

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Shennoy Wellington, LNHA

**Re:** Request for Consideration of a Resolution: Prime Rehabilitation Services

**Date:** February 13th, 2015

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize additional \$50,000 with Prime Rehabilitation Services. The increase is directly related to the increased Medicare A short term rehab residents due to increased census and opening of new rehab unit. Original resolution 129-14 authorized \$375,000. This resolution is to increase by \$50,000 to a not to exceed \$425,000. \$50,000 for remainder of 2014 and \$425,000 for 2015.

**Is subject of Resolution mandated? Explain:**

No. \_\_\_\_\_  
\_\_\_\_\_

**Does Resolution require expenditure of funds? Yes  No**

**If "Yes, provide the following information:**

Amount to be authorized by Resolution: \$ 425,000.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): 6020-68,69,70-40-4015 (Pending Budget)

If "No", specify proposed source of funds: \_\_\_\_\_

**Estimated Cost Breakdown by Source:**

County	\$ <u>12,750.00</u>	Grant(s)	\$ _____
State	\$ <u>263,500.00</u>	Other	\$ <u>51,000.00</u>
Federal Government	\$ <u>97,750.00</u>	(Specify)	_____

**Verified by Budget Office:** Janet M. Yezzer

**Does Resolution request Authority to Enter into a Contract? Yes  No**

**If "Yes", provide information requested on Pages 2 and 3.**

Request for Authority to Enter into Contract with [Prime Rehabilitation Services] of [Yorktown Heights, NY]

Nature of Other Party to Contract: Out Of County Vendor      Other:

Duration of Contract: From 01/01/2014 To 12/31/2015

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 01/01/2012 To 12/31/2013

Amount authorized by prior contract(s): 500,000.00

Resolutions authorizing prior contracts (Resolution #s): 552-11

Future Renewal Options if any:

3 additional yearly extensions are available

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

County does not provide this service in-house

\_\_\_\_\_  
\_\_\_\_\_

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): Not to exceed \$425,000

Efforts made to find Less Costly alternative:

Prime was lowest responsible bidder per RFP R-13-56 

\_\_\_\_\_  
\_\_\_\_\_

Efforts made to share costs with another agency or governmental entity:

N/A

\_\_\_\_\_

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)  
RFP R-13-56

Person(s) responsible for monitoring contract (Title): Director of Rehabilitation

Pre-Legislative Approvals:

- A. Director of Purchasing: Kathy Jones Date 2/18/15
- B. Management and Budget: Janet Myer Date 2/18/15
- C. Law Department: S. Yasgur Date 2/18
- D. County Manager: John P. ... Date 2/18/15
- E. Other as Required: \_\_\_\_\_ Date \_\_\_\_\_

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

Resolution No. \_\_\_\_\_

**RESOLUTION INTRODUCED BY GOVERNMENT SERVICES COMMITTEE TO  
MODIFY RESOLUTION NO. 447-14 PRIME REHABILITATION SERVICES**

**WHEREAS**, Prime Rehabilitation Services, 1940 Commerce Street, Suite 210, Yorktown Heights, New York 10598, was awarded the contract for rehabilitation services for the Sullivan County Adult Care Center, and

**WHEREAS**, Resolution No. 447-14, adopted by the Sullivan County Legislature on December 18, 2014, shall be amended to reflect the following change:

1. Due to the completion of the new Rehabilitation Unit for short term rehab patients, additional services are required and the total amount of the contract must be increased from, "an amount not to exceed \$375,000.00/year" to "an amount not to exceed \$425,000.00/year", for the remainder of 2014 and for 2015, and
2. This agreement shall be extended through December 31, 2015.

**NOW, THEREFORE, BE IT RESOLVED**, that the County Manager be and hereby is authorized to execute a Modification Agreement with Prime Rehabilitation Services, for a total amount not to exceed \$425,000.00/year, in accordance with RFP, R-13-56, said contract modification to be in such form as the County Attorney shall approve.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, **2015.**

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Thomas Cawley, Esq.

Re: Request for Consideration of a Resolution: to award and execute an agreement with Capital Appraisal Group

Date: February 4, 2015

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize the County Manager to execute an agreement with Capital Appraisal Group.

Is subject of Resolution mandated? Explain:

No

Does Resolution require expenditure of funds? Yes  No

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ 13,500.00

Are funds already budgeted? Yes  No

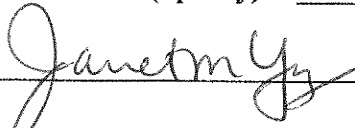
If "Yes" specify appropriation code(s): A-1420-46-4609 Pending Budget Mod

If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County	\$ <u>13,500.00</u>	Grant(s)	\$ _____
State	\$ _____	Other	\$ _____
Federal Government	\$ _____	(Specify)	_____

Verified by Budget Office: \_\_\_\_\_



Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ Capital Appraisal Group ] of \_\_\_\_\_

Nature of Other Party to Contract: Professional \_\_\_\_\_ Other: \_\_\_\_\_

Duration of Contract: From \_\_\_\_\_ To \_\_\_\_\_

Is this a renewal of a prior Contract? Yes \_\_\_ No

If "Yes" provide the following information:

Dates of prior contract(s): From \_\_\_\_\_ To \_\_\_\_\_

Amount authorized by prior contract(s): \_\_\_\_\_

Resolutions authorizing prior contracts (Resolution #s): \_\_\_\_\_

Future Renewal Options if any:

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes \_\_\_ No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

\_\_\_\_\_  
\_\_\_\_\_

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): 13500

Efforts made to find Less Costly alternative:

RFP was issued

Efforts made to share costs with another agency or governmental entity:

\_\_\_\_\_  
\_\_\_\_\_

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

RFP was issued and Capital Appraisal submitted a quote Q-15-019

Person(s) responsible for monitoring contract (Title): Kathy Jones, Director

Pre-Legislative Approvals:

- A. Director of Purchasing: James Jones Date 2/5/15
- B. Management and Budget: Janet Myers Date 2/18/15
- C. Law Department: Thomas J. Crowley Date 2/7/15
- D. County Manager: John Bond Date 2/16/15
- E. Other as Required: \_\_\_\_\_ Date \_\_\_\_\_

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_



**RESOLUTION INTRODUCED BY GOVERNMENT SERVICES COMMITTEE**

**RESOLUTION TO AUTHORIZE AWARD AND EXECUTE AGREEMENT**

**WHEREAS**, Capital Appraisal Group, PO Box 1118, Monticello, New York 12701, submitted a quote for appraisal services for the following properties:

Congregation Sheirs Yoel Dtrasif Inc., Town of Fallsburg = \$10,000.00  
Friendly Providers, Inc. in the Town of Cohecton = \$3,500.00

**WHEREAS**, the Sullivan County Attorney's Office, has approved said quote and recommends that a contract be executed.

**NOW, THEREFORE, BE IT RESOLVED**, that the County Manager be and hereby is authorized to execute an Agreement with Capital Appraisal Group, at a cost not to exceed \$13,500.00, as per Quote Q-15-01, said contract to be in such form as the County Attorney shall approve.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2015.

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Lynda G. Levine, Director of Human Resources/Personnel Officer

**Re:** Request for Consideration of a Resolution: To modify an Agreement

**Date:** January 30, 2015

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Resolution to modify agreement with EAP provider. The County is required to provide an Employees Assistance Program by virtue of Collective Bargaining Agreements and County policy.

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**Is subject of Resolution mandated? Explain:**

Mandated by CBA's

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**Does Resolution require expenditure of funds? Yes  No**

**If "Yes", provide the following information:**

Amount to be authorized by Resolution: \$ 19,520.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): A1430-40-4001

If "No", specify proposed source of funds: \_\_\_\_\_

**Estimated Cost Breakdown by Source:**

County                    \$ 19,520.00                    Grant(s)                    \$ \_\_\_\_\_

State                     \$ \_\_\_\_\_                    Other                         \$ \_\_\_\_\_

Federal Government \$ \_\_\_\_\_                    (Specify) \_\_\_\_\_

**Verified by Budget Office:** 

**Does Resolution request Authority to Enter into a Contract? Yes  No**

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [Catholic Charities Com. Serv. ] of  
[Orange County]

Nature of Other Party to Contract: Not-For-Profit Corporation **Other:**

Duration of Contract: From 04/01/2015 To 03/31/2016

Is this a renewal of a prior Contract? Yes  No

If "Yes" provide the following information:

Dates of prior contract(s): From 04/01/2014 To 03/31/2015

Amount authorized by prior contract(s): 19,520.00

Resolutions authorizing prior contracts (Resolution #s): 134-12, 134-13

Future Renewal Options if any:

none - must RFP in 2016

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

Mandated to provide EAP services by CBA

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): 19520.00

Efforts made to find Less Costly alternative:

RFP in 2012

Efforts made to share costs with another agency or governmental entity:

N/A

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

RFP-12-06 

Person(s) responsible for monitoring contract (Title): Lynda G. Levine

**Pre-Legislative Approvals:**

- A. Director of Purchasing: *Toby Jones* Date *2/18/15*
- B. Management and Budget: *Jane My* Date *2/18/15*
- C. Law Department: *S. Yasgur* Date *2/18*
- D. County Manager: *John Bond* Date *2/18/15*
- E. Other as Required: \_\_\_\_\_ Date \_\_\_\_\_

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**RESOLUTION NO. INTRODUCED BY GOVERNMENT SERVICES COMMITTEE TO MODIFY AGREEMENT**

**WHEREAS**, the County desires to continue to make the Employees Assistance Program available to its employees through the County's current vendor; and

**WHEREAS**, the County currently contracts with Catholic Charities Community Services of Orange County for said service and is satisfied with the services being provided pursuant to Resolution No. 134-12 adopted by the Sullivan County Legislature on March 15, 2012 and Resolution No. 134-13 adopted by the Sullivan County Legislature on March 21, 2013; and

**WHEREAS**, it is in the best interest of those employees that utilize the service that said services continue to be provided by Catholic Charities Community Services of Orange County; and

**WHEREAS**, Catholic Charities Community Services of Orange County will continue to provide counseling, legal and financial services to employees and their families, as well as, consultation services with managers and supervisors, from April 1, 2015 through March 31, 2016, and in accordance with RFP, R-12-06, which allows for three (3) additional, yearly extensions, at a total annual cost not to exceed \$19,520.00.

**NOW, THEREFORE, BE IT RESOLVED**, that the County Manager is hereby authorized to modify the agreement with Catholic Charities Community Services of Orange County, at a total annual cost not to exceed \$19,520.00, in accordance with R-12-06, said modification to be in such form as the County Attorney shall approve.

Moved by \_\_\_\_\_,  
Seconded by \_\_\_\_\_,  
and adopted on motion \_\_\_\_\_ day of \_\_\_\_\_, 2015.

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Shennoy Wellington

**Re:** Request for Consideration of a Resolution: Lyric Audiology, PLLC

**Date:** February 1st, 2015

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Authorize contract with Lyric Audiology, PLLC to provide audiology services as needed to the residents of the Sullivan County Adult Care Center.

(Vendor to bill Medicare B + Medicaid Directly)

**Is subject of Resolution mandated? Explain:**

No.

**Does Resolution require expenditure of funds? Yes \_\_\_ No**

**If "Yes", provide the following information:**

**Amount to be authorized by Resolution: \$** \_\_\_\_\_

**Are funds already budgeted? Yes \_\_\_ No \_\_\_**

**If "Yes" specify appropriation code(s):** \_\_\_\_\_

**If "No", specify proposed source of funds:** \_\_\_\_\_

**Estimated Cost Breakdown by Source:**

<b>County</b>	\$ _____	<b>Grant(s)</b>	\$ _____
<b>State</b>	\$ _____	<b>Other</b>	\$ _____
<b>Federal Government</b>	\$ _____	<b>(Specify)</b>	_____

**Verified by Budget Office:** Janet M. [Signature]

**Does Resolution request Authority to Enter into a Contract? Yes  No \_\_\_**

**If "Yes", provide information requested on Pages 2 and 3.**

Request for Authority to Enter into Contract with [Lyric Audiology, PLLC] of [Suite 11, 40 Underhill Rd, Middletown, NY 10940]

Nature of Other Party to Contract: Out Of County Vendor      Other:

Duration of Contract: From 02/01/2015 To 01/31/2016

Is this a renewal of a prior Contract? Yes \_\_\_ No

If "Yes" provide the following information:

Dates of prior contract(s): From \_\_\_\_\_ To \_\_\_\_\_

Amount authorized by prior contract(s): \_\_\_\_\_

Resolutions authorizing prior contracts (Resolution #s): \_\_\_\_\_

Future Renewal Options if any:

\_\_\_\_\_

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes \_\_\_ No

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Lyric Audiology, PLLC was the only firm located that will provide audiology services for Medicaid residents.

\_\_\_\_\_

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \_\_\_\_\_

Efforts made to find Less Costly alternative:

No cost  
\_\_\_\_\_  
\_\_\_\_\_

Efforts made to share costs with another agency or governmental entity:

N/A  
\_\_\_\_\_  
\_\_\_\_\_

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

RFQ - [Signature]

Person(s) responsible for monitoring contract (Title): Administrator

Pre-Legislative Approvals:

- A. Director of Purchasing: [Signature] Date 2/18/15
- B. Management and Budget: [Signature] Date 2/18/15
- C. Law Department: [Signature] Date 2/18/15
- D. County Manager: [Signature] Date 2/18/15
- E. Other as Required: \_\_\_\_\_ Date \_\_\_\_\_

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_



**RESOLUTION INTRODUCED BY GOVERNMENT SERVICES COMMITTEE**

**RESOLUTION TO AUTHORIZE AWARD AND EXECUTE AGREEMENT**

**WHEREAS**, Lyric Audiology, PLLC, Suite 11, 40 Underhill Road, Middletown, New York 10940, submitted a proposal for Audiology Services for the Sullivan County Adult Care Center, and

**WHEREAS**, the contract period shall be from February 1, 2015 through January 31, 2016. This agreement may be extended, on a yearly basis, under the same terms and conditions, for three (3) additional years.

**WHEREAS**, the Sullivan County Adult Care Center, has approved said proposal and recommends that a contract be executed.

**NOW, THEREFORE, BE IT RESOLVED**, that the County Manager be and hereby is authorized to execute an Agreement with Lyric Audiology, PLLC, at no cost to the County, as services will be billed to third party payers, said contract to be in such form as the County Attorney shall approve.

**Moved by** \_\_\_\_\_,

**Seconded by** \_\_\_\_\_,

**and adopted on motion** \_\_\_\_\_, 2015.

COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO

To: Sullivan County Legislature

Fr: Richard Martinkovic, Public Safety Commissioner

Re: Request for Consideration of a Resolution: Authorize modification agreement with the  
Chazen Companies

Date: 2/17/15

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

Modify agreement with the Chazen Companies to complete the Environmental Review Process, related documentation, filings and notifications on specific proposed tower sites.

Is subject of Resolution mandated? Explain:

Yes, in order to complete overall project.

Does Resolution require expenditure of funds? Yes  No

If "Yes, provide the following information:

Amount to be authorized by Resolution: \$ 5,500.00

Are funds already budgeted? Yes  No

If "Yes" specify appropriation code(s): H53-3997-40-4006 *Pending Budget Mod*

If "No", specify proposed source of funds: \_\_\_\_\_

Estimated Cost Breakdown by Source:

County	\$ <u>5,500.00</u>	Grant(s)	\$ _____
State	\$ _____	Other	\$ _____
Federal Government	\$ _____	(Specify)	_____

Verified by Budget Office: *Janet Myers*

Does Resolution request Authority to Enter into a Contract? Yes  No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with [ The Chazen Companies ] of  
[ Poughkeepsie, NY ]

Nature of Other Party to Contract: Professional Other:

Duration of Contract: From 02/19/2015 To 02/19/2016

Is this a renewal of a prior Contract? Yes \_\_\_ No

If "Yes" provide the following information:

Dates of prior contract(s): From \_\_\_\_\_ To \_\_\_\_\_

Amount authorized by prior contract(s): \_\_\_\_\_

Resolutions authorizing prior contracts (Resolution #s): \_\_\_\_\_

Future Renewal Options if any:

N/A

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes  No \_\_\_

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

NYS DEC - SEORA & Federal - NEPA

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \_\_\_\_\_

Efforts made to find Less Costly alternative:

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

Initial contract obtained by RFP through purchasing

Person(s) responsible for monitoring contract (Title): Richard Martinkovic

Pre-Legislative Approvals:

- A. Director of Purchasing: Kathy Jones Date 2/18/15  
B. Management and Budget: Janet Myers Date 2/18/15  
C. Law Department: S. Yastgur Date 2/18  
D. County Manager: John Bond Date 2/18/15  
E. Other as Required: \_\_\_\_\_ Date \_\_\_\_\_

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

Resolution No. \_\_\_\_\_

**RESOLUTION INTRODUCED BY GOVERNMENT SERVICES COMMITTEE TO AUTHORIZE MODIFICATION AGREEMENT WITH THE CHAZEN COMPANIES**

**WHEREAS**, a proposal was received from the The Chazen Companies, 21 Fox Street, Poughkeepsie, New York 12601, for additional services required for the SEQRA and NEPA Environmental Assessment for the Emergency Communications Upgrade Project, and

**WHEREAS**, The Chazen Companies, is our current vendor for these services as per the Resolution No. 357-13, adopted by the Sullivan County Legislature on September 19, 2013 (“Original Agreement”) and Modification Agreement as per Resolution No. 64-14, adopted by the Sullivan County Legislature on February 20, 2014, and

**WHEREAS**, it is necessary to continue services with The Chazen Companies to complete the Environmental Review Process and related documentation, including filings, notifications, approvals and additional tests as related to the original contract requirements, and

**WHEREAS**, a proposal, dated January 20, 2015, has been provided by The Chazen Companies, outlining the additional services required, and

**WHEREAS**, the Division of Emergency Management has reviewed the proposal and recommends award.

**NOW, THEREFORE, BE IT RESOLVED**, that the County Manager is authorized to execute a modification agreement with The Chazen Companies, in an amount not to exceed \$5,500.00, and shall be in such form as the County Attorney shall approve.

**Moved by** \_\_\_\_\_,  
**Seconded by** \_\_\_\_\_,  
**and adopted on motion** \_\_\_\_\_, 2015.

KATHLEEN JONES  
Director



Tel.: (845) 807-0515  
Fax: (845) 807-0526

**SULLIVAN COUNTY DEPARTMENT OF  
PURCHASING & CENTRAL SERVICES  
SULLIVAN COUNTY GOVERNMENT CENTER  
100 NORTH STREET, P.O. Box 5012  
MONTICELLO, NY 12701**

**To: Government Services Committee**

**From: Purchasing & Central Services**

**Date: February 19, 2015**

**Re: Monthly Report**

**1. Bids:**

- **Eggs & Cheese (B-14-82)**  
Duso Food Distributors  
Mivila Foods  
Ellenville, NY  
Paterson, NJ
  
- **Rebid Generators for Emergency Communication Upgrade Project (B-14-83)**  
Cummins Northeast, LLC  
Albany, NY
  
- **Meat and Fish (B-15-03)**  
Dino Mavros Co., Inc.  
Ginsberg's Foods  
Mivila Foods  
Nat Kagan Meat & Poultry, Inc.  
Montgomery, NY  
Hudson, NY  
Paterson, NJ  
Woodridge, NY

**2. Processed 609 Purchase Orders**

**3. Recyclables**