## VETERANS AFFAIRS COMMITTEE November 1, 2021 3:30 p.m.

### **AGENDA**

Chair: Tom Richardson

Members:

Preston Allen
Ed Kinowski
Jack Lawler
Dan Pemrick
Mo Wright
Benny Zlotnick - VC

- I. Welcome and Attendance
- II. Approval of the minutes of the August 30, 2021 meetings
- III. Communications to Committee
- IV. Veterans Office Report
- V. Veterans Trust Fund Report
- VI. Honoring Veterans Grant Program Applications
  - a. Town of Malta
  - b. Town of Providence
  - c. City of Mechanicville
- VII. Upcoming Honor Deceased Veterans Ceremonies
- VIII. Other Business
- IX. Adjournment

The public will have an opportunity to hear the meeting live via an audio signal using this call-in number and access code:

Dial: 1-978-990-5145 Access Code: 1840389



## **SARATOGA COUNTY**

### AGENDA ITEM REQUEST FORM

TO:	Steve Bulger, County Administrator Ridge Harris, Deputy County Administrator Michael Hartnett, County Attorney Therese Connolly, Clerk of the Board
CC:	Jason Kemper, Planning Director Bridget Rider, Deputy Clerk of the Board Matt Rose, Management Analyst Clare Giammusso, County Attorney's Office
FROM	I: Frank McClement
DATE	: 10/25/2021
RE:	Veterans Service Office Report
COMN	MITTEE: Veterans
1.	Is a Resolution Required: YES or NO (If YES, please complete #2- #10) (If NO, skip to #10 and provide reason for bringing the item)
2.	Is a Budget Amendment needed: YES or (If yes, budget lines and impact must be provided)
3.	Are there Amendments to the Compensation Schedule: YES or (If yes, provide details)
4.	Specific details on what the resolution will authorize:
5.	Does this item require hiring a Vendors/Contractors: YES or Were bids/proposals solicited:  b. Is the vendor/contractor a sole source:  c. Commencement date of contract term:  d. Termination of contract date:  e. Contract renewal and term:  f. Contact information:  g. Is the vendor/contractor an LLS, PLLC or partnership:  h. State of vendor/contractor organization:  i. Is this a renewal agreement: YES or NO  j. Vendor/Contractor comment/remarks:



6.	Is this an annual housekeeping resolution: YES or (If yes, attach the last approved resolution)  a. What were the terms of the prior resolution  b. Are the terms changing:  c. What is the reason for the change in terms:
7.	Is a new position being created: YES or NO  a. Effective date b. Salary and grade
8.	Is a new employee being hired: YES or NO  a. Effective date of employment b. Salary and grade c: Appointed position: d. Term:
9.	Is a grant being accepted:   YES or NO  a. Source of grant funding: b. Amount of grant: c. Purpose grant will be used for: d. Equipment and/or services being purchased with the grant: e. Time period grant covers:
10.	Remarks/Reasoning (Supporting documentation must be attached to this form):  As a reminder to the BOS, upcoming Honor Deceased Veterans Ceremonies to be read at full Board Meeting.

### September & October 2021 - Veterans Committee Report

### 1. Veteran Service Officer Summary Report

- a. 72 New Claims assembled and submitted
- b. 48 Conducted scheduled appointments
- c. 40 Walk-In clients
- d. 7 DSS Referrals
- e. 0 Medicaid Referral

#### 2. Veterans Events

- a. 9/13 Virtual VA Town Hall
- b. 9/13 TAP
- c. 9/17 Mental Health Summit
- d. 9/20 Walter Smead Events
- e. 9/21 VA training Recent Court Decisions
- f. 9-27-10/1 NYSDVA Annual Training (Virtual)
- g. 10/13- Malta Veterans Appreciation Luncheon
- h. 10/22- NAMI Virtual Conference
- i. 10/25-10/27 Appeals Course

### 3. Saratoga County Veterans Transportation

a. 54 Van transportation provided Rides for September and October.

### 4. Peer to Peer Summary

- a. Tuesdays: Virtual Coffee Night
- b. Thursdays: Woman's Walk Club
- c. 9/17 Mental Health Summit
- d. 9/23 Birdhouse Build
- e. 9/25 RITA Suicide Walk
- f. 9/30- Open House/New Coordinator introduction
- g. 10/18- Bowling

#### 5. Honor our Deceased Veterans

November 16 2021

The county will be honoring Robert G. Mitchell, former Veterans Agency Director as the kick off to restart the HDV Ceremonies.



### **SARATOGA COUNTY**

### AGENDA ITEM REQUEST FORM

TO:	Steve Bulger, County Administrator Ridge Harris, Deputy County Administrator Michael Hartnett, County Attorney Therese Connolly, Clerk of the Board
CC:	Jason Kemper, Planning Director Bridget Rider, Deputy Clerk of the Board Matt Rose, Management Analyst Clare Giammusso, County Attorney's Office
FROM	I: Frank McClement
DATE	: 10/25/2021
RE:	Monthly Veterans Trust Fund Report
COMN	AITTEE: Veterans
1.	Is a Resolution Required: YES or NO (If YES, please complete #2- #10) (If NO, skip to #10 and provide reason for bringing the item)
2.	Is a Budget Amendment needed: YES or (If yes, budget lines and impact must be provided)
3.	Are there Amendments to the Compensation Schedule: YES or (If yes, provide details)
4.	Specific details on what the resolution will authorize:
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6.	Is this an annual housekeeping resolution: YES or (If yes, attach the last approved resolution)  a. What were the terms of the prior resolution  b. Are the terms changing:  c. What is the reason for the change in terms:
7.	Is a new position being created: YES or NO  a. Effective date b. Salary and grade
8.	Is a new employee being hired:   a. Effective date of employment b. Salary and grade c: Appointed position: d. Term:
9.	Is a grant being accepted:   YES or NO  a. Source of grant funding: b. Amount of grant: c. Purpose grant will be used for: d. Equipment and/or services being purchased with the grant: e. Time period grant covers:
10.	Remarks/Reasoning (Supporting documentation must be attached to this form): Regular Veterans Trust Fund Report to BOS Veterans Committee.

### **VETERANS TRUST FUND**

DATE	TRANSACTION DESCRIPTION	DISBU	RSEMENTS	DEPOSITS	ACT	UAL BALANCE
12/24/2020	RunSignup Inc.			\$ 3.8	0 \$	95,547.73
12/31/2020	Spirit of Life Church Donation			\$ 300.0	0 \$	95,847.73
12/01/2020	4th Qtr Interest			\$ 12.4		95,860.18
	MONTH TOTAL: DECEMBER 2020	\$	8,150.50	\$ 312.4	5   \$	95,860.18
	MONTH TOTAL: JANUARY 2021	\$	-	\$	\$	95,860.18
	MONTH TOTAL: FEBRUARY 2021	\$	-	\$ -	\$	95,860.18
3/23/2021	D. Henderson Donation			\$ 1,000.0	0 \$	96,860.18
	MONTH TOTAL: MARCH 2021	\$	-	\$ 1,000.0	0 \$	96,860.18
4/9/2021	Grand Prix Motel - Louis Gilmore Emergency Disbursement	\$	300.00		\$	96,560.18
4/16/2021	Ramon Rodriguez Donation			\$ 500.0	0 \$	97,060.18
4/30/2021	Metabolic Clifton Park Donation			\$ 850.0	0 \$	97,910.18
	MONTH TOTAL: APRIL 2021	\$	300.00	\$ 1,350.0	0 \$	97,910.18
	MONTH TOTAL: MAY 2021	\$	-	\$ -	\$	97,910.18
5/28/2021	Exit 8 Wine & Liquor Donation			\$ 170.0	0 \$	98,080.18
	MONTH TOTAL: JUNE 2021	\$	_	\$ 170.0	0 \$	98,080.18
6/30/2021	1st Qtr Interest			\$ 13.5	2 \$	98,093.70
7/13/2021	Metro Ford - Richard Lucas Emergency Disbursement	\$	692.00		\$	97,401.70
	MONTH TOTAL: JULY 2021	\$	692.00	\$ 13.5	2 \$	97,401.70
8/10/2021	Bequest on behalf of Estate of Wesley Welenc			\$ 20,000.0	0 \$	117,401.70
	MONTH TOTAL: AUGUST 2021	\$	-	\$ 20,000.0	00   \$	117,401.70

### **VETERANS TRUST FUND**

DATE	TRANSACTION DESCRIPTION	DIS	BURSEMENTS	_	DEPOSITS	ACT	UAL BALANCE
	MONTH TOTAL: SEPTEMBER 2021	\$		\$		\$	117,401.70
10/5/2021	All Pro - John Dalton Emergency Disbursement	\$	1,250.00			\$	116,151.70
	MONTH TOTAL: OCTOBER 2021	\$	1,250.00	\$	-	\$	116,151.70
TOTALS	<del>                                     </del>	\$	102,436.59	\$	218,588.29	\$	116,151.70



TO:	Steve Bulger, County Administrator Ridge Harris, Deputy County Administrator Michael Hartnett, County Attorney Therese Connolly, Clerk of the Board
CC:	Jason Kemper, Planning Director Bridget Rider, Deputy Clerk of the Board Matt Rose, Management Analyst Clare Giammusso, County Attorney's Office
FROM	I: Frank McClement
DATE	: 10/25/2021
RE:	2021 Honoring Veterans Grant - Malta Application
COMN	MITTEE: Veterans
1.	Is a Resolution Required: YES or NO (If YES, please complete #2- #10) (If NO, skip to #10 and provide reason for bringing the item)
2.	Is a Budget Amendment needed: YES or (If yes, budget lines and impact must be provided)
3.	Are there Amendments to the Compensation Schedule: YES or (If yes, provide details)
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6.	Is this an annual housekeeping resolution:  (If yes, attach the last approved resolution)  a. What were the terms of the prior resolution  b. Are the terms changing:  c. What is the reason for the change in terms:
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9.	Is a grant being accepted: \( \begin{aligned} YES \) or \( \begin{aligned} NO \) a. Source of grant funding: b. Amount of grant: c. Purpose grant will be used for: d. Equipment and/or services being purchased with the grant: e. Time period grant covers:
10.	Remarks/Reasoning (Supporting documentation must be attached to this form):  Per established procedure. Veterans Committee approval required for each town/city submittal.

### COUNTY OF SARATOGA COUNTY MUNICIPAL CENTER

**BALLSTON SPA NY 12020** 

### **VOUCHER**

Veterans DEPT.

Claimant's Name

Town of Malta 2540 Route 9

and

DATE

**AUTHORIZED COUNTY OFFICIAL** 

Malta, New York 12020

Address

**PURCHASE** ORDER NO.

VOUCHER

NO.

	DO NOT V	VRITE IN THIS BOX	
DATE VOUC	HER RECEIVED	l'	
FUND APPRO	OPRIATION	AMOUNT	PO Number
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OPEN \$			
СК	JE		
	TOTAL		
Abstract No.			
Vendor's Ref. No.			DP

DATE	QUANTITY	DESCRIPTION OF MATERIALS OR SERVICES	UNIT PRICE	AMOUNT
8/11/2021		Veteran's Program Reimbursement		2500.00
İ				
		,		
			TOTAL	2500.00

#### **CLAIMANT'S CERTIFICATION** Kevin T. King , certify that the above account in the amount of $\$ Claimant must print name above and correct, that the items, services and disbursements charged were rendered to or for the municipality on the dates stated, that no part has been paid or satisfied, that taxes, from which the municipality is exempt, are not included, and that amount claimed is actually due. 8/11/2021 Comptroller Date SIGNATURE TITLE **DEPARTMENT APPROVAL** APPROVAL FOR PAYMENT The above services or materials were rendered or furnished to This claim is approved and ordered paid from the appropriations indicated the municipality on the dates stated and the charges are correct. above.



## Saratoga County Veterans Affairs Committee 2021 Honoring Veterans Grant Program Reimbursement Form

Applicant Information
Town/City Malta

Grant Information
Project Name American Military Education Need Program

Date of project completion 8/2/2021

Amount of grant drawdown (\$2,500K or less) \$2,500

Attached documentation
Receipts and cancelled checks - Sec Town Board Resolution / Simple Application
Saratoga County Voucher

### **Project Explanation:**

In August 2021 the Town Board of the Town of Malta established the American Military Education Need Program to provide college tuition reimbursement of \$250 to Malta residents who served in the military including their spouses, children and grandchildren. The program will be funded with a \$2,500 grant from Saratoga County. Reimbursement will be provided on a first come first serve basis and the Town has established a maximum family income limit of \$100,000 for this program. To apply for the program visit the Town web site and download a simple grant application.

The Town will deposit the funds in a Trust and Agency account and disburse the funds to eligible applicants as applications are received.

Approval Signature - Veterans Committee Chairman

DATE:

Please submit drawdown request form with Saratoga County Voucher, receipts and cancelled checks to: Frank McClement at <a href="mailto:fincelement@saratogacountyny.gov">fincelement@saratogacountyny.gov</a> | 518.884.4115 or mail to Saratoga County Veterans Service Agency, 2144 Doubleday Avenue, Ballston Spa, NY 12020

### RESOLUTION NO. \_\_\_\_ AUGUST 2, 2021

### ESTABLISH VETERANS EDUCATION NEED PROGRAM

Motion by: □O'Connor; □Dunn; □Hartzell; □Warner; □Young Seconded: □O'Connor; □Dunn; □Hartzell; □Warner; □Young

Action: Defeated; Tabled to next meeting; No action

Vote: Unanimous; D'Connor; Dunn; Hartzell; Warner; Young

WHEREAS, the Town Board of the Town of Malta desires to establish the American Military Education Need Program to provide college tuition reimbursement of \$250 to Malta residents who served in the military including their spouses, children and grandchildren, now therefore be it

RESOLVED, the Town Board hereby establishes the American Military Education Need Program to provide college tuition reimbursement of \$250,000 to Malta residents who served in the military including their spouses, children and grandchildren and be it further

RESOLVED the program will be funded with a \$2,500.00 grant from Saratoga County and remaining monies from the Malta/GlobalFoundries Foundation that had been earmarked for veteran's programs subjective to the Foundation's approval of the use of those funds for this purpose and any residency requirements imposed by the Foundation's bylaws, and be it further

RESOLVED the Town Board directs the Town Supervisor and the Town Comptroller to prepare a simple grant application to administer said program.



## **APPLICATION** American Military Education Need Program

## **TOWN OF MALTA**

SECTION A: APPLICANTINFORMATION

Name			
Address	THE PARTY OF THE P		
Email		Phone	
		•	
SECTION B: VETERAN INFOR	MATION .	,	
Name of Veteran:			
Veteran Address:			
(Attach Proof of Residency	1		
Branch of Military:	(Attach Proof of Military Service)		
Relationship of Applicant to	Veteran:		
Individual Address:			
(Attach Proof of Residency)	1		
Reimbursement Amount (	\$250 maximum) (attach copy of tuition bill	I):	

### **TOWN OF MALTA**

### SECTION C: APPLICANT AFFIRMATION

I authorize release of my contact information, dwelling information, and other information to representatives of the Town of Malta, and/or its designated representatives. I understand that the information provided by me will be used only for the purposes of determining eligibility for the program and financial incentives. I understand that all information will be kept confidential, to the extent permitted by law.

I understand that this application does not guarantee that assistance will be granted to me. Whether or not services are provided will depend on the number of applications received and the availability of funds and priorities established for the program.

I understand that by submitting this application I am affirming that my annual family income is < \$100,000.

I agree to provide the Town representatives at times that are mutually acceptable, to perform program activities including inspections and Quality Assurance activities. I agree to hold the Town harmless from any liability relating to this program.

I subscribe and affirm, under the penalties of law, that the statements made on all parts of this application, including statements made on any accompanying documents, have been examined by me and are to the best of my knowledge true and complete. I understand that my signature on this form gives permission for Town representatives of the Town of Malta, and their designees, to assure my eligibility for the programs. I consent to any inquiry to verify or confirm the information that I have given. I understand that if I give false information or withhold information in order to receive benefits that I am not entitled to, I can be prosecuted to the fullest extent of the law.

X		
Applicant Signature	Date	
AGENCY USE ONLY		
☐ Veteran Address in Malta		
■ Eligible for Program ■ NOT Eligible for Program		
Reimbursement Amount \$		
Additional Comments:		
Agency Representative Signature:	Title:	
Date:		



Log Out

**Contact Us** 

2 Messages >

3 Alerts ~

DOC

10-20-21

### **Transfers**

Transfer has been debited. Please see history for details.

### **Transfer Details**

From: Money Market Checking

To: Trust & Agency Checking

Transfer Description: Veterans Scholarship Program

Amount: \$2,500.00

Frequency: One-Time

Period: Once

Scheduled Date: 10/20/2021

Transfer ID: 314512340

Submit Date/Time: 10/20/2021 3:50:27 pm EDT

Kein T King



TO:	Steve Bulger, County Administrator Ridge Harris, Deputy County Administrator Michael Hartnett, County Attorney Therese Connolly, Clerk of the Board
CC:	Jason Kemper, Planning Director Bridget Rider, Deputy Clerk of the Board Matt Rose, Management Analyst Clare Giammusso, County Attorney's Office
FROM	I: Frank McClement
DATE	: 10/25/2021
RE:	2021 Honoring Veterans Grant - Providence Application
COMN	AITTEE: Veterans
1.	Is a Resolution Required: YES or NO (If YES, please complete #2- #10) (If NO, skip to #10 and provide reason for bringing the item)
2.	Is a Budget Amendment needed: YES or (If yes, budget lines and impact must be provided)
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	b. Salary and grade
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10.	Remarks/Reasoning (Supporting documentation must be attached to this form):  Per established procedure. Veterans Committee approval required for each town/city submittal.

### COUNTY OF SARATOGA COUNTY MUNICIPAL CENTER BALLSTON SPA NY 12020

### **VOUCHER**

DEPT. Veterans

DATE

**AUTHORIZED COUNTY OFFICIAL** 

Claimant's Town of Providence
Name 7187 BARKEISVILLE Rd
and M. ddle GROVE, NY
Address
12850

PURCHASE	VOUCHER
ORDER NO.	NO.

	DONOIN	RITE IN THIS BOX	
DATE VOUCH	ER RECEIVED	È	
FUND APPRO A.65	PRIATION 5.000-8764	AMOUNT	PO Number
OPEN \$			
CK	JE		
	TOTAL		
Abstract No.			
Vendor's Ref. No.			DP

DATE	QUANTITY	DESCRIPTION OF MATERIALS OR SERVICES	UNIT PRICE	AMOUNT	1
5/17/21	85	, 36¢ STAMPS FOR INVITATIONS		30.60	۱
5/1/21	5	Flag poles	125.00	625.00	'
5/1/21	5	Jervice Flags	29.30	146.50	1
9/20/21		3 mpping		126.72	
5/8/21	100	INVITATIONS		25.97	
6/18/21	of.	FAUIT TAYS + beverages (ARICE Chopper)	•	119.45	1
6/19/21		Food for ceremony		395.00	۱
5/22/21		Flowers AROUND VETS MONUMENT		181.80	•
7/19/21		EXTENTED WES MEMORIAL SIGN		290.00	1
4/27/20	90	reterms Eagle Pin .	2.99	269.10	•
			TOTAL	2,210.34	¥

	3			
			TOTAL	2,210.34
and correct, that the items, serv	ove , certify that the at love ices and disbursements charged were relaxes, from which the municipality is except	ANT'S CERTIFICATION  sove account in the amount of \$	es stated, that no part med is actually due.	esvesar)
The above services or materials	ENT APPROVAL swere rendered or furnished to aled and the charges are correct.	APPROVAL FO This claim is approved and ordered pa above.		ions indicated



### Saratoga County Veterans Affairs Committee 2021 Honoring Veterans Grant Program Reimbursement Form

_	Date
Applicant Information	, ,
Town/City PROVIDENCE	
Grant Information	
Project Name Veteral's MemoRIAL	CEREMONU
Date of project completion 7/31/21	£ 2.210.34
Amount of grant drawdown (\$2,500K or less)	\$ 2,210.34
Attached documentation	,
Receipts and cancelled checks	
Saratoga County Voucher	
Project Explanation:	
Signature of Town/City Supervisor	
Sandra Winney	
Approval Signature - Veterans Committee Chairman	
pp	
	DATE:

Please submit drawdown request form with Saratoga County Voucher, receipts and cancelled checks to: Frank McClement at <a href="mailto:fmcclement@saratogacountyny.gov">fmcclement@saratogacountyny.gov</a> | 518.884.4115 or mail to Saratoga County Veterans Service Agency, 2144 Doubleday Avenue, Ballston Spa, NY 12020



5101 SACANDAGA RD GALWAY, NY 12074-9998 (800)275-8777

307273-0	,,,,	11:50 AM
Qty	Unit Price	Price
85	\$0.36	\$30.60
		\$30.60
ed hterCard (XXXXXXX 18157 805 142203 ired	X)	\$30.60 Chip
	Qty 85 ed tterCard XXXXXXX 8157 805 42203	85 \$0.36  ed  terCard  000000000000000000000000000000000000

USPS is experiencing unprecedented volume increases and limited employee availability due to the impacts of COVID-19. We appreciate your patience.

> Preview your Mail Track your Packages
> Sign up for FREE @
> https://informeddelivery.usps.com

All sales final on stamps and postage. Refunds for guaranteed services only. Thank you for your business.

Tell us about your experience. Go to: https://postalexperience.com/Pos or scan this code with your mobile device,



or call 1-800-410-7420.

UFN: 353090-0074 Receipt #: 840-51200053-1-3059206-1

Clerk: 9

Stamps for Sourtations

## 1198 Mayport Road Ste 9 Atlantic Beach, FL 32233

### Invoice

Date	Invoice #
5/1/2021	569265

Bill To	
Providence Town Hall 7187 Barkerville Rd. Middle Grove, NY 12850	

Ship To

Providence Town Hall
Sander Winney
7187 Barkerville Rd.
Middle Grove, NY 12850

		P.O. No.	Terms	Rep	Ship Date	Ship Via
					5/1/2021	Ground Fed-Ex
		Description		Tody 🕦	Rate	Aniouni + ;
7922011-IZ 7932011-IZ 7942011-IZ	2 X 3 FT - V 2 X 3 FT - V (GOVERNI 2 X 3 FT - V 2 X 3 FT - V Shipping Fr FedEx Pack FedEx Pack	JS MARINE CORPS F JS NAVY FLAG ∞H& eight	G - NYLON :G LAG - OUTDOOR LAG - OUTDOOR G - NYLON 08994128 08995054		29.30 29.30 126.72	29.30 29.30 126.72
	reack rack	age 3 Hawking #. 7807				

Please Return your Payment to:

US Flag Supply LLC
PO Box 331245
Atlantic Beach, FL 32233

 Subtotal
 \$898.22

 Sales Tax (0.00)
 \$0.00

 Total
 \$898.22

 Payments/Credits
 \$0.00

 Balance Due
 \$898.22

Subtotal

Phone #	Fax#	E-mail	Web Site
904-743-9353	786-279-0887	usflagsupply@gmail.com	www.usflagsupply.com

My Account / Order History / Order Details

Account # 5862-7223-6030

### Order Details | Order # ONBFZ-H6A34-0P8

Order Date: 5/8/2021 9:54 AM

Estimated Date of Arrival: 5/17/2021

Order Status: Delivered

### **Shipping Address**

Audrey Lahoff 138 Sherman Road Middle Grove, NY 12850 United States of America 5188827318 Providence Republican

### **Delivery Speed**

Committee

Priority

#### **Order Total**

Product Total

Shipping & Processing Priority - Est. Arrival May 17

Sales Tax

You Paid:

### **Billing Address**

Committee

Audrey Lahoff 138 Sherman Road Middle Grove, NY 12850 United States of America 5188827318 Providence Republican

#### **Payment Information**

PayPal Exp. 12/2099

\$25.97

You Saved 20% (\$6.50)!

\$8.99

\$2.45

\$37.41

1 Item(s)

Reorder

by audrey

Res



Ceremony June 19th at 10 am Held in front of Town Hall

### 4" x 6" postcards - standard matte

Status: Delivered on May 12, 2021 at 1:44 PM

Carrier Notes: MAILBOX

Track: 1Z3948A0YW21538439

Carrier: UPS Details: None

Qty 100

Base Price

\$32.47 \$25.97

Item Total \*

\$25.97

<sup>\*</sup>State sales tax is required on this item.

## BY PRICE CHOPPER

Price Chopper Amsterdam #139 Store Manager: Chuck Fitzgerald 518-843-0056

06/18/2021 03:12 PM 005 #0085 C#: 0188

This was pur by me, using credit Card. Sandy

TOTAL TELESCO			
PICS TOTAL JC PNCH W A GOYA GUAVA NECTAR	2.50 F 5.98 F	Saved 0.09	≀gerald
2 9 2.99 PICS GNGR ALE 2LTR A BOTTLE DEP SO.05	0.88) F 9.15 F	Saved 0.31	85 C#: 0188
3 0 0.05 PICS HALF & HALF 2 0 2.29	(4.58) F		Saved 0.09
PICS GNOR ALE 2LTR A	(0.88) F	Saved 0.31	ħ.
PICS TOTAL JE PHEH U A	(2.50) F	Saved 0.09	Saved 0.31
PICS ENGRALE 2LTR A	(0.88) F	Saved 0.31	0.31
SPLHDA NO-CH	(4.49) F		
PC GRANULATE	(1.99) F		
LRG FRUIT PLATTER	(44_99) F		
LRG FRUIT PLATTER	(44.99)T F		Saved 0.31
NEST WATER 802 24P	4.99) F		Saved 0.09
BOTTLE DEP \$1.20	1.20 F		Saved 0.31

SUB TOTAL

Member #42395

8.000% \$7.87 119.65 Veterans TOTAL

PAID

\$128.81

Master Card \$128.81 [ ] XXXXXXXXXXXX Auth# H54393

Ref# 1097238663 \$0.00

CHANGE

. .

121.00

8.81

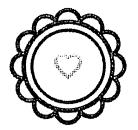
06/18/2021 15:14:29 128.81 Mastercard Debit Entry Method: Chip CARD #: XXXXXXXXXXXXX6768 7238663 **PURCHASE** - APPROVED \$0.00 AUTH CODE: H54393

> Теснос 15:14:29 Mastercard Debit Entry Method: Chip CARD #: XXXXXXXXXXXXX6768 **PURCHASE** - APPROVED AUTH CODE: H54393



Kelly's Kitchen

4300 RT 50, Suite 106 Saratoga Springs, NY 12866 +1 5188869794 KellysKitchenNY@icloud.com



### **INVOICE**

**BILL TO** 

**Audrey Lahoff** 

INVOICE# 1030 **DATE 06/19/2021 DUE DATE 06/19/2021** TERMS Due on receipt

QTY

1

DATE

06/19/2021

Service

4 sandwich platters (50 total)

-tuna, egg salad, turkey
2 assorted pastry platters (80 total)
-cinn buns, mini muffins, danish, sco
5 doz patriotic themes cupcake

-1/2 chocolate, 1/2 vanilla

Town of Providence catering order

**PAYMENT BALANCE DUE**  395.00

**AMOUNT** 

395.00

\$0.00

6841 THE THE STANKED BACK BACK TO STANKE BACK 241111 Britts keed TOWN OF PROVIDENCE GENERAL FUND IS 395. 2 е veno leturis Ceremony SEITCU ..... (Albany, HY) 700 Patroon Creek 06/19/21-07:26:14 117012257 CREDITED TO THE ACCOUNT OF HITHIN HAMED PAYER ·<<<<221373383x>>>> rains factaige a mere d'adapties intender « des carteils real filtre d'auté à alle d'appets posses proposes proposes res la commanda de la commanda de la commanda res la commanda de la commanda de la commanda res la commanda de la commanda de la commanda res la commanda de la commanda de la commanda res la commanda de la commanda de la commanda res la commanda de la commanda de la commanda res la commanda de la commanda de la commanda res la commanda de la commanda de la commanda res la commanda de la commanda de la commanda de la commanda res la commanda de  commanda de la commanda de la commanda de la commanda del commanda de la commanda de la commanda del comm of tach is

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### milburt farm's greenhouse

(518) 852-9366

May 22, 2021

www.milburtfarm.com

10.10 AId

		m & gree	nhouse
PURCHASE	Bright on the Bright Scholar Broader on appeals to the state of the	16	- May 22, 2021
Receipt 4L3		arm.com	10:10 AM
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PSN, 00  Geraniums × 4  Geraniums 4 <sup>7</sup> pot	\$20,66	)ebit 00 04 10 i0	
Annuals × 2 At neals 4 pack	\$7.00	 <b>4</b>	\$20.00
10 mch Basket x 7	\$175.00	pot	\$20,00
wilitary Discount 10% (10% off)	-\$20.20	ck	\$7.00
		et × 7	\$175.00
Subtota: Sales Tex	\$181.30 \$12.73	ount 10%	-\$20.20
fotal MusterCard 4976 (Chip) Sausta L. Zumsey	<b>\$194.53</b> \$194.53	••	\$181 80 \$12 73
<i>,</i>			

**\$194.53**Master Card 4976 (Chip) \$194.53
Sandra L. ∕umney

This was purchased by me to decorate memorial. Paid with my credit Card Sardy



Invoice #222

### custom engraved war honor roll sign 18x24

We appreciate your business.

**Bill To** 

Tim Vandenburgh yavonnev@gmail.com

**Invoice Details** 

PDF created July 14, 2021

\$290.00

**Payment** 

Due August 13, 2021

\$290.00

Item .	Quantity	Price	Amount
metal engraved sign Sign to be etched and paint filled	1	\$250.00	\$250.00
artwork	1	\$40.00	\$40.00
Subtotal			\$290.00

**Total Due** 

\$290.00

This is for an effection of our memorial segn. Yhere were many that needed to be abled.



| EOLELBORZ UDTER  SECONOSO  OS-LO-TOSO  OS-LO-TOSO  AMERICAN  SET OLEMAN  THE SECONOSO   TOWN OF PROVIDENCE  GENERAL FUND  PAY TO THE Alone City Alaphies 1 8 290.  ORDERON: A Share Arefulay Shallow Like Shallow 118 290.  Order Har Har Ahar Arefulay 1. |
|---|--|
| mearathmen unroagh  | Brandia on Greek. See Photo Sate Deposite  |

**3** 

### **FREE SHIPPING**

On purchases of \$75 or more







F30

### YOUR CART (90 ITEMS)

### Veteran Eagle Pin



SKU: S2225

Price

\$2.99

· 90 ^

Total

\$269.10

Subtotal:

\$269.10

Shipping:

\$0.00

Coupon Code:

Add Coupon

Grand total:

\$269.10

×

D 230636  TOWN OF PROVIDENCE GENERAL FUND  RAY TO THE Pur Mart  ORDER OF Pur Mart  Wo Husbred Lifty Pine Dallars  MEMO SKU: 52825 (90)  Veterski	6839
043021 8908 0931031 >071920300< GSB	ANN EQUIPMENT OF THE CHART OF T

Packing Slip

PinMart, Inc. 180 Martin Lane Elk Grove Village, IL 80007



Bhip To: Sandra Winney TOWN OF PROVIDENCE 7187 BARKERSVILLE RD MIDDLE GROVE, NY 12850-1406

US

Order # 12013302/255837

Date 4/27/2021

User 123058

Ship Date

Item	Description	Price Qty	Ext Price
82225	Veteran Eagle Pin	\$2.99 90 \$	
*******************	**************************************	Sub Total:	\$269.10
		Shipping:	\$0.00
		Tatel:	\$260.40





Steve Bulger, County Administrator Ridge Harris, Deputy County Administrator Michael Hartnett, County Attorney Therese Connolly, Clerk of the Board
Jason Kemper, Planning Director Bridget Rider, Deputy Clerk of the Board Matt Rose, Management Analyst Clare Giammusso, County Attorney's Office
1: Frank McClement
: 9/28/2021
2021 Honoring Veterans Grant - Mechanicville Application
MITTEE: Veterans
Is a Resolution Required: YES or NO (If YES, please complete #2- #10) (If NO, skip to #10 and provide reason for bringing the item)
Is a Budget Amendment needed: YES or (If yes, budget lines and impact must be provided)
Are there Amendments to the Compensation Schedule: YES or (If yes, provide details)
Specific details on what the resolution will authorize:
Does this item require hiring a Vendors/Contractors: YES or NO  a. Were bids/proposals solicited: b. Is the vendor/contractor a sole source: c. Commencement date of contract term: d. Termination of contract date: e. Contract renewal and term: f. Contact information: g. Is the vendor/contractor an LLS, PLLC or partnership: h. State of vendor/contractor organization: i. Is this a renewal agreement: YES or NO j. Vendor/Contractor comment/remarks:



6.	Is this an annual housekeeping resolution: YES or (If yes, attach the last approved resolution)  a. What were the terms of the prior resolution b. Are the terms changing: c. What is the reason for the change in terms:
7.	Is a new position being created: <b>YES</b> or <b>NO</b> a. Effective date b. Salary and grade
8.	Is a new employee being hired:   a. Effective date of employment b. Salary and grade c: Appointed position: d. Term:
9.	Is a grant being accepted: TYES or NO  a. Source of grant funding: b. Amount of grant: c. Purpose grant will be used for: d. Equipment and/or services being purchased with the grant: e. Time period grant covers:
10.	Remarks/Reasoning (Supporting documentation must be attached to this form):  Per established procedure. Veterans Committee approval required for each town/city submittal.



## Saratoga County Veterans Affairs Committee 2021 Honoring Veterans Grant Program Reimbursement Form

Date $\sqrt{6-7-2}$
Applicant Information
Town/City MccHANICVILLE
Grant Information  Project Name UPTEVANS WAIK WAY To UPTEVANS IMON WINTENT  Date of project completion 10-7-21  Amount of grant drawdown (\$2,500K or less) 42,500 20
Amount of grant drawdown (\$2,500K or less) 42,500 Zu
Attached documentation  Receipts and cancelled checks  Saratoga County Voucher
Project Explanation:  BVICK WHIKWAY WITH VETENBUS NAMES  BN EACH BNCK IN MAR AMONY OF INDIVIDUAL VETENBUS  ON EACH BNCK IN MAR AMONY OF INDIVIDUAL VETENBUS
Signature of Town/City Supervisor  Approval Signature - Veterans Committee Chairman  DATE:

Please submit drawdown request form with Saratoga County Voucher, receipts and cancelled checks to: Frank McClement at <a href="mailto:fmcclement@saratogacountyny.gov">fmcclement@saratogacountyny.gov</a> | 518.884.4115 or mail to Saratoga County Veterans Service Agency, 2144 Doubleday Avenue, Ballston Spa, NY 12020

## COUNTY OF SARATOGA COUNTY MUNICIPAL CENTER

BALLSTON SPA NY 12020

### **VOUCHER**

DEPT. Veterans

CITY of ANECHANICUITE

ANAIN ST.

ANECHANICUITE

13118 Claimant's Name and Address

PURCHASE	
ORDER NO.	

**VOUCHER** NO.

DO NOT WRITE IN THIS BOX	DO	NOT	WRITE	IN THIS	BOX
--------------------------	----	-----	-------	---------	-----

DATE VOUCH	ER RECEIVED		
FUND APPROI	PRIATION	AMOUNT	PO Number
A.65	.000-8764		
OPEN \$			
СК	JE		
	TOTAL		
Abstract No.			
Vendor's Ref. N			DP

DATE	QUANTITY	DESCRIPTION OF MATERIALS OR SERVICES	UNIT PRICE	AMOUNT
		See Henried STARMENT AMAGES		\$12500 A
		•	TOTAL	2 c d
		•	TOTAL	

CLAIN	MANT'S CERTIFICATION		
Claimant must print name above and correct, that the items, services and disbursements charged were			
/6-7-2)	SIGNATURE SUPERIOR TITLE		
	t, that the items, services and disbursements charged were rendered to or for the municipality on the dates stated, that no part aid or satisfied, that taxes, from which the municipality is exempt, are not included, and that amount claimed is actually due.    10-7-2-1		
DEPARTMENT APPROVAL	APPROVAL FOR PAYMENT		
The above services or materials were rendered or furnished to the municipality on the dates stated and the charges are correct.	1		
DATE AUTHORIZED COUNTY OFFICIAL			

No. 020175

REFERENCE/DESCRIPTION

Vendor: SURROU05 SURROUNDINGS LANDSCAPE & DESIG

**NET AMOUNT** 

PO: 19-05778 DESC: VETERAN PARK COUNTY GRANT

2,500.00

Check Date: 10/13/21 Check Amount: \$\*\*\*\*\*2,500.00

**DETACH BEFORE DEPOSITING** 

HIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS • SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE • MISSING A FEATURE INDICATES A COPY CITY OF MECHANICVILLE

36 NORTH MAIN STREET **MECHANICVILLE, NY 12118 GENERAL FUND ACCOUNT** 

America's Most Convenient Bank

No. 020175

50-256 213

DATE 10/13/21

\$\*\*\*\*\*\*\*2,500.00

Two Thousand Five Hundred AND 00/100 Dollars

TO THE **ORDER** OF

г

L

SURROUNDINGS LANDSCAPE & DESIG PO BOX 269 MECHANICVILLE, NY 12118

AUTHORIZED SIGNATURE AUTHORIZED SIGNATURE

# SURROUNDINGS LANDSCAPE & DESIGN P.O. BOX 269 MECHANICVILE, NY 12118

STATEMENT
DATE 10/1/2021

(<del>518) 664-8755</del> 516 641-6362

### NAME/ADDRESS

Mechanicville Veterans Park

	DESCRIPTION	QTY	RATE	TOTAL / BAL.
	ille Veterans Park Phase III  Ite for scope of work / material list		\$24,500.00	\$24,500.00
Down payr	nent 10/1/2020		-10.000.00	\$14,500.00
Installment	Due 11/1/2021		\$ 2,500.00	



(518) 664-8755 518 641-8362

NAME/ADDRESS Mechanicville Veterans Park

### ESTIMATE

DATE

ESTIMATE

9/29/2020

12411-88

			PROJECT
	OTV	RATE	TOTAL
DESCRIPTION	QTY		
Mechanicville Veterans Park Phase III Scope of Work -Remove 1 section of pavers -Set grades for base concrete -Set crusher run and compact -Concrete poured by Brad -Level mason sand -Set paver and blue stone out to fit -Install rick edging and polysand		24,500.00	24,500.00
-Install plantings, steel edging and mulch -Install granite medallion  Materials -100 piece of 12x12 blue stone -60' of brick edging			
-230 sq ft of new pavers -21 boxwood 18/24" -3 yards mason sand -10 yards crusher run -6 bags poly sand -3 yards much			
-1 engraved granite 3' medallion -2 4' benches poly products -Brad concrete price \$2200.00			
		it.	
		Subtotal	\$24,500.00
		Sales Tax (0.0%)	\$0.00

\$24,500.00