



**Commission of
Correction**

ALLEN RILEY
Chairman

THOMAS J. LOUGHREN
Commissioner

YOLANDA CANTY
Commissioner

M E M O R A N D U M

TO: COMMISSION MEMBERS
FROM: Brian Callahan, General Counsel 
RE: AGENDA FOR COMMISSION MEETING
DATE: August 17, 2021 at **11:00AM**
LOCATION: Alfred E. Smith Building, 80 So. Swan Street, 12th Floor,
Albany, New York.

I. MINUTES

SCOC
July 20, 2021 Commission Meeting

CPCRC
August 12, 2021

II. VARIANCES

**A. Genesee County Sheriff's Office
Genesee County Jail
21-V-03
Maximum Facility Capacity
Sections 7040.3 and 7040.5(a)(d)**

**B. Erie County Department of Social Services
Erie County Secure Detention Center
20-V-26
Pod
Section 7320.4**

**C. Orleans County Sheriff's Office
Orleans County Jail
21-V-17
Prisoner Correspondence
Sections 7004.1 and 7004.3**

**D. Westchester County Department of Probation
Woodfield Juvenile Detention Center
21-V-08
Use of West Wing Trailer 1st Floor
Rooms 3, 5 and 9**

**E. Westchester County Department of Probation
Woodfield Juvenile Detention Center
19-V-08
Use of West Wing
Section 7320.4**

III. MAXIMUM FACILITY CAPACITY

**F. Onondaga County Department of Probation
Hillbrook Specialized Secure Detention Facility
Revised MFC**

IV. CONSTRUCTION

**G. Albany County Sheriff's Office
Clarksville Substation
SCOC #21-C-040
Holding Cells**

**H. Croton-on-Hudson Police Department
SCOC #21-C-17
Holding Cells**

**I. Monroe County Sheriff's Office
Monroe County Jail
SCOC #21-C-037
Food/Cuff Ports**

**J. New York City Department of Correction
George R. Vierno Center
SCOC #21-C-038
Medication Distribution Case**

**K. Orange County Sheriff's Office
Road Patrol Area
SCOC #21-C-039
Holding Cells**



Commission of Correction

ALLEN RILEY
Chairman

THOMAS J. LOUGHREN
Commissioner

YOLANDA CANTY
Commissioner

MINUTES **Commission Meeting**

STATE COMMISSION OF CORRECTION

LOCATION:

Albany Location
80 S. Swan Street, 12th Floor
Albany, New York 12210

DATE OF MEETING: July 20, 2021

Chairman Riley called the meeting to order at 11:00 a.m.

PRESENT:

Allen Riley, Chairman
Thomas Loughren, Commissioner
Yolanda Canty, Commissioner
Tricia Amati, Assistant to Chairman/Commissioner
Brian Callahan, Counsel
Debbie Slack-Bean, Associate Attorney
Terry Moran, Director of Operations
Keith, Zobel, Deputy Director of Operations
Cynthia Allen, Correctional Specialist 3
Debbie Clark, Correctional Specialist 3
Robert Cuttita, Correctional Specialist 3
Chris Ost, Correctional Specialist 3
Larry Roe, Correctional Specialist 3
Lloyd Robistow, Correctional Facility Specialist 1
Adam Tilbe, Correctional Facility Specialist 1

LOCATION: Alfred E. Smith Building, 80 So. Swan Street, 12th Floor,
Albany, New York.

I. MINUTES

SCOC

June 29, 2021 Commission Meeting

**Approved Unanimous
Loughren/Canty**

CPCRC

July 8, 2021

**Approved Unanimous
Canty/Loughren**

- | | |
|---|---|
| <p style="text-align: center;">MRB
Administrative Closures</p> | <p style="text-align: center;">Approved Unanimous
Canty/Loughren</p> |
| <p>II. <u>VARIANCES</u></p> | |
| <p>A. New York City Department of Correction
10-V-02
Kiosk Service Fee</p> | <p style="text-align: center;">Approved Unanimous
August 1, 2022
Canty/Loughren</p> |
| <p>B. Onondaga County Sheriff's Office
Onondaga County Corrections Department
21-V-16 NEW
Sections 7008.2(b) and 7008.3(c)</p> | <p style="text-align: center;">Approved Unanimous
October 1, 2021
Canty/Loughren</p> |
| <p>III. <u>MAXIMUM FACILITY CAPACITY</u></p> | |
| <p>C. St. Lawrence County Sheriff's Office
St. Lawrence County Jail
Revision</p> | <p style="text-align: center;">Approved Unanimous
Canty/Loughren</p> |
| <p>IV. <u>WAIVERS</u></p> | |
| <p>D. Westchester County Department of Correction
Waiver Extension 20-W-001</p> | <p style="text-align: center;">Approved Unanimous
August 1, 2022
Canty/Loughren</p> |
| <p>V. <u>CONSTRUCTION</u></p> | |
| <p>E. Town of Chili
Town of Chili Court
SCOC 21-C-35
Court Holding Area</p> | <p style="text-align: center;">Approved Unanimous
Canty/Loughren</p> |
| <p>F. Monroe County Department of Human Services
Monroe County Children's Center
SCOC 21-C-30
Heat Panels</p> | <p style="text-align: center;">Approved Unanimous
Canty/Loughren</p> |
| <p>G. Onondaga County Sheriff's Office
Onondaga County Children's Center
SCOC 21-C-36
Visiting Room</p> | <p style="text-align: center;">Approved Unanimous
Canty/Loughren</p> |

Commissioner Canty made a motion to go into executive session at 11:03 a.m. to discuss Variances, Construction and Medical Review Board items which was seconded by Commissioner Loughren. Commissioner Canty made a motion to exit Executive

Session and return to general session at 11:13 a.m., which was seconded by Commissioner Loughren.

The meeting resumed at 11:14 a.m. Motion was made by Commissioner Canty to ratify actions taken in Executive Session regarding Variances, Construction and Medical Review Board items, seconded by Commissioner Loughren. Commissioner Canty made a motion to adjourn at 11:15 a.m. which was seconded by Commissioner Loughren.

Respectfully submitted,

Tricia Amati
Assistant to Chairman/Commissioners



Commission of Correction

ALLEN RILEY
Chairman

THOMAS J. LOUGHREN
Commissioner

YOLANDA CANTY
Commissioner

EXECUTIVE SESSION

MINUTES

LOCATION:

Commission Meeting

STATE COMMISSION OF CORRECTION

LOCATION:

Albany Location
80 S. Swan Street, 12th Floor
Albany, New York 12210

DATE OF MEETING: July 20, 2021

Chairman Riley called the meeting to order at 11 a.m.

PRESENT:

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Brian Callahan, Counsel
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Debbie Clark, Correctional Specialist 3
Robert Cuttita, Correctional Specialist 3
Chris Ost, Correctional Specialist 3
Larry Roe, Correctional Specialist 3
Lloyd Robistow, Correctional Facility Specialist 1
Adam Tilbe, Correctional Facility Specialist 1

LOCATION: Alfred E. Smith Building, 80 So. Swan Street, 12th Floor,
Albany, NY.

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by Commissioner Loughren. Commissioner Canty made a motion to exit Executive Session and return to general session at 11:13 a.m., which was seconded by Commissioner Loughren.

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Respectfully submitted,

Tricia Amati
Assistant to Chairman/Commissioners

CITIZENS' POLICY AND COMPLAINT REVIEW COUBNCIL

August 12, 2021

NYS Commission of Correction
at

Alfred E. Smith Office Building
80 South Swan Street, 12^h Floor
Albany, NY 12210

WEBEX CONFERENCE CALL

PRESENT:

Commissioner Canty

Council Members:

Albany:

Tom Cross

Martin Stanton

Also Present:

Commissioner Loughren

Terry Moran

Deborah Slack-Bean

Cynthia Allen

Chris Ost

Vicky Walker

Commissioner Loughren opened the meeting at 11:06 A.M.

Commissioner Loughren asked for a motion to ratify all actions taken at the July 8, 2021 meeting. Tom Cross made a motion to ratify all actions taken on July 8, 2021. Martin Stanton seconded. Carried. Commissioner Loughren asked for a motion to approve the minutes of the July 8, 2021 meeting. Tom Cross made a motion to approve the minutes of the July 8, 2021 meeting. Martin Stanton seconded. Carried.

Tom Cross, Martin Stanton, and Commissioner Loughren reviewed the Denied with Comment grievances for the month of August 2021. Tom Cross and Martin Stanton made motions to Deny with the appropriate comment the grievances that they reviewed. These motions were seconded by Martin Stanton and Commissioner Canty respectively, and unanimously passed. Upon the recommendation of Commissioner Loughren, Tom Cross made a motion to Deny with the appropriate comment the grievances that Commissioner Loughren reviewed. This motion was seconded by Martin Stanton, and unanimously passed.

Tom Cross, Martin Stanton, and Commissioner Loughren reviewed the Expedited grievances for the month August 2021. Tom Cross and Martin Stanton made motions to deny the grievances that they reviewed. These motions were seconded by Martin Stanton and Commissioner Canty respectively, and unanimously passed. Upon the recommendation of Commissioner Loughren, Tom Cross made a motion to Deny the grievances that Commissioner Loughren reviewed. This motion was seconded by Martin Stanton, and unanimously passed.

The Council reviewed the remaining grievances.

ACCEPT IN PART

141175
Cattaraugus CJ Unanimous

143786
142203
142147
Chenango CJ Unanimous

144335
Genesee CJ Unanimous

144238
141917
Monroe CJ Unanimous

143959
Oneida CJ Unanimous

140297
Onondaga COR Unanimous

140500
St. Lawrence CJ Unanimous

143974
143755
143129
Warren CJ Unanimous

DENY

144737
Warren CJ Unanimous

DENIED WITH COMMENT

139842
Dutchess CJ Unanimous

139340
Oneida CJ Unanimous

142457
Otsego CJ Unanimous

ADMINISTRATIVE CLOSURES

DENY

145433

144354

143759

143734

143660

139976

139732

139562

Albany CJ

Unanimous

144454

139835

139638

Cattaraugus CJ

Unanimous

145526

145522

145056

145054

144936

144935

144563

144560

143983

143981

143980

143979

143978

143969

143284

143281

142494

141055

140170

140169

139567

Cayuga CJ

Unanimous

144922

144377

144239

143920

143918

143906

143905

143904

143902

143637
143636
143374
142347
142188
141078
141077
141060
140994
140663
140229

Chautauqua CJ

Unanimous

146178
144517
143896

Chemung CJ

Unanimous

146266
145855
145854
145354
144944
144834
144630
144564
144294
143986
143975
143961
143474
143277
143116
141003
141002
140555
140539
140527
140525
139295
139294
139274

Chenango CJ

Unanimous

144460
144357
144356
144355
144094
143641
143564

142394
Clinton CJ Unanimous

139594
Cortland CJ Unanimous

145311
144624
144622
144586
143834
Delaware CJ Unanimous

144445
144444
144074
143227
142722
142674
142388
142219
Dutchess CJ Unanimous

146341
146251
144982
144870
144869
144592
144591
144590
144405
144403
144166
144165
144060
143550
143549
143319
143287
143286
143222
143122
142711
142710
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142548
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142544
142387
142300
142130
142126
142031
142029
141976
141005
141004
140671
140399
140397
140396
140296
140295
140294
139563
Erie CF

Unanimous

146114
145677
144796
144794
144792
144543
144542
144541
144539
144458
144057
144055
143760
143751
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143117
142626
142176
140755
140754
140733
140731
140716
140715

140215
140214
139855
139840
139839
139838
139655
139480
139201
139199
Erie CJ

Unanimous

144215
142994
141914
Franklin

144629
141028
140842
140196
Fulton CJ

Unanimous

145596
144334
143437
143436
143435
143434
Genesee CJ

Unanimous

144416
Jefferson CJ

Unanimous

140307
Madison CJ

Unanimous

146015
145035
144578
144514
144359
143454
143340
143339
142816
142094
140954
140639
140557
140376

140374
139834
139538
139536
138779
138675

Monroe CJ

Unanimous

146256
145000
144940
144939
144694
144535
144534
144235
144234
144162
144155
144154
142597
141176
141174
139216

Montgomery CJ

Unanimous

146179
145740
144457
143778
143634
142616

Nassau CJ

Unanimous

144548
144547
144546
144524
143347
143346
143345
143343
142815

Niagara CJ

Unanimous

144441
143538
143176
142907
142906
142183

141995
139219
Oneida CJ

Unanimous

146187
145763
145760
143911
143663
142858
142422
142200
139539
138538
Onondaga COR

Unanimous

146215
144589
144557
144440
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144437
144167
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143318
143065
142124
141118
140174
Onondaga CUS

Unanimous

144628
144577
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144194
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143643
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142156
141902
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139434
Ontario CJ Unanimous

144715
144714
144161
143566
143565
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142196
142181
139209
139042
138454

Orange CJ Unanimous

144336
143156
143154
143146
142735
142734
142036
141694
140242
140240

Orleans CJ Unanimous

141098
139614
Oswego CJ

Unanimous

145269
145248
Otsego CJ

Unanimous

145266
143854
143351
143350
143349
142974
Putnam CJ

Unanimous

142654
146197
Rensselaer CJ

Unanimous

145570
143644
141900
Rockland CJ Unanimous

143598
142828
Saratoga CJ Unanimous

144518
143294
143274
139844
St. Lawrence CJ Unanimous

142954
140875
140874
139764
139762
Steuben CJ Unanimous

144674
144455
143919
142633
Suffolk CJ Unanimous

144553
142116
Sullivan CJ Unanimous

144159
144142
144141
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142123
141014
140514
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140155
139854
Tioga CJ

Unanimous

145834
145657
142575
142574
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140726
140721
140536
140236
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140222
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140220
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140216
Tompkins CJ

Unanimous

145562
145420
145417
145246
145245
144943
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144903
144900
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140658
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139777
139474
139215
139206
138957
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138818
Warren CJ

Unanimous

144237
144217
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138794
Wayne CJ

Unanimous

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142198
142197
142000
138960
Westchester DOC Unanimous

146045
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141974
139862
138714
138396
Yates CJ Unanimous

DENIED WITH COMMENT

140305
139217
Allegany CJ Unanimous

143574
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Cattaraugus CJ Unanimous

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Cayuga CJ Unanimous

142139
Chautauqua CJ Unanimous

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Clinton CJ Unanimous

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Delaware CJ Unanimous

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Dutchess CJ Unanimous

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Erie CF	Unanimous
143749	
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139479	
Erie CJ	Unanimous
142178	
142177	
Essex CJ	Unanimous
144214	
144135	
144134	
Franklin CJ	Unanimous
141032	
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140818	
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Fulton CJ	Unanimous
139114	
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Montgomery CJ	Unanimous

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Monroe CJ Unanimous

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Nassau CJ Unanimous

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Niagara CJ Unanimous

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Oneida CJ Unanimous

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138537 138534 Onondaga COR	Unanimous
141018 140507 Onondaga CUS	Unanimous
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140668 138920 Orange CJ	Unanimous
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143054 Putnam CJ	Unanimous
142908 Rockland CJ	Unanimous
140847 Saratoga CJ	Unanimous
140501 140490 140498 139845 139843 St. Lawrence CJ	Unanimous
142955 Steuben CJ	Unanimous
142520 142518 Suffolk CJ	Unanimous

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Sullivan CJ Unanimous

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Tioga CJ Unanimous

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140235
Tompkins CJ Unanimous

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138858
138819
Warren CJ Unanimous

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142707
142706
Westchester DOC Unanimous

140231
Yates CJ Unanimous

The next CPCRC meeting will be held on Thursday, September 9, 2021 at 11:00 A.M. via WebEx Telephone Conference.

Commissioner Loughren requested a motion to adjourn the meeting, which was made by Tom Cross, seconded by Commissioner Canty, and carried. The meeting adjourned at 11:39 A.M.

Respectfully submitted,

Victoria Connors
Administrative Assistant

STAFF INFORMATION AFTER SITE VISIT (DATE OF LAST VISIT TO FACILITY):

No site visit conducted.

DATE OF LAST CYCLE THAT STANDARD VIOLATIONS WERE IDENTIFIED:

February 3, 2021.

ANY OPEN MINIMUM STANDARD VIOLATIONS:

Section 7002.4 (C) Property confiscation
 Section 7075.5(b) Deprivation of essential services

ANY VIOLATIONS WHICH PERTAIN TO THE VARIANCE'S CONDITIONS:

NA

JUSTIFICATION FOR WHY VARIANCE SHOULD OR SHOULD NOT BE APPROVED/EXTENDED:

It is recommended this variance be approved based on the following:

These are the same housing areas that were approved for variance beds in 04-V-02, which the facility chose not to extend in late 2019 due to a decrease in their population.

<u>LOCATION</u>	<u>MFC</u>	<u>INCREASE</u>	<u>TOTAL</u>
1 st Floor North West Dorm	5	2	7
1 st Floor South West Dorm	5	2	7
3 rd Floor North West Dorm	5	2	7
3 rd Floor South West Dorm	5	2	7
3 rd Floor North Recreation Dorm	4	2	6
TOTAL:	24	10	

REVIEWED BY REGIONAL SUPERVISOR: DATE

OFFICIAL USE ONLY:

NOTES OF MEETING: _____



New York State
Commission of Correction
80 S. Swan Street, 12th Floor
Albany, New York 12205
518-485-2465
518-485-2467 (Fax)

County Jail Variance Application Form

INSTRUCTIONS TO SHERIFF OR CHIEF ADMINISTRATIVE OFFICER:

Pursuant to New York State Minimum Standards Part 7050, Variances, please complete all portions of this form and mail or fax this form Attn: Chairman/ Commissioner to the address or fax number listed above.

Facility: Genesee County Jail

Person requesting: Sheriff William A. Sheron, Jr.
(Sheriff/Chief Administrative Officer)

A. State the specific part, section and subdivision of New York State Minimum Standards for which the variance is requested: Example: 7040.3 states that, the total number of inmates confined within each correctional facility shall not exceed the maximum facility capacity of such facility. To request a variance to house additional inmates within the facility the citation should be listed as:

Ex. Part: 7040 Section: 3 Subdivision: n/a

Standard for which the variance is requested:

Part: 7040 Section: 3 Subdivision:

B. In the space provided below include specific plans fully explaining and supporting the alternative manner of compliance. If you are requesting a modification to an existing variance, please include that information in the area below as well. (Include or attach any relevant supporting documentation)

C. In the space provided below, include a detailed description regarding why this variance is necessary. (Include or attach any relevant supporting documentation.)

The SCOC has recently changed our facilities maximum facility capacity and reduced our MFC by 10 beds. As you are aware, Genesee County has worked closely with the Commission over the past several years as part of its efforts to design and construct a new county jail. Although the COVID-19 pandemic has had an impact on those plans, we are currently moving forward and updating our needs assessment and construction plans. In the meantime, the loss of these beds will have a negative operational impact, particularly with the jail's population increasing now that the courts are beginning to re-open and are resuming sentencing people. As you know, for several years, the Genesee County Jail operated with variance beds approved by the Commission in these housing areas with no problems and all conditions observed. I am requesting authorization for a total of 10 variance beds in the following housing areas for a period of one year.

Housing	Revised by the new MFC:	Variance Beds Requested	Total Capacity
1 st Floor NW Dorm	5	2	7
1 st Floor SW Dorm	5	2	7
3 rd Floor NW Dorm	5	2	7
3 rd Floor SW Dorm	5	2	7
3 rd Floor North Rec Dorm	4	2	6

Your consideration in this matter is greatly appreciated.

D. Provide the amount of time for which the variance is requested, if applicable:

_____ Days _____ Weeks _____ 12 _____ Months

E. Should this variance application be approved, please detail below any plans, provisions, and timetables for achieving full compliance with the Minimum Standard regulation that is the subject of this application. (Use additional sheets to provide further information and supporting documentation).

F. If this variance request pertains to housing additional inmates, please provide the square footage for the potential housing areas affected (day space area, cells, gym, etc.) as well as the number of sinks, shower and toilets for that area. It is also necessary to include the current Maximum Facility Capacity (MFC) for the specific area listed in this application, along with the number of additional inmates (beyond the MFC rating) you are requesting to be housed in the specific area.

Housing Area (Name and type, i.e. 1 North, dorm, linear)	Dorms and Cells Sq. Ft.	Number of Sinks	Number of Showers	Number of Toilets	Current MFC	Requested Number of Variance Beds
1 st Floor North West Dorm	376	1	1	1	5	2
1 st Floor South West Dorm	376	1	1	1	5	2
3 rd Floor North West Dorm	376	1	1	1	5	2
3 rd Floor South West Dorm	376	1	1	1	5	2
3 rd Floor North Rec Dorm	315	1	1	1	4	2

(If additional space is required, please make a copy of this sheet and attach.)

(Page _____ of _____)

G. Has this variance been previously approved by the Commission?

Yes X If yes, include the variance number #21-V-03 No 1

Signature (Sheriff) (Chief Administrative Officer)

5/10/2021

Date

Additional copies of this form can be obtained by contacting the Commission, or online at www.scoc.ny.gov . Click on Table of Contents, Commission Forms, Request for a Variance (Formal application statement).

Name of Facility: Erie County SSD

Variance # 20-V-26

New: Renewal: X

Relief from Standard: 7320.5 c

Application by: Deputy Commissioner Paul Kubula Date Request Rec: 7/1/2021

Last Approved: 5/18/2021 Length of Approval: 4 months Expiration: 9/1/21

Write-up Prepared by: Larry Roe/Amanda Grimes

Recommendation by Field Staff: Approve until March 1, 2022

Recommendation at Briefing:

Final Recommendation:

SUMMARY OF VARIANCE REQUEST

Paul Kubala is requesting that Light Blue Pod which is not hardened be added to the current MFC. Their current AO population is 19. Lt Blue pod houses female jo/jd's and they currently have (2) AO females. Currently the 8 Bed pod known as Green Pod is being used to house youth who may need medical isolation due to a positive Covid-19 test result. The Green Pod is the only pod that has a food pass slot in the doors which helps minimize risk to staff who are working with a medically isolated youth.

RECOMMENDED CONDITIONS IF APPROVED

1. The adjacent rooms to the AO shall not used
2. During times that youth are secured in their rooms 15-minute security checks will be conducted.

CONSTRUCTION/RENOVATION PLANS

N/A

OTHER VARIANCES IN EFFECT

None

STAFF INFORMATION AFTER SITE VISIT (DATE OF LAST VISIT TO FACILITY):

N/A

DATE OF LAST CYCLE VISIT THAT STANDARD VIOLATIONS WERE IDENTIFIED:

Not applicable at this time.

ANY OPEN MINIMUM STANDARD VIOLATIONS:

See most recent evaluation report

ANY VIOLATIONS WHICH PERTAIN TO THE VARIANCE'S CONDITIONS:

None

JUSTIFICATION FOR WHY VARIANCE SHOULD OR SHOULD NOT BE EXTENDED:

This variance will permit the facility to utilize the Lt Blue pod for the housing of Adolescent Offenders. OCFS was consulted on this use and find it appropriate. They will be issuing an updated capacity for Erie's SSD.

REVIEWED BY REGIONAL SUPERVISOR: Larry Roe **DATE:** 7/30/21

OFFICIAL USE ONLY:

NOTES OF MEETING: _____



Commission of Correction

New York State
Commission of Correction
80 S. Swan Street, 12th Floor
Albany, New York 12205
518-485-2465
518-485-2467 (Fax)

Specialized Secure Detention Variance Application Form

INSTRUCTIONS TO DIRECTOR:

Pursuant to New York State Minimum Standards Part 7360, Variances, please complete all portions of this form and mail or fax this form Attn: Chairman/Commissioner to the address or fax number listed above.

Facility: Erie County Secure and Specialized Secure Youth Center

Person requesting: Paul Kubala

(Director)

- A. State the specific part, section and subdivision of New York State Minimum Standards for which the variance is requested: Example: 7320.4(c) states that, at least one functioning toilet, sink and shower shall be available for every 6 youth contained within a living unit. To request a variance to allow for 1 tub/shower for every 8 youth: Ex. Part: 7320 Section: 4 Subdivision: c

Standard for which the variance is requested:

Part: 7320 Section: 5 Subdivision: C

- B. In the space provided below include specific plans fully explaining and supporting the alternative manner of compliance. If you are requesting a modification to an existing variance please include that information in the area below as well. (Include or attach any relevant supporting documentation)

Erie County Secure and Specialized Secure Youth Center is requesting to allow AO females to be housed in our Lt. Blue non-hardened eight bed pod. The Lt. Blue pod has rooms with full view doors and windows that shall allow increase supervision while youth are in their rooms. The Lt. Blue Pod shall operate strictly according to all SCOC

- C. In the space provided below include a detailed description regarding why this variance is necessary. (Include or attach any relevant supporting documentation)

Erie County Secure and Specialized Secure Youth Center would like to continue to use the Green Pod for youth who may need medical isolation due to a positive Covid-19 test result. The Green Pod is the only pod that has a food pass slot in the doors which helps minimize risk to staff who are working with a medically isolated

D. Provide the amount of time for which the variance is requested, if applicable:

_____Days _____Weeks 6Months

E. Should this variance application be approved, please detail below any plans, provisions and timetables for achieving full compliance with the Minimum Standard regulation that is the subject of this application. (Use additional sheets to provide further information and supporting documentation).

G. Has this variance been previously approved by the Commission?

Yes _____ If yes, include the variance number _____ No

Signature (Director)

Date

Additional copies of this form can be obtained by contacting the Commission, or online at www.scoc.ny.gov . Click on Table of Contents, Commission Forms, Request for a Variance (Formal application statement).

(SCOC Form #VA-SSD-2)
(09/18)

Name of Facility: Orleans CJ

Variance # 21-V-17

New: NEW **Renewal:** **Relief from Standard: Part 7004.1(a) and Part 7004.3(a)**

Application by: Superintendent Scott Wilson

Date Request Rec: July 28, 2021

Last Approved:

Length of Approval:

Expiration: 12 Months from Approval Date

Write-up Prepared by: Michael Walters

Recommendation by Field Staff: Recommend Approval of Variance until July 1, 2022

Recommendation at Briefing: Recommend approval until July 1, 2022

Final Recommendation:

SUMMARY OF VARIANCE REQUEST

The Orleans County Jail would like to request a Variance for 9-CRR-NY-7004.1(a) and 7004.3(a) for the purpose of photocopying all non-privileged correspondence. General and Legal privileged will only be photocopied when there is reasonable suspicion to do so. General and Legal correspondence shall be completed in the presence of the inmate, [REDACTED]

VARIANCE HISTORY

This is the initial request for this Variance.

CONSTRUCTION/RENOVATION PLANS

None

OTHER VARIANCES IN EFFECT

None

STAFF INFORMATION AFTER SITE VISIT (DATE OF LAST VISIT TO FACILITY):

COMMISSION STAFF MEMBER CONDUCTED AN ON SITE VISIT MAY 12, 2021. COMMISSION STAFF COMPLETED A COVID-19 INSPECTION ALONG WITH FOLLOW UP TO PREVIOUSLY IDENTIFIED OPEN ISSUES.

DATE OF LAST CYCLE VISIT THAT STANDARD VIOLATIONS WERE IDENTIFIED:

April 22-26, 2019

ANY OPEN MINIMUM STANDARD VIOLATIONS:

Section 7075.4(c) Inmate Confinement, Section 7003.3(j)(5)(vi) Supervision of Prisoners in Facility Housing Areas, Section 7028.5 Exercise Searches and Section 7039.4 Fire and Safety Inspections

OTHER INFORMATION

[REDACTED]

ANY VIOLATIONS WHICH PERTAIN TO THE VARIANCE'S CONDITIONS:

None

JUSTIFICATION FOR WHY VARIANCE SHOULD OR SHOULD NOT BE EXTENDED:

Facility Open Issues are not related to the Correspondence Variance Request.

RECOMMENDED CONDITIONS IF APPROVED

Pursuant to this action, the following conditions shall apply:

1. Non-privileged correspondence and accompanying envelope may be photocopied and provided to the recipient prisoner. The original non-privileged incoming correspondence and accompanying envelope shall be placed in the recipient prisoner's personal property.
2. Incoming general and legal privileged correspondence may only be opened and inspected for contraband in the presence of the recipient prisoner.
3. Incoming general and legal privileged correspondence and accompanying envelope may only be photocopied in the presence of the recipient prisoner. The original incoming general and legal privileged correspondence and accompanying envelope shall, in the presence of the recipient prisoner, be placed in a sealed envelope in a manner that does not allow the correspondence to be read, and thereafter secured in the recipient prisoner's personal property.
4. The scanning of incoming general and legal privileged correspondence is strictly prohibited.
5. Outside the presence of recipient prisoner, the facility may use a drug detecting device to scan incoming general and legal privileged correspondence for illicit drugs without opening the envelope. In instances where the envelope must be opened in order to perform such scan, the opening and scanning of the envelope must occur only while in the presence of the recipient prisoner.
6. Approval of this variance does not relieve the facility from its duty to comply with United States Postal Services' regulations and statutes.
7. Except for incoming non-general and legal privileged correspondence forwarded to the chief administrative officer, the facility shall make available correspondence for incarcerated individual view within one business day of delivery by the United States Postal Service.
8. The facility shall ensure that incarcerated individuals are provided, **at no cost**, the opportunity to:
 - a. be provided with their original correspondence and enclosed contents (i.e., photos, cards, etc.), that are non-criminal in nature, immediately upon release/transfer from the facility; and

- b. be permitted to designate a person(s) who may obtain such original correspondence from the facility.
- 9. The facility shall provide incarcerated individuals the opportunity to have their original correspondence forwarded to a third party.
- 10. All relevant protocols concerning the photocopying of correspondence shall be included in the facility's incarcerated individual rulebook. If the rulebook is not yet scheduled for reprinting, such information shall be posted conspicuously in all housing areas until such reprinting has been completed and issued.
- 11. Any costs associated with the correspondence photocopying program shall be borne by the facility and not through the use of commissary profits.
- 12. The facility shall ensure that all correspondence-related reportable incidents are submitted to the Commission in accordance with Part 7022, Reportable Incidents.

REVIEWED BY REGIONAL SUPERVISOR: Debbie Clark DATE: 8-9-21

REVIEWED BY DIRECTOR: T. Moran DATE: 8/9/21

COMMENTS BY DIRECTOR:

OFFICIAL USE ONLY:

NOTES OF MEETING:



Commission of Correction

New York State
Commission of Correction
80 S. Swan Street, 12th Floor
Albany, New York 12205
518-485-2465
518-485-2467 (Fax)

County Jail Variance Application Form

INSTRUCTIONS TO SHERIFF OR CHIEF ADMINISTRATIVE OFFICER:

Pursuant to New York State Minimum Standards Part 7050, Variances, please complete all portions of this form and mail or fax this form Attn: Chairman/Commissioner to the address or fax number listed above.

Facility: Orleans County Jail

Person requesting: Superintendent Scott Wilson

(Sheriff/Chief Administrative Officer)

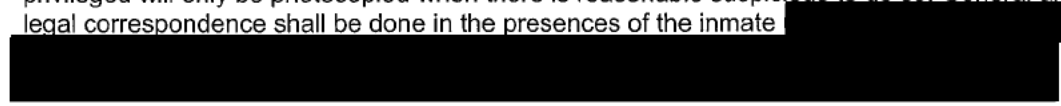
- A. State the specific part, section and subdivision of New York State Minimum Standards for which the variance is requested: Example: 7040.3 states that, the total number of inmates confined within each correctional facility shall not exceed the maximum facility capacity of such facility. To request a variance to house additional inmates within the facility the citation should be listed as: Ex. Part: 7040 Section: 3 Subdivision: n/a

Standard for which the variance is requested:

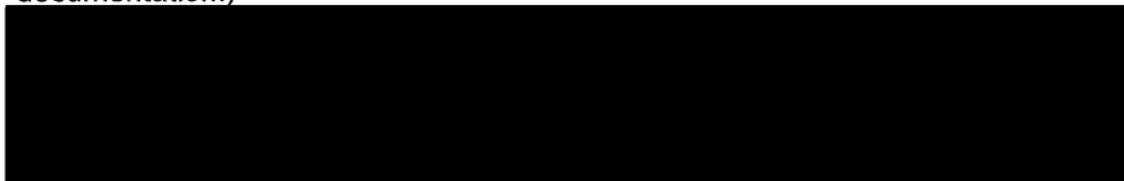
Part: 7004 Section: 1 and 3 Subdivision:

- B. In the space provided below include specific plans fully explaining and supporting the alternative manner of compliance. If you are requesting a modification to an existing variance please include that information in the area below as well. (Include or attach any relevant supporting documentation)

The Orleans County Jail would like to request a variance for 9-CRR-NY-7004.1 and 7004.3 for the purpose of photocopying all incoming non-privileged correspondence. General and legal privileged will only be photocopied when there is reasonable suspicious to do so. General and legal correspondence shall be done in the presences of the inmate



C. In the space provided below include a detailed description regarding why this variance is necessary. (Include or attach any relevant supporting documentation.)



D. Provide the amount of time for which the variance is requested, if applicable:

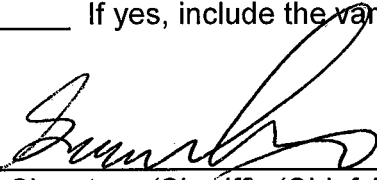
Days _____ Weeks _____ 12 Months

E. Should this variance application be approved, please detail below any plans, provisions and timetables for achieving full compliance with the Minimum Standard regulation that is the subject of this application. (Use additional sheets to provide further information and supporting documentation).



G. Has this variance been previously approved by the Commission?

Yes _____ If yes, include the variance number _____ No X



Signature (Sheriff) (Chief Administrative Officer)

7-28-21

Date

Additional copies of this form can be obtained by contacting the Commission, or online at www.scoc.ny.gov . Click on *Table of Contents, Commission Forms, Request for a Variance* (Formal application statement).

Name of Facility: Woodfield Detention Center Variance # 21-V-08

New: Renewal: X

Relief from Standard: 7320.4 & 5

Application by: Director Dean DeKranis

Date Request Rec: 6/28/2021

Last Approved: Length of Approval: 4 months

Expiration: 9/1/21

Write-up Prepared by: Larry Roe/Amanda Grimes

Recommendation by Field Staff: The Commission has received a request from Dean DeKranis of the Woodfield Detention Center to extend the variance to continue to allow for the housing of female youth in the west wing trailer 1st floor in order to create more bed space for male AO's in the main building [REDACTED]. This would allow for the 10 bed east trailer to be utilized for JD/JO males and the 17 bed west wing of the main building to be used to for AO males. Only female JD/JO/AO classified females would be housed on the 1st floor of the west wing trailer.

[REDACTED]

Recommendation at Briefing:

Final Recommendation: Recommend Approval through March 1, 2022

SUMMARY OF VARIANCE REQUEST

SCOC received a request from Director DeKranis for authorization for Woodfield Detention Center requesting to continue to use three beds on the west trailer housing unit 1st floor to house AO female youth.

VARIANCE HISTORY

[REDACTED]

RECOMMENDED CONDITIONS IF APPROVED

If approved, conditions should be as follows:

1. [REDACTED]
2. [REDACTED]
3. [REDACTED]
4. Daily documented inspections shall be completed at least once per day of the youth rooms.
5. All unauthorized coverings on youth lights must be removed.
6. The facility shall maintain a staffing plan consistent with the

requirements as outlined in OCFS and SCOC regulations.

7. Prior to the opening of any housing units the facility shall submit a staffing plan consistent with the requirements as outlined in OCFS and SCOC regulations.
8. The outside fire egress path to the trailers shall always remain clear.

CONSTRUCTION/RENOVATION PLANS

18-C-93- Security Upgrades approved in September 2018. Due to cost concerns project being modified, anticipate updated project submission in near future.

OTHER VARIANCES IN EFFECT

Toilet Ratio 18-V-08

West Wing second floor 19-V-08

STAFF INFORMATION AFTER SITE VISIT (DATE OF LAST VISIT TO FACILITY):

DATE OF LAST CYCLE VISIT THAT STANDARD VIOLATIONS WERE IDENTIFIED:

Conducted a 7306 evaluation

ANY OPEN MINIMUM STANDARD VIOLATIONS:

Many open minimum standard violations are being followed by the SCOC staff and worked on with the facility.

ANY VIOLATIONS WHICH PERTAIN TO THE VARIANCE'S CONDITIONS:

- [REDACTED]
- Unauthorized coverings over the resident's lights in their rooms is ongoing

JUSTIFICATION FOR WHY VARIANCE SHOULD OR SHOULD NOT BE EXTENDED:

Facility has a current need.

REVIEWED BY REGIONAL SUPERVISOR: Larry Roe **DATE:** 7 / 3 0 / 2 1

OFFICIAL USE ONLY:

NOTES OF MEETING: _____

(09/18)



Commission of Correction

New York State
Commission of Correction
80 S. Swan Street, 12th Floor
Albany, New York 12205
518-485-2465
518-485-2467 (Fax)

Specialized Secure Detention Variance Application Form

INSTRUCTIONS TO DIRECTOR:

Pursuant to New York State Minimum Standards Part 7360, Variances, please complete all portions of this form and mail or fax this form Attn: Chairman/Commissioner to the address or fax number listed above.

Facility: Woodfield Detention Center

Person requesting: Dean DeKranis

(Director)

- A. State the specific part, section and subdivision of New York State Minimum Standards for which the variance is requested: Example: 7320.4(c) states that, at least one functioning toilet, sink and shower shall be available for every 6 youth contained within a living unit. To request a variance to allow for 1 tub/shower for every 8 youth:

Ex. Part: 7320 Section: 4 Subdivision: c

Standard for which the variance is requested:

Part: 7320 Section: 4 Subdivision:

- B. In the space provided below include specific plans fully explaining and supporting the alternative manner of compliance. If you are requesting a modification to an existing variance please include that information in the area below as well. (Include or attach any relevant supporting documentation)

In order to create more bed space for male AOs in the main building we would like to use 3 beds on the West Trailer Housing Unit 1st floor to house female admissions. This would allow us to open up bed space availability in the 10 Bed East Trailer for JD/JOs and 17 beds on the West Wing for AOs.

- C. In the space provided below include a detailed description regarding why this variance is necessary. (Include or attach any relevant supporting documentation)

The variance is necessary because the 1st floor West Trailer is not currently SSD certified.

D. Provide the amount of time for which the variance is requested, if applicable:

_____ Days _____ Weeks 6 Months

E. Should this variance application be approved, please detail below any plans, provisions and timetables for achieving full compliance with the Minimum Standard regulation that is the subject of this application. (Use additional sheets to provide further information and supporting documentation).

Only Adolescent Offender, Juvenile Offender or Juvenile Delinquent classified females will be housed on the 1st Floor West Trailer Housing Unit.

G. Has this variance been previously approved by the Commission?

Yes If yes, include the variance number 21-V-08 No



Signature (Director)

6/28/21

Date

Additional copies of this form can be obtained by contacting the Commission, or online at www.scoc.ny.gov. Click on Table of Contents, Commission Forms, Request for a Variance (Formal application statement).

(SCOC Form #VA-SSD-2)
(09/18)

New: Renewal: X

Relief from Standard: 7320.4

Application by: Director Dean DeKranis

Date Request Rec: 6/28/2021

Last Approved: Length of Approval: 4 months

Expiration: 9/1/21

Write-up Prepared by: Larry Roe/Amanda Grimes

Recommendation by Field Staff: The Commission has received a request from Dean DeKranis of the Woodfield Detention Center to extend the variance.

Recommendation at Briefing:

Final Recommendation: Recommend Approval through March 1, 2022

SUMMARY OF VARIANCE REQUEST

SCOC received a request from Director DeKranis for authorization for Woodfield Detention Center requesting to continue use the Woodfield West Wing trailer 2nd floor for residents that have been quarantined.

VARIANCE HISTORY

This variance has been in effect since September 2019.

RECOMMENDED CONDITIONS IF APPROVED

If approved, conditions should be as follows

1. Only youth quarantined at the direction of the medical director may be housed on the second floor of the West Wing trailer.
2. The maximum number of youth authorized on the second floor of the West Wing trailer is seven (7). Further, these youth must maintain an allocated bed within the facility, and once cleared by medical the youth is to be placed back into their original individual living unit.
3. The facility shall maintain a staffing plan consistent with the requirements as outlined in OCFS and SCOC regulations.
4. Prior to the utilization of the Second Floor West Wing Trailer the agency must submit a safety plan to the Commission that has been approved by OCFS.
5. [REDACTED]
6. [REDACTED]
7. [REDACTED]
8. The outside fire egress path to the trailers shall always remain clear of debris, snow, etc.

CONSTRUCTION/RENOVATION PLANS

18-C-93 Security Upgrades approved in September 2018. Due to cost concerns project being modified, anticipate updated project submission in near future.

OTHER VARIANCES IN EFFECT

Toilet Ratio 18-V-08

West Wing trailer 1st floor 21-V-08

STAFF INFORMATION AFTER SITE VISIT (DATE OF LAST VISIT TO FACILITY):

DATE OF LAST CYCLE VISIT THAT STANDARD VIOLATIONS WERE IDENTIFIED:

Conducted a 7306 evaluation

ANY OPEN MINIMUM STANDARD VIOLATIONS:

Many open minimum standard violations are being followed by the SCOC staff and worked on with the facility.

ANY VIOLATIONS WHICH PERTAIN TO THE VARIANCE'S CONDITIONS:

JUSTIFICATION FOR WHY VARIANCE SHOULD OR SHOULD NOT BE EXTENDED:

Facility has a current need.

REVIEWED BY REGIONAL SUPERVISOR: Larry Roe **DATE:** 7/30/21

OFFICIAL USE ONLY:

(09/18)

NOTES OF MEETING:



Commission of Correction

New York State
Commission of Correction
80 S. Swan Street, 12th Floor
Albany, New York 12205
518-485-2465
518-485-2467 (Fax)

Specialized Secure Detention Variance Application Form

INSTRUCTIONS TO DIRECTOR:

Pursuant to New York State Minimum Standards Part 7360, Variances, please complete all portions of this form and mail or fax this form Attn: Chairman/ Commissioner to the address or fax number listed above.

Facility: Woodfield Detention Center

Person requesting: Dean DeKranis

(Director)

- A. State the specific part, section and subdivision of New York State Minimum Standards for which the variance is requested: Example: 7320.4(c) states that, at least one functioning toilet, sink and shower shall be available for every 6 youth contained within a living unit. To request a variance to allow for 1 tub/shower for every 8 youth:

Ex. Part: 7320 Section: 4 Subdivision: c

Standard for which the variance is requested:

Part: 7320 Section: 4 Subdivision:

- B. In the space provided below include specific plans fully explaining and supporting the alternative manner of compliance. If you are requesting a modification to an existing variance please include that information in the area below as well. (Include or attach any relevant supporting documentation)

Woodfield Detention Center is requesting authorization to use the 2nd floor of the West Trailer as a Covid-19 Quarantine unit.

- C. In the space provided below include a detailed description regarding why this variance is necessary. (Include or attach any relevant supporting documentation)

This space will be used to quarantine youth who test positive for Covid-19 as well as for new admissions pending Covid-19 testing.

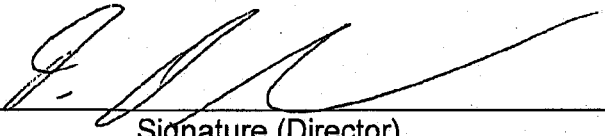
D. Provide the amount of time for which the variance is requested, if applicable:

_____ Days _____ Weeks **6** _____ Months

E. Should this variance application be approved, please detail below any plans, provisions and timetables for achieving full compliance with the Minimum Standard regulation that is the subject of this application. (Use additional sheets to provide further information and supporting documentation).

G. Has this variance been previously approved by the Commission?

Yes If yes, include the variance number 19-V-08 No



Signature (Director)

8/14/21
Date

Additional copies of this form can be obtained by contacting the Commission, or online at www.scoc.ny.gov . Click on Table of Contents, Commission Forms, Request for a Variance (Formal application statement).

(SCOC Form #VA-SSD-2)
(09/18)



**Commission of
Correction**

**Maximum Facility Capacity
for the**

HILLBROOK JUVENILE DETENTION FACILITY

Specialized Secure Detention Facility

Syracuse, New York

August 17, 2021

Allen Riley
Chairman

Thomas J. Loughren
Commissioner

Yolanda Canty
Commissioner

NOTE: ONLY INDIVIDUAL OCCUPANCY ROOMS AND SPECIAL MANAGEMENT UNITS WHICH MEET THE FOLLOWING REQUIREMENTS PURSUANT TO 9 NYCRR PART 7320 ARE TO BE INCLUDED IN THIS CAPACITY FORMULATION.

INDIVIDUAL OCCUPANCY ROOM:

1. Each such room shall only house one (1) youth and contain at least 70 square feet of floor space.
2. Each such room shall contain:
1 bed and mattress; Mattresses shall be constructed of fire-retardant material

LIVING UNIT

Each living unit shall contain:

1. At least one functioning toilet, sink and shower for every six (6) youth confined within a living unit.
2. Each individual occupancy room constructed after the effective date of this Part shall provide a minimum of 25 Square feet of unencumbered Living Unit space per youth adjacent and accessible to such Individual Occupancy Room.

EXCEPTIONS:

1. A room may contain less than 70 square feet of floor space if such room was originally constructed for such purpose prior to the effective date of Part 7320,

SPECIAL MANAGEMENT UNITS:

Any unit which can be designated for the individual housing of a youth separate and apart from general population for purpose including but not limited to:

1. A medical treatment unit;
2. A classification and orientation unit; or
3. A mental health unit.

I. A. INDIVIDUAL OCCUPANCY ROOMS USED FOR GENERAL HOUSING

Name of Living Unit	Number of Individual Occupancy Rooms	Total Size of Individual Occupancy Rooms (Sq. Ft. of unencumbered Floor Space)	# of Showers Available per Living Unit	# of Sinks Available per Living Unit	# of Toilets Available per Living Unit	Maximum Youth Capacity
A Wing	8	8 @ 99 Sq. Ft	3	2	3	8
B Wing	8	8 @ 99 Sq. Ft	3	2	3	8
C Wing	8	8 @ 99 Sq. Ft	3	2	3	8
C Wing Extension	5	5 @ 96 Sq. Ft	1	1	1	5
D Wing	8	8 @ 99 Sq. Ft	3	2	3	8
D Wing Extension	5	5 @ 96 Sq. Ft	1	1	1	5
Orientation Wing	8	8 @ 96 Sq. Ft	1	1	1	8

Individual Occupancy Rooms for General Housing Total: 50

II B. INDIVIDUAL OCCUPANCY ROOMS USED FOR SPECIAL MANAGEMENT HOUSING

Name of Living Unit	Purpose/ Type of Special Management Unit	Number of Individual Occupancy Rooms	Total Size of Living Unit (Sq. Ft. of unencumbered Floor Space)	# of Showers Available per Living Unit	# of Sinks Available per Living Unit	# of Toilets Available per Living Unit	Maximum Youth Capacity
N/A							N/A

Individual Occupancy Units for Special Management Total: 0

<i>LIVING UNIT TYPE</i>	<i>TOTALS</i>
Subtotal Individual Occupancy Rooms Used for General Housing:	50
Subtotal Individual Occupancy Rooms Used for Special Management:	0
MAXIMUM FACILITY CAPACITY:	50

The above-noted capacity is based upon the following:

1. The number of properly equipped individual occupancy rooms, including the number of properly equipped special management units;
2. The total number of youth housing at this facility will not exceed the Maximum Facility Capacity as rated above; and
3. The facility's ability to provide required programs and services and to comply with other rules and regulations of 9 NYCRR Chapter III which are related to facility capacity.

_____ Adjustments have not been made based on the facility's ability to provide required programs and services and to comply with other rules and regulations of 9 NYCRR Chapter III which are related to facility capacity.

_____ Adjustments have been made based on the facility's ability to provide required programs and services and to comply with other rules and regulations of 9 NYCRR Chapter III which are related to facility capacity. (Explain below.)

COMMENTS:

To the best of my knowledge all information contained in this formulation is correct.

Submitted by:

Approved by:

(Preparer's Signature and Title, and Date)

(Signature Title and Date)