28 W 751 Stafford Place · Warrenville, IL 60555 · 630/393-1171 · Fax 630/393-1688

WARRENVILLE PUBLIC LIBRARY DISTRICT Regular Meeting of the Board of Trustees Wednesday, March 15, 2017, 7:00 p.m. Location: Lower Level Meeting Room

#### **AGENDA**

Visitors are welcome to all meetings of the Board of Trustees. Anyone who wishes to address the Board during Public Comments must fill out a sign up sheet prior to the start of the meeting. Speakers are limited to three (3) minutes. The Board requests that a group appoint one (1) speaker to present the views of the entire group. Speakers will state name and address before addressing the Board. While the Board appreciates all questions and comments, they will not respond at the meeting, but may choose to do so at a later time.

- 1. Call to order
- 2. Roll Call (Trustees Arlowe, DuRocher, Lezon, Picha, Richardson, Stull, Warren)
- Approval of the agenda (ACTION)
   Trustees may request to remove any items from the consent or regular agenda at this time.
   Discussion only items may also be added to the regular agenda at this time.
- 4. Presentations
- 5. Public comments
- 6. Correspondence
- 7. Consent Agenda (ACTION)

		9-11-16-10-16-10-16-10-16-16-10-16-10-16-10-16-10-16-10-16-10-16-10-16-10-16-10-16-10-16-10
	a.	Approve Minutes of the February 15, 2017 Regular Board of Trustees Meeting
p. 10	b.	Receive and file Financial Report for February
p. 19	c.	Approve Non-resident Library Card Participation for FY18 Utilizing the Tax Bill Method for Calculation of the Non-resident fee and 15% Calculation for Non-resident Renters
p. 20	d.	Approve Closure of Library at 3 p.m. on Monday, July 3, 2017 for Warrenville Parade
p. 20	e.	Approve Closure of Library at 3 p.m. on Friday, August 4, 2017 and all day on Saturday, August 5, 2017 for Warrenville Summer Daze
p. 21	f.	Adopt Resolution R-208, Amending Premium Conversion Plan
P. 21	g.	Rescind January 1, 2010 Wageworks Flexible Benefits Plan

- 8. Regular Agenda a. Approve payments for the period of February 16 – March 15, 2017 p. 55. (ACTION) p. 58 b. Approve transfer of funds (ACTION) c. Approve trustee expenditures for meetings and/or travel (ACTION) D. 59 sereccescones 9. Unfinished Business a. Building Project Update (discussion only) p. 63 b. Approve Strategic Priority Action Steps for FY18 (ACTION) 10. New Business a. Proposal for "Fresh Start" Initiative Including Fee Waivers and Discounts p. 64..... (ACTION) b. Consideration of dates for Grand Re-opening celebration (ACTION) p. 68 ..... p. 69 ...... 11. Director's Report 71 ..... 12. Department Head Reports 76..... 13. President's Report a. Next meetings or events 14. Treasurer's Report 15. Secretary's Report 16. Committee Reports p. 79 .....a. Personnel Committee – Director's FY17 Evaluation p. 80 .......... b. Personnel Committee – Director's Evaluation Process (Trustee DuRocher) 17. Trustee Comments 18. Items for Information and/or Discussion (No Action) 19. Closed session as allowed by 5 ILCS 120/2(c)(8) for the purpose of the "Security procedures and the use of personnel and equipment to respond to an actual, a threatened, or a reasonably potential danger to the safety of employees,

20. Discussion/action resulting from the above closed session (ACTION)

students, staff, the public, or public property."

21. Adjournment (ACTION)

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- 4. Presentations
- 5. Public comments
- 6. Correspondence
- 7. Consent Agenda (ACTION)
  - a. Approve Minutes of the February 15, 2017 Regular Board of Trustees Meeting
  - b. Receive and file Financial Report for February
  - C. Approve Non-resident Library Card Participation for FY18 Utilizing the Tax Bill Method for Calculation of the Non-resident fee and 15% Calculation for Non-resident Renters
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  - f. Adopt Resolution R-208, Amending Premium Conversion Plan
  - g. Rescind January 1, 2010 Wageworks Flexible Benefits Plan

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- 8. Regular Agenda
  - a. Approve payments for the period of February 16 March 15, 2017
     (ACTION)
  - b. Approve transfer of funds (ACTION)
  - c. Approve trustee expenditures for meetings and/or travel (ACTION)
- 9. Unfinished Business
  - a. Building Project Update (discussion only)
  - b. Approve Strategic Priority Action Steps for FY18 (ACTION)
- 10. New Business
  - a. Proposal for "Fresh Start" Initiative Including Fee Waivers and Discounts (ACTION)
  - b. Consideration of dates for Grand Re-opening celebration (ACTION)
- 11. Director's Report
- 12. Department Head Reports
- 13. President's Report
  - a. Next meetings or events
- 14. Treasurer's Report
- 15. Secretary's Report
- 16. Committee Reports
  - a. Personnel Committee Director's FY17 Evaluation
  - b. Personnel Committee Director's Evaluation Process (Trustee DuRocher)
- 17. Trustee Comments
- 18. Items for Information and/or Discussion (No Action)
- 19. Closed session as allowed by 5 ILCS 120/2(c)(8) for the purpose of the "Security procedures and the use of personnel and equipment to respond to an actual, a threatened, or a reasonably potential danger to the safety of employees, students, staff, the public, or public property."
- 20. Discussion/action resulting from the above closed session (ACTION)
- 21. Adjournment (ACTION)

# WARRENVILLE PUBLIC LIBRARY DISTRICT Minutes of the Regular Meeting Of the Board of Trustees Wednesday, February 15, 2017

- 1. Call to order Trustee Stull called the meeting to order at 7:02 p.m.
- 2. Roll call

ATTENDING: Trustees Arlowe, DuRocher, Lezon, Picha, Richardson, Stull and Warren STAFF ATTENDING: Library Director Sandy Whitmer and Assistant to the Director Jackie Davis

OTHERS ATTENDING: Trustee Candidate Cindy Ruzicka and Jim Vroman, Community Unit School District 200 Board President

3. Approval of the Agenda

Trustee Picha deleted #19 and moved #20 Destruction of Verbatim Recordings of Closed Sessions and Release of Closed Session Minutes to #8. d. - Regular Agenda – Items for Information and/or Discussion

Director Whitmer added "Discussion of Developer Contributions" to #18.a.

MOTION: Trustee DuRocher moved to approve the agenda as amended. Trustee Warren seconded.

Voice vote – all ayes Nays - None Motion carried

- 4. Presentation None
- 5. Public comments
  - a. Jim Vroman, School District 200 Board President, expressed his gratitude to the Library for their summer reading programs and the partnerships that are enjoyed by all.

He also reviewed the \$132.5 million referendum question that will be on the ballot in April to help finance needed repairs, renovations and upgrades to 19 of the 20 schools in District 200.

Mr. Vroman left the meeting after sharing his comments.

- b. Trustee Candidate Cindy Rucizka stated that she is looking forward to serving on the Board.
- Correspondence None

Minutes of the Regular Board Meeting February 15, 2017 Page 1 of 7

#### 7. Consent Agenda

Trustee Warren read the consent agenda as follows:

- a. Approve Minutes of the January 18, 2017 Regular Board of Trustees Meeting
- b. Receive and file Financial Report for January

MOTION: Trustee Picha moved to approve the Consent Agenda as read. Trustee Lezon seconded.

Roll call vote:

Ayes – Trustees DuRocher, Lezon, Picha, Richardson, Stull and Warren Abstain – Trustee Arlowe Nays - None Motion carried

#### 8. Regular Agenda

a. Approve payments for the period of January 19, 2017 – February 15, 2017

MOTION: Trustee Picha moved to approve payment in the amount of \$356,399.91 for the period of January 19, 2017 – February 15, 2017 including electronic payments and checks #5677 – 5716. Trustee Warren seconded.

Roll call vote:

All Ayes – Trustees Arlowe, DuRocher, Lezon, Picha, Richardson, Stull and Warren Nays - None Motion carried

b. Approve Transfer of Funds

MOTION: Trustee Picha moved to transfer \$450,000 from the Business NOW account to the Operating Account. Trustee DuRocher seconded Ayes – Trustees Arlowe, DuRocher, Lezon, Picha, Richardson, Stull and Warren Nays – None Motion carried

c. Approve Minutes of the February 2, 2017 Meeting Room Policy Committee Meeting

MOTION: Trustee Picha moved to approve the Minutes of the February 2, 2017 Meeting Room Policy Committee Meeting. Trustee DuRocher seconded. Roll call vote:

Ayes – Trustees DuRocher, Lezon, and Warren Abstain – Trustees Arlowe, Picha, Richardson and Stull Nays - None Motion carried

d. Destruction of Verbatim Recordings of Closed Sessions and Release of Closed Session Minutes

Minutes of the Regular Board Meeting February 15, 2017 Page 2 of 7 MOTION: Trustee Picha moved to destroy verbatim recordings for the closed session held on May 19, 2015 and closed sessions #1 and #2 held on May 27, 2015. Trustee DuRocher seconded.

Voice vote: Ayes – all Nays – None Motion Carried

MOTION: Trustee Picha moved to release the following closed session minutes. Trustee Lezon seconded.

- From 2005 March 24
- From 2006 April 26, May 17, and July 19 Session #2
- From 2007 April 18 Session #1
- From 2008 March 19 and December 17 Session #2
- From 2009 January 21 Session #2, April 15 Session #2, May 20, and June 17
- From 2010 January 20 Session #2, February 17 Session #2, February 24, April 21 Session #1, August 18, and November 17
- From 2012 March 21 Session #1 and December 19
- From 2013 January 16, March 20, May 15 Session #1, August 21 Session #1, September 18, and October 16

Voice Vote: Ayes – All Nays - None Motion carried

#### 9. Unfinished Business

#### a. Building Project Update

Director Whitmer stated that most of the current month's progress has been behind the scenes, not the significant progress that was seen in the prior months. The public washrooms have been completely gutted.

Trustee Picha asked if the Project Manager's aggressive scheduling has caused any issues for the Library. Director Whitmer stated that some of the seating areas have been lost to the public.

Programming is continuing with Youth Services holding storytimes at Trinity Lutheran Church and City Hall and Adult Services has scheduled Sunday concerts at the Warrenville VFW.

Director Whitmer stated that one of the most challenging issues has been due to existing HVAC, sprinkler, etc. conditions in the meeting room. The ceiling in the meeting room will be lowered to approximately 8'6" to accommodate a steel beam needed to support the partition wall.

Trustee Picha asked if change orders are included in the contingency budget. Director Whitmer replied yes. Trustee Picha also commended Head of Public Services Leila Heath and her staff for moving 37,000 plus items.

#### 10. New Business

 Review Staff Report on FY17 Strategic Priority Action Steps and Provide Input and Feedback on Action Steps for FY18

Director Whitmer reviewed items scheduled to be completed by the end of this fiscal year and proposed tasks for FY 17-18.

Director Whitmer stated she has received 12 applications for the Marketing Specialist position and interviews will begin the week of February 20.

Director Whitmer stated under Library Brand, the item to develop values, vision and mission statements will be carried forward to FY 2018-19.

Director Whitmer recommends that the Board engage the services of a consultant in FY19 to develop a new strategic plan.

Trustee Picha asked if Mobile Circ is currently working. Director Whitmer stated that it is not working. Staff are not confident that it is ready for functional implementation. BlueCloudPAC has not been working and the company has offered another product at no cost, for as long as the Library remains a customer.

b. Review Revisions to Meeting Room Policy

The Board discussed allowing an alternate designated person in the event of an emergency to sign as the person responsible for the room. After discussion, it was the consensus of the Board to have Library staff monitor these instances and revisit if necessary.

Trustee Picha asked what steps are taken to recover damage costs if the responsible person does not pay for the repairs. After discussion, it was the consensus of the Board to add under IX. – Other Rules & Regulations, Item M. a bullet point stating "Failure to pay fees assessed for damage".

Trustee DuRocher asked if an organization could use the room more than once a month if the need arose. Director Whitmer stated that due to Library programs, etc. it is not possible. Staff will monitor.

Trustee Stull asked if the organization could bring in their own tables/chairs. Director Whitmer stated that they could.

- c. Review Suggested Uses for Foundation Funds
  - Trustees felt that the Library should dedicate a permanent fixture to commemorate the Foundation. Suggestions included the Quiet Room, fireplace, book sale area or a garden bench. Director Whitmer will investigate what a reasonable amount would be for the fireplace and/or quiet room.

- Trustees agreed with Director's Whitmer suggestion to modify the existing water fountain to include a bottle filling station.
- Trustee DuRocher inquired about the purchase of Wifi Hotspots.
   Director Whitmer stated that the Library could pilot the program for one year with 5 hotspots and expand if warranted the next year.
- Trustee Picha stated that Dorothy Deer on behalf of Warrenville in Bloom (WIB) approached Maple Hill's HOA. WIB is participating in the DuPage Monarch Project and are looking for individuals and organizations to plant Monarch waystations. Trustee Picha suggested to WIB that they should contact the Library about planting a waystation. WIB has a designer to assist in garden design.

Consensus of the Board is to have Director Whitmer contact WIB regarding a garden, which could be dedicated to the Foundation.

 All other requests submitted by staff should be considered as part of the operating budget.

#### Director's Report

Trustee DuRocher asked for an update on the status of the Building Maintenance Levy. Director Whitmer explained that she received correspondence from Attorney Ritzman. His opinion is that any potential loss from taxpayer objections would be small.

#### 12. Department Head Reports

- Public Services held a Winter Library Reading Club this year, however, participation was disappointing.
- Trustee Picha asked how many home bound patrons the Library serves.
   Director Whitmer stated that currently there are 1-2.

#### 13. President's Report

- Trustee Stull shared the list of upcoming meetings, holidays and future board meeting topics for discussion and/or action.
- 14. Treasurer's Report Trustee Lezon stated that the financials look good. She also stated that two checks need to be voided:

#5705 – Sandy Whitmer (was signed by Director Whitmer) #5717 – American Library Association (it was not included in the bill list)

These checks will be reissued next month.

15. Secretary's Report – Trustee Warren asked if Director Whitmer has ideas for a keynote speaker at the rededication. Director Whitmer stated that elected officials would be invited to the event, however, Trustees would "keynote" the event.

The Board agreed to consider dates for a grand re-opening celebration at the next Board Meeting.

#### 16. Committee Reports - none

#### 17. Trustee Comments

- Trustee Arlowe stated that she recently visited a local library in upstate New York. Their yearly budget is \$40,000 \$45,000 with \$1,500 a year for materials. There is one staff person who works 25 hours per week when the library is open. Trustee Arlowe stated that this library is facing the same challenges and issues that our larger library is. They also have two fireplaces enjoyed by the patrons.
- Trustee Warren stated that he attended the Legislative Lunch on Monday, February 13. He shared several handouts from the event.
- Trustee Warren stated that he attended Glen Ellyn Public Library event "Whiskey and Words".

#### 18. Items for Information and/or Discussion

a. Discussion of Developer Contributions

Director Whitmer stated that she received an email from Ron Mentzer, City of Warrenville, regarding the Musselman Property. Airhart Builders has asked the City to calculate developer donations for the School, Library and Park Districts at the attached single-family home rate, rather than the detached single-family home rate. The City has asked asked for input from the Library.

Airhart Builders believes the target market tends to trend towards people whom would normally purchase a townhome with an HOA.

This proposal would reduce the amount of funds received by the Library. Director Whitmer ran samples from the Library's patron base to see how many people live in the attached single-family residences in Village Green. She arrived at exactly the same percentage Airhart used in their proposal and feels the Board should not object to this proposal.

Director Whitmer does object to a statement made by Airhart Builders stating the people residing in these homes would not impact the library.

Empty nesters, retirees and seniors account for a significant amount of library use.

She will also ask the City to use the detached family home calculations for their TIF reimbursements as long as the TIF exists.

After discussion, the consensus of the Board is to have Director Whitmer thank them for including the Library in making this decision and to remind them about the TIF district commitment.

#### 19. Adjournment

MOTION: Trustee Richardson moved to adjourn the meeting at 8:43 pm. Trustee Picha seconded.

Voice vote:

Ayes – all

Motion carried.

Respectfully submitted,

Richard W. Warren Jr.
Secretary
Board of Trustees
Warrenville Public Library District

# WARRENVILLE PUBLIC LIBRARY DISTRICT 28 W 751 STAFFORD PLACE WARRENVILLE, IL 60556 February 28, 2017

WILLE	FEBRUARY		FUND BALANCES	NCES							PAGE 1
LEVY	LEW EXT	LEVYEXT TOTAL TAX R	TAX INC. RECEIVED CUR. MTH	TAX INC. RECEIVED Y.T.D.	% RECEIVED	UNAUDITED OTHER INC FUND BAL RECEIVED 6/30/2016 MONTH	OTHER INC RECEIVED MONTH	Y.T.D. OTHER INCOME	EXPENSES	Y.T.D. Expenses	CURRENT
CORPORATE	1676131	95.1842%	a	1673583	99.85%	301229	35056	92724	98457	958621	1108915
BLDG, & MAIN.	84803	4.8158%	0	84674	99.85%	53430	0	0	3267	30628	107476
TOTAL TAX (LEVIED)	1760934	100.00%	٥	1758257	99.85%	354659	35056	92724	101724	989249	1216391
DEFERRED REVENUE	0		0	0		0	0	0	0	0	0
WORKING CASH	0		0	0		225847	0	0	0	0	225847
DEVELOPER DONATIONS	0		0	0		0	57329	57329	0	0	57329.00
SPECIAL RESERVE	0		0	0		562160	0	0	0.00	38036	524124
ALBA LEMOS GIFT FUND	0		0	0		23524	0	0	0	0	23524
CAPITAL PROJECT	0		0	0		0	0	1929700	327544	832175	1097525
TOTAL	1760934	100.00%	0	1758257	99.85%	1166190	92385	2079753	429268	1859460	3144740
FORMULA = A+B+C-D=E				¥		œ		O		٥	Ш

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		CORPORATE F	UND		
	1 Month Ended	8 Months Ended			% Received /
	Feb. 28, 2017	Feb. 28, 2017	Budget	Balance	Expended
income					
Taxes Levied	0.00	1,673,583.46	1,676,131.00	2,547.54	99.85%
Copier	460.00	4,592.52	6,000,00	1,407.48	76.54%
Extended Use Fees	1,415.49	16,619.19	30,000.00	13,380.81	55.40%
Fees	8.00	131.25	300.00	168.75	43.75%
Interest	257.12	2,745.43	2,500.00	(245.43)	109.82%
Book Sales	0.00	1,648.44	5,000.00	3,351.56	32.97%
Lost Books	99,00	2,301.27	3,500.00	1,198.73	65.75%
Gifts / Memorials	32,358.62	44,494.79	1.000.00	(43,494.79)	4,449,48%
Miscellaneous	•				164.74%
Hotel/Motel Tax	457,49	4,942.34	3,000.00	(1,942.34)	84.49%
	0.00	15,248.91	18,049.00	2,800.09	0.00%
Grants - Per Capita	0.00	0.00	10,445.00	10,445.00	0.00%
	35,055.72	1,766,307.60	1,755,925.00	(10,382.60)	100.59%
Expenses					
Sal Administration	42 040 20	402 005 02	494 000 00	77 104 10	57.35%
Sal Circulation	12,018.30	103,805.82	181,000.00	77,194.18	65.66%
	8,795.92	76,818.88	117,000.00	40,181.12	45.08%
Sal Maintenance	1,678.27	11,715.67	26,000.00	14,284.33	
Sal Public Services	23,562.40	208,244.28	314,000.00	105,755.72	66.32%
Sal Tech Services	15,270.01	132,930.51	201,000.00	68,069.49	66.13%
I.M.R.F Expense	6,677.42	55,815.73	87,500.00	31,684.27	63.79%
Fica - Expense	4,563.46	39,142.52	64,500.00	25,357.48	60.69%
Unemp. Comp.	94.45	474.17	1,200.00	725.83	39.51%
Op - Mat'l Processing/Tech	605.09	5,120.18	9,170.00	4,049.82	55.84%
Op - Mat'l Processing/Circ	14.41	579.38	2,660.00	2,080.62	21.78%
Op - Postage	110.00	2,712.60	5,941.00	3,228.40	45.66%
Op - Office Supplies	504.74	2,593.53	4,000.00	1,408.47	64.84%
Op - Bank Fee's	58.04	542,84	795.00	252.16	68.28%
Op - Automation Supplies	148.9 <del>9</del>	1,154.68	3,000.00	1,845.32	38.49%
Op - Publishing	0.00	1,128.47	1,500.00	371.53	75.23%
Equip Purchases	391.00	9,222,44	6,300.00	(2,922.44)	146.39%
Equip Maintenance	254.90	2,465.73	3,500.00	1,034,27	70.45%
Auto Software	0.00	4,385.37	9,210.00	4,824.63	47.62%
Auto Purchases	1,087.00	5,803.58	9,950.00	4,146.42	58,33%
Auto Maintenance	648.11	41,781.42	48,295.00	6,513.58	86.51%
L. Ins Workmen's Comp	0.00	2,924.24	2,925.00	0.76	99.97%
ins Multi Peril Package	0.00	10,530.00	10,603.00	73.00	99.31%
Ins Health / Life	3,691.61	27,960.44	65,780.00	37,819.56	42.51%
Pd - Recruiting	45.00	225.00	500.00	275.00	45.00%
Pd - Staff Appreciation	0.00	410.03	1,200.00	789.97	34.17%
Pd - Staff / Dues	0.00	1,429.00	2,625.00	1,196.00	54.44%
Pd - Staff / Meetings	445.00	1,982.56	5,650.00	3,667.44	35.09%
Pd - Staff / Transportation	16.11	502.25	2,500.00	1,997.75	20.09%
Pd - Trst / Mtgs	0.00	315.00	1,000.00	685.00	31.50%
Pd - Trst / Transportation	0.00	93.94	200.00	106.06	46.97%
Pd - Trustee Misc.	6.98	116.88	500.00	383.12	23.38%
Cont Lawyer	0.00	2,347.50	15,000.00	12,652.50	15.65%
Cont Accounting	1,035.23	6,726.71	9,700.00	2,973.29	69.35%
Cont Collections	53,70	429.60	1,000.00	570.40	42.96%
Cont Audit	0.00	6,450.00	6,450.00	0.00	100.00%
Cont Consultants	0.00	0.00	10,000.00	10,000.00	0.00%
	0.00	0.00	10,000,00	10,000,00	0,0070

See Accountants Compilation Letter

#### CORPORATE FUND

		ODIG-CIONIE	- UND		
	1 Month Ended	8 Months Ended			% Received /
	Feb. 28, 2017	Feb. 28, 2017	Budget	Balance	Expended
Lib. Mat Adult Books	3,318.51	36,687,05	63,650,00	26,962,95	57,64%
Lib. Mat Youth Books	2,703.23	24,042.59	35,150.00	11,107.41	68.40%
Lib. Mat Adult AV	1,743.35	18,049.94	30,875.00	12,825.06	58.46%
Lib. Mat Youth AV	441.74	3,434.18	8.550.00	5,115,82	40,17%
Lib. Mat EBooks	59.94	5,744.56	14,250,00	8,505.44	40.31%
Lib. Mat Periodicals	337.43	9,356,88	11,400.00	2,043.12	82.08%
Lib. Mat - Internet Subsc	0.00	17,452.25	42,750.00	25,297.75	40.82%
Ps - Programs Adult	856.96	3,333.61	6,500.00	3,166.39	51.29%
Ps - Programs Youth	82.54	1,649.77	6,500,00	4,850.23	25.38%
Ps - Hotel/Motel	250,00	8,322.15	17,850.00	9,527.85	46,62%
Ps - Refunds / Fines / Fees	0.00	102.97	500.00	397.03	20.59%
Ps - Printing	0.00	5,239.00	12,000.00	6,761.00	43.66%
Ps - PR / Publicity	0.00	1,745.37	5,300.00	3,554.63	32.93%
Ps - Misc.	19.98	869.62	3,000.00	2,130.38	28.99%
Gas	1,512.23	3,856,09	10,000.00	6.143.91	38.56%
B & M - Water / Sewer	133.68	387.60	900.00	512.40	43.07%
Electricity	4,375.89	32,697.89	44,500.00	11,802,11	73.48%
Telephone	575.58	9,428.23	14,000.00	4,571.77	67.34%
B & M - Landscape Maint	270.00	4,010.00	7,950.00	3,940.00	50.44%
Gifts	0.00	0.00	1,000.00	1,000.00	0.00%
Contingency	0.00	3,330.23	10,000.00	6,669.77	33.30%
Debt Repayment	0.00	0.00	180,000.00	180,000.00	0.00%
	98,457.20	958,620.93	1,758,779.00	800,158.07	54,50%

**BUILDING & MAINTENANCE FUND** 

		: Invalle I CIANTIACE L	UITD		
	1 Month Ended	8 Months Ended			% Received /
	Feb. 28, 2017	Feb. 28, 2017	Budget	Balançe	Expended
Income					
Taxes Levied	0.00	84,674.18	84,803.00	128.82	99.85%
	0.00	84,674.18	84,803.00	128.82	99.85%
	0.00	04,074.10	04,003.00	120.02	33.0078
Expenses					
Maintenance	1,792.00	16,174.76	39,720.00	23,545.24	40.72%
Maintenance Supplies	24.00	1,628.81	5,900.00	4,271.19	27.61%
Security	140.40	722.40	7,800.00	7,077.60	9.26%
Snow Removal	944.40	9,873.11	20,000.00	10,126.89	49.37%
Hvac	0.00	301.84	10,900.00	10,598.16	2.77%
Janitorial Supplies	366.45	1,927.63	2,200.00	272.37	87.62%
	3,267.25	30.628.55	86,520.00	55,891.45	35.40%

**DEVELOPER DONATIONS** 

	1 Month Ended Feb. 28, 2017	8 Months Ended Feb. 28, 2017	Budget	Balance	% Received / Expended
Income Developer Donations	57,329,39	57,329.39	40,000.00	(17,329.39)	143.32%
	57,329.39	57,329.39	40,000.00	(17,329.39)	143.32%
Expenses					
	0.00	0.00	0.00	0.00	0.00%

**SPECIAL RESERVE FUND** 

	V				
	1 Month Ended Feb. 28, 2017	8 Months Ended Feb. 28, 2017	Budget	Balance	% Received / Expended
Income					
	0.00	0.00	0.00	0.00	0.00%
Expenses				(222.22)	400.000
Auto Purchases Maintenance	0.00 0.00	38,036.08 0,00	37,800.00 17,000.00	(236.08) 17,000.00	100.62% 0.00%
	0.00	38,036.08	54,800.00	16,763.92	69.41%

**CAPITAL PROJECT** 

	1 Month En Feb. 28, 2017	8 Months Ended Feb. 28, 2017	Budget	Balance	% Recel Expanded
Income Debt Certificate Proce	0.00	1,929,700.00	1,900,000.00	(29,700.00)	101.56%
	0.00	1,929,700.00	1,900,000.00	(29,700.00)	101.56%
Expenses Capital Improvement	327,544,24	832,174.95	2,500,000.00	1,667,825.05	33.29%
	327,544.24	832,174.95	2,500,000.00	1,667,825.05	33.29%

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#### WARRENVILLE PUBLIC LIBRARY DISTRICT Statement of Assets & Liabilities Cash Basis February 28, 2017

#### **ASSETS**

CURRENT ASSETS Petty Cash Cash In Drawer III National Bank E-Pay Account Cash / Copler Change MB Operating MB Business NOW MB Business Money Market MB Certificate of Deposit	250.00 160.00 11,299.94 75.00 299,600.75 1,810,823.61 824,270.23 201,001.91 3,147,481.44
General Fixed Assets	4,461,551.00
TOTAL ASSETS	\$ 7,609,032.44
LIABILITIES & FUND BALANCE	
CURRENT LIABILITIES I.M.R.F.	2,739.43
	2,739.43
LONG-TERM LIABILITIES	<del></del>
FOUTV	0.00
EQUITY Fund Balance Fund Balance Special Reserve	7,181,293.01 425,000.00 7,606,293.01
TOTAL LIABILITIES & FUND BALANCE	\$ 7,609,032.44

See Accountants Compilation Letter

#### **CONSENT AGENDA**

Approve Non-resident Library Card Participation for FY18 Utilizing the Tax Bill Method for Calculation of the Non-resident fee and 15% Calculation for Non-resident Renters

State law requires that public library boards annually "opt-in" or "opt-out" of the non-resident library card program.

By participating in the program, any non-resident cards issued by our library are required to be honored by other libraries that also participate in the non-resident program. If we choose not to participate, then our non-resident cards become "local use only" cards and they will not be honored by other libraries in the state.

A non-resident card is one that is issued by the Library to a person who does not live within a library's service area. Non-resident cards are valid for one year.

The Director and Circulation Manager recommend the following:

- Continue participation in the non-resident library card program.
- Continue to utilize the tax bill method for calculation of the non-resident fee. This ensures that a non-resident is paying the fee that would be required if his or her property was located within the District's boundaries.
- Continue to utilize the 15% of monthly rent formula to calculate the non-resident fee for non-resident renters (individuals who reside in a rental property outside of the library district's boundaries).

#### **CONSENT AGENDA**

Library Closures

 Approve Closure of Library at 3 p.m. on Monday, July 3, 2017 for Warrenville Parade

Each year, the July 3 parade requires the closure of streets surrounding the Library for the lineup of parade entries. These street closures limit public access to the Library facility. The 2017 parade will step off at 6 p.m., requiring street closures beginning at 3 p.m. Director Whitmer recommends that the Library close at 3 p.m. on July 3. Specific details for Library participation in the parade have not yet been decided.

 Approve Closure of Library at 3 p.m. on Friday, August 4, 2017 and all day on Saturday, August 5, 2017 for Warrenville Summer Daze

Director Whitmer recommends that the Library repeat last year's Summer Daze plan: close the Library and participate in the event by hosting an information table.

#### **CONSENT AGENDA**

Adopt Resolution R-208, Amending Premium Conversion Plan

The Library discontinued offering a Flexible Spending Account on January 1, 2017.

This action requires an amendment to our January 1, 1997 Premium Conversion Plan which allows employee contributions for specific insurance premiums to be deducted from the employee's paycheck on a pre-tax basis.

Insurance premiums included in this Plan are:

- Health Insurance Benefit
- Dental Insurance Benefit
- Vision Insurance Benefit
- Other Insurance Benefit (AFLAC)
  - Cancer Care Plan Select
  - o Cancer with Plus Rider
  - o Accident Advantage
  - o Hospital Advantage
- Health Savings Account Benefit

#### **CONSENT AGENDA**

Rescind January 1, 2010 Wageworks Flexible Benefits Plan

Wageworks, the administrator of the Library's Flexible Spending Account, required a separate plan document for pre-tax deductions. The amended plan prepared by Sikich and adopted with R-208 renders the Wageworks plan obsolete.

# R-208 AMENDING PREMIUM CONVERSION PLAN

The undersigned authorized representatives of Warrenville Public Library District (the Employer) hereby certifies that the following resolution was duly adopted by the Employer on March 15, 2017 and that such resolution has not been modified or rescinded as of the date hereof:

RESOLVED, that the form of amended Cafeteria Plan effective January 1, 2017, presented to this meeting is hereby approved and adopted and that an authorized representative of the Employer is hereby authorized and directed to execute and deliver to the Administrator of the Plan one or more counterparts of the Plan.

The undersigned further certifies that attached hereto as Exhibits A and B, respectively, are true copies of Warrenville Public Library District Premium Conversion Plan as amended and restated, and the Summary Plan Description approved and adopted in the foregoing resolution.

ADOPTED this 15th day of March 2017.

Heather Stull, President Library Board of Trustees Warrenville Public Library District

ATTEST:

Richard W. Warren Jr., Secretary Library Board of Trustees Warrenville Public Library District

### WARRENVILLE PUBLIC LIBRARY DISTRICT PREMIUM CONVERSION PLAN

AND ALL SUPPORTING FORMS HAVE BEEN PRODUCED FOR SIKICH LLP

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#### WARRENVILLE PUBLIC LIBRARY DISTRICT PREMIUM CONVERSION PLAN

#### INTRODUCTION

The Employer has amended this Plan effective January 1, 2017, to recognize the contribution made to the Employer by its Employees. Its purpose is to reward them by providing benefits for those Employees who shall qualify hereunder and their Dependents and beneficiaries. The concept of this Plan is to allow Employees to choose among different types of benefits based on their own particular goals, desires and needs. This Plan is a restatement of a Plan which was originally effective on January 1, 1997. The Plan shall be known as Warrenville Public Library District Premium Conversion Plan (the "Plan").

The intention of the Employer is that the Plan qualify as a "Cafeteria Plan" within the meaning of Section 125 of the Internal Revenue Code of 1986, as amended, and that the benefits which an Employee elects to receive under the Plan be excludable from the Employee's income under Section 125(a) and other applicable sections of the Internal Revenue Code of 1986, as amended.

#### ARTICLE I DEFINITIONS

- 1.1 "Administrator" means the Employer unless another person or entity has been designated by the Employer pursuant to Section 7.1 to administer the Plan on behalf of the Employer. If the Employer is the Administrator, the Employer may appoint any person, including, but not limited to, the Employees of the Employer, to perform the duties of the Administrator. Any person so appointed shall signify acceptance by filing written acceptance with the Employer. Upon the resignation or removal of any individual performing the duties of the Administrator, the Employer may designate a successor.
- 1.2 "Affiliated Employer" means the Employer and any corporation which is a member of a controlled group of corporations (as defined in Code Section 414(b)) which includes the Employer; any trade or business (whether or not incorporated) which is under common control (as defined in Code Section 414(c)) with the Employer; any organization (whether or not incorporated) which is a member of an affiliated service group (as defined in Code Section 414(m)) which includes the Employer, and any other entity required to be aggregated with the Employer pursuant to Treasury regulations under Code Section 414(o).
- 1.3 "Benefit" or "Benefit Options" means any of the optional benefit choices available to a Participant as outlined in Section 4.1.
- 1.4 "Cafeteria Plan Benefit Dollars" means the amount available to Participants to purchase Benefit Options as provided under Section 4.1. Each dollar contributed to this Plan shall be converted into one Cafeteria Plan Benefit Dollar.
  - 1.5 "Code" means the Internal Revenue Code of 1986, as amended or replaced from time to time.
  - 1.6 "Compensation" means the amounts received by the Participant from the Employer during a Plan Year.
- 1.7 "Dependent" means any individual who qualifies as a dependent under an Insurance Contract for purposes of coverage under that Contract only under Code Section 152 (as modified by Code Section 105(b)).
- "Dependent" shall include any Child of a Participant who is covered under an Insurance Contract, as defined in the Contract, or as allowed by reason of the Affordable Care Act.
  - 1.8 "Effective Date" means January 1, 1997.
- 1.9 "Election Period" means the period immediately preceding the beginning of each Plan Year established by the Administrator, such period to be applied on a uniform and nondiscriminatory basis for all Employees and Participants. However, an Employee's initial Election Period shall be determined pursuant to Section 5.1.
  - 1.10 "Eligible Employee" means any Employee who has satisfied the provisions of Section 2.1.

An individual shall not be an "Eligible Employee" if such individual is not reported on the payroll records of the Employer as a common law employee. In particular, it is expressly intended that individuals not treated as common law employees by the Employer on its payroll records are not "Eligible Employees" and are excluded from Plan participation even if a court or administrative agency determines that such individuals are common law employees and not independent contractors.

1.11 "Employee" means any person who is employed by the Employer. The term Employee shall include leased

employees within the meaning of Code Section 414(n)(2).

- 1.12 "Employer" means Warrenville Public Library District and any successor which shall maintain this Plan; and any predecessor which has maintained this Plan. In addition, where appropriate, the term Employer shall include any Participating. Affiliated or Adopting Employer.
  - 1.13 "ERISA" means the Employee Retirement Income Security Act of 1974, as amended from time to time.
  - 1.14 "Insurance Contract" means any contract issued by an Insurer underwriting a Benefit.
  - 1.15 "Insurer" means any insurance company that underwrites a Benefit under this Plan.
- 1,16 "Participant" means any Eligible Employee who becomes a Participant pursuant to Section 2.2 and has not for any reason become ineligible to participate further in the Plan.
  - 1.17 "Plan" means this instrument, including all amendments thereto.
- 1.18 "Plan Year" means the 12-month period beginning January 1st and ending December 31st. The Plan Year shall be the coverage period for the Benefits provided for under this Plan. In the event a Participant commences participation during a Plan Year, then the initial coverage period shall be that portion of the Plan Year commencing on such Participant's date of entry and ending on the last day of such Plan Year.
  - 1.19 "Premium Expenses" or "Premiums" mean the Participant's cost for the Benefits described in Section 4.1.
- 1.20 "Salary Redirection" means the contributions made by the Employer on behalf of Participants pursuant to Section 3.1. These contributions shall be converted to Cafeteria Plan Benefit Dollars and allocated to the funds or accounts established under the Plan pursuant to the Participants' elections made under Article V.
- 1.21 "Salary Redirection Agreement" means an agreement which is deemed to be entered into between the Participant and the Employer under which the Participant agrees to reduce his Compensation or to forego all or part of the increases in such Compensation and to have such amounts contributed by the Employer to the Plan on the Participant's behalf. The Salary Redirection Agreement shall apply only to Compensation that has not been actually or constructively received by the Participant as of the date of the agreement (after taking this Plan and Code Section 125 into account) and, subsequently does not become currently available to the Participant.
  - 1.22 "Spouse" means spouse as determined under Federal law.

## ARTICLE II PARTICIPATION

#### 2.1 ELIGIBILITY

Any Eligible Employee shall be eligible to participate hereunder as of the date he satisfies the eligibility conditions for the Employer's group medical plan, the provisions of which are specifically incorporated herein by reference. However, any Eligible Employee who was a Participant in the Plan on the effective date of this amendment shall continue to be eligible to participate in the Plan.

#### 2.2 EFFECTIVE DATE OF PARTICIPATION

An Eligible Employee shall become a Participant effective as of the entry date under the Employer's group medical plan, the provisions of which are specifically incorporated herein by reference, unless such Employee elects, during the Election Period, not to participate in the Plan.

#### 2.3 TERMINATION OF PARTICIPATION

A Participant shall no longer participate in this Plan upon the occurrence of any of the following events:

(a) **Termination of employment.** The Participant's termination of employment, subject to the provisions of Section 2.4;

- (b) Death. The Participant's death; or
- (c) Termination of the plan. The termination of this Plan, subject to the provisions of Section 8.2.

#### 2.4 TERMINATION OF EMPLOYMENT

If a Participant's employment with the Employer is terminated for any reason other than death, his participation in the Benefit Options provided under Section 4.1 shall cease, subject to the Participant's right to continue coverage under any Insurance Contract for which premiums have already been paid.

#### **ARTICLE III**

#### CONTRIBUTIONS TO THE PLAN

#### 3.1 SALARY REDIRECTION

Benefits under the Plan shall be financed by Salary Redirections sufficient to support Benefits that a Participant has elected hereunder and to pay the Participant's Premium Expenses. A Participant's salary shall be automatically reduced unless the Participant elects, during the Election Period, not to participate in the Plan. For new Participants, the Salary Redirection Agreement shall only be applicable from the first day of the pay period following the Employee's entry date up to and including the last day of the Plan Year.

Any Salary Redirection shall be determined prior to the beginning of a Plan Year (subject to initial elections pursuant to Section 5.1) and prior to the end of the Election Period and shall be irrevocable for such Plan Year. However, a Participant may revoke a Benefit election or a Salary Redirection Agreement after the Plan Year has commenced and make a new election with respect to the remainder of the Plan Year, if both the revocation and the new election are on account of and consistent with a change in status and such other permitted events as determined under Article V of the Plan and consistent with the rules and regulations of the Department of the Treasury. Salary Redirection amounts shall be contributed on a pro rata basis for each pay period during the Plan Year. All individual Salary Redirection Agreements are deemed to be part of this Plan and incorporated by reference hereunder.

#### 3.2 APPLICATION OF CONTRIBUTIONS

As soon as reasonably practical after each payroll period, the Employer shall apply the Salary Redirection to provide the Benefits elected by the affected Participants.

#### 3.3 PERIODIC CONTRIBUTIONS

Notwithstanding the requirement provided above and in other Articles of this Plan that Salary Redirections be contributed to the Plan by the Employer on behalf of an Employee on a level and pro rata basis for each payroll period, the Employer and Administrator may implement a procedure in which Salary Redirections are contributed throughout the Plan Year on a periodic basis that is not pro rata for each payroll period.

#### ARTICLE IV

#### **BENEFITS**

#### 4.1 BENEFIT OPTIONS

Each Participant may elect any one or more of the following optional Benefits:

- (1) Health Insurance Benefit
- (2) Dental Insurance Benefit
- (3) Vision Insurance Benefit
- (4) Other Insurance Benefit
- (5) Health Savings Account Benefit

#### 4.2 HEALTH INSURANCE BENEFIT

- (a) Coverage for Participant and Dependents. Each Participant may elect to be covered under a health Insurance Contract for the Participant, his or her Spouse, and his or her Dependents.
- (b) **Employer selects contracts.** The Employer may select suitable health Insurance Contracts for use in providing this health insurance benefit, which policies will provide uniform benefits for all Participants electing this Benefit.
- (c) Contract incorporated by reference. The rights and conditions with respect to the benefits payable from such health Insurance Contract shall be determined therefrom, and such Insurance Contract shall be incorporated herein by reference.

#### 4.3 DENTAL INSURANCE BENEFIT

- (a) Coverage for Participant and/or Dependents. Each Participant may elect to be covered under the Employer's dental Insurance Contract. In addition, the Participant may elect either individual or family coverage under such Insurance Contract.
- (b) Employer selects contracts. The Employer may select suitable dental Insurance Contracts for use in providing this dental insurance benefit, which policies will provide uniform benefits for all Participants electing this
- (c) Contract incorporated by reference. The rights and conditions with respect to the benefits payable from such dental Insurance Contract shall be determined therefrom, and such dental Insurance Contract shall be incorporated herein by reference.

#### 4.4 VISION INSURANCE BENEFIT

Benefit.

- (a) Coverage for Participant and/or Dependents. Each Participant may elect to be covered under the Employer's vision Insurance Contract. In addition, the Participant may elect either individual or family coverage.
- (b) Employer selects contracts. The Employer may select suitable vision Insurance Contracts for use in providing this vision insurance benefit, which policies will provide uniform benefits for all Participants electing this Benefit.
- (c) Contract incorporated by reference. The rights and conditions with respect to the benefits payable from such vision Insurance Contract shall be determined therefrom, and such vision Insurance Contract shall be incorporated herein by reference.

#### 4.5 OTHER INSURANCE BENEFIT

- (a) Employer selects contracts. The Employer may select additional health or other policies allowed under Code Section 125 or allow the purchase of additional health or other policies by and for Participants, which policies will provide uniform benefits for all Participants electing this Benefit.
- (b) Contract incorporated by reference. The rights and conditions with respect to the benefits payable from any additional Insurance Contract shall be determined therefrom, and such Insurance Contract shall be incorporated herein by reference.

#### 4.6 HEALTH SAVINGS ACCOUNT BENEFIT

Each Participant may elect to have a portion of his Salary Redirections contributed to a Health Savings Account, as defined in Code Section 223. The amounts contributed shall be subject to the terms of the Health Savings Account as established.

#### 4.7 NONDISCRIMINATION REQUIREMENTS

- (a) Intent to be nondiscriminatory. It is the intent of this Plan to provide benefits to a classification of employees which the Secretary of the Treasury finds not to be discriminatory in favor of the group in whose favor discrimination may not occur under Code Section 125.
- (b) Adjustment to avoid test failure. If the Administrator deems it necessary to avoid discrimination or possible taxation to a group of employees in whose favor discrimination may not occur in violation of Code Section 125, it may, but shall not be required to, reduce contributions or non-taxable Benefits in order to assure compliance with the Code and regulations. Any act taken by the Administrator shall be carried out in a uniform and nondiscriminatory manner. With respect to any affected Participant who has had Benefits reduced pursuant to this Section, the reduction shall be made proportionately among insured Benefits.

#### ARTICLE V PARTICIPANT ELECTIONS

#### 5.1 INITIAL ELECTIONS

An Employee who meets the eligibility requirements of Section 2.1 on the first day of, or during, a Plan Year may elect not to participate in this Plan for all or the remainder of such Plan Year, provided he elects to do so on or before his effective date of participation pursuant to Section 2.2.

#### 5.2 SUBSEQUENT ANNUAL ELECTIONS

During the Election Period prior to each subsequent Plan Year, each Participant shall be given the opportunity to elect not to participate in the Plan. With regard to subsequent annual elections, the following options shall apply:

- (a) A Participant or Employee who elected not to participate may elect to participate for the next Plan Year.
- (b) A Participant may terminate his participation in the Plan by notifying the Administrator in writing
- during the Election Period that he does not want to participate in the Plan for the next Plan Year;
- (c) An Employee who elects not to participate for the Plan Year following the Election Period will have to wait until the next Election Period before again electing to participate in the Plan, except as provided for in Section 5.4.

#### 5.3 FAILURE TO ELECT

With regard to Benefits available under the Plan for which Premium Expenses apply, any Participant who fails to complete a new benefit election form pursuant to Section 5.2 by the end of the applicable Election Period shall be deemed to have made the same Benefit elections as are then in effect for the current Plan Year. The Participant shall also be deemed to have elected Salary Redirection in an amount necessary to purchase such Benefit options.

#### 5.4 CHANGE IN STATUS

(a) Change in status defined. Any Participant may change a Benefit election after the Plan Year (to which such election relates) has commenced and make new elections with respect to the remainder of such Plan Year if, under the facts and circumstances, the changes are necessitated by and are consistent with a change in status which is acceptable under rules and regulations adopted by the Department of the Treasury, the provisions of which are incorporated by reference. Notwithstanding anything herein to the contrary, if the rules and regulations conflict, then such rules and regulations shall control.

In general, a change in election is not consistent if the change in status is the Participant's divorce, annulment or

legal separation from a Spouse, the death of a Spouse or Dependent, or a Dependent ceasing to satisfy the eligibility requirements for coverage, and the Participant's election under the Plan is to cancel accident or health insurance coverage for any individual other than the one involved in such event. In addition, if the Participant, Spouse or Dependent gains or loses eligibility for coverage, then a Participant's election under the Plan to cease or decrease coverage for that individual under the Plan corresponds with that change in status only if coverage for that individual becomes applicable or is increased under the family member plan.

Regardless of the consistency requirement, if the individual, the individual's Spouse, or Dependent becomes eligible for continuation coverage under the Employer's group health plan as provided in Code Section 4980B or any similar state law, then the individual may elect to increase payments under this Plan in order to pay for the continuation coverage. However, this does not apply for COBRA eligibility due to divorce, annulment or legal separation.

Any new election shall be effective at such time as the Administrator shall prescribe, but not earlier than the first

pay period beginning after the election form is completed and returned to the Administrator. For the purposes of this subsection, a change in status shall only include the following events or other events permitted by Treasury regulations:

- (1) Legal Marital Status: events that change a Participant's legal marital status, including marriage, divorce, death of a Spouse, legal separation or annulment;
- (2) Number of Dependents: Events that change a Participant's number of Dependents, including birth, adoption, placement for adoption, or death of a Dependent;
- (3) Employment Status: Any of the following events that change the employment status of the Participant, Spouse, or Dependent: termination or commencement of employment, a strike or lockout, commencement or return from an unpaid leave of absence, or a change in worksite. In addition, if the eligibility conditions of this Plan or other employee benefit plan of the Employer of the Participant, Spouse, or Dependent depend on the employment status of that individual and there is a change in that individual's employment status with the consequence that the individual becomes (or ceases to be) eligible under the plan, then that change constitutes a change in employment under this subsection;
- (4) Dependent satisfies or ceases to satisfy the eligibility requirements: An event that causes the Participant's Dependent to satisfy or cease to satisfy the requirements for coverage due to attainment of age, student status, or any similar circumstance; and
- (5) Residency: A change in the place of residence of the Participant, Spouse or Dependent, that would lead to a change in status (such as a loss of HMO coverage).

Notwithstanding anything in this Section to the contrary, the gain of eligibility or change in eligibility of a child, as allowed under Code Sections 105(b) and 106, and guidance thereunder, shall qualify as a change in status.

- (b) Special enrollment rights. Notwithstanding subsection (a), the Participants may change an election for group health coverage during a Plan Year and make a new election that corresponds with the special enrollment rights provided in Code Section 9801(f), including those authorized under the provisions of the Children's Health Insurance Program Reauthorization Act of 2009 (SCHIP); provided that such Participant meets the sixty (60) day notice requirement imposed by Code Section 9801(f) (or such longer period as may be permitted by the Plan and communicated to Participants). Such change shall take place on a prospective basis, unless otherwise required by Code Section 9801(f) to be retroactive.
- (c) Qualified Medical Support Order. Notwithstanding subsection (a), in the event of a judgment, decree, or order (including approval of a property settlement) ("order") resulting from a divorce, legal separation, annulment, or change in legal custody which requires accident or health coverage for a Participant's child (including a foster child who is a Dependent of the Participant):
  - (1) The Plan may change an election to provide coverage for the child if the order requires coverage under the Participant's plan; or
  - (2) The Participant shall be permitted to change an election to cancel coverage for the child if the order requires the former Spouse to provide coverage for such child, under that individual's plan and such coverage is actually provided.
  - (d) Medicare or Medicaid. Notwithstanding subsection (a), a Participant may change elections to

accident or health coverage for the Participant or the Participant's Spouse or Dependent if the Participant or the Participant's Spouse or Dependent is enrolled in the accident or health coverage of the Employer and becomes entitled to coverage (i.e., enrolled) under Part A or Part B of the Title XVIII of the Social Security Act (Medicare) or Title XIX of the Social Security Act (Medicaid), other than coverage consisting solely of benefits under Section 1928 of the Social Security Act (the program for distribution of pediatric vaccines). If the Participant or the Participant's Spouse or

Dependent who has been entitled to Medicaid or Medicare coverage loses eligibility, that individual may prospectively elect coverage under the Plan if a benefit package option under the Plan provides similar coverage.

(e) Cost increase or decrease. If the cost of a Benefit provided under the Plan increases or decreases during a Plan Year, then the Plan shall automatically increase or decrease, as the case may be, the Salary Redirections of all affected Participants for such Benefit. Alternatively, if the cost of a benefit package option increases significantly, the Administrator shall permit the affected Participants to either make corresponding changes in their payments or revoke their elections and, in lieu thereof, receive on a prospective basis coverage under another benefit package option with similar coverage, or drop coverage prospectively if there is no benefit package option with similar coverage.

A cost increase or decrease refers to an increase or decrease in the amount of elective contributions under the Plan, whether resulting from an action taken by the Participants or an action taken by the Employer.

- (f) Loss of coverage. If the coverage under a Benefit is significantly curtailed or ceases during a Plan Year, affected Participants may revoke their elections of such Benefit and, in lieu thereof, elect to receive on a prospective basis coverage under another plan with similar coverage, or drop coverage prospectively if no similar coverage is offered.
- (g) Addition of a new benefit. If, during the period of coverage, a new benefit package option or other coverage option is added, an existing benefit package option is significantly improved, or an existing benefit package option or other coverage option is eliminated, then the affected Participants may elect the newly-added option, or elect another option if an option has been eliminated properties and make corresponding election shanges with respect to

option or other coverage option is eliminated, then the affected Participants may elect the newly-added option, or elect another option if an option has been eliminated prospectively and make corresponding election changes with respect to other benefit package options providing similar coverage. In addition, those Eligible Employees who are not participating in the Plan may opt to become Participants and elect the new or newly improved benefit package option.

- (h) Loss of coverage under certain other plans. A Participant may make a prospective election change to add group health coverage for the Participant, the Participant's Spouse or Dependent if such individual loses group health coverage sponsored by a governmental or educational institution, including a state children's health insurance program under the Social Security Act, the Indian Health Service or a health program offered by an Indian tribal government, a state health benefits risk pool, or a foreign government group health plan.
- (i) Change of coverage due to change under certain other plans. A Participant may make a prospective election change that is on account of and corresponds with a change made under the plan of a Spouse's, former Spouse's or Dependent's employer if (1) the cafeteria plan or other benefits plan of the Spouse's, former Spouse's or Dependent's employer permits its participants to make a change; or (2) the cafeteria plan permits participants to make an election for a period of coverage that is different from the period of coverage under the cafeteria plan of a Spouse's, former Spouse's or Dependent's employer.
- (j) Health Savings Account changes. With regard to the Health Savings Account Benefit specified in Section 4.6, a Participant who has elected to make elective contributions under such arrangement may modify or revoke the election prospectively, provided such change is consistent with Code Section 223 and the Treasury regulations thereunder.
- (k) Changes due to reduction in hours or enrollment in an Exchange Plan. A Participant may prospectively revoke coverage under the group health plan (that is not a health Flexible Spending Account) which provides minimum essential coverage (as defined in Code §5000A(f)(1)) provided the following conditions are met:

Conditions for revocation due to reduction in hours of service:

- (1) The Participant has been reasonably expected to average at least 30 hours of service per week and there is a change in that Participant's status so that the Participant will reasonably be expected to average less than 30 hours of service per week after the change, even if that reduction does not result in the Participant ceasing to be eligible under the group health plan; and
- (2) The revocation of coverage under the group health plan corresponds to the intended enrollment of the Participant, and any related individuals who cease coverage due to the revocation, in another plan that provides minimum essential coverage with the new coverage effective no later than the first day of the second month following the month that includes the date the original coverage is revoked.

The Administrator may rely on the reasonable representation of the Participant who is reasonably expected to have an average of less than 30 hours of service per week for future periods that the Participant and related individuals have enrolled or intend to enroll in another plan that provides minimum essential coverage for new coverage that is effective no later than the first day of the second month following the month that includes the date the original coverage is revoked.

Conditions for revocation due to enrollment in a Qualified Health Plan:

- (1) The Participant is eligible for a Special Enrollment Period to enroll in a Qualified Health Plan through a Marketplace (federal or state exchange) pursuant to guidance issued by the Department of Health and Human Services and any other applicable guidance, or the Participant seeks to enroll in a Qualified Health Plan through a Marketplace during the Marketplace's annual open enrollment period; and
- (2) The revocation of the election of coverage under the group health plan corresponds to the intended enrollment of the Participant and any related individuals who cease coverage due to the revocation in a Qualified Health Plan through a Marketplace for new coverage that is effective beginning no later than the day immediately following the last day of the original coverage that is revoked.

The Administrator may rely on the reasonable representation of a Participant who has an enrollment opportunity for a Qualified Health Plan through a Marketplace that the Participant and related individuals have enrolled or intend to enroll in a Qualified Health Plan for new coverage that is effective beginning no later than the day immediately following the last day of the original coverage that is revoked.

#### ARTICLE VI BENEFITS AND RIGHTS

#### 6.1 CLAIM FOR BENEFITS

(a) Insurance claims. Any claim for Benefits underwritten by Insurance Contract(s) shall be made to the Insurer. If the Insurer denies any claim, the Participant or beneficiary shall follow the Insurer's claims review procedure.

#### ARTICLE VII ADMINISTRATION

#### 7.1 PLAN ADMINISTRATION

The Employer shall be the Administrator, unless the Employer elects otherwise. The Employer may appoint any person, including, but not limited to, the Employees of the Employer, to perform the duties of the Administrator. Any person so appointed shall signify acceptance by filing acceptance in writing (or such other form as acceptable to both parties) with the Employer. Upon the resignation or removal of any individual performing the duties of the Administrator, the Employer may designate a successor.

If the Employer elects, the Employer shall appoint one or more Administrators. Any person, including, but not limited to, the Employees of the Employer, shall be eligible to serve as an Administrator. Any person so appointed shall signify acceptance by filing acceptance in writing (or such other form as acceptable to both parties) with the Employer. An Administrator may resign by delivering a resignation in writing (or such other form as acceptable to both parties) to the Employer or be removed by the Employer by delivery of notice of removal (in writing or such other form as acceptable to both parties), to take effect at a date specified therein, or upon delivery to the Administrator if no date is specified. The Employer shall be empowered to appoint and remove the Administrator from time to time as it deems necessary for the proper administration of the Plan to ensure that the Plan is being operated for the exclusive benefit of the Employees entitled to participate in the Plan in accordance with the terms of the Plan and the Code.

The operation of the Plan shall be under the supervision of the Administrator. It shall be a principal duty of the Administrator to see that the Plan is carried out in accordance with its terms, and for the exclusive benefit of Employees entitled to participate in the Plan. The Administrator shall have full power and discretion to administer the Plan in all of its details and determine all questions arising in connection with the administration, interpretation, and application of the Plan. The Administrator may establish procedures, correct any defect, supply any information, or reconciles any inconsistency in such manner and to such extent as shall be deemed necessary or advisable to carry out the purpose of the Plan. The Administrator shall have all powers necessary or appropriate to accomplish the Administrator's duties under the Plan. The Administrator shall be charged with the duties of the general administration of the Plan as set forth under the Plan, including, but not limited to, in addition to all other powers provided by this Plan:

- (a) To make and enforce such procedures, rules and regulations as the Administrator deems necessary or proper for the efficient administration of the Plan;
- (b) To interpret the provisions of the Plan, the Administrator's interpretations thereof in good faith to be final and conclusive on all persons claiming benefits by operation of the Plan;
- (c) To decide all questions concerning the Plan and the eligibility of any person to participate in the Plan and to receive benefits provided by operation of the Plan;
- (d) To reject elections or to limit contributions or Benefits for certain highly compensated participants if it deems such to be desirable in order to avoid discrimination under the Plan in violation of applicable provisions of the Code;
- (e) To provide Employees with a reasonable notification of their benefits available by operation of the Plan and to assist any Participant regarding the Participant's rights, benefits or elections under the Plan;
- (f) To keep and maintain the Plan documents and all other records pertaining to and necessary for the administration of the Plan;
- (g) To appoint such agents, counsel, accountants, consultants, and other persons or entities as may be required to assist in administering the Plan.

Any procedure, discretionary act, interpretation or construction taken by the Administrator shall be done in a nondiscriminatory manner based upon uniform principles consistently applied and shall be consistent with the intent that the Plan shall continue to comply with the terms of Code Section 125 and the Treasury regulations thereunder.

#### 7.2 EXAMINATION OF RECORDS

The Administrator shall make available to each Participant, Eligible Employee and any other Employee of the Employer such records as pertain to their interest under the Plan for examination at reasonable times during normal business hours.

#### 7.3 PAYMENT OF EXPENSES

Any reasonable administrative expenses shall be paid by the Employer unless the Employer determines that administrative costs shall be borne by the Participants under the Plan or by any Trust Fund which may be established hereunder. The Administrator may impose reasonable conditions for payments, provided that such conditions shall not discriminate in favor of highly compensated employees.

#### 7.4 INSURANCE CONTROL CLAUSE

In the event of a conflict between the terms of this Plan and the terms of an Insurance Contract of an independent third party Insurer whose product is then being used in conjunction with this Plan, the terms of the Insurance Contract shall control as to those Participants receiving coverage under such Insurance Contract. For this purpose, the Insurance Contract shall control in defining the persons eligible for insurance, the dates of their eligibility, the conditions which must be satisfied to become insured, if any, the benefits Participants are entitled to and the circumstances under which insurance terminates.

#### 7.5 INDEMNIFICATION OF ADMINISTRATOR

The Employer agrees to indemnify and to defend to the fullest extent permitted by law any Employee serving as the Administrator or as a member of a committee designated as Administrator (including any Employee or former Employee who previously served as Administrator or as a member of such committee) against all liabilities, damages, costs and expenses (including attorney's fees and amounts paid in settlement of any claims approved by the Employer) occasioned by any act or omission to act in connection with the Plan, if such act or omission is in good faith.

#### ARTICLE VIII AMENDMENT OR TERMINATION OF PLAN

#### 8.1 AMENDMENT

The Employer, at any time or from time to time, may amend any or all of the provisions of the Plan without the consent of any Employee or Participant. No amendment shall have the effect of modifying any benefit election of any Participant in effect at the time of such amendment, unless such amendment is made to comply with Federal, state or local laws, statutes or regulations.

#### 8.2 TERMINATION

The Employer reserves the right to terminate this Plan, in whole or in part, at any time. In the event the Plan is terminated, no further contributions shall be made. Benefits under any Insurance Contract shall be paid in accordance with the terms of the Insurance Contract.

#### ARTICLE IX MISCELLANEOUS

#### 9.1 PLAN INTERPRETATION

All provisions of this Plan shall be interpreted and applied in a uniform, nondiscriminatory manner. This Plan shall be read in its entirety and not severed except as provided in Section 9.12.

#### 9.2 GENDER AND NUMBER

Wherever any words are used herein in the masculine, feminine or neuter gender, they shall be construed as though they were also used in another gender in all cases where they would so apply, and whenever any words are used herein in the singular or plural form, they shall be construed as though they were also used in the other form in all cases where they would so apply.

#### 9.3 WRITTEN DOCUMENT

This Plan, in conjunction with any separate written document which may be required by law, is intended to satisfy the written Plan requirement of Code Section 125 and any Treasury regulations thereunder relating to cafeteria plans.

#### 9.4 EXCLUSIVE BENEFIT

This Plan shall be maintained for the exclusive benefit of the Employees who participate in the Plan.

#### 9.5 PARTICIPANT'S RIGHTS

This Plan shall not be deemed to constitute an employment contract between the Employer and any Participant or to be a consideration or an inducement for the employment of any Participant or Employee. Nothing contained in this Plan shall be deemed to give any Participant or Employee the right to be retained in the service of the Employer or to interfere with the right of the Employer to discharge any Participant or Employee at any time regardless of the effect which such discharge shall have upon him as a Participant of this Plan.

#### 9.6 ACTION BY THE EMPLOYER

Whenever the Employer under the terms of the Plan is permitted or required to do or perform any act or matter or thing, it shall be done and performed by a person duly authorized by its legally constituted authority.

#### 9.7 EMPLOYER'S PROTECTIVE CLAUSES

- (a) Insurance purchase. Upon the failure of either the Participant or the Employer to obtain the insurance contemplated by this Plan (whether as a result of negligence, gross neglect or otherwise), the Participant's Benefits shall be limited to the insurance premium(s), if any, that remained unpaid for the period in question and the actual insurance proceeds, if any, received by the Employer or the Participant as a result of the Participant's claim.
  - (b) Validity of insurance contract. The Employer shall not be responsible for the validity of any Insurance Contract issued hereunder or for the failure on the part of the Insurer to make payments provided for under any Insurance Contract. Once insurance is applied for or obtained, the Employer shall not be liable for any loss which may result from the failure to pay Premiums to the extent Premium notices are not received by the Employer.

#### 9.8 NO GUARANTEE OF TAX CONSEQUENCES

Neither the Administrator nor the Employer makes any commitment or guarantee that any amounts paid to or for the benefit of a Participant under the Plan will be excludable from the Participant's gross income for federal or state income tax purposes, or that any other federal or state tax treatment will apply to or be available to any Participant. It shall be the obligation of each Participant to determine whether each payment under the Plan is excludable from the Participant's gross income for federal and state income tax purposes, and to notify the Employer if the Participant has reason to believe that any such payment is not so excludable. Notwithstanding the foregoing, the rights of Participants under this Plan shall be legally enforceable.

#### 9.9 INDEMNIFICATION OF EMPLOYER BY PARTICIPANTS

If any Participant receives one or more payments or reimbursements under the Plan that are not for a permitted Benefit, such Participant shall indemnify and reimburse the Employer for any liability it may incur for failure to withhold federal or state income tax or Social Security tax from such payments or reimbursements. However, such indemnification and reimbursement shall not exceed the amount of additional federal and state income tax (plus any penalties) that the Participant would have owed if the payments or reimbursements had been made to the Participant as regular cash compensation, plus the Participant's share of any Social Security tax that would have been paid on such compensation, less any such additional income and Social Security tax actually paid by the Participant.

#### 9.10 FUNDING

Unless otherwise required by law, contributions to the Plan need not be placed in trust or dedicated to a specific Benefit, but may instead be considered general assets of the Employer until the Premium Expense required under the Plan has been paid. Furthermore, and unless otherwise required by law, nothing herein shall be construed to require the Employer or the Administrator to maintain any fund or segregate any amount for the benefit of any Participant, and no Participant or other person shall have any claim against, right to, or security or other interest in, any fund, account or asset of the Employer from which any payment under the Plan may be made.

#### 9.11 GOVERNING LAW

This Plan is governed by the Code and the Treasury regulations issued thereunder (as they might be amended from time to time). In no event shall the Employer guarantee the favorable tax treatment sought by this Plan. To the extent not preempted by Federal law, the provisions of this Plan shall be construed, enforced and administered according to the laws of the State of Illinois.

#### 9.12 SEVERABILITY

If any provision of the Plan is held invalid or unenforceable, its invalidity or unenforceability shall not affect any other provisions of the Plan, and the Plan shall be construed and enforced as if such provision had not been included herein.

#### 9.13 CAPTIONS

The captions contained herein are inserted only as a matter of convenience and for reference, and in no way define, limit, enlarge or describe the scope or intent of the Plan, nor in any way shall affect the Plan or the construction of any provision thereof.

#### 9.14 CONTINUATION OF COVERAGE (COBRA)

Notwithstanding anything in the Plan to the contrary, in the event any benefit under this Plan subject to the continuation coverage requirement of Code Section 4980B becomes unavailable, each Participant will be entitled to continuation coverage as prescribed in Code Section 4980B, and related regulations. This Section shall only apply if the Employer employs at least twenty (20) employees on more than 50% of its typical business days in the previous calendar year.

#### 9.15 FAMILY AND MEDICAL LEAVE ACT (FMLA)

Notwithstanding anything in the Plan to the contrary, in the event any benefit under this Plan becomes subject to the requirements of the Family and Medical Leave Act and regulations thereunder, this Plan shall be operated in accordance with Regulation 1.125-3.

## 9.16 UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT (USERRA)

Act (USERRA) and the regulations thereunder.

Notwithstanding any provision of this Plan to the contrary, contributions, benefits and service credit with respect to qualified military service shall be provided in accordance with the Uniform Services Employment And Reemployment Rights

IN WITNESS WHEREOF, this Plan document is hereby exec	cuted this day of
	Warrenville Public Library District
	ByEMPLOYER

SUMMARY PLAN DESCRIPTION

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X SUMMARY

#### INTRODUCTION

We have amended the "Premium Payment Plan" that we previously established for you and other eligible employees. Under this Plan, you will be able to pay for insurance coverage that we make available to you with a portion of your pay before Federal income or social security taxes are withheld.

Read this Summary Plan Description carefully so that you understand the provisions of our amended Plan and the benefits you will receive. This SPD describes the Plan's benefits and obligations as contained in the legal Plan document, which governs the operation of the Plan. The Plan document is written in much more technical and precise language. If the non-technical language in this SPD and the technical, legal language of the Plan document conflict, the Plan document always governs. Also, if there is a conflict between an insurance contract and either the Plan document or this Summary Plan Description, the insurance contract will control. If you wish to receive a copy of the legal Plan document, please contact the Administrator.

This SPD describes the current provisions of the Plan which are designed to comply with applicable legal requirements. The Plan is subject to federal laws, such as the Internal Revenue Code and other federal and state laws which may affect your rights. The provisions of the Plan are subject to revision due to a change in laws or due to pronouncements by the Internal Revenue Service (IRS) or other federal agencies. We may also amend or terminate this Plan. If the provisions of the Plan that are described in this SPD change, we will notify you.

We have attempted to answer most of the questions you may have regarding your benefits in the Plan. If this SPD does not answer all of your questions, please contact the Administrator (or other plan representative). The name and address of the Administrator can be found in the Article of this SPD entitled "General Information About the Plan."

#### I ELIGIBILITY

#### 1. When can I become a participant in the Plan?

Before you become a Plan member (referred to in this Summary Plan Description as a "Participant"), there are certain rules which you must satisfy. First, you must meet the eligibility requirements and be an active employee. After that, the next step is to actually join the Plan on the "entry date" that we have established for all employees. The "entry date" is defined in Question 3 below.

#### 2. What are the eligibility requirements for our Plan?

You will be eligible to join the Plan once you have satisfied the conditions for coverage under our group medical plan. Of course, if you were already a participant before this amendment, you will remain a participant.

#### 3. When is my entry date?

You can join the Plan on the same day you can enter our group medical plan.

#### 4. What must I do to enroll in the Plan?

You will automatically become a Participant in this Plan once you have satisfied the preceding requirements. If you do not want any or all of the benefits offered under the Plan, you may elect not to receive such benefits in accordance with the procedure as explained in this Summary.

#### II OPERATION

#### 1. How does this Plan operate?

Before the start of each Plan Year, you will be able to elect not to receive any or all of the benefits under the Plan. If you do not make such an election, then some of your upcoming pay will be paid to the Plan. The money will be used to pay for insurance coverage or contributed to a Health Savings Account for you. The portion of your pay that is contributed to pay the premium expense or contributed to a Health Savings Account is not subject to Federal income or Social Security taxes. In other words, the plan allows you to use tax-free dollars to pay for insurance coverage which you normally pay for with out-of-pocket, taxable dollars, or contribute to a Health Savings Account. (See the Article entitled "General Information About Our Plan" for the definition of "Plan Year.")

#### III CONTRIBUTIONS

#### 1. How much of my pay may the Employer redirect?

Each year, we will automatically contribute on your behalf enough of your compensation to pay for the insurance coverage provided unless you elect not to receive any or all of such coverage. These amounts will be deducted from your pay over the course of the year.

#### 2. What happens to contributions made to the Plan?

Each Plan Year, contributions will automatically be used to pay the premium expenses for the insurance coverage you have selected and contributions to a Health Savings Account unless you elect not to participate in the Plan.

#### 3. When must I decide what insurance coverage I want?

If you are already covered by any of the insured benefits offered by this Plan, you will automatically become a Participant to the extent of the premium for such insurance unless you elect, during the election period (defined below), not to participate in the Plan.

#### 4. When is the election period for our Plan?

You will make your initial election on or before your entry date. (You should review Section I on Eligibility to better understand the eligibility requirements and entry date.) Then, for each following Plan Year, the election period is established by the Administrator and applied uniformly to all Participants. It will normally be a period of time prior to the beginning of each Plan Year. The Administrator will inform you each year about the election period. (See the Article entitled "General Information About Our Plan" for the definition of Plan Year.)

#### 5. May I change my elections during the Plan Year?

Generally, you cannot change the elections you have made after the beginning of the Plan Year. However, there are certain limited situations when you can change your elections. You are permitted to change elections if you have a "change in status" and you make an election change that is consistent with the change in status. Currently, Federal law considers the following events to be a change in status:

- -- Marriage, divorce, death of a spouse, legal separation or annulment;
- -- Change in the number of dependents, including birth, adoption, placement for adoption, or death of a dependent;
- -- Any of the following events for you, your spouse or dependent: termination or commencement of employment, a strike or lockout, commencement or return from an unpaid leave of absence, a change in worksite, or any other change in employment status that affects eligibility for benefits;
- -- One of your dependents satisfies or ceases to satisfy the requirements for coverage due to change in age, student status, or any similar circumstance; and
- -- A change in the place of residence of you, your spouse or dependent that would lead to a change in status, such as moving out of a coverage area for insurance.

However, with respect to the Health Savings Account, you may modify or revoke your elections without having to have a change in status.

There are detailed rules on when a change in election is deemed to be consistent with a change in status. In addition, there are laws that give you rights to change health coverage for you, your spouse, or your dependents. If you change coverage due to rights you have under the law, then you can make a corresponding change in your elections under the Plan. If any of these conditions apply to you, you should contact the Administrator.

If the cost of a benefit provided under the Plan increases or decreases during a Plan Year, then we will automatically increase or decrease, as the case may be, your salary redirection election. If the cost increases significantly, you will be permitted to either make corresponding changes in your payments or revoke your election and obtain coverage under another benefit package option with similar coverage, or revoke your election entirely.

If the coverage under a Benefit is significantly curtailed or ceases during a Plan Year, then you may revoke your elections and elect to receive on a prospective basis coverage under another plan with similar coverage. In addition, if we add a new coverage option or eliminate an existing option, you may elect the newly-added option (or elect another option if an option has been eliminated) and make corresponding election changes to other options providing similar coverage. If you are not a Participant, you may elect to join the Plan. There are also certain situations when you may be able to change your elections on account of a change under the plan of your spouse's, former spouse's or dependent's employer.

You may revoke your coverage under the employer's group health plan outside of our open enrollment period, if your employment status changes from working at least 30 hours per week to less than 30 hours. This is regardless of whether the reduction in hours has resulted in loss of eligibility. You must show intent to enroll in another health plan.

You may also revoke your coverage under our Employer sponsored group health plan if you are eligible to obtain coverage through the health exchanges.

#### 6. May I make new elections in future Plan Years?

Yes, you may. For each new Plan Year, you may change the elections that you previously made. You may also choose not to participate in the Plan for the upcoming Plan Year. If you do not make new elections during the election period before a new Plan Year begins, we will assume you want your elections for insured benefits only to remain the same and you will not be considered a Participant for the non-insured benefit options under the Plan for the upcoming Plan Year.

#### IV BENEFITS

#### 1. What insurance coverage may I purchase?

Under our Plan, you can purchase the following insurance coverage:

- -- Health care premiums under our insured group medical plan.
- -- Our dental insurance plan.
- -- Our vision insurance plan.
- -- Other insurance coverage that we may provide as follows:
  - Cancer Care Plan Select
  - Cancer with Plus Rider
  - Accident Advantage
  - Hospital Advantage.

Certain limits may apply on the amount of coverage that we obtain on your behalf. The insurance contracts will normally control.

The Administrator may terminate or modify Plan benefits at any time, subject to the provisions of any insurance contracts providing benefits described above. We will not be liable to you if an insurance company fails to provide any of the benefits described above. Also, your insurance will end when you leave employment, are no longer eligible under the terms of any insurance policies, or when insurance terminates.

Any benefits to be provided by insurance will be provided only after (1) you have provided the Administrator the necessary information to apply for insurance, and (2) the insurance is in effect for you.

If you cover your children up to age 26 under your insurance, you can pay for that coverage through the Plan.

#### 2. May I direct Plan contributions to my Health Savings Account?

Yes. Any monies that you do not apply toward available benefits can be contributed to your Health Savings Account, which enables you to pay for expenses which are not covered by our insured medical plan and save taxes at the same time. Please see your Plan Administrator for further details.

#### V BENEFIT PAYMENTS

#### 1. When will I receive benefit payments?

The amount of pay you contribute to the Plan will be used to pay the premiums for the insurance coverage that is available. The provisions of the insurance policies will control what benefits will be paid and when.

#### 2. Family and Medical Leave Act (FMLA)

If you take leave under the Family and Medical Leave Act, you may revoke or change your existing elections for health insurance. If your coverage in these benefits terminates, due to your revocation of the benefit while on leave or due to your non-payment of contributions, you will be permitted to reinstate coverage for the remaining part of the Plan Year upon your return.

If you continue your coverage during your unpaid leave, you may pre-pay for the coverage, you may pay for your coverage on an after-tax basis while you are on leave, or you and your Employer may arrange a schedule for you to "catch up" your payments when you return.

#### 3. What happens if I terminate employment?

If you terminate employment during the Plan Year, your right to benefits will be determined in the following manner:

- (a) Your Health Savings Account amounts will remain yours even after your termination of employment.
- (b) For health benefit coverage on termination of employment, please see the Article entitled "Continuation Coverage Rights Under COBRA."

#### 4. Will my Social Security benefits be affected?

Your Social Security benefits may be slightly reduced because when you receive tax-free benefits under our Plan, it reduces the amount of contributions that you make to the Federal Social Security system as well as our contribution to Social Security on your behalf.

#### VI HIGHLY COMPENSATED EMPLOYEES

#### 1. Do limitations apply to highly compensated employees?

Under the Internal Revenue Code, highly compensated employees generally are Participants who are shareholders or highly paid. You will be notified by the Administrator each Plan Year whether you are a highly compensated employee.

If you are within these categories, the amount of contributions and benefits for you may be limited so that the Plan as a whole does not unfairly favor those who are highly paid, their spouses or their dependents.

Plan experience will dictate whether contribution limitations on highly compensated employees will apply. You will be notified of these limitations if you are affected.

#### VII GENERAL INFORMATION ABOUT OUR PLAN

This Section contains certain general information which you may need to know about the Plan.

#### 1. General Plan Information

Warrenville Public Library District Premium Conversion Plan is the name of the Plan.

Your Employer has assigned Plan Number 501 to your Plan.

The provisions of your amended Plan become effective on January 1, 2017. Your Plan was originally effective on January 1, 1997.

Your Plan's records are maintained on a twelve-month period of time. This is known as the Plan Year. The Plan Year begins on January 1st and ends on December 31st.

#### 2. Employer Information

Your Employer's name, address, and identification number are:

Warrenville Public Library District 28 W 751 Stafford Place Warrenville, Illinois 60555 36-3035297

#### 3. Plan Administrator Information

The name, address and business telephone number of your Plan's Administrator are:

Warrenville Public Library District 28 W 751 Stafford Place Warrenville, Illinois 60555 630-393-1171

The Administrator keeps the records for the Plan and is responsible for the administration of the Plan. The Administrator will also answer any questions you may have about our Plan. You may contact the Administrator for any further information about the Plan.

#### 4. Service of Legal Process

The name and address of the Plan's agent for service of legal process are: Warrenville Public Library District 28 W 751 Stafford Place Warrenville, Illinois 60555

#### 5. Type of Administration

The type of Administration is Insurer Administration.

# VIII ADDITIONAL PLAN INFORMATION

#### 1. Insurance Procedures

Claims that are insured will be handled in accordance with procedures contained in the insurance policies. All other general requests should be directed to the Administrator of our Plan.

# IX CONTINUATION COVERAGE RIGHTS UNDER COBRA

Under federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), certain employees and their families covered under health benefits under this Plan will be entitled to the opportunity to elect a temporary extension of health coverage (called "COBRA continuation coverage") where coverage under the Plan would otherwise end. This notice is intended to inform Plan Participants and beneficiaries, in summary fashion, of their rights and obligations under the continuation coverage provisions of COBRA, as amended and reflected in final and proposed regulations published by the Department of the Treasury. This notice is intended to reflect the law and does not grant or take away any rights under the law.

The Plan Administrator or its designee is responsible for administering COBRA continuation coverage. Complete instructions on COBRA, as well as election forms and other information, will be provided by the Plan Administrator or its designee to Plan Participants who become Qualified Beneficiaries under COBRA. While the Plan itself is not a group health plan, it does provide health benefits. Whenever "Plan" is used in this section, it means any of the health benefits under this Plan.

#### 1. What is COBRA continuation coverage?

COBRA continuation coverage is the temporary extension of group health plan coverage that must be offered to certain Plan Participants and their eligible family members (called "Qualified Beneficiaries") at group rates. The right to COBRA continuation coverage is triggered by the occurrence of a life event that results in the loss of coverage under the terms of the Plan (the "Qualifying Event"). The coverage must be identical to the coverage that the Qualified Beneficiary had immediately before the Qualifying Event, or if the coverage has been changed, the coverage must be identical to the coverage provided to similarly situated active employees who have not experienced a Qualifying Event (in other words, similarly situated non-COBRA beneficiaries).

There may be other options available when you lose group health coverage. For example, you may be eligible to buy an individual plan through the Health Insurance Marketplace. By enrolling in coverage through the Marketplace, you may qualify for lower costs on your monthly premiums and lower out-of-pocket costs. Additionally, you may qualify for a 30-day special enrollment period for another group health plan for which you are eligible (such as a spouse's plan), even if that plan generally doesn't accept late enrollees.

#### 2. Who can become a Qualified Beneficiary?

In general, a Qualified Beneficiary can be:

- (a) Any individual who, on the day before a Qualifying Event, is covered under a Plan by virtue of being on that day either a covered Employee, the Spouse of a covered Employee, or a Dependent child of a covered Employee. If, however, an individual who otherwise qualifies as a Qualified Beneficiary is denied or not offered coverage under the Plan under circumstances in which the denial or failure to offer constitutes a violation of applicable law, then the individual will be considered to have had the coverage and will be considered a Qualified Beneficiary if that individual experiences a Qualifying Event.
- (b) Any child who is born to or placed for adoption with a covered Employee during a period of COBRA continuation coverage, and any individual who is covered by the Plan as an alternate recipient under a qualified medical support order. If, however, an individual who otherwise qualifies as a Qualified Beneficiary is denied or not offered coverage under the Plan under circumstances in which the denial or failure to offer constitutes a violation of applicable law, then the individual will be considered to have had the coverage and will be considered a Qualified Beneficiary if that individual experiences a Qualifying Event.

The term "covered Employee" includes any individual who is provided coverage under the Plan due to his or her performance of services for the employer sponsoring the Plan. However, this provision does not establish eligibility of these individuals. Eligibility for Plan coverage shall be determined in accordance with Plan Eligibility provisions.

An individual is not a Qualified Beneficiary if the individual's status as a covered Employee is attributable to a period in which the individual was a nonresident alien who received from the individual's Employer no earned income that constituted income from sources within the United States. If, on account of the preceding reason, an individual is not a Qualified Beneficiary, then a Spouse or Dependent child of the individual will also not be considered a Qualified Beneficiary by virtue of the relationship to the individual. A domestic partner is not a Qualified Beneficiary.

Each Qualified Beneficiary (including a child who is born to or placed for adoption with a covered Employee during a period of COBRA continuation coverage) must be offered the opportunity to make an independent election to receive COBRA continuation coverage.

#### 3. What is a Qualifying Event?

A Qualifying Event is any of the following if the Plan provided that the Plan participant would lose coverage (i.e., cease to be covered under the same terms and conditions as in effect immediately before the Qualifying Event) in the absence of COBRA continuation coverage:

- (a) The death of a covered Employee.
- (b) The termination (other than by reason of the Employee's gross misconduct), or reduction of hours, of a covered Employee's employment.
- (c) The divorce or legal separation of a covered Employee from the Employee's Spouse. If the Employee reduces or eliminates the Employee's Spouse's Plan coverage in anticipation of a divorce or legal separation, and a divorce or legal separation later occurs, then the divorce or legal separation may be considered a Qualifying Event even though the Spouse's coverage was reduced or eliminated before the divorce or legal separation.
- (d) A covered Employee's enrollment in any part of the Medicare program.
- (e) A Dependent child's ceasing to satisfy the Plan's requirements for a Dependent child (for example, attainment of the maximum age for dependency under the Plan).

If the Qualifying Event causes the covered Employee, or the covered Spouse or a Dependent child of the covered Employee, to cease to be covered under the Plan under the same terms and conditions as in effect immediately before the Qualifying Event, the persons losing such coverage become Qualified Beneficiaries under COBRA if all the other conditions of COBRA are also met. For example, any increase in contribution that must be paid by a covered Employee, or the Spouse, or a Dependent child of the covered Employee, for coverage under the Plan that results from the occurrence of one of the events listed above is a loss of coverage.

The taking of leave under the Family and Medical Leave Act of 1993, as amended ("FMLA") does not constitute a Qualifying Event. A Qualifying Event will occur, however, if an Employee does not return to employment at the end of the FMLA leave and all other COBRA continuation coverage conditions are present. If a Qualifying Event occurs, it occurs on the last day of FMLA leave and the applicable maximum coverage period is measured from this date (unless coverage is lost at a later date and the Plan provides for the extension of the required periods, in which case the maximum coverage date is measured from the date when the coverage is lost.) Note that the covered Employee and family members will be entitled to COBRA continuation coverage even if they failed to pay the employee portion of premiums for coverage under the Plan during the FMLA leave.

#### 4. What factors should be considered when determining to elect COBRA continuation coverage?

When considering options for health coverage, Qualified Beneficiaries should consider:

- Premiums: This plan can charge up to 102% of total plan premiums for COBRA coverage. Other options, like coverage on a spouse's plan or through the Marketplace, may be less expensive. Qualified Beneficiaries have special enrollment rights under federal law (HIPAA). They have the right to request special enrollment in another group health plan for which they are otherwise eligible (such as a plan sponsored by a spouse's employer) within 30 days after Plan coverage ends due to one of the Qualifying Events listed above.
- Provider Networks: If a Qualified Beneficiary is currently getting care or treatment for a condition, a change in health coverage
  may affect access to a particular health care provider. You may want to check to see if your current health care providers
  participate in a network in considering options for health coverage.
- <u>Drug Formularies</u>: For Qualified Beneficiaries taking medication, a change in health coverage may affect costs for medication –
  and in some cases, the medication may not be covered by another plan. Qualified beneficiaries should check to see if current
  medications are listed in drug formularies for other health coverage.
- Severance payments: If COBRA rights arise because the Employee has lost his job and there is a severance package available
  from the employer, the former employer may have offered to pay some or all of the Employee's COBRA payments for a period
  of time. This can affect the timing of coverage available in the Marketplace. In this scenario, the Employee may want to contact
  the Department of Labor at 1-866-444-3272 to discuss options.
- Medicare Eligibility: You should be aware of how COBRA coverage coordinates with Medicare eligibility. If you are eligible for Medicare at the time of the Qualifying Event, or if you will become eligible soon after the Qualifying Event, you should know that you have 8 months to enroll in Medicare after your employment –related health coverage ends. Electing COBRA coverage does not extend this 8-month period. For more information, see medicare.gov/sign-up-change-plan.

- Service Areas: If benefits under the Plan are limited to specific service or coverage areas, benefits may not be available to a Qualified Beneficiary who moves out of the area.
- Other Cost-Sharing: In addition to premiums or contributions for health coverage, the Plan requires participants to pay copayments, deductibles, coinsurance, or other amounts as benefits are used. Qualified beneficiaries should check to see what the cost-sharing requirements are for other health coverage options. For example, one option may have much lower monthly premiums, but a much higher deductible and higher copayments.

Are there other coverage options besides COBRA Continuation Coverage? Yes. Instead of enrolling in COBRA continuation coverage, there may be other coverage options for Qualified Beneficiaries through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as a spouse's plan) through what is called a "special enrollment period." Some of these options may cost less than COBRA continuation coverage. You can learn more about many of these options at www.healthcare.gov.

#### 5. What is the procedure for obtaining COBRA continuation coverage?

The Plan has conditioned the availability of COBRA continuation coverage upon the timely election of such coverage. An election is timely if it is made during the election period.

#### 6. What is the election period and how long must it last?

The election period is the time period within which the Qualified Beneficiary must elect COBRA continuation coverage under the Plan. The election period must begin no later than the date the Qualified Beneficiary would lose coverage on account of the Qualifying Event and ends 60 days after the later of the date the Qualified Beneficiary would lose coverage on account of the Qualifying Event or the date notice is provided to the Qualified Beneficiary of her or his right to elect COBRA continuation coverage. If coverage is not elected within the 60 day period, all rights to elect COBRA continuation coverage are forfeited.

Note: If a covered Employee who has been terminated or experienced a reduction of hours qualifies for a trade readjustment allowance or alternative trade adjustment assistance under a federal law called the Trade Act of 2002, as extended by the Trade Preferences Extension Act of 2015, and the employee and his or her covered dependents have not elected COBRA coverage within the normal election period, a second opportunity to elect COBRA coverage will be made available for themselves and certain family members, but only within a limited period of 60 days or less and only during the six months immediately after their group health plan coverage ended. Any person who qualifies or thinks that he or she and/or his or her family members may qualify for assistance under this special provision should contact the Plan Administrator or its designee for further information about the special second election period. If continuation coverage is elected under this extension, it will not become effective prior to the beginning of this special second election period.

# 7. Is a covered Employee or Qualified Beneficiary responsible for informing the Plan Administrator of the occurrence of a Qualifying Event?

The Plan will offer COBRA continuation coverage to Qualified Beneficiaries only after the Plan Administrator or its designee has been timely notified that a Qualifying Event has occurred. The Employer (if the Employer is not the Plan Administrator) will notify the Plan Administrator or its designee of the Qualifying Event within 30 days following the date coverage ends when the Qualifying Event is:

- (a) the end of employment or reduction of hours of employment,
- (b) death of the employee,
- (c) commencement of a proceeding in bankruptcy with respect to the Employer, or
- (d) entitlement of the employee to any part of Medicare.

#### IMPORTANT:

For the other Qualifying Events (divorce or legal separation of the employee and spouse or a dependent child's losing eligibility for coverage as a dependent child), you or someone on your behalf must notify the Plan Administrator or its designee in writing within 60 days after the Qualifying Event occurs, using the procedures specified below. If these procedures are not followed or if the notice is not provided in writing to the Plan Administrator or its designee during the 60-day notice period, any spouse or dependent child who loses coverage will not be offered the option to elect continuation coverage. You must send this notice to the Plan Administrator or its designee.

#### **NOTICE PROCEDURES:**

Any notice that you provide must be *in writing*. Oral notice, including notice by telephone, is not acceptable. You must mail, fax or hand-deliver your notice to the person, department or firm listed below, at the following address:

Warrenville Public Library District 28 W 751 Stafford Place Warrenville, Illinois 60555

If mailed, your notice must be postmarked no later than the last day of the required notice period. Any notice you provide must state:

- the name of the plan or plans under which you lost or are losing coverage,
- the name and address of the employee covered under the plan,
- the name(s) and address(es) of the Qualified Beneficiary(ies), and
- the Qualifying Event and the date it happened.

If the Qualifying Event is a divorce or legal separation, your notice must include a copy of the divorce decree or the legal separation agreement.

Be aware that there are other notice requirements in other contexts, for example, in order to qualify for a disability extension.

Once the Plan Administrator or its designee receives <u>timely notice</u> that a Qualifying Event has occurred, COBRA continuation coverage will be offered to each of the qualified beneficiaries. Each Qualified Beneficiary will have an independent right to elect COBRA continuation coverage. Covered employees may elect COBRA continuation coverage for their spouses, and parents may elect COBRA continuation coverage on behalf of their children. For each Qualified Beneficiary who elects COBRA continuation coverage, COBRA continuation coverage will begin on the date that plan coverage would otherwise have been lost. If you or your spouse or dependent children do not elect continuation coverage within the 60-day election period described above, the right to elect continuation coverage will be lost.

#### 8. Is a waiver before the end of the election period effective to end a Qualified Beneficiary's election rights?

If, during the election period, a Qualified Beneficiary waives COBRA continuation coverage, the waiver can be revoked at any time before the end of the election period. Revocation of the waiver is an election of COBRA continuation coverage. However, if a waiver is later revoked, coverage need not be provided retroactively (that is, from the date of the loss of coverage until the waiver is revoked). Waivers and revocations of waivers are considered made on the date they are sent to the Plan Administrator or its designee, as applicable.

## 9. Is COBRA coverage available if a Qualified Beneficiary has other group health plan coverage or Medicare?

Qualified Beneficiaries who are entitled to elect COBRA continuation coverage may do so even if they are covered under another group health plan or are entitled to Medicare benefits on or before the date on which COBRA is elected. However, a Qualified Beneficiary's COBRA coverage will terminate automatically if, after electing COBRA, he or she becomes entitled to Medicare or becomes covered under other group health plan coverage (but only after any applicable preexisting condition exclusions of that other plan have been exhausted or satisfied).

#### 10. When may a Qualified Beneficiary's COBRA continuation coverage be terminated?

During the election period, a Qualified Beneficiary may waive COBRA continuation coverage. Except for an interruption of coverage in connection with a waiver, COBRA continuation coverage that has been elected for a Qualified Beneficiary must extend for at least the period beginning on the date of the Qualifying Event and ending not before the earliest of the following dates:

- (a) The last day of the applicable maximum coverage period.
- (b) The first day for which Timely Payment is not made to the Plan with respect to the Qualified Beneficiary.
- (c) The date upon which the Employer ceases to provide any group health plan (including a successor plan) to any employee.
- (d) The date, after the date of the election, that the Qualified Beneficiary first becomes entitled to Medicare (either part A or part B, whichever occurs earlier).
- (e) In the case of a Qualified Beneficiary entitled to a disability extension, the later of:
  - (1) (i) 29 months after the date of the Qualifying Event, or (ii) the first day of the month that is more than 30 days after the date of a final determination under Title II or XVI of the Social Security Act that the disabled Qualified Beneficiary whose disability resulted in the Qualified Beneficiary's entitlement to the disability extension is no longer disabled, whichever is earlier; or
  - (2) the end of the maximum coverage period that applies to the Qualified Beneficiary without regard to the disability extension.

The Plan can terminate for cause the coverage of a Qualified Beneficiary on the same basis that the Plan terminates for cause the coverage of similarly situated non-COBRA beneficiaries, for example, for the submission of a fraudulent claim.

In the case of an individual who is not a Qualified Beneficiary and who is receiving coverage under the Plan solely because of the individual's relationship to a Qualified Beneficiary, if the Plan's obligation to make COBRA continuation coverage available to the Qualified Beneficiary ceases, the Plan is not obligated to make coverage available to the individual who is not a Qualified Beneficiary.

#### 11. What are the maximum coverage periods for COBRA continuation coverage?

The maximum coverage periods are based on the type of the Qualifying Event and the status of the Qualified Beneficiary, as shown below.

- (a) In the case of a Qualifying Event that is a termination of employment or reduction of hours of employment, the maximum coverage period ends 18 months after the Qualifying Event if there is not a disability extension and 29 months after the Qualifying Event if there is a disability extension.
- (b) In the case of a covered Employee's enrollment in the Medicare program before experiencing a Qualifying Event that is a termination of employment or reduction of hours of employment, the maximum coverage period for Qualified Beneficiaries ends on the later of:
  - (1) 36 months after the date the covered Employee becomes enrolled in the Medicare program. This extension does not apply to the covered Employee; or
  - (2) 18 months (or 29 months, if there is a disability extension) after the date of the covered Employee's termination of employment or reduction of hours of employment.
- (c) In the case of a Qualified Beneficiary who is a child born to or placed for adoption with a covered Employee during a period of COBRA continuation coverage, the maximum coverage period is the maximum coverage period applicable to the Qualifying Event giving rise to the period of COBRA continuation coverage during which the child was born or placed for adoption.
- (d) In the case of any other Qualifying Event than that described above, the maximum coverage period ends 36 months after the Qualifying Event.

#### 12. Under what circumstances can the maximum coverage period be expanded?

If a Qualifying Event that gives rise to an 18-month or 29-month maximum coverage period is followed, within that 18- or 29-month period, by a second Qualifying Event that gives rise to a 36-months maximum coverage period, the original period is expanded to 36 months, but only for individuals who are Qualified Beneficiaries at the time of and with respect to both Qualifying Events. In no circumstance can the COBRA maximum coverage period be expanded to more than 36 months after the date of the first Qualifying Event. The Plan Administrator must be notified of the second qualifying event within 60 days of the second qualifying event. This notice must be sent to the Plan Administrator or its designee in accordance with the procedures above.

#### 13. How does a Qualified Beneficiary become entitled to a disability extension?

A disability extension will be granted if an individual (whether or not the covered Employee) who is a Qualified Beneficiary in connection with the Qualifying Event that is a termination or reduction of hours of a covered Employee's employment, is determined under Title II or XVI of the Social Security Act to have been disabled at any time during the first 60 days of COBRA continuation coverage. To qualify for the disability extension, the Qualified Beneficiary must also provide the Plan Administrator with notice of the disability determination on a date that is both within 60 days after the date of the determination and before the end of the original 18-month maximum coverage. This notice must be sent to the Plan Administrator or its designee in accordance with the procedures above.

#### 14. Does the Plan require payment for COBRA continuation coverage?

For any period of COBRA continuation coverage under the Plan, Qualified Beneficiaries who elect COBRA continuation coverage may be required to pay up to 102% of the applicable premium and up to 150% of the applicable premium for any expanded period of COBRA continuation coverage covering a disabled Qualified Beneficiary due to a disability extension. Your Plan Administrator will inform you of the cost. The Plan will terminate a Qualified Beneficiary's COBRA continuation coverage as of the first day of any period for which timely payment is not made.

#### 15. Must the Plan allow payment for COBRA continuation coverage to be made in monthly installments?

Yes. The Plan is also permitted to allow for payment at other intervals.

#### 16. What is Timely Payment for COBRA continuation coverage?

Timely Payment means a payment made no later than 30 days after the first day of the coverage period. Payment that is made to the Plan by a later date is also considered Timely Payment if either under the terms of the Plan, covered Employees or Qualified Beneficiaries are allowed until that later date to pay for their coverage for the period or under the terms of an arrangement between the Employer and the entity that provides Plan benefits on the Employer's behalf, the Employer is allowed until that later date to pay for coverage of similarly situated non-COBRA beneficiaries for the period.

Notwithstanding the above paragraph, the Plan does not require payment for any period of COBRA continuation coverage for a Qualified Beneficiary earlier than 45 days after the date on which the election of COBRA continuation coverage is made for that Qualified Beneficiary. Payment is considered made on the date on which it is postmarked to the Plan.

If Timely Payment is made to the Plan in an amount that is not significantly less than the amount the Plan requires to be paid for a period of coverage, then the amount paid will be deemed to satisfy the Plan's requirement for the amount to be paid, unless the Plan notifies the Qualified Beneficiary of the amount of the deficiency and grants a reasonable period of time for payment of the deficiency to be made. A "reasonable period of time" is 30 days after the notice is provided. A shortfall in a Timely Payment is not significant if it is no greater than the lesser of \$50 or 10% of the required amount.

#### IF YOU HAVE QUESTIONS

If you have questions about your COBRA continuation coverage, you should contact the Plan Administrator or its designee. For more information about your rights under ERISA, including COBRA, the Health Insurance Portability and Accountability Act (HIPAA), and other laws affecting group health plans, contact the nearest Regional or District Office of the U.S. Department of Labor's Employee Benefits Security Administration (EBSA). Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website at www.dol.gov/ebsa.

## KEEP YOUR PLAN ADMINISTRATOR INFORMED OF ADDRESS CHANGES

In order to protect your family's rights, you should keep the Plan Administrator informed of any changes in the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator or its designee.

#### X SUMMARY

The money you earn is important to you and your family. You need it to pay your bills, enjoy recreational activities and save for the future. Our premium payment plan will help you keep more of the money you earn by lowering the amount of taxes you pay. The Plan is the result of our continuing efforts to find ways to help you get the most for your earnings.

If you have any questions, please contact the Administrator.

#### ELECTION FORM AND COMPENSATION REDUCTION AGREEMENT

Employer Name:		
Employee Name:		
Employee Address:		
Employee Social Security Number:		
Employee Number:		
Plan Year	through	
		received the Summary Plan Description. I have read the ll as the other rights and obligations which I have under the
		r the Plan Year specified above. The Employer and I agree each pay period and Plan Year (or during such portion of the
ELECTION	OF HEALTH SAVI	INGS ACCOUNT
( ) I elect to contribute to a Health Savings Account during	ng the Plan Year.	
Salary Redirection: The amount of compensation redirect	tion will be \$	for the Plan Year.
I understand and certify that I am eligible to make co	ontributions to a Heal	th Savings Account under Code Section 223.
ОТНЕ	R TERMS AND CO	ONDITIONS
I understand that:		
		reduction agreement at any time during the Plan Year unless I lealth Savings Account election may be changed at any time.
- The Plan Administrator may reduce or cancel nubelieves it advisable in order to satisfy certain provisions		action or otherwise modify this agreement in the event he are Code.
The reduction in my cash compensation under the benefit programs maintained by my Employer.	this agreement shall b	e in addition to any reductions under other agreements or
Any amounts, except those amounts contribute benefits will be forfeited and may not be paid to me in ca		gs Account, that are not used during a Plan Year to provide benefits specifically for me in a later Plan Year.
Prior to the first day of each Plan Year I will be Year. If I do not complete and return a new election form elections then in effect for the new Plan Year but not my continue by its terms in the amount of the required contri	at that time, I will be non-insured benefits.	In addition, this compensation reduction agreement will
	ND CONSTRUED IN R APPLICABLE LA	
***************************************	Dat	te
Employee's signature		
Accepted and agreed to by the Employer's Authorized Representative.		
Ray	Dot	ra .

# **ELECTION NOT TO PARTICIPATE**

No.:    Last   First   Middle	Zip trict Premium
Last First Middle  Address:  Street City State  I understand all the benefit options available under the Plan.  I elect to reject the following insurance coverage offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  ——Health insurance coverage ——Dental coverage ——Vision insurance coverage ——Vision insurance coverage ——Cancer Care Plan Select ——Cancer with Plus Rider ——Accident Advantage ——Hospital Advantage ——Hospital Advantage  I elect to reject the following non-insured benefits offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  ——I elect not to participate in a Health Savings Account.	
Address:  Street  City  State  I understand all the benefit options available under the Plan.  I elect to reject the following insurance coverage offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  Health insurance coverage  Dental coverage  Vision insurance coverage  Cancer Care Plan Select  Cancer with Plus Rider  Accident Advantage  Hospital Advantage  I elect to reject the following non-insured benefits offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  I elect not to participate in a Health Savings Account.	
Street City State  I understand all the benefit options available under the Plan.  I elect to reject the following insurance coverage offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  Health insurance coverage  Dental coverage  Vision insurance coverage  Cancer Care Plan Select  Cancer with Plus Rider  Accident Advantage  Hospital Advantage  I elect to reject the following non-insured benefits offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  I elect not to participate in a Health Savings Account.	
I understand all the benefit options available under the Plan.  I elect to reject the following insurance coverage offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  Health insurance coverage  Dental coverage  Vision insurance coverage  Cancer Care Plan Select  Cancer with Plus Rider  Accident Advantage  Hospital Advantage  Hospital Advantage  I elect to reject the following non-insured benefits offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  I elect not to participate in a Health Savings Account.	
I elect to reject the following insurance coverage offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  Health insurance coverage Dental coverage Vision insurance coverage Cancer Care Plan Select Cancer with Plus Rider Accident Advantage Hospital Advantage Hospital Advantage I elect to reject the following non-insured benefits offered by my Employer through the Warrenville Public Library Dis Conversion Plan: I elect not to participate in a Health Savings Account.	trict Premium
Health insurance coverage  Dental coverage  Vision insurance coverage  Cancer Care Plan Select  Cancer with Plus Rider  Accident Advantage  Hospital Advantage  I elect to reject the following non-insured benefits offered by my Employer through the Warrenville Public Library DisConversion Plan:  I elect not to participate in a Health Savings Account.	trict Premium
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Vision insurance coverage Cancer Care Plan Select Cancer with Plus Rider Accident Advantage Hospital Advantage  I elect to reject the following non-insured benefits offered by my Employer through the Warrenville Public Library Dis Conversion Plan: I elect not to participate in a Health Savings Account.	
Cancer Care Plan Select  Cancer with Plus Rider  Accident Advantage  Hospital Advantage  I elect to reject the following non-insured benefits offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  I elect not to participate in a Health Savings Account.	
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Accident AdvantageHospital Advantage I elect to reject the following non-insured benefits offered by my Employer through the Warrenville Public Library Dis Conversion Plan:I elect not to participate in a Health Savings Account.	
Hospital Advantage  I elect to reject the following non-insured benefits offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  I elect not to participate in a Health Savings Account.	
I elect to reject the following non-insured benefits offered by my Employer through the Warrenville Public Library Dis Conversion Plan:  I elect not to participate in a Health Savings Account.	
I elect not to participate in a Health Savings Account.	
	strict Premium
l cannot change or revoke this election to receive full compensation in each at any time during the Plan Veer unle	
change in status (such as marriage, divorce, death of a spouse or child, birth or adoption of a child, termination or come employment of a spouse, change in my or my spouse's employment status from full-time to part-time or part-time to further spouse or I taking an unpaid leave of absence, and such other events as the Plan Administrator determines will permit a revocation of an election).	mencement of
- Prior to each Plan Year I will be offered the opportunity to change my benefit election for the following Plan Year complete and return a new election form at that time, I will be treated as having elected to continue my election to reject of insurance payments through this Plan.	: If I do not at the payment
Employee's signature  Date	
Administrator Date	

## CHANGE IN STATUS ELECTION FORM

Employer Name:
Employee Name:
Employee Address:
Employee Social Security Number;
Employee Number:
Plan Yearthrough
As a participant in the cafeteria plan, I am entitled to revoke my prior benefit election and enter into a new election in the event of certain changes in status.
I understand that the change in my benefit election must be necessitated by and consistent with the change in status and that the change must be acceptable under the Regulations issued by the Department of Treasury.
I certify that I have incurred the following change in status:
Marriage
Divorce, Legal Separation or Annulment
Birth, adoption or placement for adoption of a child
Death of my spouse and/or dependent
Termination or commencement of employment by my spouse or dependent
Switching from part-time to full-time (or vice-versa) employment on the part of me or my spouse, or dependent or reduction or increase in hours, strike or lockout
I, my spouse or dependent have taken an unpaid leave of absence
A change in the residence or worksite of myself, my spouse or dependent
My dependent satisfies or ceases to satisfy the requirements for coverage
Other:
The Administrator may require you to provide evidence to document the event which requires the change of election.
Date
Date

Administrator

# **REGULAR AGENDA**

Approve payments for the period of February 16 – March 15, 2017

A partial bill list is included on the following page(s).

A complete bill list with SUGGESTED MOTION will be provided at Board Meeting

# **WARRENVILLE PUBLIC LIBRARY** Transaction Detail by Account February 16 - March 15, 2017

Date	Num	Name	Amount
3/15/2017	5718	American Library Association	\$0.00
03/15/2017	5719	Accounting Services, Inc.	-\$498.00
03/15/2017	5720	Ambius	-\$270.00
03/15/2017	5721	Aridan Books, Inc.	-\$120.00
03/15/2017	5722	Abraham, Diana	-\$59.63
03/15/2017	5723	AT&T	-\$393.50
03/15/2017	5724	AT&T	-\$383.97
03/06/2017	5725	Baker & Taylor Adult Fiction	-\$2,312.08
03/06/2017	5726	Baker & Taylor Adult NonFiction	-\$1,996.04
03/06/2017	5727	Baker & Taylor Continuation Service	-\$1,123.61
03/06/2017	5728	Baker & Taylor Juvenile	-\$2,698.68
03/15/2017	5729	Communications Revolving Fund	-\$450.00
03/15/2017	5730	Constellation New Energy	-\$3,506.97
03/15/2017	5731	Creekside Printing	-\$2,590.00
03/15/2017	5732	Davis, Jackie	-\$27.07
03/06/2017	5733	Demco	-\$208.41
03/15/2017	5734	Grant & Power	-\$944.40
03/15/2017	5735	Illinois Library Association	-\$40.00
03/15/2017	5736	Midwest Tape	-\$367.76
03/06/2017	5737	Midwest Tape	-\$1,824.18
03/06/2017	5738	Mikoirac, Inc.	-\$725.00
03/06/2017	5739	Otis Elevator Company	-\$4,795.91
03/06/2017	5740	OverDrive	-\$975.79
03/15/2017	5741	Petty Cash Fund	-\$40.62
03/06/2017	5742	Quill Corporation	-\$186.73
03/15/2017	5743	Service Master Commercial Cleaning	-\$1,600.00
03/15/2017	5744	Team One Repair, Inc.	-\$159.60
03/15/2017	5745	U.S. Postmaster	-\$225.00
03/15/2017	5746	Unique Management Services, Inc.	-\$53.70
03/15/2017	5747	Whitmer, Sandy	-\$159.11
03/15/2017	5748	Winfield Flower Shoppe	-\$75.95
03/15/2017	5749	Ty Tran	-\$71.83
03/15/2017	5750	Tyco Integrated Security LLC	-\$578.00
03/07/2017	5751	OverDrive	-\$383.49
03/15/2017	5752	product architecture + design	-\$3,570.62
03/15/2017	5753	Today's Business Solutions, Inc.	-\$126.56
03/15/2017	5754	Konica Minolta Business Solutions	-\$282.87
03/15/2017	5755	Shales McNutt Construction	-\$259,374.03
02/16/2017	Electronic	Paylocity	-\$450.15
02/16/2017	Electronic	AFLAC	-\$203.22
02/27/2017	Electronic	MegaPath:	-\$63.12

02/28/2017	Electronic	Harland Clarke Check Order	-\$218.55
02/28/2017	Electronic	Northern Illinois Gas	-\$1,512.23
02/28/2017	Electronic	AFLAC	-\$135.48
03/02/2017	Electronic	Pitney Bowes, Inc.	-\$133.57
03/02/2017	Electronic	Paylocity	-\$88.77
03/07/2017	Electronic	Konica Minolta Premier Finance	-\$391.00

-\$296,395.20

# **REGULAR AGENDA**

Approve transfer of funds

A transfer recommendation with SUGGESTED MOTION will be provided at Board Meeting if needed

Each month, a transfer of funds from the MB Bank Business NOW account to the MB Bank Operating account may be necessary to cover anticipated expenditures.

# **REGULAR AGENDA**

# Approve trustee expenditures for meetings and/or travel (ACTION)

SUGGESTED MOTION: Approve expenditures in the amount of \$175 for meetings attended by Trustee Warren.

Itemized trustee meeting and/or travel expenses to be approved:

Trustee	Description		Cost
Warren	ILA Legislative Meetup (2/13/17)		\$40.00
Warren	ILA Trustee Workshop (2/18/17)		\$135.00
		TOTAL	\$175.00

#### UNFINISHED BUSINESS

# **Building Project Update (discussion only)**

Report as of 3/8/17

#### PATRON IMPACTS

- Beverage vending machines installed in vending café area.
- Main entrance and main level public restrooms remain closed.
- Circulation desk is open, but area is congested due to temporary location of shelving.
- Computer availability is occasionally impacted by construction work. (For example, three computers were unavailable during the installation of the fireplace.)
- Limited seating; No study rooms; No designated quiet space.
- Whenever possible, noisy construction work is scheduled prior to opening.
- Occasionally, pathways are blocked due to work in progress.

#### STAFF IMPACTS

- Staff areas double as storage for some furnishings as we await completion of the public areas.
- The Adult & Youth Services Desks are still combined.
- Construction crews and staff continue to share the staff lounge for meal breaks.
   We also share the staff restrooms with the construction crews.

#### **NEXT STEPS**

- Installation of youth and adult desks.
- Painting in Phase 2 areas.
- Carpet installation in Phase 2 areas.
- Phase 2 shelving installation; shelving moves; collection shifts; shelving deconstruction.

#### SUMMARY OF PROGRESS

- All doors and locks re-keyed.
- Fireplace installed.
- New boiler installed (lower level).
- Framing and drywall complete for Phase 2 (Teen room, meeting room, study rooms)
- Tile installation complete in men's and women's restrooms.
- Steel beam installed to support partition wall in meeting room.
- HVAC modifications (ductwork, VAV boxes) substantially complete.
- Electrical work continues (new conduit for floorboxes, overhead work for light fixtures, conduit and boxes for wall outlets in study rooms)
- Hot and cold beverage vending machines installed in vending café.

#### **CONSTRUCTION MEETING NOTES**

### February 22

- Reviewed submittal logs, outstanding RFIs and change requests.
- Schedule lost 1½ weeks on meeting room challenges (existing conditions, accommodations for new partition wall).
- Steel beam to support partition wall expected this week.
- Service desks expected in 1-2 weeks. Cabinetry subcontractor is building children's entry (trees) offsite.
- Architect Jim Lonergan shared a model of the wall graphic for the youth activity room. Sandy suggested some of the flowers in the graphic be changed to Blackeyed Susans, the City's official flower.

#### March 8

- Reviewed submittal logs, outstanding RFIs and change requests.
- Schedule update: approximately 1 week behind; cautioned that team remember the second phase was initially broken into two overlapping phases and we are tackling them both at once. Aiming for substantial completion last week of March.
- Boiler complete, start up next week. Also need to replace recirculating pump.
- Bathroom partitions should arrive Friday/Monday
- Waiting on casework (desks,etc.)
- Agreed to plan for shelving install first full week of April. (Picture books, Children's Audiovisual)
- Agreed not to reopen main entrance until collections are moved away from entryway (mid-to-late April)

# CHANGE ORDERS APPROVED (through 3/8/17)

(Contingency Budget for project: \$100,000)

Number	Description	Add / (Deduct)
1-11, 13-16	Various (reported prior months)	\$20,590.00
12	(Oustanding – Modernfold door system for meeting room)	śśś
17		
18	Framing modifications and additional monitors for window shades	\$2,666.00
19	Revisions to existing HVAC system as needed for meeting room modifications	\$3,023.00
20	Credit for two auto openers at main entrance (single door at each passage will have auto opener)	(\$2,882.00)
21	New trash receptacles for public restrooms (existing cannot be reused because they do not fit desired wall locations)	\$517.00
22	Additional cost for sink revision in meeting room (requested larger sink; was small, wet-bar type)	\$293.00
23	Steel increased weight for span (partition support); support structures for existing and new soffit (existing soffit collapsed during demo)	\$10,260.00
24	Additional ductwork (HVAC), install fire damper, access door	\$1,154.06
25	Misc. Electrical (wiring, rough-ins)	(\$150.00)
26	Flooring – cutdown floor tile in lieu of bullnose base (bathrooms)	\$475.00

27	Painting – seal and prep walls for wall graphic installation (toddler activity room; was wallpaper)	\$400.00
28	Plumbing – bottle filler retro kit for existing water cooler/fountain	\$970.00
29	Skim coat existing walls for wall graphic installation (toddler activity room; skim coat applied over sealer)	\$2,244.00
30		
31	Electrical – above ceiling wiring for wireless access points	\$1,485.00
	TOTAL	\$41,045.06

### UNFINISHED BUSINESS

Approve Strategic Action Steps for FY18 (ACTION)

SUGGESTED MOTION: Approve Strategic Action Steps for FY18 as presented by staff.

The following "Strategic Action Steps" for FY18 (July 1, 2017 – June 30, 2018) were discussed at the February 15, 2017 Board Meeting. Formal approval by the Board will help staff develop a work plan and budget for next fiscal year.

# Fiscal Year 2018 Strategic Action Steps

- Revise Job Descriptions and engage the services of consultant to complete a benchmark study and revise the pay grades and wage scale.
- Prepare a report to the Board on needs and opportunities for use of lower level "meeting" space including book sale, makerspace and youth/teen program room.
- Develop strategic partnerships to enhance community support and to expand programs and services.
- Identify and document best practices and procedures for each department.
- Review Reference Service and Circulation Policies to ensure efficient, friendly and professional service.
- Establish a style guide for Library communications.
- Develop a responsive website.

# **NEW BUSINESS**

# Proposal for "Fresh Start" Initiative Including Fee Waivers and Discounts (ACTION)

Circulation Manager Patty Dybala will attend the Board Meeting to present this item and answer questions.

SUGGESTED MOTION: Approve staff recommendation to implement the proposed three-part "fresh start" initiative to coincide with the completion of the renovation and the start of the summer reading program.

To celebrate the completion of the Library's renovation project and the start of the summer reading program we want to be able to welcome all residents to the Library. By waiving fees, we want to remove the barrier that may prevent patrons from utilizing all Library resources and give everyone a "fresh start."

This proposal consists of three actions:

- A. Waive all fees on "current" accounts
- B. Offer a discount for lost/damaged item charges on "current" accounts.
- C. Waive all charges and delete "stale" accounts.

A "current" account has an expiration date on or after July 1, 2010 (7 years) A "stale" account has been expired more than 7 years (before July 1, 2010).

Specific details for each action are outlined below.

#### A. Waive all fees on Current Accounts

Currently, library card privileges are suspended if a patron has a balance of \$10 or more in fees, has charges for lost/damaged material or has an outstanding balance in debt collection. The borrower is restricted from using the public computers, checking out material and using electronic resources.

We will waive all fees (any charges that are not for lost or damaged material) incurred prior to June 1, 2017 on current accounts.

We will institute a fine-free period for all patrons during the processing of these accounts (from May 15 - 31). All extended use fees that would normally accrue will be waived for material returned during this period.

**2,336** current accounts have an outstanding balance that includes fees, the outstanding balance for fees on all current accounts amounts to \$33,282.76. (Refer to Chart 1 for a complete breakdown of fees on current accounts.)

#### B. Offer a discount for lost/damaged charges on current accounts.

We will offer a 50% waiver on lost and damaged charges. A lost item charge is placed on a patron's account if material is not returned within 21 days of the due date. We do not accept items that are more than 90 days overdue. We

would like to recover some of the fees in order to restock our collection. We will mail out a notice informing affected patrons of the opportunity to resolve their accounts at a discounted rate. In some cases, patrons may have moved and we may never receive payment for the materials. This will be an opportunity to update our database to reflect inaccurate mailing addresses.

There are **556** current accounts with lost or damaged material charges; the charges total **\$28,558.06**. (Refer to Chart 1 for a complete breakdown of fees on current accounts.)

#### C. Delete Stale Accounts

To keep the database clean and current, we plan to establish a best practice for deleting "stale" accounts from the database. This will allow us to provide a welcoming experience for a patron who may return to the Library after many years, instead of creating a long-standing barrier for patrons who seek to use Library resources.

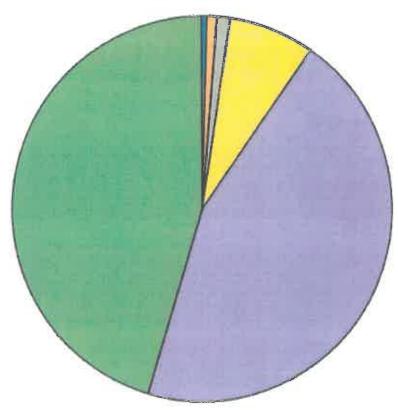
Currently, we delete accounts that are expired for more than 2 years using specific criteria. The expired account is deleted only if the outstanding balance is less than \$10 in extended use fees. An account with fees of \$10 or more, lost or damaged charges, or debt collect fees is kept in the database indefinitely.

Due to a legal opinion received by our debt collection agency, library accounts in debt collection are no longer credit reported. It is exceptionally rare that we receive payment for any debt older than 7 years.

There are **378** accounts expired prior to July 1, 2010 with an outstanding balance of **\$17,441.79**. (Refer to Chart 2 for a complete breakdown of fees on stale accounts.)

# CHART 1.

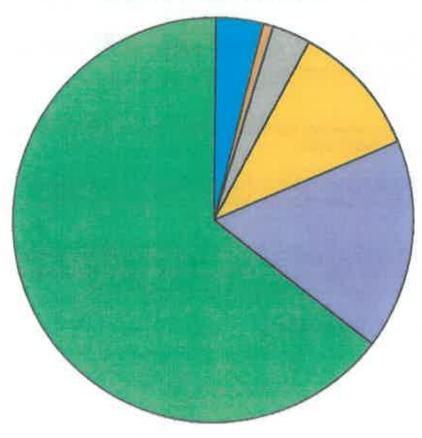




	Amount	Number of Accounts
Fee	\$277.17	27
<ul> <li>Damaged</li> </ul>	\$545.95	31
(* Charge	\$692.07	24
Debt Collect	\$4,500.00	450
Fine	\$27,813.52	2623
- Lost	\$28,012.11	525

CHART 2.

**Stale Accounts with Fees** 



	Amount	<b>Number of Accounts</b>
Fee	\$672.20	3
Collection Fee	\$140.00	14
Charge	\$543.62	22
Debt Collect	\$1,880.00	188
<b>Fine</b>	\$2,937.30	238
Lost	\$11,268.67	235

### **NEW BUSINESS**

# Consideration of dates for Grand Re-opening celebration (ACTION)

SUGGESTED MOTION: Approve <u>(date)</u> as the date for the grand re-opening celebration.

At the February Board Meeting, the Board indicated an interest in selecting the date for a grand re-opening celebration.

Director Whitmer has discussed the project timeline with the architects and construction management team and has determined that a date anytime after July 14 would be appropriate.

Staff recommend that the event be held on a Sunday afternoon with remarks at 12:30 p.m. immediately followed by a ribbon cutting. Details including refreshments, entertainment and activities can be discussed at a later date.

The following Sundays are suggested:

July 16

July 23

July 30

The building project has been my primary focus over the past month.

#### Other activities of note:

- The City of Warrenville sent notification that both Hotel Motel Tax Grant Applications are awarded in full:
  - Concerts on the Commons \$9,538
     Wednesday night concerts; July 12 August 30
  - Sunday Musical Matinees \$3,175
     Monthly concerts: September through April

I have reached out to our booking contact to begin performer selection for summer concerts. I have also met with Emily Larson who is assisting with gathering food vendor contacts. (Residents have expressed interest in having food trucks/vendors at the weekly concerts.)

- Reviewed 40+ applications for two part-time positions (Marketing & Communications Specialist, Graphic Artist); Conducted 15 telephone interviews. On site interviews will be completed by March 17.
- Library provided a computer station at which people could complete a City of Warrenville online survey. (In hopes of increasing the number of survey responses, the City reached out to the Library as a location with considerable foot traffic.) The purpose of the survey was to gather input from residents and non-residents as part of the City's branding/regional positioning initiative.
- Communicated Library's position on request by Airhart Developers regarding calculation of developer donations.
- Jackie compiled a response to a FOIA request from SmartProcure. This is a quarterly request for our check register. SmartProcure is a business that maintains a database of purchasing information from government agencies. The data is used by vendors to research competitors and discover new opportunities (https://smartprocure.us).
- The Library's Management Team has been gathering information and preparing budget requests for next fiscal year.

#### February Meetings/Programs/Outreach (Sandy)

February 2 – Review closed session minutes with Trustee Warren

February 7, 21 - Management Team Meetings

February 7 – City Branding/Positioning Meeting with City consultants

February 8, 22 - Construction Meetings

February 9 – Library Volunteer Lunch (Ellen Bales, Sharon Goodman)

February 14 – Webinar: Email Newsletters Made Easy

February 15 - Met with Park District Executive Director

February 21 – Met with DuPage Literacy Volunteer Recruitment and Marketing Manager

February 22-24 – Conducted 15 telephone interviews for Graphic Artist and Marketing &

Communications Specialist

February 28 - Webinar: Communico for Libraries

# February Meetings/Programs/Outreach (Jackie)

February 1 - Webinar: ACA Trumped

February 7, 21 - Management Team Meetings

February 13 – FOIA Training (online certificate)

February 28 – Webinar: Communico for Libraries

# STATISTICAL SUMMARY

# February 2017

	FEB 2017	FEB 2016	% change	+/-
TOTAL CIRCULATION	14,519	19,374	-25.1%	-4,855
Print	6,581	9,378	-29.8%	-2,797
NonPrint	7,034	9,142	-23.1%	-2,108
Equipment (mobile dev., in-house laptops, etc.)	30	38	-21.1%	-8
Downloadables	874	816	7.1%	58
OVERDRIVE (eBooks & eAudiobooks)	595	770	-22.7%	-175
ZINIO (eMagazines)	97	46	110.9%	51
Hoopla	182	n/a		
ITEM REQUESTS PROCESSED	226	277	-18.4%	-51
INTERLIBRARY LOANS RECEIVED	186	270	-31.1%	-84
MATERIALS ADDED	588	975	-39.7%	-387
MATERIALS WITHDRAWN	708	3,150	-77.5%	-2,442
TOTAL COLLECTION SIZE*	107,022	124,373	-14.0%	-17,351
PROGRAMS	_			
Number of Adult Programs	6	7	-14.3%	-1
Adult Program Attendance	104	133	-21.8%	-29
Number of Children's Programs	19	25	-24.0%	-6
Children's Program Attendance	613	484	26.7%	129
Book-A-Librarian	4	5	-20.0%	-1
Book-a-Librarian Attendance	4	5	-20.0%	-1
RECIPROCAL BORROWER CIRCULATION	1,170	1,732	-32.4%	-562
RESIDENT CARDS ACTIVE	6,140	6,347	-3.3%	-207
RECIPROCAL BORROWER CARDS ACTIVE	308	344	-10.5%	-36
VISITOR COUNT **	6,499	10,587	-38.6%	-4,088
COMPUTER SESSIONS	1,166	1,722	-32.3%	-556
DATABASE USAGE***	355	2,949	-88.0%	-2,594
WEBSITE VISITS	4,854	8,386	-42.1%	-3,532
UNIQUE WEBSITE VISITORS	2,295	4,091	-43.9%	-1,796
			·	

<sup>\*</sup>Total Collection Size includes downloadable items and equipment/mobile devices 8/2015

Detailed statistical reports will be available at the Board Meeting

<sup>\*\*</sup>March 2016 installed new counter at main entrance. Collects only entry through exterior doors.

<sup>\*\*\*</sup>December 2016 - Tumblebooks Computers removed from Youth Department for Renovation

# PUBLIC SERVICES DEPARTMENT REPORT February 2017

Leila Heath

InterLibrary Loan

Item Requests Processed: 226 (277 LY); Materials Received: 186; Materials Lent: 66

# **Programming**

Adult:

Book Discussion 2/2: 7

Sunday Concert (Indian Drumming) 2/12: 32

Game Night 2/16: 0 Adult Coloring 2/18: 1

Roads That Lead to Lincoln 2/21: 44 Maintaining Your Computer: 2/25: 20

Book a Librarian (4): 4

Puzzles: 2

1000 piece: Best Sellers, Down the Wharf

Teen:

Teen Writing Club 2/8: 2 Teen Hangout 2/17: 0

Teen Board Game Night 2/22: 3

Youth:

Family Storytime (4): 130 Toddler Time (3): 82 Robot Adventures: 2/9: 6 Saturday Storytime 2/11: 5

Lego Time 2/16: 12 Snap Circuit 2/23: 8

#### Outreach / PR

The Library e-newsletter, Library Matters, was mailed 2/28 to 538 (542 LY) recipients.

Youth:

Bower School Lego 2/7: 39

Bower School Snap Circuit 2/14: 26

Bower School Robots 2/21: 26

Day of Play 2/25: 225

Johnson School Lego 2/28: 30

Teen Volunteers: 8; Hours: 14

**Shelving / Collection Shifts** 

YS Shelving Prep: Picture Books Classification

AS Weeding: DVDs, Audiobooks

YS Shifting: J Fiction, Beginning Readers, Spanish

# Meetings / Continuing Ed

Management Meetings: Leila Programming SIG 2/2: Sylvia

Touchbase Meetings 2/6-2/15: Leila, Jen, Sylvia, Guillermo, Alyssa, Diana, Jane, Nayeli

Summer Programming Planning 2/14, 2/16: Leila, Jen, Sylvia, Diana, Jane, Nayeli

Tech Team Meeting 2/9: Jen, Sylvia, Guillermo, Alyssa, Diana, Jane, Nayeli

Tinker Meeting 2/14: Jen, Jane

LACONI Website Redesign 2/15: Leila, Jen

Anderson Bookshop Children's Literature Breakfast 2/18: Diana, Jane

Digital Citizenship Webinar 2/18: Nayeli Holiday House Webinar 2/18: Diana

Parent Council 2/20: Diana

Literacy DuPage 2/21: Leila, Sandy

SirsiDynix Future of Library Space Webinar 2/22: Leila Sneak Peek Spring 2017 & Series NF Webinar 2/22: Diana

Picture Books Galore Webinar 2/22: Diana Family Day of Play 2/27: Nayeli, Diana

Communico Live Stream 2/28: Leila, Jen

## Readers' Advisory

NextReads eNewsletter: 150 (145 LY) subscribers

Beyond Dust Jackets Blog: Views 2/1-28: 860; Total views 2017: 1932

#### OverDrive eAudiobooks/eBooks

New User accounts 2/1-28: 13

Checkouts 2/1-28: 595

Total checkouts 2017: 1387; Total checkouts FY: 5855

#### Zinio eMagazines

User accounts thru 2/28: 187

Checkouts 2/1-28: 97

Total checkouts 2017: 182; Total checkouts FY: 544

#### Hoopla

New User accounts 2/1-28: 10

Checkouts 2/1-28: 182

Total checkouts 2017: 395; Total checkouts FY: 1234

# **Collection statistics for the month:**

- \*588 items were added. (340 books, 89 AV, 159 periodicals, 0 eBooks/eAudio, 0 equipment)
- \*708 items were deleted. (266 books, 196 AV, 246 periodicals, 0 eBooks/eAudio. 0 equipment)

# Other items:

- \*60 books were repaired.
- \*158 AV were cleaned / repaired.

## **Activities:**

- \*Tech Team meeting (Lou Carlile)
- \* Communico Live Stream (Lou Carlile)

Library Card Monthly Stats				
	February 2017	February 2016		
# of new cards issued	53	67		
# of renewed cards (expiring 2/2017)	<b>61</b> (179 notices sent)	<b>20</b> (139 notices sent)		
Warrenville Resident cards (active)	6,140	6,347		
Reciprocal Borrower cards (active)	308	344		

Miscellaneous Monthly Circulation Stats				
	February 2017	February 2016		
Self-Checkout Station	3,436 items (25% of total circulation)	4,366 items (23% of total circulation)		
Reciprocal Borrower Circulation	1,170	1,732		
# of Outgoing Book Discussion ILL Requests	37 (14% of total item requests)	<b>30</b> (10% of total item requests)		
Mobile Device Circulation	14	28		
Mobile Device In-house Circulation	16	6		

## **Professional Growth/Meetings:**

Management Team meetings-Patty

2/9 Tech Team Meeting-Jaime

2/7 Meeting with Sandy re: Waiving Fines Proposal- Patty

2/12 Design Thinking Brainstorming Meeting- Ellen, Jaime, Sandy, Sarah, Stephanie,

Bhargavi, Patty

2/28 Communico Live Stream-Patty

## **Homebound Delivery**

2/17 Patty & Jackie

# **COMPUTER SERVICES REPORT**

# February 2017

Cynthia Makowski

- 1. Meetings, training, etc.
  - Management Team (2)
  - Communico Demo webinar
- 2. Moved furniture, computers, printers, phones, power strips & cables as needed due to construction.
- 3. Replaced failed battery in uninterruptible power supply (UPS) in server room. Shipped out old battery for recycling.
- 4. Worked with SirsiDynix to facilitate Web Services 2017.01 upgrade.
- 5. Worked with SirsiDynix to diagnose issue with Hoopla records not syncing automatically to eResource Central in the BLUEcloud PAC. Will continue run manual sync weekly until resolved or we discontinue use of the BLUEcloud PAC.
- 6. Processed zero dollar quote for Enterprise PAC product to replace BC PAC & HIP catalogs, and scheduled staff training for early April.
- 7. Began preparing IT budget draft.
- 8. Upgraded DeepFreeze to v8.37 on Faronics server and all PCs except laptops.

# PRESIDENT'S REPORT Next Meetings or Events

(As of Wednesday, March 8, 2017)

Wednesday, March 15 at 7 p.m.
Regular Library Board of Trustees Meeting
Lower Level Meeting Room

Sunday, April 16 Library Closed

Wednesday, April 19 at 6 p.m.

Committee of the Whole Meeting (Budget)
Lower Level Meeting Room

Wednesday, April 19 at 7 p.m.

Regular Library Board of Trustees Meeting
Lower Level Meeting Room

Wednesday, May 17 at 6 p.m.
(Tentative) Committee of the Whole Meeting (Budget)
Meeting Room

Wednesday, May 17 at 7 p.m.

Regular Library Board of Trustees Meeting

Meeting Room



#### **Building Project Calendar**

The project is one week behind original schedule. (Phase 2 is being completed in one step instead of two.)

Next major project targets:

Week of March 27 – Substantial completion Phase 2 Week of April 3 – Begin move into Phase 2 space Begin remainder of Phase 3

**REMINDER:** On March 1, the DuPage County Clerk emailed notices with instructions for filing the Statement of Economic Interest. Please complete the online filing prior to the May 1 deadline. If you need instructions or your filer ID, please contact Director Whitmer.

#### **Continuing Education Opportunities**

Please inform Director Whitmer by Wednesday, March 15 if you wish to attend either of the following events:

# 2017 Folleti Lecture at Dominican University Wednesday, April 12, 6 p.m.

Dr. R. David Lankes, 2016-17 Follett Chair, associate dean of the University of South Carolina's College of Information and Communications and director of the School of Library and Information Science there, will present the 2017 Follett Lecture, titled "The Social Responsibility of the Library and the Librarian in a Post-Factual World." The

author of The Atlas of New Librarianship and Expect More, he is a strong advocate for innovation and excellence in twenty-first century libraries.

Respondent panelists include Nicole A. Cooke, assistant professor at the School of Information Sciences and faculty affiliate of the Center for Digital Inclusion at the University of Illinois Urbana-Champaign; Miguel Figueroa, director of the American Library Association's Center for the Future of Libraries; and Scott Walter, university librarian at DePaul University.

The lecture will take place at 6 p.m., followed by a reception; it is free and open to the public, with registration required. The Follett Lecture is generously supported by the Follett Corporation.

Trustee Workshop: Keys to Running a More Successful Board Meeting Saturday, April 22, 9:30 a.m. – 12:30 p.m. at Matteson Public Library

Saturday, April 29, 9:30 a.m. – 12:30 p.m. at Sycamore Public Library (see flyer on following page)

# Future Board Meeting Discussion/Action Items

April -

- Committee of the Whole review first draft of budget
- General Conduct Policy

May-

- Closed session for Director's Evaluation
- Adopt Revised Meeting Room Policy

# Trustee Workshop: Keys to Running a More Successful Board Meeting

Nancy Sylvester, certified professional parliamentarian, will offer a library trustee workshop at two locations in April 2017. These are free events for staff and trustees at RAILS member libraries.

In order to have a successful board governance, each board member needs an understanding of the role of the board in relationship to the remainder of the organization. Nancy will cover board basics, board governing documents, fiduciary duty, and board/staff relationships.

Learn important aspects of parliamentary procedure to help you run a more successful board meeting. Topics include quorum, agendas, steps in processing a motion, the concept of precedence of a motion, the script of a motion, the meaning of votes, and basic characteristics of a motion.

Saturday, April 22, 2017 9:30 AM - 12:30 PM Matteson Public Library

Register online: www.librarylearning.info/events/?eventID=24389

Saturday, April 29, 2017 9:30 AM - 12:30 PM Sycamore Public Library

Register online: www.librarylearning.info/events/?eventID=24390

If you have questions or need assistance registering, please call 779.205.4202 or email ce@railslibraries.info.



For more information, contact:

Joe Filapek Consulting and Continuing Education Manager

Phone: 630.734.5132

E-mail: joseph.filapek@railslibraries.info



# **COMMITTEE REPORTS**

# Personnel Committee – Director's FY17 Evaluation

The Director's self-evaluation will be distributed at the March 15 Board meeting along with instructions and forms for completing the evaluation "survey."

The deadline for completing the evaluation is 11:45 p.m. on Sunday, April 9.

# **COMMITTEE REPORTS**

# Personnel Committee - Director's Evaluation Process

Trustee DuRocher would like to get feedback from the Board regarding the current evaluation process.

The current process and evaluation criteria have been in place since 2006, the year Director Whitmer was hired.

Think carefully about the purpose of the process. What specifically does the Board want to accomplish through this process?

# Some things to consider:

- Is the process valuable?
- Does it produce useful feedback?
- Is it redundant?
- Does the process advance the Library?