



**ALBANY COUNTY
BOARD OF ELECTIONS**
224 S. Pearl St Albany, NY 12202
(518) 487-5060 • Fax (518) 487-5077
boardofelections@albanycounty.com
www.albanycounty.com/vote

Commissioners
ALISON MCLEAN LANE, DEMOCRATIC
RACHEL BLEDI, REPUBLICAN

Deputy Commissioners
DAVID CADY, DEMOCRATIC
MELISSA KERMANI, REPUBLICAN

MEMO

TO: Joanne Cunningham, Chairwoman of the Legislature
Dennis Feeney, Majority Leader
Frank Mauriello, Minority Leader
Dave Reilly, Commissioner of Management & Budget
Quentin Trahan-Crudo, Budget Analyst

FROM: Rachel Bledi, Board of Elections Republican Commissioner
Alison McLean Lane, Board of Elections Democratic Commissioner

RE: Contract extension for Pre-Paid Absentee Ballot Postage Grant

DATE: 07/06/2026

Please be advised that the Albany County Board of Elections is seeking an extension of its contract with the NYS Board of Elections for a Pre-Paid Postage Grant, which has been extended to 3/31/2027. The Original amount allocated was \$130,598.85, and only \$1,197.16 remains to be reimbursed.

REQUEST FOR LEGISLATIVE ACTION

Contract Extension for Board of Elections

..title

Absentee Ballot Pre-Paid Postage Grant

..body

Date:	07/06/2026	Submitted By:	Rachel Bledi
Department:	Board of Elections	Title:	Commissioner of Elections
Attending Meeting:	Rachel Bledi and Kathleen Donovan	Phone:	518-487-5070

Purpose of Request: Contract Authorization 01/28/2023 to 03/31/2027

CONTRACT TERMS/CONDITIONS:

Party Names and Addresses: NYS Board of Elections
40 N. Pearl St, Suite 5, Albany, Ny 12207

Term: (Start/end date or duration)	1/28/2023 to 3/31/2027
Amount/Raise Schedule/Fee:	\$130,598.85

BUDGET INFORMATION:

Is there a Fiscal Impact:	Yes ☒ No ☐
Anticipated in Budget:	Yes ☒ No ☐
Spreadsheet attached:	Yes ☐ No ☒

Source of Funding – (Percentages)

Federal:	0	County:	0
State:	100%	Local:	0

Enter text.

County Budget Accounts:

Revenue Account and Line:	A1450 03041
Revenue Amount:	\$130,598.85
Appropriation Account and Line:	Enter text.
Appropriation Amount:	

ADDITIONAL INFORMATION:

Mandated Program/Service:	Yes ☒ No ☐
If Mandated, Cite Authority:	Election Law
Request for Bids / Proposals:	
Competitive Bidding Exempt:	Yes ☐ No ☐
# of Response(s):	Enter text.
# of MWBE:	Enter text.
# of Veteran Business:	Enter text.
Bond Resolution No.:	Enter text.
Apprenticeship Program	Yes ☐ No ☐

Previous requests for Identical or Similar Action:
Resolution/Law Number and Date: 24-569

DESCRIPTION OF REQUEST:

The Board of Elections is requesting approval for an extension of a contract with the State Board of Elections for a Pre-Paid Postage Grant, which has a remaining fund balance of \$1,197.16. The new term for the contract is 01/28/2023 to 03/31/2027.

STATE OF NEW YORK MASTER CONTRACT FOR GRANTS FACE PAGE

STATE AGENCY (Name & Address): New York State Board of Elections 40 North Pearl Street, Suite 5 Albany, NY 12207	BUSINESS UNIT/DEPT. ID: BOE01/1110000 CONTRACT NUMBER: BOE01 - C004569- 1110000 CONTRACT TYPE: ☐ Multi-Year Agreement ☐ Simplified Renewal Agreement ☒ Fixed Term Agreement
CONTRACTOR SFS PAYEE NAME: Albany County	TRANSACTION TYPE: ☐ New ☐ Renewal ☒ Amendment
CONTRACTOR DOS INCORPORATED NAME: N/A	PROJECT NAME: Absentee Ballot Pre-Paid Postage Grant Program
CONTRACTOR IDENTIFICATION NUMBERS: NYS Vendor ID Number: 1000002428 Federal Tax ID Number: 14-6002563 DUNS Number (if applicable):	AGENCY IDENTIFIER: N/A CFDA NUMBER (Federally Funded Grants Only): N/A
CONTRACTOR PRIMARY MAILING ADDRESS: 260 South Pearl Street Albany NY 12202 CONTRACTOR PAYMENT ADDRESS: ☐ Check if same as primary mailing address CONTRACT MAILING ADDRESS: ☐ Check if same as primary mailing address	CONTRACTOR STATUS: ☐ For Profit ☒ Municipality, Code: ☐ Tribal Nation ☐ Individual ☐ Not-for-Profit Charities Registration Number: N/A Exemption Status/Code: N/A ☐ Sectarian Entity

Contract Number: # BOE01 - C004569 - 1110000

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Master Grant Contract, Face Page

STATE OF NEW YORK MASTER CONTRACT FOR GRANTS FACE PAGE

CURRENT CONTRACT TERM: From: 01/28/2023 To: 03/31/2026 CURRENT CONTRACT PERIOD: From: AMENDED TERM: From: 01/28/2023 To: 03/31/2027 AMENDED PERIOD: From:	CONTRACT FUNDING AMOUNT <i>(Multi-year - enter total projected amount of the contract; Fixed Term/Simplified Renewal - enter current period amount):</i> CURRENT: \$130,598.85 AMENDED: FUNDING SOURCE(S) ☒ State ☐ Federal ☐ Other
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FOR MULTI-YEAR AGREEMENTS ONLY - CONTRACT PERIOD AND FUNDING AMOUNT:
 (Out years represent projected funding amounts)

#	CURRENT PERIOD	CURRENT AMOUNT	AMENDED PERIOD	AMENDED AMOUNT
1				
2				
3				
4				
5				

ATTACHMENTS PART OF THIS AGREEMENT:

- | | |
|---|---|
| ☐ Attachment A:

☐ Attachment B:

☐ Attachment C:
☐ Attachment D:
☐ Other: | ☐ A-1 Program Specific Terms and Conditions
☐ A-2 Federally Funded Grants

☐ B-1 Expenditure Based Budget
☐ B-2 Performance Based Budget
☐ B-3 Capital Budget
☐ B-1(A) Expenditure Based Budget (Amendment)
☐ B-2(A) Performance Based Budget (Amendment)
☐ B-3(A) Capital Budget (Amendment) |
|---|---|

Contract Number: # BOE01 - C004569 - 1110000

IN WITNESS THEREOF, the parties hereto have executed or approved this Master Contract on the dates below their signatures.

CONTRACTOR:

Albany County

By: _____

Printed Name

Title: _____

Date: _____

STATE AGENCY:

NYS Board of Elections

By: _____

Printed Name

Title: _____

Date: _____

STATE OF NEW YORK

County of _____

On the ____ day of _____, _____, before me personally appeared _____, to me known, who being by me duly sworn, did depose and say that he/she resides at _____, that he/she is the _____ of the _____, the contractor described herein which executed the foregoing instrument; and that he/she signed his/her name thereto as authorized by the contractor named on the face page of this Master Contract.

(Notary) _____

ATTORNEY GENERAL'S SIGNATURE

STATE COMPTROLLER'S SIGNATURE

Printed Name

Printed Name

Title: _____

Title: _____

Date: _____

Date: _____