

# ALBANY COUNTY SHERIFF'S OFFICE

**CRAIG D. APPLE, SR.**  
SHERIFF



**MICHAEL S. MONTELEONE**  
EXECUTIVE UNDERSHERIFF

County Court House  
Albany, New York 12207 (518) 487-5400  
[WWW.ALBANYCOUNTYSHERIFF.COM](http://WWW.ALBANYCOUNTYSHERIFF.COM)

July 28, 2025

Honorable Joanne Cunningham  
Legislative Clerk's Office  
112 State Street, Room 710  
Albany, New York 12207

Re: Request for Legislative Action  
Budget Amendment

Jo  
Dear Chairwoman Cunningham:

Enclosed please find the Albany County Sheriff's Office Request for Legislative Action relative to the above captioned.

Briefly, this request is to fund a full time Commander position at the Albany County Sheriff's Office. There will be no additional cost to the county to fund this position as this is budget neutral.

Please present the enclosed at the next available Legislative Meeting for consideration and action. Thank you and if you have any questions please feel free to contact me.

Sincerely  
  
Craig D. Apple Sr.  
Sheriff

Cc. Hon. Daniel P. McCoy, County Executive  
Hon. Wanda Willingham, Audit & Finance Committee

## REQUEST FOR LEGISLATIVE ACTION

### Description (e.g., Contract Authorization for Information Services):

..title

Request for Legislative approval for personnel adjustments at the Albany County Sheriff's Office

..body

Date: July 28, 2025 Submitted By: Craig D. Apple, Sr.  
Department: Sheriff's Office Title: Sheriff  
Attending Meeting: Sheriff Craig D. Apple, Sr. Phone: 518-487-5440

Purpose of Request: Budget Amendment Enter text.

### **CONTRACT TERMS/CONDITIONS:**

Party Names and Addresses:

Enter text.

Term: (Start/end date or duration) Enter text.

Amount/Raise Schedule/Fee: Enter text.

### **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: 100%

State: 0% Local: 0%

### **County Budget Accounts:**

Revenue Account and Line: Enter text.

Revenue Amount: Enter text.

Appropriation Account and Line: Enter text.

Appropriation Amount: Enter text.

### **ADDITIONAL INFORMATION:**

Mandated Program/Service: Yes ☐ No ☒

If Mandated, Cite Authority: Enter text.

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: Enter text.

### **DESCRIPTION OF REQUEST:** (state briefly why legislative action is requested)

Position necessary to ensure proper functioning and safety of the Sheriff's Office.

**APPROPRIATIONS**

ACCOUNT NO.	RESOLUTION DESCRIPTION	INCREASE	DECREASE	ANNUAL SALARY	COMMENTS
A 3110 1 2309 007	379312 Commander	38,386.00		117,399.00	Payroll check 9/4
A 3110 1 6236 002	370139 Clerk Typist		20,000.00	38,377.00	Reduce Position
A 3110 1 6192 001	379154 Keyboard Specialist		18,386.00	35,895.00	Reduce Position
<b>TOTAL APPROPRIATIONS</b>		<u>38,386.00</u>	<u>38,386.00</u>		

**ESTIMATED REVENUES**

ACCOUNT NO.	RESOLUTION DESCRIPTION	DECREASE	INCREASE	UNIT COST	COMMENTS
<b>TOTAL ESTIMATED REVENUES</b>		<u>0.00</u>	<u>0.00</u>		
<b>GRAND TOTALS</b>		<u><u>38,386.00</u></u>	<u><u>38,386.00</u></u>		