

ILLINOIS STATE LIBRARY, SPRINGFIELD, IL 62756  
PUBLIC LIBRARY ANNUAL REPORT  
1986-1987

Every public library in Illinois is required by law (Chapter 81, Sec. 4-10, and elsewhere in the Illinois Revised Statutes) to file this annual report with the State Library. The purpose of this report is to obtain and publish data on the resources and services of all Illinois public libraries for use by all concerned. Each library is asked to file this report with its system headquarters **AS SOON AS POSSIBLE UPON (AND BY NO LATER THAN 30 DAYS AFTER)** completion of its fiscal year ending between July 1, 1986, and June 30, 1987. Please complete and return this form promptly. (By law, public library districts have until Oct. 1 to file this report, however it would be appreciated if the form is filed by Aug. 1.) Every public library district should send the State Library a copy of the certified audit of its accounts within 6 months of the close of the fiscal year. That document can be sent to the State Library later.

Please do **not** leave any item blank. Enter "0" if the appropriate entry for an item is zero or "none." Enter "N.A." if an item does not apply to your library. If an exact figure is not available for a particular item, but it is known that the amount is greater than zero, enter an estimate of the amount. Type your responses or print in black ink. To help prevent mistakes in assembling photocopies of several different libraries' reports, please write the name of your library in the line provided in the right hand margin of pages 2-6.

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IDENTIFICATION

1. Location Decatur \_\_\_\_\_ 1  
*Name of the municipality in which the central library is located.*
  2. Librarian James C. Seidl/City Librarian \_\_\_\_\_ / (title) 2  
*Give the name of the librarian in the following order: first name, last name. Married women should use their own names, not their husband's first name (e.g., Mary Jones, NOT Mrs. John Jones).*
  3. Legal name of central library Decatur Public Library \_\_\_\_\_ 3  
*A CENTRAL LIBRARY is the single unit library or the unit which is the administrative center, where the principal collections are kept and handled. Also called MAIN LIBRARY.*
  4. Mailing address (include street and zip code) 247 East North Street, Decatur, IL 62523 \_\_\_\_\_ 4
  5. Library telephone (include area code) (217) 428-6617 \_\_\_\_\_ 5  
*If your library has more than one telephone number, report the number you want listed in **Illinois Libraries**.*
  6. Library system Rolling Prairie Library System \_\_\_\_\_ 6
  7. Population residing in tax base area 93,939 \_\_\_\_\_ 7  
*Use latest official federal census figure.*
  8. If this library levies taxes on and serves more than one corporate community, list here the names of all counties, cities, towns, villages and townships so taxed and served, and identify those of which it serves only a part and not all. NA \_\_\_\_\_ 8
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GENERAL INFORMATION

9. Opening and closing hours of the central library for use by the public in a typical week last October (i.e., a week with no holidays and in which the library was open its regular hours): Monday 9 am to 9 pm ; Tuesday 9 am to 9 pm ; Wednesday 9 am to 9 pm ; Thursday 9 am to 9 pm ; Friday 9 am to 9 pm ; Saturday 9 am to 5:30 pm ; Sunday closed to \_\_\_\_\_ 9
10. Total number of branches (supply names and addresses on a separate sheet) ..... 0 \_\_\_\_\_ 10  
*A branch is a library facility in separate quarters with its own collection of books, permanent paid staff, and open for use by all persons on a regular schedule. Do not include reading centers, collections of books for hospital patients, etc.*
11. Total number of bookmobiles ..... 2 \_\_\_\_\_ 11

**Registered Borrowers**

12. Total number of resident borrower's cards in force as of the last day of the fiscal year 37,963 12  
 Do NOT include nonresident borrowers here. If you do not have exact information as of the last day of the fiscal year, please estimate using the most accurate and recent information available.

Number of nonresident borrower's cards and the annual fee, if any, as of the last day of the fiscal year for each of the following types of cards:

	Type of Nonresident Card	Number		Fee (for use of this library)	
		(a)	(b)	(a)	(b)
13.	<b>Family</b> .....	<u>204</u>		<u>52.00</u>	13
14.	<b>Student</b> .....				14

(a) For each type of nonresident card, report the number of cards on file as of the last day of the fiscal year. Report the total of non-resident cards, both for system-wide use and for use of this library only.

(b) Report the amount charged for one year for each type of nonresident card for use of YOUR LIBRARY ONLY. If it is the same as for system-wide use, specify that fee.

**RESOURCES OWNED**

	Held at End of Last FY (a)	Withdrawn During FY (b)	Added During FY (c)	Held at End of This FY (d)	
15. Number of books	<u>207,328</u>	<u>7,078</u>	<u>15,086</u>	<u>215,336</u>	15
<i>Report number of different physical volumes in your library for which you provide at least minimal access through the library's catalog (on cards, in book form, on microfiche, online etc.). Include government documents arranged by Su Docs classification. Exclude periodicals and microforms.</i>					
16. Video recordings and films	<u>1,727</u>	<u>40</u>	<u>468</u>	<u>2,155</u>	16
<i>Report number of copies, of all sizes. Include motion picture films, videotapes, videocassettes, and videodiscs. Do NOT include slides or filmstrips.</i>					
17. Audio recordings	<u>10,769</u>	<u>791</u>	<u>764</u>	<u>10,742</u>	17
<i>Report number of copies, of all sizes. Include phonorecords, tapes, cassettes, compact disks, etc.</i>					

**Periodicals (Magazines and newspapers only)**

18. Number of titles currently received .....	<u>608</u>	18
<i>Exclude duplicates. Include periodicals received by gift subscriptions, in microform, or as government documents.</i>		
19. Number of titles for which back issues are held for more than one year .....	<u>793</u>	19
<i>Report the number of titles of back issues of bound AND unbound periodicals, including microforms. Exclude duplicates.</i>		

**USE OF RESOURCES (Report for your entire fiscal year)**

20. Number of adult materials loaned .....	<u>442,785</u>	20
<i>Count here all adult and young adult materials borrowed by patrons from your library (and any branches, bookmobiles or other agency), including interlibrary loans received from other libraries, bulk loan materials, reciprocal borrowing transactions, and all print and non-print media such as films, records and art prints.</i>		
21. Number of juvenile materials loaned .....	<u>310,467</u>	21
22. TOTAL loans (sum of lines 20 & 21) .....	<u>753,252</u>	22
23. Number of reference (as opposed to directional) questions by phone or in person. Answer line 23a if you have data for the year; if not, use lines 23b and c.		
a. For the year: asked by adults <u>14,650</u> ; asked by children <u>7,847</u> ; total <u>22,497</u> .		
b. For any one week in October: asked by adults _____; asked by children _____; total _____.		
c. For any one week in April: asked by adults _____; asked by children _____; total _____.		23
<i>A reference question is a question which requires the use of books, periodicals or other resources such as index tools, the library catalog, online data bases or people outside the library.</i>		

\*If it is easier for you to give us (in either line 23a or 23b-c) the number of reference questions asked in the Adult Department and in the Children's Department (and not all asked by adults and children respectively), do so and check here \_\_\_\_\_

**FINANCIAL INFORMATION** (Report whole dollars only. Report for your entire fiscal year. Report all funds received or spent, but do NOT include funds spent by others for the benefit of the library.)

NOTE: If a certified audit of library accounts is prepared, please submit a copy as a supplement to this report on or before October 1, 1987.

**Library Receipts by Source** (Do not include balance from previous year or income from tax anticipation warrants)

24. Local government (Include capital income from sale of bonds and specify amount in footnote. Do not include income from tax anticipation warrants. Show revenue sharing funds in lines 26a-26b)  
(use whole dollars only) 1,380,324 24
25. State government (exclude federal funds distributed by the state)
- a. Per capita grants (use whole dollars only) 91,830 25a
  - b. Equalization aid (use whole dollars only) 0 25b
  - c. Corporate replacement tax (use whole dollars only) 142,736 25c
  - d. Other (specify) (use whole dollars only) 0 25d
26. Federal government (include federal funds distributed by the state)
- a. Revenue Sharing received for operating expenditures (use whole dollars only) 0 26a
  - b. Revenue Sharing received for capital expenditures (use whole dollars only) 0 26b
  - c. Other federal funds received (use whole dollars only) 0 26c
- Include federal money received through the state, e.g., LSCA grants, paid directly to your library.*
27. All other receipts (use whole dollars only) 626,261 27  
*Report all monetary receipts not reported above, e.g., endowment income, gifts and donations, fines, payments for contract services, interest income, and receipts from a library system or from a loan or mortgage.*
28. TOTAL receipts (sum of lines 24-27) (use whole dollars only) 2,241,151 28

**Library Expenditures by Category (regardless of the source of funds)**

29. Salaries and wages for staff (other than building maintenance staff) including fringe benefits  
(use whole dollars only) 1,253,671 29  
*Include salaries and wages before deductions, and fringe benefits paid by the library, such as insurance, IMRF, social security, etc. Report salaries and wages for maintenance staff on line 30.*
30. Salaries and wages for building maintenance staff, including fringe benefits  
(use whole dollars only) 92,114 30  
*Include salaries and wages before deductions, and fringe benefits paid by the library, such as insurance, IMRF, social security, etc.*
31. Printed materials (use whole dollars only) 197,436 31  
*Include expenditures for books, periodicals, microforms, pamphlets, government documents, etc.*
32. Nonprint materials (use whole dollars only) 37,659 32  
*Include expenditures for all materials used by visual projection and/or sound reproduction (e.g., films, phonorecords, tape cassettes, filmstrips, slides, etc.) and for framed pictures, sculpture, etc.*
33. All other operating expenditures not entered above (use whole dollars only) 235,429 33  
*Include expenditures for library and general office supplies, processing costs, commercial binding and rebinding, equipment, rent, utilities, repairs, etc. Report purchase of fixed assets in line 34.*
34. Capital outlay for building construction (use whole dollars only) 0 34  
*Show here the amount spent this year on construction of a new building or of an addition to or remodeling of an existing building, which cost at least \$1000.*
35. Capital outlay for all other fixed assets (use whole dollars only) 37,296 35  
*Report all expenditures for land and improvements to land, for the purchase of existing buildings, for long-term debt retirement (e.g., mortgage payments), for equipment costing over \$1000, etc.*
36. TOTAL of all expenditures (sum of lines 29-35) (use whole dollars only) 1,853,605 36  
*Lines 28 and 36 need not agree.*

**PERSONNEL** (Report status as of the last day of the fiscal year)

**37. Staff Data** (only for people paid by the library).

*Group A: Professional librarians, media and audiovisual specialists, etc.*

List each Group A employee on a separate line below, and give the information requested in columns I-VI. Attach another page if needed. Do not include persons employed as short-term substitutes. Count in Group B a business manager or other person not a librarian.

- I. Name of employee. Do not include any vacant position other than head librarian.
- II. Identify as "cataloger," "children's librarian," or "reference librarian" each person who regularly spends at least 75% of his/her work week in duties characteristic of or directly related to each of these positions. For each other librarian, record the title of his/her position.
- III. Use the highest appropriate number in the following code to indicate the extent of formal education: (1) less than a bachelor's degree, (2) a bachelor's degree with less than a minor in library science and with or without graduate study in a subject field, (3) a bachelor's degree, with at least a minor (18 semester hours) in librarianship or educational media and with or without some graduate study in those fields, or (4) a master's degree in librarianship, information science, instructional technology or educational media, with or without further study.
- IV. Sex. Use F for female and M for male.
- V. Hours worked per week. If exact number is not known, supply your best estimate.

(I) Name of Employee	(II) Title of Position	(III) Education	(IV) Sex	(V) Hours Worked Per Week	(VI) Hourly Rate or Annual Salary
James C. Seidl	City Librarian	4	M	40	42,900
Shirley A. Apley	Head, Home Read. Dept.	4	F	40	27,678
Sharon R. Bakula	Catalog Librarian	4	f	40	26,356
Catherine C. Gross	Children's Librarian	4	F	40	27,678
Jerald A. Merrick	Reference Librarian	4	M	40	32,040
Catherine J. Ritchie	Gen'l. Serv. Librarian	4	F	40	24,507
Steven H. Serber	Extension Librarian	4	M	40	27,678

\* Library assistants are now counted in group B, per State Library instructions.

**Group B:** Full-time or part-time technical and clerical employees (including full-time pages)

Total number of hours all Group B employees worked in a typical week	15.80
Minimum hourly rate actually paid (convert annual salary to hourly rate)	\$ 6.09
Maximum hourly rate actually paid (convert annual salary to hourly rate)	\$ 12.67

**Group C:** Part-time hourly paid pages or shelvers

Total number of hours all Group C employees worked in a typical week	120
Minimum hourly rate actually paid (convert annual salary to hourly rate)	\$ 5.01
Maximum hourly rate actually paid (convert annual salary to hourly rate)	\$ 6.09

**Group D:** Full-time or part-time building maintenance, security or plant operation employees

Total number of hours all Group D employees worked in a typical week	140
Minimum hourly rate actually paid (convert annual salary to hourly rate)	\$ 9.00
Maximum hourly rate actually paid (convert annual salary to hourly rate)	\$ 13.97

(For ISL Use Only)

1:        /        2:        /        3:        /        4:        /        P:        N:        M:

**REFERENDA**

**38. Was your library involved in a referendum during the last fiscal year?**      Yes \_\_\_\_\_ No   X   **38**  
 If No, go directly to Line 40. If Yes, please attach a copy of the ballot or a statement of the proposition as presented to the voters. If more than one referendum occurred, report each separately.

39. For each type of referendum presented to the voters, indicate the date of the vote, and whether it passed or failed. For an annexation referendum, report the result in outlying areas separately from that in the city.

	Date of Referendum	Passed	Failed	Effective Date	
Tax Increase Referendum	_____	_____	_____	_____	39
Bond Issue Referendum	_____	_____	_____	_____	
Establishment Referendum	_____	_____	_____	_____	
Annexation Referendum	_____	_____	_____	_____	
Conversion Referendum	_____	_____	_____	_____	
Other (please specify)	_____	_____	_____	_____	

**CURRENT LIBRARY BOARD AND OFFICIALS**

NOTE: This information is used for directory purposes. REPORT THE MOST RECENT INFORMATION AVAILABLE.

40. President (a) John W. Mueller (c) 217 877-2634 40  
 (b) 632 Karen Drive, Decatur, IL 62526 (d) 7/88  
Name (Area Code) Telephone  
Complete Home Address
41. Vice-President (a) Mark Sorensen (c) 217 428-6850 41  
 (b) 289 S. Westlawn, Decatur, IL 62522 (d) 7/88  
Mo. & Yr. When Present Term Ends
42. Treasurer (a) none (c) \_\_\_\_\_ 42  
 (b) \_\_\_\_\_ (d) \_\_\_\_\_
43. Secretary (a) Janna Lutovsky (c) 217 429-9773 43  
 (b) 690 Cove Ct., Decatur, IL 62521 (d) 7/88
44. Other Members (a) John Akin (c) 217 422-4475 44  
 (b) 1740 Illini Drive, Decatur, IL 62521 (d) 7/89
45. (a) Jerrodean Martin (c) 217 428-4699 45  
 (b) 2595 St. Louis Bridge Road, Decatur, IL 62521 (d) 7/89
46. (a) Lucy Murphy (c) 217 429-0593 46  
 (b) 715 S. Monroe Street, Decatur, IL 62522 (d) 7/89
47. (a) Sharon Alpi (c) 217 423-6555 47  
 (b) 511 W. Macon Street, Decatur, IL 62522 (d) 7/87
48. (a) Martin Seidman (c) 217 428-0644 48  
 (b) 346 W. Macon Street, Decatur, IL 62522 (d) 7/87
49. (a) Edith Rossiter (c) 217 877-7082 49  
 (b) 18 Montez Drive, Decatur, IL 62526 (d) 7/87
50. (a) \_\_\_\_\_ (c) \_\_\_\_\_ 50  
 (b) \_\_\_\_\_ (d) \_\_\_\_\_
51. (a) \_\_\_\_\_ (c) \_\_\_\_\_ 51  
 (b) \_\_\_\_\_ (d) \_\_\_\_\_
52. Name of library attorney Edward Booth 52  
 Address 132 S. Water Street, Decatur, IL 62523 Telephone ( 217) 423-6076
53. Is the custodian of library funds a member of the board? Yes \_\_\_\_\_ No X 53
54. Surety company covering custodian of funds: Lumberman's Mutual 54
55. Amount of surety bond \$ 1,000,000 55

NOTE: *Illinois Revised Statutes, Chapter 81*, requires that the bond be "not less than 50% of the total funds received by the library in the last fiscal year" for municipalities of less than 50,000 population (Paragraph 4-9), and for public library districts (Paragraph 1004-10).

56. Name of certified public accountant employed by the library or your corporate authority:  
 Name: Peat, Marwick, Mitchell & Co. Address: 250 N. Water Street, Decatur, IL  
*Report the name and address of the certified public accountant preparing your annual audit. If the audit is done in conjunction with your corporate authority, obtain the name of the auditor from your corporate authority.*

57. Person to contact (if necessary) concerning the information reported on this form:  
 Name: James C. Seidl Telephone: (217) 428-6617

CERTIFICATION

58. This annual report is filed by the undersigned public library pursuant to Chapter 81, Section 4-10, **Illinois Revised Statutes**, for the fiscal year commencing 5/1 19 86 and ending 4/30 19 87  
*Report the beginning and ending dates (month, day, and year) of your most recently completed fiscal year.*

59. Legal name of library Decatur Public Library

60. Signature of the librarian James Seidl

The board of directors herewith accepts the above report, certifies its essential accuracy and transmits it to the Illinois State Library in accordance with the above statute.

61. James Lutzky John W. Mueller  
 Secretary (signature) President (signature)

*Requires the signature of the secretary and president of the current library board.*

62. 5-28-87  
 Date signed by the president and secretary of the board.

Thank you for completing this report. Please send one copy to your local government and send one original signed copy to your library system headquarters. The system headquarters will return a photocopy to you, make another for itself, a third for the University of Illinois Library Research Center, and send the original to the State Library.

You are invited to attach to this report comments or suggestions as to how we can improve this form, what questions were difficult for you to answer, on what other topics you would like to see information gathered and made available, etc.

(For System Use Only)  
Full name of system staff member who reviewed this form: Paul V. Johnson

One-time questions on topics of current interest:

- Does your library have a disaster plan? yes \_\_\_ no X
- Does your library have a preservation/conservation plan? yes X no \_\_\_
- If you use computers for any of the following functions, indicate for each the make and model of the computer and/or the name of the turnkey system:
  - Circulation control (e.g., CLSI) CLSI
  - Cataloging (e.g., OCLC) OCLC
  - Access to other libraries' collections 0
  - Reference use of data bases (e.g., Dialog) 0
  - Book order (e.g., BATAB) 0
  - Financial records IBM mainframe
  - Indexing IBM AT
  - Other (specify) 0