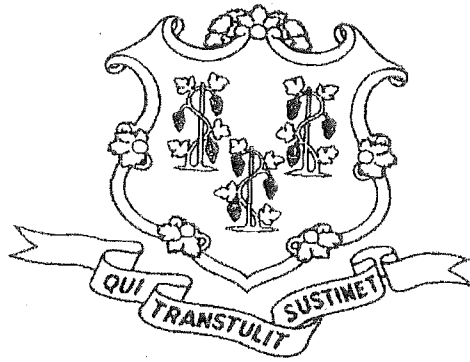


State of Connecticut



Annual Report of Long-Term Care Facility Cost Year 2019

Name of Facility (as licensed) Avon Convalescent Home, Inc., d/b/a Avon Health Center	
Address (No. & Street, City, State, Zip Code) 652 West Avon Road, Avon, CT 06001	
Type of Facility	
<input checked="" type="checkbox"/> Chronic and Convalescent Nursing Home only (CCNH)	<input type="checkbox"/> Rest Home with Nursing Supervision only (RHNS) <input type="checkbox"/> (Specify)
Report for Year Beginning 10/1/2018	Report for Year Ending 9/30/2019

License Numbers:	CCNH 938-C	RHNS	(Specify)	Medicare Provider 07-5244
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Medicaid Provider Numbers:	CCNH 9381	RHNS	ICF-IID
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For Department Use Only

Sequence Number Assigned	Signed and Notarized	Date Received	Sequence Number Assigned	Signed and Notarized	Date Received

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General Information

Name of Facility (as licensed) Avon Convalescent Home, Inc., d/b/a Avon Health Ce	License No. 938-C	Report for Year Ended 9/30/2019	Page 1	of 37
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Administrator's/Owner's Certification

MISREPRESENTATION OR FALSIFICATION OF ANY INFORMATION CONTAINED IN THIS COST REPORT MAY BE PUNISHABLE BY FINE AND/OR IMPRISONMENT UNDER STATE OR FEDERAL LAW.

I HEREBY CERTIFY that I have read the above statement and that I have examined the accompanying Cost Report and supporting schedules prepared for Avon Convalescent Home, Inc., d/b/a Avon Health Center [facility name], for the cost report period beginning October 1, 2018 and ending September 30, 2019, and that to the best of my knowledge and belief, it is a true, correct, and complete statement prepared from the books and records of the provider(s) in accordance with applicable instructions.

I hereby certify that I have directed the preparation of the attached General Information and Questionnaires, Schedule of Resident Statistics, Statements of Reported Expenditures, Statements of Revenues and the related Balance Sheet of this Facility in accordance with the Reporting Requirements of the State of Connecticut for the year ended as specified above.

I have read this Report and hereby certify that the information provided is true and correct to the best of my knowledge under the penalty of perjury. I also certify that all salary and non-salary expenses presented in this Report as a basis for securing reimbursement for Title XIX and/or other State assisted residents were incurred to provide resident care in this Facility. All supporting records for the expenses recorded have been retained as required by Connecticut law and will be made available to auditors upon request.

{a} Subject to Desk Audit Review

Signed (Administrator)		Date	Signed (Owner)	Date
Printed Name (Administrator) Tina L. Richardson			Printed Name (Owner) Russell Schwartz	
Subscribed and Sworn to before me:	State of	Date	Signed (Notary Public)	Comm. Expires / /
Address of Notary Public				

(Notary Seal)

State of Connecticut
Department of Social Services
 55 Farmington Avenue, Hartford, Connecticut 06105

Data Required for Real Wage Adjustment			Page 1A	of 37
Name of Facility Avon Convalescent Home, Inc., d/b/a Avon Health Center	Period Covered:	From 10/1/2018	To 9/30/2019	
Address of Facility 652 West Avon Road, Avon, CT 06001				
Report Prepared By Marcum LLP	Phone Number 203-781-9600	Date 12/30/2019		
Item	Total	CCNH	RHNS	(Specify)
1. Dietary wages paid \$				
2. Laundry wages paid \$				
3. Housekeeping wages paid \$				
4. Nursing wages paid \$				
5. All other wages paid \$				
6. Total Wages Paid \$				
7. Total salaries paid \$				
8. Total Wages and Salaries Paid (As per page 10 of Report) \$				

Wages - Compensation computed on an hourly wage rate.

Salaries - Compensation computed on a weekly or other basis which does not generally vary, based on the number of hours worked.

DO NOT include Fringe Benefit Costs.

General Information and Questionnaire
Type of Facility - Organization Structure

Phone No. of Facility 860-673-3521		Report for Year Ended 9/30/2019	Page 2	of 37
Name of Facility (as shown on license) Avon Convalescent Home, Inc., d/b/a Avon Health Center		Address (No. & Street, City, State, Zip) 652 West Avon Road, Avon, CT 06001		
License Numbers:	CCNH 938-C	RHNS	(Specify)	Medicare Provider No. 07-5244
Type of Facility (Check appropriate box(es))				
<input checked="" type="checkbox"/> Chronic and Convalescent Nursing Home only (CCNH) <input type="checkbox"/> Rest Home with Nursing Supervision only (RHNS) <input type="checkbox"/> (Specify)				
Type of Ownership (Check appropriate box)				
<input type="radio"/> Proprietorship <input type="radio"/> LLC <input type="radio"/> Partnership <input checked="" type="radio"/> Profit Corp. <input type="radio"/> Non-Profit Corp. <input type="radio"/> Government <input type="radio"/> Trust				
If this facility opened or closed during report year provide:		Date Opened	Date Closed	
Has there been any change in ownership or operation during this report year?		<input type="radio"/> Yes	<input checked="" type="radio"/> No	If "Yes," explain fully.
N/A				
Administrator				
Name of Administrator Tina L. Richardson		Nursing Home Administrator's License No.:	1984	
Other Operators/Owners who are assistant administrators (full or part time) of this facility.				
Name N/A		License No.:		

General Information and Questionnaire
Corporate Owners

Name of Facility Avon Convalescent Home, Inc., d/b/a Avon H	License No. 938-C	Report for Year Ended 9/30/2019	Page 3A	of 37
If this facility is owned or operated as a corporation, provide the following information:				
Legal Name of Corporation	Business Address	State(s) in Which Incorporated		
Avon Convalescent Home, Inc., d/b/a Avon Health Center	652 West Avon Road, Avon, CT 06001	CT		
Name of Directors, Officers	Business Address	Title	No. Shares Held by Each	
Freda Schwartz	652 West Avon Road, Avon, CT 06001	older / Pres / Se	100	
Russell Schwartz	652 West Avon Road, Avon, CT 06001	VP / Treasurer		
Names of Stockholders Owning at Least 10% of Shares				
Freda Schwartz	652 West Avon Road, Avon, CT 06001	Stockholder	100	

General Information and Questionnaire Individual Proprietorship

Name of Facility	License No.	Report for Year Ended	Page	of
Avon Convalescent Home, Inc., d/b/a Avon Health	938-C	9/30/2019	3B	37

If this facility is owned or operated as an individual proprietorship, provide the following information:

Owner(s) of Facility

N/A

General Information and Questionnaire
Related Parties*

Name of Facility Avon Convalescent Home, Inc., d/b/a Avon Health Cen	License No. 938-C	Report for Year Ended 9/30/2019	Page 4	of 37
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Are any individuals receiving compensation from the facility related through marriage, ability to control, ownership, family or business association? Yes No If "Yes," provide the Name/Address and complete the information on Page 11 of the report.

Are any individuals or companies which provide goods or services, including the rental of property or the loaning of funds to this facility, related through family association, common ownership, control, or business association to any of the owners, operators, or officials of this facility? Yes No If "Yes," provide the following information:

Name of Related Individual or Company	Business Address	Also Provides Goods/Services to Non-Related Parties			Description of Goods/Services Provided	Indicate Where Costs are Included in Annual Report Page # / Line #	Cost Reported	Actual Cost to the Related Party
		Yes	No	%**				
West Hartford Health and Rehabilitation Center	130 Loomis Drive, West Hartford, CT 06107	<input type="radio"/>	<input checked="checked" type="radio"/>		Clinical Liason	Pg . 13 / Line B12	40,971	40,971
Avon Realty, LLC	652 West Avon Road, CT 06001	<input type="radio"/>	<input checked="checked" type="radio"/>		Depreciation (Movable Equipment)	Page 22 / Line 7d	35,151	35,151
Avon Realty, LLC	652 West Avon Road, CT 06001	<input type="radio"/>	<input checked="checked" type="radio"/>		Depreciation (Leasehold Improvements)	Page 22 / Line 8c	75,454	75,454
Avon Realty, LLC	652 West Avon Road, CT 06001	<input type="radio"/>	<input checked="checked" type="radio"/>		Rental of Real Property	Various See Attached	517,391	517,391
Brookview / Avon Realty	Various	<input type="radio"/>	<input checked="checked" type="radio"/>		Related Party Due To / From	Page 32 / Line D6		
		<input type="radio"/>	<input checked="checked" type="radio"/>					
		<input type="radio"/>	<input checked="checked" type="radio"/>					
		<input type="radio"/>	<input checked="checked" type="radio"/>					

* Use additional sheets if necessary.

** Provide the percentage amount of revenue received from non-related parties.

Avon Health Care
 Reconciliation of Related Party Rent
 September 30, 2019

	Cost Reported	Actual Cost to Provider	Page on Cost Report	Line on Page
Portion Related to Taxes	144,065 {a}	144,065	22	10b
Portion Related to Personal Property Taxes	6,441 {a}	6,441	22	10c
Portion Related to Insurance	70,493 {a}	70,493	27	14a
Portion Related to Mortgage Insurance	19,256 {a}	19,256	22	9
Sewage Use	0 {a}	-	22	6f
Actual Rent per Cost Report	<u>277,136 {a}</u>	<u>277,136</u>	22	9
Total	<u>517,391</u>	<u>517,391</u>		

Tickmarks
 {a}

Recorded on the books of the related realty and applicable to the operation of the facility, as a result of HUD refinance.

General Information and Questionnaire
Basis for Allocation of Costs

Name of Facility Avon Convalescent Home, Inc., d/b/a Avon Hea	License No. 938-C	Report for Year Ended 9/30/2019	Page 5	of 37
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If the facility is licensed as CDH and/or RCH or provides AIDS or TBI services with special Medicaid rates, costs must be allocated to CCNH and RHNS as follows:

Item	Method of Allocation
Dietary	Number of meals served to residents
Laundry	Number of pounds processed
Housekeeping	Number of square feet serviced
Nursing	Number of hours of routine care provided by EACH employee classification, i.e., Director (or Charge Nurse), Registered Nurses, Licensed Practical Nurses, Aides and Attendants
Direct Resident Care Consultants	Number of hours of resident care provided by EACH specialist (<i>See listing page 13</i>)
Maintenance and operation of plant	Square feet
Property costs (depreciation)	Square feet
Employee health and welfare	Gross salaries
Management services	Appropriate cost center involved
All other General Administrative expenses	Total of Direct and Allocated Costs

The preparer of this report must answer the following questions applicable to the cost information provided.

1. In the preparation of this Report, were all costs allocated as required? Yes No If "No," explain fully why such allocation was not made.

N/A

2. Explain the allocation of related company expenses and attach copy of appropriate supporting data.

Russell Schwartz, Director of Operations, salary is allocated between West Hartford Health and Rehab Center and Avon Health Center. The split is 57% and 43% respectively, based upon beds.

3. Did the Facility appropriately allocate and self-disallow direct and indirect costs to non-nursing home cost centers? (e.g., Assisted Living, Home Health, Outpatient Services, Adult Day Care Services, etc.)

Yes No If "No," explain fully why such allocation was not made.

N/A

General Information and Questionnaire Leases (Excluding Real Property)

Operating Leases - Include all long-term leases for motor vehicles and equipment that have not been capitalized. Short-term leases or as needed rentals should not be included in these amounts.

Name of Facility		License No.	Report for Year Ended			Page	of	
Avon Convalescent Home, Inc., d/b/a Avon Health Center		938-C	9/30/2019			6	37	
Name and Address of Lessor	Related * to Owners, Operators, Officers		Description of Items Leased	Date of Lease**	Term of Lease	Annual Amount of Lease	Amount Claimed	
	Yes	No						
DeLage Landen Financial Services, PO Box 41601, Philadelphia, PA 19101	<input type="radio"/>	<input checked="" type="radio"/>	2 Copy Machines	11/01/14	60 Months	11,807	11,807	
Neopost New England, 3 Metal Drive, Southington, CT 06489	<input type="radio"/>	<input checked="" type="radio"/>	Postage Machine	12/01/15	63 Months	1,047	1,047	
	<input type="radio"/>	<input checked="" type="radio"/>						
	<input type="radio"/>	<input checked="" type="radio"/>						
	<input type="radio"/>	<input checked="" type="radio"/>						
	<input type="radio"/>	<input checked="" type="radio"/>						
	<input type="radio"/>	<input checked="" type="radio"/>						
	<input type="radio"/>	<input checked="" type="radio"/>						
	<input type="radio"/>	<input checked="" type="radio"/>						
	<input type="radio"/>	<input checked="" type="radio"/>						
Is a Mileage Log Book Maintained for All Leased Vehicles ?						<input type="radio"/> Yes	<input checked="" type="radio"/> No	Total ***
							12,854	

* Refer to Page 4 for definition of related. If "Yes," transaction should be reported on Page 4 also.
 ** Attach copies of newly acquired leases.
 *** Amount should agree to Page 22, Line 6e.

Annual Report of Long-Term Care Facility

CSP-7 Rev. 6/95

**General Information and Questionnaire
Accounting Basis**

Name of Facility Avon Convalescent Home, Inc., d/t	License No. 938-C	Report for Year Ended 9/30/2019	Page 7	of 37
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The records of this facility for the period covered by this report were maintained on the following basis:

- Accrual Cash Modified Cash

Is the accounting basis for this period the same as for the previous period? Yes No If "No," explain.

N/A

Independent Accounting Firm

Name of Accounting Firm	Address (No. & Street, City, State, Zip Code)
1 Marcum LLP	555 Long Wharf Drive, 8th Floor, New Haven, CT 06511
2 Cohn Reznick	1780 Glastonbury Blvd., Glastonbury, CT 06033
3	
4	

Services Provided by This Firm (*describe fully*)

1 Cost Report Preparation / Rate Matters	\$ 12,060
2 General Accounting / Year End Work / Tax Returns	\$ 18,300
3	\$
4	\$
	Charge for Services Provided
	\$ 30,360

Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.

- Yes No Page 15, Line 1d

Legal Services Information

Name of Legal Firm or Independent Attorney	Telephone Number
1 Jackson Lewis	914-328-0404
2 Murtha Cullina	860-240-6000
3 SB2, Inc.	717-585-7186
4 State Marshall	860-658-2739
5 Treasurer State of Connecticut	860-702-3000

Address (*No. & Street, City, State, Zip Code*)

- 1 1 North Broadway, White Plains, NY 10601
- 2 185 Asylum Street, Hartford, CT 06013
- 3 1426 N. 3rd Street, Suite 200; PO Box 5400, Harrisburg, PA 17102
- 4 P.O. Box 42, Simsbury, CT 06070
- 5 55 Elm St #2, Hartford, CT 06106

Services Provided by This Firm (*describe fully*)

1 Labor Relations Advice Counsel	\$ 8,360
2 Regulatory Compliance / Collections (\$5,033 disallowed on Pg 28)	\$ 7,491
3 Regulatory Advisory Services	\$ 17,500
4 Conservatorship (Disallowed on Pg 28)	\$ 70
5 Probate Fees (Disallowed on Pg 28)	\$ 225
	Charge for Services Provided
	\$ 33,646

Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.

- Yes No Page 15, Line 1e

Schedule of Resident Statistics

Name of Facility Avon Convalescent Home, Inc., d/b/a Avon Health Center			License No. 938-C		Report for Year Ended 9/30/2019				Page 8	of 37			
	Total All Levels	Total CCNH Level	Total RHNS Level	Total (Specify)	Period 10/1 Thru 6/30				Period 7/1 Thru 9/30				
					Total	CCNH	RHNS	(Specify)	Total	CCNH	RHNS	(Specify)	
1. Certified Bed Capacity													
A. On last day of PREVIOUS report period	120	120			120	120			120	120			
B. On last day of THIS report period	120	120			120	120			120	120			
2. Number of Residents													
A. As of midnight of PREVIOUS report period	108	108			108	108			109	109			
B. As of midnight of THIS report period	115	115			109	109			115	115			
3. Total Number of Days Care Provided During Period													
A. Medicare	2,531	2,531			1,971	1,971			560	560			
B. Medicaid (Conn.)	28,703	28,703			21,300	21,300			7,403	7,403			
C. Medicaid (other states)													
D. Private Pay	5,664	5,664			4,268	4,268			1,396	1,396			
E. State SSI for RCH													
F. Other (Specify) Hospice / Managed Medicare / C	3,164	3,164			2,212	2,212			952	952			
G. Total Care Days During Period (3A thru F)	40,062	40,062			29,751	29,751			10,311	10,311			
4. Total Number of Days Not Included in Figures in 3G for Which Revenue Was Received for Reserved Beds													
A. Medicaid Bed Reserve Days													
B. Other Bed Reserve Days	16	16			5	5			11	11			
5. Total Resident Days (3G + 4A + 4B)	40,078	40,078			29,756	29,756			10,322	10,322			

Annual Report of Long-Term Care Facility

Schedule of Resident Statistics (Cont'd)

Name of Facility Avon Convalescent Home, Inc., d/b/a Avon H		License No. 938-C		Report for Year Ended 9/30/2019			Page 9		of 37					
4. Were there any changes in the certified bed capacity during the report year? <input type="radio"/> Yes <input checked="" type="radio"/> No														
If "YES", provide the following information:														
Date of Change	Place of Change			Change in Beds						Capacity After Change			Reason for Change	
	CCNH	RHNS	(Specify)	Lost			Gained			CCNH	RHNS	(Specify)		
	(1)	(2)	(3)	(1)	(2)	(3)	(1)	(2)	(3)	CCNH	RHNS	(Specify)		
N/A														
5. If there was any change in certified bed capacity during the report year (as reported in item 4 above) provide the number of RESIDENT DAYS for 90 days following the change.														
Change in Resident Days							CCNH	RHNS	(Specify)					
1st change														
2nd change														
3rd change														
4th change														
6. Number of Residents and Rates on September 30 of Cost Year														
Item	Medicare		Medicaid		Self-Pay			Other State Assisted						
	CCNH		CCNH	RHNS	CCNH	RHNS	(Specify)	R.C.H.	ICF-MR					
No. of Residents	20		81		14									
Per Diem Rate														
a. One bed rm.	Various		243.45		508.00									
b. Two bed rms.	Various		243.45		490.00									
c. Three or more bed rms.														
7. Total Number of Physical Therapy Treatments							TOTAL	CCNH	RHNS	(Specify)				
A. Medicare - Part B							3,512	3,512						
B. Medicaid (Exclusive of Part B)														
1. Maintenance Treatments							49	49						
2. Restorative Treatments														
C. Other							10,840	10,840						
D. Total Physical Therapy Treatments							14,401	14,401						
8. Total Number of Speech Therapy Treatments														
A. Medicare - Part B							1,173	1,173						
B. Medicaid (Exclusive of Part B)														
1. Maintenance Treatments														
2. Restorative Treatments														
C. Other							1,210	1,210						
D. Total Speech Therapy Treatments							2,383	2,383						
9. Total Number of Occupational Therapy Treatments														
A. Medicare - Part B							2,835	2,835						
B. Medicaid (Exclusive of Part B)														
1. Maintenance Treatments							34	34						
2. Restorative Treatments														
C. Other							11,099	11,099						
D. Total Occupational Therapy Treatments							13,968	13,968						

Report of Expenditures - Salaries & Wages

Name of Facility	License No.	Report for Year Ended	Page	of		
Avon Convalescent Home, Inc., d/b/a Avon Health Center	938-C	9/30/2019	10	37		
Are time records maintained by all individuals receiving compensation? <input checked="" type="radio"/> Yes <input type="radio"/> No						
	Total Cost and Hours					
Item	CCNH	Hours	RHNS	Hours	(Specify)	Hours
A. Salaries and Wages*						
1. Operators/Owners (Complete also Sec. I of Schedule A1)						
2. Administrator(s) (Complete also Sec. III of Schedule A1)	101,074	2,080				
3. Assistant Administrator (Complete also Sec. IV of Schedule A1)						
4. Other Administrative Salaries (telephone operator, clerks, receptionists, etc.)	362,871	12,453				
5. Dietary Service						
a. Head Dietitian	43,028	1,055				
b. Food Service Supervisor	69,009	2,081				
c. Dietary Workers	436,149	25,757				
6. Housekeeping Service						
a. Head Housekeeper	48,029	2,141				
b. Other Housekeeping Workers	305,436	22,834				
7. Repairs & Maintenance Services						
a. Engineer or Chief of Maintenance	70,306	2,152				
b. Other Maintenance Workers	50,640	2,115				
8. Laundry Service						
a. Supervisor						
b. Other Laundry Workers	100,131	5,386				
9. Barber and Beautician Services						
10. Protective Services						
11. Accounting Services						
a. Head Accountant						
b. Other Accountants						
12. Professional Care of Residents						
a. Directors and Assistant Director of Nurses	205,145	4,189				
b. RN						
1. Direct Care	1,366,335	36,653				
2. Administrative**	391,813	13,553				
c. LPN						
1. Direct Care	567,157	17,446				
2. Administrative**						
d. Aides and Attendants	1,992,737	115,392				
e. Physical Therapists						
f. Speech Therapists						
g. Occupational Therapists						
h. Recreation Workers	145,764	6,499				
i. Physicians						
1. Medical Director						
2. Utilization Review						
3. Resident Care***						
4. Other (Specify)						
j. Dentists						
k. Pharmacists						
l. Podiatrists						
m. Social Workers/Case Management	203,661	6,165				
n. Marketing						
o. Other (Specify) See Attached Schedule						
<i>A-13. Total Salary Expenditures</i>	6,459,285	277,951				

* Do not include in this section any expenditures paid to persons who receive a fee for services rendered or who are paid on a contract basis.

** Administrative - costs and hours associated with the following positions: MDS Coordinator, Inservice Training Coordinator and Infection Control Nurse. Such costs shall be included in the direct care category for the purposes of rate setting.

*** This item is not reimbursable to facility. For Title 19 residents, doctors should bill DSS directly. Also, any costs for Title 18 and/or other private pay residents must be removed on Page 28.

Schedule of Other Salaries and Wages (Page 10)

Position	CCNH		RHNS		(Specify)	
	\$	Hours	\$	Hours	\$	Hours
	-					
Total	\$ -	-	\$ -	-	\$ -	-

Schedule of Other Fees (Page 13)

Service	CCNH		RIINS		(Specify)	
	\$	Hours	\$	Hours	\$	Hours
	-					
Medical Records	\$ 20,850	96				
Clinical Liason	40,971	894				
Clinical Psychiatrist	1,000	8				
Total	\$ 62,821	998	\$ -	-	\$ -	-

**Schedule A1 - Salary Information for Operators/Owners; Administrators,
Assistant Administrators and Other Related Parties***

Name of Facility				License No.	Report for Year Ended			Page	of	
Avon Convalescent Home, Inc., d/b/a Avon Health Center				938-C	9/30/2019			11	37	
Name	Salary Paid			Fringe Benefits and/or Other Payments (describe fully)	Full Description of Services Rendered	Total Hours Worked	Line Where Claimed on Page 10	Name and Address of All Other Employment**	Total Hours Worked	Compensation Received
	CCNH	RHNS	(Specify)							
Section I - Operators/Owners										
Leonard J. Schwartz (No salary paid)				Dental Insurance (See page 28a)	President			Brookview Corp., 130 Loomis Drive, West Hartford, CT		
Section II - Other related parties of Operators/Owners employed in and paid by facility (EXCEPT those who may be the Administrator or Assistant Administrators who are identified on Page 12).										
Russell Schwartz	121,964			Non Discriminatory	Director of Operations	897	A4			

* No allowance for salaries will be considered unless full information is provided. Use additional sheets if required.

** Include **all** employment worked during the cost year.

**Schedule A1 - Salary Information for Operators/Owners; Administrators,
Assistant Administrators and Other Related Parties***

Name of Facility (as licensed)				License No.	Report for Year Ended			Page	of	
Avon Convalescent Home, Inc., d/b/a Avon Health Center				938-C	9/30/2019			12	37	
Name	Salary Paid			Fringe Benefits and/or Other Payments (describe fully)	Full Description of Services Rendered	Total Hours Worked	Line Where Claimed on Page 10	Name and Address of All Other Employment**	Total Hours Worked	Compensation Received
	CCNH	RHNS	(Specify)							
Section III - Administrators***										
Tina L. Richardson	101,074			Non Discriminatory	Administrator	2,080	A2			
Section IV - Assistant Administrators										

*No allowance for salaries will be considered unless full information is provided. Use additional sheets if required.

** Include **all** other employment worked during the cost year.

*** If more than one Administrator is reported, include dates of employment for each.

Annual Report of Long-Term Care Facility

CSP-13 Rev. 9/2002

B. Report of Expenditures - Professional Fees

Name of Facility	License No.	Report for Year Ended	Page	of		
Avon Convalescent Home, Inc., d/b/a Avon Health C	938-C	9/30/2019	13	37		
Total Cost and Hours						
Item	CCNH	Hours	RHNS	Hours	(Specify)	Hours
*B. Direct care consultants paid on a fee for service basis in lieu of salary (For all such services complete Schedule B1)						
1. Dietitian						
2. Dentist	7,578	109				
3. Pharmacist	10,976	189				
4. Podiatrist						
5. Physical Therapy						
a. Resident Care	239,833	4,192				
b. Other						
6. Social Worker						
7. Recreation Worker						
8. Physicians						
a. Medical Director (entire facility)	54,720	1,413				
b. Utilization Review (Title 18 and 19 only) monthly meeting						
c. Resident Care**						
d. Administrative Services facility						
1. Infection Control Committee (Quarterly meetings)						
2. Pharmaceutical Committee (Quarterly meetings)						
3. Staff Development Committee (Once annually)						
e. Other (Specify)						
9. Speech Therapist						
a. Resident Care	81,352	1,283				
b. Other						
10. Occupational Therapist						
a. Resident Care	238,286	5,173				
b. Other						
11. Nurses and aides and attendants						
a. RN						
1. Direct Care						
2. Administrative***						
b. LPN						
1. Direct Care						
2. Administrative***						
c. Aides	12,484	518				
d. Other						
12. Other (Specify) See Attached Schedule	62,821	998				
B-13 Total Fees Paid in Lieu of Salaries	708,050	13,875				

* Do not include in this section management consultants or services which must be reported on Page 16 item M-12 and supported by required information, Page 17.

** This item is not reimbursable to facility. For Title 19 residents, doctors should bill DSS directly. Also, any costs for Title 18 and/or other private pay residents must be removed on Page 28.

*** Administrative - costs and hours associated with the following positions: MDS Coordinator, Inservice Training Coordinator and Infection Control Nurse. Such costs shall be included in the direct care category for the purposes of rate setting.

Report of Expenditures
Schedule B1 - Information Required for Individual(s) Paid on Fee for Service Basis*

Name of Facility Avon Convalescent Home, Inc., d/b/a Avon Health Center		License No. 938-C	Report for Year Ended 9/30/2019	Page 14	of 37
Name & Address of Individual	Full Explanation of Service	Related** to Owners, Operators, Officers		Explanation of Relationship	
		Yes	No		
Gerident Solutions, PO Box 290539, Wethersfield, CT 06129	Dental Consultant Service	<input type="radio"/>	<input checked="" type="radio"/>	N/A	
ValueRX Pharmacy Services, 54 Tuttle Place, Middletown, CT 06457	Pharmacy Consultant	<input type="radio"/>	<input checked="" type="radio"/>	N/A	
Alliance Rehab, 1520 Kensington Road, Oak Brook, IL 60523	Physical, Speech and Occupational Therapy	<input type="radio"/>	<input checked="" type="radio"/>	N/A	
Hartford Hospital (Jeffrey Robbins, MD), 80 Seymour Street, Hartford, CT 06102	Medical Director	<input type="radio"/>	<input checked="" type="radio"/>	N/A	
University Physicians (Jaclyn Olsen, MD), PO Box 660, Hartford, CT 06143	Assistant Medical Director	<input type="radio"/>	<input checked="" type="radio"/>	N/A	
The Nurse Network, PO Box 982, Southington, CT 06496	Contract CNAs	<input type="radio"/>	<input checked="" type="radio"/>	N/A	
MassTex Imaging, 3 Electronics Ave, Suite 201 Danvers, MA 01923-1099	Speech Therapy (Endoscopic Evaluations)	<input type="radio"/>	<input checked="" type="radio"/>	N/A	
Celtic Consulting, Maureen McCarthy, RN, BS, 507 East Main Street, Torrington, CT 06790	Medical Records, Compliance Audits, Education	<input type="radio"/>	<input checked="" type="radio"/>	N/A	
Mary Alice Spratto	Clinical Liaison	<input checked="" type="radio"/>	<input type="radio"/>	West Hartford Health & Rehabilitation	
Valley Psychiatry, 542 Hopmeadow Street, PMB 138, Simsbury, CT 06070	Clinical Psychiatrist	<input type="radio"/>	<input checked="" type="radio"/>	N/A	
		<input type="radio"/>	<input checked="" type="radio"/>		
		<input type="radio"/>	<input checked="" type="radio"/>		
		<input type="radio"/>	<input checked="" type="radio"/>		
		<input type="radio"/>	<input checked="" type="radio"/>		
		<input type="radio"/>	<input checked="" type="radio"/>		
		<input type="radio"/>	<input checked="" type="radio"/>		
		<input type="radio"/>	<input checked="" type="radio"/>		
		<input type="radio"/>	<input checked="" type="radio"/>		
		<input type="radio"/>	<input checked="" type="radio"/>		
		<input type="radio"/>	<input checked="" type="radio"/>		
		<input type="radio"/>	<input checked="" type="radio"/>		
		<input type="radio"/>	<input checked="" type="radio"/>		

* Use additional sheets if necessary.
 ** Refer to Page 4 for definition of related.

C. Expenditures Other Than Salaries - Administrative and General

Name of Facility	License No.	Report for Year Ended		Page	of
Avon Convalescent Home, Inc., d/b/a Avon Health	938-C	9/30/2019		15	37
Item	Total	CCNH	RHNS	(Specify)	
1. Administrative and General					
a. Employee Health & Welfare Benefits					
1. Workmen's Compensation	\$ 125,571	125,571			
2. Disability Insurance	\$				
3. Unemployment Insurance	\$ 60,756	60,756			
4. Social Security (F.I.C.A.)	\$ 429,710	429,710			
5. Health Insurance	\$ 859,084	859,084			
6. Life Insurance (employees only) (not-owners and not-operators)	\$				
7. Pensions (Non-Discriminatory) (not-owners and not-operators)	\$ 105,244	105,244			
8. Uniform Allowance	\$				
9. Other (<i>Specify</i>) See Attached Schedule	\$ 8,286	8,286			
b. Personal Retirement Plans, Pensions, and Profit Sharing Plans for Owners and Operators (Discriminatory)*	\$				
c. Bad Debts*	\$ 60,000	60,000			
d. Accounting and Auditing	\$ 30,360	30,360			
e. Legal (<i>Services should be fully described on Page 7</i>)	\$ 33,646	33,646			
f. Insurance on Lives of Owners and Operators (<i>Specify</i>)*	\$				
g. Office Supplies	\$ 34,681	34,681			
h. Telephone and Cellular Phones					
1. Telephone & Pagers	\$ 8,594	8,594			
2. Cellular Phones	\$ 554	554			
i. Appraisal (<i>Specify purpose and attach copy</i>)*	\$				
j. Corporation Business Taxes (<i>franchise tax</i>)	\$				
k. Other Taxes (<i>Not related to property - See Page 22</i>)					
1. Income*	\$ 28,000	28,000			
2. Other (<i>Specify</i>) See Attached Schedule	\$				
3. Resident Day User Fee	\$ 731,455	731,455			
Subtotal	\$ 2,515,941	2,515,941			

* Facility should self-disallow the expense on Page 28 of the Cost Report.

(Carry Subtotals forward to next page)

***** DO NOT Include Holiday Parties / Awards / Gifts to Staff**

Schedule of Other Employee Benefits

Description	CCNH	RHNS	(Specify)
	-		
Tuition Expense	\$ 2,500		
New Hire Expense	4,248		
Employee Physicals / Medication	1,538		
Total	\$ 8,286	\$ -	\$ -

Schedule of Other Taxes

Description	CCNH	RHNS	(Specify)
	-		
Total	\$ -	\$ -	\$ -

C. Expenditures Other Than Salaries (cont'd) - Administrative and General

Name of Facility	License No.	Report for Year Ended		Page	of
Avon Convalescent Home, Inc., d/b/a Avon Health Cen	938-C	9/30/2019		16	37
Item	Total	CCNH	RHNS	(Specify)	
Subtotals Brought Forward:		2,515,941	2,515,941		
l. Travel and Entertainment					
1. Resident Travel and Entertainment	\$				
2. Holiday Parties for Staff	\$	1,903	1,903		
3. Gifts to Staff and Residents	\$	5,670	5,670		
4. Employee Travel	\$	3,541	3,541		
5. Education Expenses Related to Seminars and Conventions	\$	23,640	23,640		
6. Automobile Expense (<i>not purchase or depreciation</i>)	\$				
7. Other (<i>Specify</i>) See Attached Schedule	\$				
m. Other Administrative and General Expenses					
1. Advertising Help Wanted (<i>all such expenses</i>)	\$	6,821	6,821		
2. Advertising Telephone Directory (<i>all such expenses</i>)***	\$				
3. Advertising Other (<i>Specify</i>)*** See Attached Schedule	\$	48,025	48,025		
4. Fund-Raising***	\$				
5. Medical Records	\$				
6. Barber and Beauty Supplies (if this service is supplied directly and not by contract or fee for service)***	\$				
7. Postage	\$	4,561	4,561		
* 8. Dues and Membership Fees to Professional Associations (<i>Specify</i>) See Attached Schedule	\$	9,643	9,643		
8a. Dues to Chamber of Commerce & Other Non-Allowable Org.***	\$	140	140		
9. Subscriptions	\$	2,956	2,956		
10. Contributions*** See Attached Schedule	\$	1,817	1,817		
11. Services Provided by Contract (<i>Specify and Complete Schedule C-2, Page 21 for each firm or individual</i>)	\$	43,168	43,168		
12. Administrative Management Services**	\$				
13. Other (<i>Specify</i>) See Attached Schedule	\$	103,104	103,104		
C-14 Total Administrative & General Expenditures	\$	2,770,930	2,770,930		

* Do not include Subscriptions, which should go in item 9.

** Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

*** Facility should self-disallow the expense on Page 28 of the Cost Report.

Schedule of Other Travel and Entertainment

Description	CCNH	RHNS	(Specify)
	-		
Total Other Travel and Entertainment	\$ -	\$ -	\$ -

Schedule of Other Advertising

Description	CCNH	RHNS	(Specify)
	-		
Business Promotion Advertising (Disallowed on Pg 28)	\$ 48,025		
Total Other Advertising	\$ 48,025	\$ -	\$ -

Schedule of Dues

Description	CCNH	RHNS	(Specify)
	-		
ACHCA Dues	\$ 753		
ALTCFM Dues	122		
SHRM Dues	189		
CAHCF Dues	8,539		
ICNC Dues	40		
Total Dues	\$ 9,643	\$ -	\$ -

Schedule of Contributions

Description	CCNH	RHNS	(Specify)
	-		
Donation Expense (Disallowed on Pg 28)	1,817		
Total Contributions	\$ 1,817	\$ -	\$ -

Schedule of Other Administrative and General

Description	CCNH	RHNS	(Specify)
	-		
Licenses	\$ 2,528		
Purchased Service Office	1,382		
Bank Charges	4,319		
Employee Relations (Disallowed on Pg 28a)	14,343		
Computer Services	75,088		
Volunteer Expense	96		
American Express Membership Fee	140		
Employee Food (Disallowed on Pg 28a)	5,208		
Total Other Administrative and General	\$ 103,104	\$ -	\$ -

Schedule C-1 - Management Services*

Name of Facility Avon Convalescent Home, Inc., d/b/a Avo	License No. 938-C	Report for Year Ended 9/30/2019	Page of 17 37
Name & Address of Individual or Company Supplying Service	Cost of Management Service	Full Description of Mgmt. Service Provided	Indicate Where Costs are Included in Annual Report Page #/Line #
N/A			

* In addition to management fees reported on page 16, line m12 include any additional management company charges or allocations of home office overhead costs reported elsewhere in the Annual Report.

C. Expenditures Other Than Salaries (cont'd) - Dietary Basis for Allocation of Costs (See Note on Page 5)

Name of Facility		License No.	Report for Year Ended		Page	of
Avon Convalescent Home, Inc., d/b/a Avon Health Cen		938-C	9/30/2019		18	37
Item		Total	CCNH	RHNS	(Specify)	
2. Dietary						
a. In-House Preparation & Service						
1.	Raw Food	\$ 261,665	261,665			
2.	Non-Food Supplies	\$ 40,578	40,578			
3.	Other (Specify) _____	\$				
b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21)						
c. Other (Specify) _____						
2D. Total Dietary Expenditures (2a + b + c + d)		\$ 302,243	302,243			
2E. Dietary Questionnaire		Total	CCNH	RHNS	(Specify)	
F.	Resident Meals: Total no. of meals served per day:*					
G.	Is cost of employee meals included in 2D?	<input type="radio"/> Yes	<input checked="" type="radio"/> No			
H.	Did you receive revenue from employees?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify amt.		
I.	Where is the revenue received reported in the Cost Report? (Page/Line Item)					
J.	Is cost of meals provided to persons other than employees or residents (i.e., Board Members, Guests) included in 2D?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify cost.		
K.	Is any revenue collected from these people?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify amt.		
L.	Where is the revenue received reported in the Cost Report? (Page/Line Item)					
M.	Is cost of food (other than meals, e.g., snacks at monthly staff meetings, board meetings) provided to employees included in 2D?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify cost.		
N.	Is any revenue collected from employees?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify amt.		
O.	Where is the revenue received reported in the Cost Report? (Page/Line Item)					

* Count each tray served to a resident at meal time, but do not count liquids or other "between meal" snacks.

C. Expenditures Other Than Salaries (cont'd) - Laundry Basis for Allocation of Costs
(See Note on Page 5)

Name of Facility		License No.	Report for Year Ended	Page	of
Avon Convalescent Home, Inc., d/b/a Avon Health Centre		938-C	9/30/2019	19	37
Item		Total	CCNH	RHNS	(Specify)
3. Laundry					
a. In-House Processing*		Lbs.			
1. Bed linens, cubicle curtains, draperies, gowns and other resident care items washed, ironed, and/or processed.***		Amt. \$	8,935	8,935	
2. Employee items including uniforms, gowns, etc. washed, ironed and/or processed.***		Lbs.			
		Amt. \$			
3. Personal clothing of residents washed, ironed, and/or processed.***		Lbs.			
		Amt. \$			
4. Repair and/or purchase of linens.***		Lbs.			
		Amt. \$			
b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21)		\$			
c. Other (Specify) Laundry Supplies		\$	8,672	8,672	
3D. Total Laundry Expenditures (3a + b + c)		\$	17,607	17,607	
3E. Laundry Questionnaire					
F. Is cost of employee laundry included in 3D?		<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify cost.	
G. Did you receive revenue from employees?		<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify amt.	
H. Where is the revenue received reported in the Cost Report?		(Page/Line Item)			
I. Is Cost of laundry provided to persons other than employees or residents included in 3D?		<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify cost.	
J. Did you receive revenue from these people?		<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify amt.	
K. Where is the revenue received reported in the Cost Report?		(Page/Line Item)			

* Do not include salaries from page 10 as part of dollar values recorded in 1, 2, 3, and 4.

All allocations should add to total recorded in 3D.

*** Pounds of Laundry only required for multi-level facilities.

**C. Expenditures Other Than Salaries (cont'd) - Housekeeping and Resident Care
 Basis for Allocation of Costs (See Note on Page 5)**

Name of Facility		License No.	Report for Year Ended		Page	of
Avon Convalescent Home, Inc., d/b/a Avon Hea		938-C	9/30/2019		20	37
Item			Total	CCNH	RHNS	(Specify)
4.	Housekeeping	Sq. Ft. Serviced by Personnel				
a.	In-House Care					
1.	Supplies - Cleaning (<i>Mops, pails, brooms, etc.</i>)	Amt. \$	40,190	40,190		
b.	Purchased Services (<i>by contract other than through Management Services</i>) (<i>Complete Schedule C-2 att. Page 21</i>)	Sq. Ft. Serviced by Personnel				
		Amt. \$				
C.	Other (<i>Specify</i>)	\$				
4D.	Total Housekeeping Expenditures (4a + b + c)	\$	40,190	40,190		
5.	Resident Care (Supplies)**					
a.	Prescription Drugs***					
1.	Own Pharmacy	\$				
2.	Purchased from Value Rx	\$	186,017	186,017		
b.	Medicine Cabinet Drugs	\$	249,595	249,595		
c.	Medical and Therapeutic Supplies	\$	7,541	7,541		
d.	Ambulance/Limousine***	\$	3,021	3,021		
e.	Oxygen					
1.	For Emergency Use	\$				
2.	Other***	\$	19,604	19,604		
f.	X-rays and Related Radiological Procedures***	\$	6,055	6,055		
g.	Dental (<i>Not dentists who should be included under salaries or fees</i>)	\$				
h.	Laboratory***	\$	24,431	24,431		
i.	Recreation	\$	28,542	28,542		
j.	Direct Management Services*	\$				
k.	Indirect Management Services*	\$				
l.	Other (Specify)**** See Attached Schedule	\$	87,281	87,281		
5M.	Total Resident Care Expenditures (5a - 5j)	\$	612,087	612,087		

* Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

** Do not include any fees to professional staff, these should be reported on Page 13, or, if paid on salary basis, on Page 10.

*** Facility should self-disallow the expense on Page 29 of the Cost Report.

**** ICFMR's should provide a detailed schedule of all Day Program Costs.

Schedule of Other Resident Care

Description	CCNH	RHNS	(Specify)
	-		
Therapy Equipment Rental	\$ 10,958		
Physical Therapy Supplies	4,216		
IV Therapy Expense	8,639		
Supplies Patient Personal	3,404		
Nursing Equipment Rental	3,744		
Nursing Equipment Med A	7,814		
Medical Software Subscriptions	48,506		
Total Other Resident Care	\$ 87,281	\$ -	\$ -

Report of Expenditures
Schedule C-2 - Individuals or Firms Providing Services by Contract *

Name of Facility Avon Convalescent Home, Inc., d/b/a Avon Health Center			License No. 938-C		Report for Year Ended 9/30/2019			Page of 21 37		
Name of Individual or Company	Address	Related ** to Owners, Operators, Officers		Explanation of Relationship	Full Explanation of Service Provided*	Total Cost/Page Ref.***				
		Yes	No			CCNH	RHNS	(Specify)	Pg	Line
Paylocity	Arlington Heights, IL 60004	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Payroll Processing	23,150			16	m11
Paine's Rubbish Removal	PO Box 307, Simsbury, CT 06070	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Trash Removal / Recycling	19,984			22	6f
Procaire	P.O. Box 801, Tolland, CT 06084	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Equipment / Nursing Supplies	26,484			Var	Var
St. Francis Laboratory	114 Woodland Street, Hartford, CT 06105	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Lab	23,997			20	5h
Matrixcare	9201, Minneapolis, MN 55480-9201	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Clinical Software	38,615			20	5i
TM Technology Systems	Wallingford, CT 06492-1904	<input type="radio"/>	<input checked="" type="radio"/>	N/A	IT / Technology Support	55,948			16	m13
Aegis Energy Services, Inc.	Springfield, MA 01101-2511	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Cogeneration Maintenance	11,031			Var	Var
Pete's Landscaping	806 Hillstown Road, Manchester, CT 06040	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Groundskeeping	15,551			22	6f
Goldstar Property Maintenance	Avenue, Unionville, CT 06085	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Snow Removal	15,421			22	6f
Imagine IT Consulting, Inc.	PO Box 310629, Newington, CT 06131	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Website Maintenance	12,000			16	m13
LTC Consulting Services	Americas, Lakewood, NJ 08701	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Consulting Services	15,543			16	m11
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							

* List all contracted services over \$10,000. Use additional sheets if necessary.

** Refer to Page 4 for definition of related.

*** Please cross-reference amount to the appropriate page in the Annual Report (Pages 16, 18, 19, 20 or 22).

C. Expenditures Other Than Salaries (cont'd) - Maintenance and Property

Name of Facility	License No.	Report for Year Ended			Page	of
Avon Convalescent Home, Inc., d/b/a Avon Ho	938-C	9/30/2019			22	37
Item	Total	CCNH	RHNS	(Specify)		
6. Maintenance & Operation of Plant						
a. Repairs & Maintenance	\$ 89,314	89,314				
b. Heat	\$ 57,399	57,399				
c. Light & Power	\$ 40,054	40,054				
d. Water	\$ 49,953	49,953				
e. Equipment Lease (<i>Provide detail on page 6</i>)	\$ 12,854	12,854				
f. Other (<i>itemize</i>)	\$ 99,209	99,209				
See Attached Schedule						
6g. Total Maint. & Operating Expense (6a - 6f)	\$ 348,783	348,783				
7. Depreciation (<i>complete schedule page 23*</i>)						
a. Land Improvements	\$					
b. Building & Building Improvements	\$ 375	375				
c. Non-Movable Equipment	\$					
d. Movable Equipment	\$ 54,289	54,289				
*7e. Total Depreciation Costs (7a + b + c + d)	\$ 54,664	54,664				
8. Amortization (<i>Complete att. Schedule Page 24*</i>)						
a. Organization Expense	\$					
b. Mortgage Expense	\$					
c. Leasehold Improvements	\$ 208,720	208,720				
d. Other (<i>Specify</i>)	\$					
*8e. Total Amortization Costs (8a + b + c + d)	\$ 208,720	208,720				
9. Rental payments on leased real property less real estate taxes included in item 10b	\$ 296,392	296,392				
10. Property Taxes						
a. Real estate taxes paid by owner	\$					
b. Real estate taxes paid by lessor	\$ 144,065	144,065				
c. Personal property taxes	\$ 12,920	12,920				
11. Total Property Expenses (7e + 8e + 9 + 10)	\$ 716,761	716,761				

* Amounts entered in these items must agree with detail on Schedule for Depreciation and Amortization Page 23 and Page 24.

Schedule of Other Repairs and Maintenance

Description	CCNH	RHNS	(Specify)
	-		
Groundskeeping	\$ 17,133		
Rubbish Removal	19,984		
Snow Removal	15,421		
Purchase Maintenance Contract	46,671		
Total Other Repairs and Maintenance	\$ 99,209	\$ -	\$ -

Depreciation Schedule

Name of Facility Avon Convalescent Home, Inc., d/b/a Avon Health Center				License No. 938-C		Report for Year Ended 9/30/2019			Page 23	of 37			
Property Item				Historical Cost Exclusive of Land	Less Salvage Value	Cost to Be Depreciated	Accumulated Depreciation to Beginning of Year's Operations	Method of Computing Depreciation	Useful Life	Depreciation for This Year	Totals		
A. Land Improvements													
1. Acquired prior to this report period													
2. Disposals (attach schedule)													
3. Acquired during this report period (attach schedule)													
A-4. Subtotal													
B. Building and Building Improvements													
1. Acquired prior to this report period				7,495		7,495	1,500	S/L	20	375			
2. Disposals (attach schedule)													
3. Acquired during this report period (attach schedule)													
B-4. Subtotal											375		
C. Non-Movable Equipment													
1. Acquired prior to this report period													
2. Disposals (attach schedule)													
3. Acquired during this report period (attach schedule)													
C-4. Subtotal													
		Is a mileage logbook maintained?		Date of Acquisition		Historical Cost Exclusive of Land	Less Salvage Value	Cost to Be Depreciated	Accumulated Depreciation to Beginning of Year's Operations	Method of Computing Depreciation	Useful Life	Depreciation for This Year	Totals
		Yes	No	Month	Year								
D. Movable Equipment													
1. Motor Vehicles (Specify name, model and year of each vehicle)													
a.													
b.													
c.													
d.													
2. Movable Equipment													
a. Acquired prior to this report period				Var	Var	1,018,152		1,018,152	757,917	S/L	Various	49,006	
b. Disposals (attach schedule)				Var	Var	(69,670)		(69,670)	(68,924)	S/L	Various		
c. Acquired during this report period (attach schedule)				Var	Var	34,454		34,454		S/L	Various	5,283	
D-3. Subtotal													54,289
E. Total Depreciation													54,664

Schedule of Land Improvements Acquired during this report period

Acquisition Date	Description of Item	Cost	Useful Life	Depreciation
Additions:				
Total additions for Land Improvements		\$ -		\$ - *
Deletions:				
Total deletions for Land Improvements		\$ -		\$ - **

*Ties to Page 23, Line A3

**Ties to Page 23, Line A2

Schedule of Building Improvements Acquired during this report period

Acquisition Date	Description of Item	Cost	Useful Life	Depreciation
Additions:				
Total additions for Building Improvements		\$ -		\$ - *
Deletions:				
Total deletions for Building Improvements		\$ -		\$ - **

*Ties to Page 23, Line B3

**Ties to Page 23, Line B2

Schedule of Non-Movable Equipment Acquired during this report period

Acquisition Date	Description of Item	Cost	Useful Life	Depreciation
Additions:				
Total additions for Non-Movable Equipment		\$ -		\$ - *
Deletions:				
Total deletions for Non-Movable Equipment		\$ -		\$ - **

*Ties to Page 23, Line C3

**Ties to Page 23, Line C2

Schedule of Movable Equipment Acquired during this report period

Acquisition Date	Description of Item	Cost	Useful Life	Depreciation
Additions:				
10/31/2018	special bed	\$ 3,627	12	\$ 302
10/31/2018	intel nuc 715BNK mini pc for nursing supervisor's office	904	5	181
10/31/2018	user refurbished nuc mini pc for south wing nursing station	978	5	196
12/31/2018	maxi 500 2H SP Bar & Scale	3,097	5	619
12/31/2018	hardware, software, setup, & installation	2,556	5	511
12/31/2018	hardware, software, setup, & installation	2,815	5	563
2/28/2019	ELO 17" all in one touch (backup touchscreens for cnas)	3,171	5	634
3/31/2019	air curtain refrigerator, dinex model #DXIRAC12LS	4,707	10	471
4/30/2019	10 chairs, 4 tables for professional development (Marla)	3,372	10	337
7/31/2019	NUC computers #741, 742 admissions/A/P	2,122	5	424
9/30/2019	dinex air curtain refrigerators	3,767	10	377
9/30/2019	TM nuc 3748-Liz social services, TM nuc #749- south wing	3,339	5	668
Total additions for Movable Equipment		\$ 34,454		\$ 5,283 *
Deletions:				
1/31/2005	Vacuum	\$ (624)		
1/31/2005	Call Cord	(1,945)		
3/31/2005	Computer	(525)		
4/30/2005	Food Warmer	(4,056)		
6/30/2005	Area Rug	(1,973)		
11/30/2005	Chart Racks	(3,168)		
10/31/2006	Rehab equipment	(3,129)		
11/30/2006	Thermal Base to Plate/Tray for patient meals	(1,475)		
1/31/2007	Secretary/base; server (furniture for lobby)	(912)		
6/30/2007	3 Round tables	(1,103)		
6/30/2007	12 Arm chairs	(2,424)		
11/29/2007	27 LCD TV	(8,589)		
1/10/2008	Rotary Toaster	(1,032)		
1/31/2008	Bookcase & console	(1,107)		
2/6/2008	2 LCD TV	(3,173)		
4/16/2008	Smart Them Base Dinex	(1,719)		
8/31/2008	Smart Them Base Dinex	(3,392)		
2/25/2009	8 Overbed Tables	(856)		
5/12/2009	6 Overbed Tables	(647)		
7/15/2009	3 Refrigerators for Rehab	(676)		
10/30/2009	6 Overbed Tables	(667)		
12/11/2009	42" LCD HDTV	(848)		
3/14/2010	2 HP 2035n Printers	(732)		
4/9/2010	6 Overbed Tables	(665)		
5/14/2010	6 Overbed Tables	(665)		
6/17/2010	6 Overbed Tables	(658)		
11/9/2010	Vital Signs Monitor (South Wing)	(1,604)		
4/12/2011	47" TV for PUB	(954)		
1/31/2012	HP 4530 Laptop for Dietician	(1,059)		
3/31/2012	Desktop for Medical Records	(1,579)		
5/16/2012	Desktop - Administrator	(798)		
5/16/2012	Epson G7S80 Scanner - Med Records	(956)		
6/30/2012	Desktop for A Wing #524	(803)		
10/1/2012	6 Overbed Tables	(626)		
4/5/2013	Blood Pressure Unit & Oximeter	(1,371)		
7/13/2013	TM Desktop Machines #563 and 564	(1,284)		
7/13/2013	Inwin Mini Desktop	(1,957)		
7/19/2013	4 Grey Task Chairs - South Unit	(583)		
8/31/2013	Computer Nursing Supervisor	(1,637)		
7/31/2014	Microsoft Office 2013	(3,191)		
8/31/2014	DNS Laptop	(744)		
9/12/2012	Disposal of 3 Elo Touch Screen Computers	(3,768)		
Total deletions for Movable Equipment		\$ (69,670)		\$ - **

*Ties to Page 23, Line D2c

**Ties to Page 23, Line D2b

Schedule of Leasehold Improvements Acquired during this report period

Acquisition Date	Description of Item	Cost	Useful Life	Depreciation
Additions:				

10/31/2018	north & south wing, replace all heating registers	\$ 1,340	15	\$ 89
12/31/2018	3 doors & associated hardware	4,493	15	300
12/31/2018	new backflow preventers- sprinklers	5,161	15	344
2/28/2019	loading dock door	2,309	15	154
5/31/2019	Install new air scoop, install new high capacity vent	5,143	15	343
6/30/2019	visitor entrance & additional parking signs	2,287	15	152
7/31/2019	estate wall & patio courtyard	6,669	15	445
7/31/2019	install patio in courtyard	10,890	15	726
7/31/2019	installed 79" of 5' high vinyl fencing	3,935	15	262
8/31/2019	replacement of compressor, filter drier...	3,570	15	238
9/30/2019	fenced in patio area delayed egress lock alternate	3,690	15	246
9/30/2019	outdoor patio wiring	1,546	15	103
10/31/2018	Replace RU #6 & heat exchange	14,945	20	747
5/31/2019	Flooring in pub, elevators, rehab gym, & front entry	19,029	15	1,269
7/31/2019	Resident room wallpaper	48,969	15	3,265
8/31/2019	Painting of building exterior	17,000	15	1,133
Total additions for Leasehold Improvement		\$ 150,976		\$ 9,816 *
Deletions:				
9/30/1989	Disposal of assets prior to 2008	\$ (160,667)		
4/30/2006	Dish machine work	(723)		
8/31/2006	Dish machine upgrade	(873)		
8/31/2006	Commercial disposal	(1,403)		
11/30/2006	Install heaters in elevator cabs	(1,000)		
11/30/2006	Install heaters in elevator cabs	(3,079)		
3/31/2007	Facility upgrades: paint, wallpaper, carpet, electrical...	(45,625)		
3/31/2007	Wallpaper	(954)		
12/14/2007	Hot water tank Motor	(1,748)		
7/31/2008	Smoking Shed	(1,494)		
3/31/2009	Replace Compressor Walk-in Freezer	(2,441)		
9/10/2009	Network Upgrade Hardware & Labor	(6,189)		
9/30/2009	Front Sign	(755)		
10/1/2009	Front Sign Sales Tax	(45)		
10/15/2008	Retrofit Lighting	(43,457)		
Total deletions for Leasehold Improvement		\$ (270,454)		\$ - **

*Ties to Page 24, Line C3

**Ties to Page 24, Line C2

Amortization Schedule*

Name of Facility			License No.		Report for Year Ended			Page	of
Avon Convalescent Home, Inc., d/b/a Avon Health Center			938-C		9/30/2019			24	37
Item	Date of Acquisition		Length of Amortization	Cost to Be Amortized	Accumulated Amort. to Beginning of Year's Operations	Basis for Computing Amortization**	Rate %	Amortization for This Year	Totals
	Month	Year							
A. Organization Expense									
1.									
2.									
3.									
A-4. Subtotal									
B. Mortgage Expense									
1.									
2.									
3.									
B-4. Subtotal									
C. Leasehold Improvements and Other									
1. Acquired prior to this report period	Var	Var	Various	3,931,887	2,572,360	S/L	Various	198,904	
2. Disposals (attach schedule)	Var	Var	Various	(270,454)	(270,454)	S/L	Various		
3. Acquired during this report period (attach schedule)	Var	Var	Various	150,976		S/L	Various	9,816	
C-4. Subtotal									208,720
D. Total Amortization									208,720

* Straight-line method must be used.

** Specify which of the following bases were used:

- A. Minimum of 5 years or 60 months.
- B. Life of mortgage; OR
- C. Remaining Life of Lease; OR
- D. Actual Life if owned by Related Party.

AVON HEALTH CENTER
BUILDINGS

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (YEARS)	MONTHLY DEPREC	Accum. 30-Sep-16	Depreciation 30-Sep-17	Accum. 30-Sep-17	Depreciation 30-Sep-18	Accum. 30-Sep-18	Depreciation 30-Sep-19	Accum. 30-Sep-19	NET VALUE
<i>2015 Additions:</i>															
RC Restoration	Storage Shed	9/14/2015	7,495	7,495	S/L	20	-	750	375	1,125	375	1,500	375	1,875	5,620
2019 Balance		Totals	\$ 7,495	\$ 7,495				\$ 750	\$ 375	\$ 1,125	\$ 375	\$ 1,500	\$ 375	\$ 1,875	\$ 5,620

AVON HEALTH CENTER
FURNITURE FIXTURES

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (YEARS)	MONTHLY DEPREC	Accum. 30-Sep-18	Depreciation 30-Sep-19	Accum. 30-Sep-19	NET VALUE
Balance Forward prior 2008							\$4,366	-	-	-	51,018
Build 'N Serve	2 Laptops	11-Oct-07	4,799	4,799	S/L	5	80	4,799	-	4,799	-
Harbor Sales	Northington Room Curtains	22-Oct-07	823	823	S/L	5	14	823	-	823	-
SMD	Pin Hole Camera	5-Oct-07	1,021	1,021	S/L	5	17	612	204	816	204
Digital Meida	27 LCD TV	29-Nov-07	8,589	8,589	S/L	5	143	8,589	-	8,589	-
Build 'N Serve	HP Laser Printer	31-Jan-08	1,001	1,001	S/L	5	17	1,001	-	1,001	-
Boston Showcase	Rotary Toaster	10-Jan-08	1,032	1,032	S/L	10	9	1,032	-	1,032	-
Gulf South Medical Supply	Matrix Bed	2-Jan-08	2,348	2,348	S/L	12	16	2,104	196	2,300	48
Puritan Furniture	Bookcase & console	31-Jan-08	1,107	1,107	S/L	20	5	594	-	594	513
Direct Supply	Vital Signs Monitor	28-Mar-08	1,607	1,607	S/L	8	17	1,607	-	1,607	-
Gulf South Medical Supply	Matrix Bed	18-Feb-08	1,405	1,405	S/L	12	10	1,249	117	1,366	39
Health Care Logistics	Emergency cart	19-Mar-08	849	849	S/L	10	7	849	-	849	-
Digital Meida	2 LCD TV	6-Feb-08	3,173	3,173	S/L	5	53	3,173	-	3,173	-
Direct Supply	Mobile Hydrocollator	11-Apr-08	1,178	1,178	S/L	10	10	1,178	-	1,178	-
Gulf South Medical Supply	Matrix Bed	16-Apr-08	1,499	1,499	S/L	12	10	1,312	125	1,437	62
HPC Foodservice	Smart Them Base DineX	16-Apr-08	1,719	1,719	S/L	5	29	1,719	-	1,719	-
Medline	Vital Signs Monitor	22-May-08	1,386	1,386	S/L	8	14	1,386	-	1,386	-
Suburban Stationers	Shredder	18-Apr-08	1,324	1,324	S/L	5	22	1,324	-	1,324	-
Arjo	Patient Lifts	30-Apr-08	16,072	16,072	S/L	10	134	16,072	-	16,072	-
Build 'N Serve	2 Computers	1-Jun-08	1,571	1,571	S/L	5	26	1,571	-	1,571	-
Total Communication	Digital Card System	19-Jun-08	1,655	1,655	S/L	5	28	1,655	-	1,655	-
Titan Mechanical	Replace Economizer	10-Jun-08	1,166	1,166	S/L	12	8	1,004	97	1,101	65
Build 'N Serve	2 computers	1-Jul-08	2,490	2,490	S/L	5	42	2,490	-	2,490	-
Industrial Time	Time Clock Software	31-Aug-08	981	981	S/L	5	16	981	-	981	-
Direct Supply	7 QT Stainless Steel Bowl	31-Aug-08	834	834	S/L	5	14	834	-	834	-
Hartford Provision	Smart Them Base DineX	31-Aug-08	3,392	3,392	S/L	5	57	3,392	-	3,392	-
Prior Year Adjustment							\$672	-	-	-	-
2008 Ending			\$ 1,141,944	\$ 1,142,571			\$ 5,834	\$ 61,350	\$ 739	\$ 62,089	\$ 51,949
Amano	Time Clock - Leased	1-Oct-08	\$ 7,974	\$ 7,974	S/L	10	\$ 66	7,974	-	7,974	-
JCPenney	Windsor Benches	1-Oct-08	522	522	S/L	15	3	348	35	383	138
Build 'N Serve	Desktop & Monitor - Karen's	1-Nov-08	1,541	1,541	S/L	5	26	1,541	-	1,541	-
Sears	Refrigerator	22-Oct-08	613	613	S/L	10	5	613	-	613	-
Jocrms Healthcare	Queen Anne Chair	10-Nov-08	884	884	S/L	15	5	584	59	643	240
Music Score	Piano	31-Dec-08	3,175	3,175	S/L	20	13	1,562	159	1,721	1,454
Chef's Equipment Emp	1 Gallon Blender	31-Dec-08	1,145	1,145	S/L	10	10	1,125	-	1,125	20
Lintech	Software & Installation	1-Jan-09	61,787	61,787	S/L	15	343	40,161	4,119	44,280	17,507
Build 'N Serve	New Server	1-Jan-09	7,155	7,155	S/L	5	119	7,155	-	7,155	-
Jocrms Healthcare	8 Overbed Tables	25-Feb-09	856	856	S/L	5	14	856	-	856	-
Harbor Linen	North Wing Day Room Valances	9-Mar-09	676	676	S/L	5	11	676	-	676	-
Encompass	3 Chairs Admissions Office	5-May-09	1,045	1,045	S/L	15	6	657	70	727	318
Jocrms Healthcare	6 Overbed Tables	12-May-09	647	647	S/L	5	11	647	-	647	-
HD Supply Facilities	4 Linen Carts	20-May-09	1,063	1,063	S/L	10	9	1,000	62	1,062	0
Best Buy (AMEX)	47" LCD TV for Rehab	31-May-09	1,124	1,124	S/L	5	19	1,124	-	1,124	-
Build 'N Serve	Server Rack	31-May-09	1,632	1,632	S/L	5	27	1,632	-	1,632	-
Build 'N Serve	Administrator Computer	30-Jun-09	1,166	1,166	S/L	5	19	1,166	-	1,166	-
Office Depot	3 Refrigerators for Rehab	15-Jul-09	676	676	S/L	10	6	626	50	676	(0)
Build 'N Serve	Dell Laptop for MDS Coordinator	31-Jul-09	1,007	1,007	S/L	5	17	1,007	-	1,007	-
Amex - Acc Hardware	5 Leaf Benches	15-Jul-09	583	583	S/L	15	3	360	39	399	184
	Disposals		(18,705)	(18,705)			(251)	-	-	-	(18,705)
2009 Balance			\$ 1,218,506	\$ 1,219,134			\$ 132,163	\$ 5,332	\$ 137,495	\$ 53,106	
Amex BestBuy	6 Overbed Tables	30-Oct-09	\$ 668	\$ 668	S/L	5	\$ 11	668	-	668	-
	42" LCD HDTV	11-Dec-09	848	848	S/L	5	\$ 14	848	-	848	-
	Dell for Nursing Secretary	1-Jan-10	686	686	S/L	5	\$ 11	686	-	686	-
	6 Lounge chairs		1,326	1,326	S/L	10	\$ 11	1,017	133	1,150	176
	2 HP 2035n Printers		732	732	S/L	5	\$ 12	732	-	732	-
	7 Dining Table Tops		923	923	S/L	5	\$ 15	923	-	923	-
	36 insulated bases		2,210	2,210	S/L	5	\$ 37	2,210	-	2,210	-
	6 Overbed Tables		665	665	S/L	5	\$ 11	665	-	665	-
	6 Overbed Tables		665	665	S/L	5	\$ 11	665	-	665	-
	6 Overbed Tables		658	658	S/L	5	\$ 11	658	-	658	-
	2 Patio Dining Sets w/Umbrellas		1,391	1,391	S/L	10	\$ 12	834	139	973	418
	Software Training		44,291	44,291	S/L	3	\$ 1,230	44,291	-	44,291	-
	Resident Rooms A&B Wings Blinds		2,598	2,598	S/L	5	\$ 43	2,598	-	2,598	-
	Enamel Shampoo Bowl		653	653	S/L	20	\$ 3	175	33	208	445

AVON HEALTH CENTER
FURNITURE FIXTURES

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (YEARS)	MONTHLY DEPREC.	Accum. 30-Sep-18	Depreciation 30-Sep-19	Accum. 30-Sep-19	NET VALUE
2010 Balance		Adj.	\$ 1,276,819	\$ 1,277,447				\$ 189,132	\$ 5,637	\$ 194,769	\$ 54,145
TM Technology	3 HP Mini Notebooks - SS	10-Oct-10	\$ 1,701	\$ 1,701	S/L	3	\$ 47	1,701	-	1,701	-
SMD Inc.	Keypad outside of Front Doors	28-Oct-10	1,708	1,708	S/L	5	28	1,708	-	1,708	-
Direct Supply	BladderScanner	12-Nov-10	13,640	13,640	S/L	5	277	13,640	-	13,640	-
Direct Supply	Vital Signs Monitor (South Wing)	9-Nov-10	1,604	1,604	S/L	8	17	1,553	51	1,604	(0)
TM Technology	2 Mini HP Desktops	17-Nov-10	1,813	1,813	S/L	5	30	1,813	-	1,813	-
TM Technology	Notebook & Printer	16-Jan-11	1,177	1,177	S/L	5	20	1,177	-	1,177	-
TM Technology	Samsung Laser Printer Admissions	18-Feb-11	665	665	S/L	5	11	665	-	665	-
Lintech	Care Plan Library	28-Feb-11	1,734	1,734	S/L	3	48	1,734	-	1,734	-
Alfax Furniture	7 Square Tables	1-Mar-11	1,387	1,387	S/L	15	8	623	92	715	672
TM Technology	Receipt Color Laserjet & other items	31-Mar-11	2,928	2,928	S/L	5	49	2,928	-	2,928	-
TM Technology	Wireless Router & Printer	30-Apr-11	900	900	S/L	5	15	900	-	900	-
Home Depot	18 Blinds N/S Wing Resident Rms	11-Apr-11	2,061	2,061	S/L	5	34	2,061	-	2,061	-
Best Buy (AMEX)	47" TV for PUB	12-Apr-11	954	954	S/L	5	16	954	-	954	-
InPro Corp	Bed Protectors	16-May-11	2,980	2,980	S/L	5	47	2,980	-	2,980	-
WB Mason	Lateral Filing Cabinet for Payroll	3-Jun-11	1,007	1,007	S/L	15	6	402	67	469	538
TM Technology	Admissions/Receipt Computers & Monitor	20-Jul-11	1,286	1,286	S/L	5	21	1,286	-	1,286	-
Perkins	Rack Tray Dispenser	25-Jul-11	1,520	1,520	S/L	5	25	1,520	-	1,520	-
American Healthcare Supply	2 Chair and table for Payroll Office	27-Jul-11	748	748	S/L	15	4	287	50	337	411
Carstons	Medical Records Cart	17-Aug-11	1,468	1,468	S/L	10	12	808	147	955	513
Direct Supply	Dragon 20i Floor Burnisher	26-Aug-11	1,317	1,317	S/L	5	22	1,317	-	1,317	-
Sigma Care/Lintech	eMar/eTar Software & Implementation	30-Sep-11	11,993	11,993	S/L	3	333	11,993	-	11,993	-
	Disposals		(19,396)	(19,396)				(10,904)	-	(10,904)	(8,492)
2011 Balance			\$ 1,312,012	\$ 1,312,639				\$ 230,276	\$ 6,044	\$ 236,320	\$ 47,786
2012 Additions:											
Perkins	China	\$ 40,840	\$ 1,000	\$ 1,000	S/L	7	\$ 12	1,000	-	1,000	-
TM Technology	Mini Computer & Printer	31-Oct-11	1,024	1,024	S/L	3	28	1,024	-	1,024	-
WB Mason	Office Furniture for Dietician Office	1-Jan-12	1,224	1,224	S/L	15	7	531	82	613	611
BSD Care	8 Dining Room Chairs	3-Jan-12	1,953	1,953	S/L	15	11	846	130	976	977
Farmington Valley Equipment	Ariens Professional Snow Thrower	20-Jan-12	2,126	2,126	S/L	5	35	2,126	-	2,126	-
Life Systems	2 Rosebud Oximeters	27-Jan-12	3,594	3,594	S/L	10	30	2,335	359	2,694	900
TM Technology	HP 4530 Laptop for Dietician	31-Jan-12	1,059	1,059	S/L	3	29	1,059	-	1,059	-
Amex - Best Buy	2 32" TV with mounts A/B Day Rooms	23-Feb-12	723	723	S/L	5	12	723	-	723	-
McKesson Medical	Ultrasonic Cleaner	19-Mar-12	1,061	1,061	S/L	10	9	654	106	760	301
TM Technology	Desktop for Medical Records	31-Mar-12	1,579	1,579	S/L	5	26	1,579	-	1,579	-
WB Mason	Office Furniture for Dietary Office	12-Apr-12	1,005	1,005	S/L	15	6	402	67	469	536
TM Technology	Desktop - Administrator	16-May-12	798	798	S/L	5	13	798	-	798	-
TM Technology	Laptop - Dietician	16-May-12	835	835	S/L	3	23	835	-	835	-
TM Technology	Epson GTS80 Scanner - Med Record	16-May-12	956	956	S/L	5	16	956	-	956	-
Fire Equipment Headquarters	Gas Meter to test air	23-May-12	850	850	S/L	8	9	619	106	725	125
TM Technology	Desktop for A Wing #524	30-Jun-12	803	803	S/L	5	13	803	-	803	-
TM Technology	Desktop for Payroll #526	30-Jun-12	936	936	S/L	5	16	936	-	936	-
WB Mason	5 Task Chairs for Nursing	10-Jul-12	675	675	S/L	15	4	248	45	293	383
TM Technology	4 Minis-Therapy, 2 NB and Labier	12-Aug-12	3,751	3,751	S/L	3	104	3,751	-	3,751	-
	Disposals		(3,819)	(3,819)				(3,819)	-	(3,819)	-
2012 Balance		TOTALS	\$ 1,334,144	\$ 1,334,771				\$ 247,682	\$ 6,939	\$ 254,621	\$ 51,617
2013 Additions:											
HD Supply Facilities	6 Overbed Tables	1-Oct-12	\$ 626	\$ 626	S/L	5	\$ 10	626	-	626	-
TM Technology	HP Laptop MDS Nurse	21-Oct-12	729	729	S/L	3	20	729	-	729	-
SigmaCare	eMar/eTar Software & Implemenation	31-Oct-12	12,335	12,335	S/L	3	343	12,335	-	12,335	-
TM Technology	Printer North & ADNS	15-Nov-12	1,013	1,013	S/L	5	17	1,013	-	1,013	-
Fire Equipment Headquarters	Tripod, Winch & Harness	14-Dec-12	2,201	2,201	S/L	20	9	660	110	770	1,431
Perkins	1 Gallon Blender	31-Dec-12	1,225	1,225	S/L	10	10	734	122	856	369
Bemes Inc.	Sprodoc & Oxi (combo Resp Eq)	25-Jan-13	1,717	1,717	S/L	5	29	1,717	-	1,717	-
TM Technology	Fax	10-Mar-13	532	532	S/L	3	15	532	-	532	-
TM Technology	Dietary Desktop Computer	10-Mar-13	1,664	1,664	S/L	5	28	1,664	-	1,664	-
Perkins	Hot Water Dispenser 5 gal	21-Mar-13	888	888	S/L	10	7	533	89	622	266
Dumouchel Paper	Walk Behind Auto Scrubber	4-Apr-13	4,842	4,842	S/L	5	81	4,842	-	4,842	-
Direct Supply	Blood Pressure Unit & Oximeter	5-Apr-13	1,371	1,371	S/L	6	19	1,371	-	1,371	-
Surface Solutions	Kaivac Omni Dispense & Vac	7-May-13	862	862	S/L	8	9	647	108	755	107
WB Mason	Office Furniture for Staff Development	19-Jun-13	1,177	1,177	S/L	15	7	470	78	548	629

AVON HEALTH CENTER
FURNITURE FIXTURES

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (YEARS)	MONTHLY DEPRECC	Accum. 30-Sep-18	Depreciation 30-Sep-19	Accum. 30-Sep-19	NET VALUE
WB Mason	Office Furniture for Staff Development	11-Jul-13	1,170	1,170	S/L	15	7	468	78	546	624
TM Technology	TM Desktop Machines #563 and 564	13-Jul-13	1,284	1,284	S/L	3	36	1,284	-	1,284	-
TM Technology	Invin Mini Desktop	13-Jul-13	1,957	1,957	S/L	3	54	1,957	-	1,957	-
WB Mason	4 Grey Task Chairs - South Unit	19-Jul-13	583	583	S/L	10	5	349	-	349	234
Perkins	Advolution 20 xp Floor Burnisher	22-Jul-13	1,272	1,272	S/L	5	21	1,272	-	1,272	-
TM Technology	Printer Nursing Super & Staff Dev	31-Jul-13	956	956	S/L	5	16	956	-	956	-
TM Technology	Computer Nursing Supervisor	31-Aug-13	1,637	1,637	S/L	5	27	1,637	-	1,637	-
WB Mason	Office Furniture DNS Office Disposals	4-Sep-13	2,003	2,003	S/L	15	11	802	134	936	1,066
			(316,187)	(316,187)				(316,187)	-	(316,187)	-
2013 Balance		Totals	\$ 1,059,999	\$ 1,060,627				\$ (31,908)	\$ 7,658	\$ (24,250)	\$ 56,343
2014 Additions:											
TM Technology	Laptop for B Wing	10/31/2013	\$ 850	\$ 850	S/L	3	\$ 24	850	-	850	-
Arjo	Sit to Stand Sara Lift	12/31/2013	2,911	2,911	S/L	10	24	1,455	291	1,746	1,165
McKesson Medical	2 Blood Pressure Monitors	1/21/2014	1,830	1,830	S/L	6	25	1,525	305	1,830	0
TM Technology	HP ProBook and Replicator	2/28/2014	1,070	1,070	S/L	3	30	1,070	-	1,070	-
TM Technology	HP ProBook Spare 1	3/31/2014	914	914	S/L	3	25	914	-	914	-
TM Technology	AP Bookkeeper PC	4/30/2014	1,073	1,073	S/L	5	18	1,073	-	1,073	-
TM Technology	QuickBooks Server	4/30/2014	1,282	1,282	S/L	5	21	1,282	-	1,282	-
SMD	Paging Transmitter	5/20/2014	1,590	1,590	S/L	20	7	396	79	475	1,114
Graham-Field	Bariatric Bed	5/30/2014	1,793	1,793	S/L	12	12	746	149	895	897
Space Tables	3 Oak Tables Northington Dining Room	5/31/2014	1,950	1,950	S/L	15	11	650	130	780	1,170
TM Technology	Computer Medical Records	5/31/2014	851	851	S/L	5	14	851	-	851	-
TM Technology	Sigmacore Server Hard Drive	5/31/2014	690	690	S/L	5	12	690	-	690	-
TM Technology	2 Color Printers and Windows 8.1	6/30/2014	1,216	1,216	S/L	5	20	1,216	-	1,216	-
TM Technology	Microsoft Office 2013	7/31/2014	3,191	3,191	S/L	5	53	3,191	-	3,191	-
TM Technology	Russell's Laptop	8/31/2014	994	994	S/L	3	28	994	-	994	-
Space Tables	A Wing Lounge Tables	8/31/2014	680	680	S/L	15	4	226	45	271	409
TM Technology	DNS Laptop	8/31/2014	744	744	S/L	3	21	744	-	744	-
TM Technology	Dietary Desktop Computer	8/31/2014	1,010	1,010	S/L	5	17	1,010	-	1,010	-
TM Technology	Admissions Desktop Computer	8/31/2014	1,206	1,206	S/L	5	20	1,206	-	1,206	-
TM Technology	North Wing Printer & Windows 7	9/30/2014	804	804	S/L	5	13	804	-	804	-
Arjo		8/31/2014	(3,583)	(3,583)	S/L	7	-	(3,583)	-	(3,583)	-
2014 Balance		Totals	\$ 1,083,064	\$ 1,083,691				\$ (14,598)	\$ 8,657	\$ (5,941)	\$ 61,099
2015 Additions:											
WB Mason	Furniture for Infection Control Nurse	10/24/2014	\$ 763	\$ 763	S/L	15	\$ 4	204	51	255	508
TM Technology	2 HP LaserJet Pro Printers	12/31/2014	596	596	S/L	5	10	476	119	595	0
TM Technology	Cisco Router with 3 Yr Ent License	12/31/2014	2,953	2,953	S/L	3	82	2,953	-	2,953	-
TM Technology	3 Desktops, Printer and Dual Monitors	12/31/2014	1,956	1,956	S/L	5	33	1,564	391	1,955	1
TM Technology	Cisco 52 port	4/30/2015	1,442	1,442	S/L	5	24	1,152	288	1,440	1
WB Mason	2 Desks for Social Services	4/30/2015	1,926	1,926	S/L	20	8	384	96	480	1,446
TM Technology	Notebook and Printer	4/30/2015	860	860	S/L	3	24	860	-	860	-
McKesson Medical	Defibulator	4/8/2015	1,539	1,539	S/L	5	26	1,232	307	1,539	(0)
Sure Response	Portable Radio w/5 earpieces	8/20/2015	1,564	1,564	S/L	5	26	1,252	312	1,564	0
TM Technology	New Server	9/30/2015	10,651	10,651	S/L	5	178	8,520	2,130	10,650	1
2015 Disposals:											
ACQUISITIONS		9/30/1990	\$ (2,813)	\$ (2,813)	S/L	5	\$ (47)	(2,813)	-	(2,813)	-
ACQUISITIONS		9/30/1990	(497)	(497)	S/L	10	(4)	(497)	-	(497)	-
ACQUISITIONS		9/30/1990	(3,013)	(3,013)	S/L	15	(17)	(3,013)	-	(3,013)	-
ACQUISITIONS		9/30/1991	(3,510)	(3,510)	S/L	3	(98)	(3,510)	-	(3,510)	-
ACQUISITIONS		9/30/1991	(31,379)	(31,379)	S/L	5	(523)	(31,379)	-	(31,379)	-
ACQUISITIONS		9/30/1991	(14,993)	(14,993)	S/L	10	(125)	(14,993)	-	(14,993)	-
ACQUISITIONS		9/30/1991	(1,331)	(1,331)	S/L	15	(7)	(1,331)	-	(1,331)	-
Build 'N Serve		1/1/2009	(7,155)	(7,155)	S/L	5	(119)	(7,155)	-	(7,155)	-
2015 Balance		Totals	\$ 1,042,621	\$ 1,043,249				\$ (60,691)	\$ 12,351	\$ (48,340)	\$ 63,056
2016 Additions:											
TM Technology	HP Pro Book / HP Retail Desktop	11/30/2015	\$ 1,121	\$ 1,121	S/L	3	\$ 31	1,121	-	1,121	-
W.B. Mason	Office Furniture Admin Office	3/31/2016	1,819	1,819	S/L	15	10	363	121	484	1,334
W.B. Mason	Office Furniture Admin Office	3/31/2016	1,808	1,808	S/L	3	50	1,808	-	1,808	-
W.B. Mason	new file for admission office	3/31/2016	465	465	S/L	15	3	93	31	124	341

AVON HEALTH CENTER
FURNITURE FIXTURES

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (YEARS)	MONTHLY DEPREC	Accum. 30-Sep-18	Depreciation 30-Sep-19	Accum. 30-Sep-19	NET VALUE
Direct Supply	5 Classic 4 foot benches	7/31/2016	3,180	3,180	S/L	15	18	636	212	848	2,332
TM Technology	17" Touch Computer	7/31/2016	3,607	3,607	S/L	5	60	2,163	721	2,884	723
TM Technology	2 HP ProBooks Spares	7/31/2016	1,117	1,117	S/L	3	31	1,117	-	1,117	-
Space Tables	6 Tables	9/30/2016	2,003	2,003	S/L	15	11	402	134	536	1,467
2016 Disposals:											
ACQUISITIONS		9/30/1991	\$ (829)	\$ (829)	S/L	18	\$ (4)	(829)	-	(829)	-
ACQUISITIONS		9/30/1991	(2,076)	(2,076)	S/L	20	(9)	(2,076)	-	(2,076)	-
ACQUISITIONS		9/30/1992	(4,955)	(4,955)	S/L	5	(83)	(4,955)	-	(4,955)	-
ACQUISITIONS		9/30/1992	(6,706)	(6,706)	S/L	10	(56)	(6,706)	-	(6,706)	-
ACQUISITIONS		9/30/1992	(4,330)	(4,330)	S/L	3	(120)	(4,330)	-	(4,330)	-
ACQUISITIONS		9/30/1992	(23,328)	(23,328)	S/L	15	(130)	(23,328)	-	(23,328)	-
ACQUISITIONS		9/30/1993	(4,020)	(4,020)	S/L	5	(67)	(4,020)	-	(4,020)	-
ACQUISITIONS		9/30/1993	(6,714)	(6,714)	S/L	10	(56)	(6,714)	-	(6,714)	-
ACQUISITIONS		9/30/1993	(4,280)	(4,280)	S/L	15	(24)	(4,280)	-	(4,280)	-
2016 Balance		Totals	\$ 1,000,502	\$ 1,001,130				\$ (110,226)		\$ 69,253	
2017 Additions:											
Space Tables	6 Tables Sales Tax	10/31/2016	\$ 127	\$ 127	S/L	15	\$ 1	16	8	24	103
TM Technology	hp laserjet pro	11/30/2016	2,095	2,095	S/L	3	58	1,396	698	2,094	1
TM Technology	new computer for reception, new computer for hr	12/31/2016	1,813	1,813	S/L	5	30	726	363	1,089	724
EZProducts	digital pop up press label maker	1/31/2017	770	770	S/L	5	13	308	154	462	308
LPA Medical	glider chair between a&b wing	1/31/2017	1,030	1,030	S/L	15	6	138	69	207	823
TM Technology	hp probook 450	3/31/2017	1,143	1,143	S/L	3	32	762	381	1,143	-
American Express- Microsoft	tablet for admissions	4/30/2017	1,201	1,201	S/L	5	20	480	240	720	481
TM Technology	hp for mds nurse	5/31/2017	850	850	S/L	3	24	566	283	849	1
McKesson Medical	wheelchair scale	6/30/2017	2,909	2,909	S/L	10	24	582	291	873	2,036
Arjo	new scale	7/31/2017	1,016	1,016	S/L	10	8	204	102	306	710
Life Systems, Inc	3 rosebud vital sign caarts	7/31/2017	4,038	4,038	S/L	10	34	808	404	1,212	2,826
Dept of Revenue	use tax on Life systems purchase (above)	7/31/2017	256	256	S/L	10	2	52	26	78	178
Cisco	wireless access point (capital lease)	8/31/2017	12,906	12,906	S/L	5	215	5,162	2,581	7,743	5,163
Arjo	replacement of the scale portion	8/31/2017	1,532	1,532	S/L	10	13	306	153	459	1,073
Raintech	jeron pro alert 640 system	9/30/2017	4,075	4,075	S/L	10	34	816	408	1,224	2,851
TM Technology	HP Probok	9/30/2017	723	723	S/L	3	20	482	241	723	-
2017 Balance		Totals	\$ 1,036,986	\$ 1,037,614				\$ (97,422)	\$ 6,402	\$ 19,206	\$ 86,531
2018 Additions:											
TM Technology	rehab- notebook: 3 nursing touchscreens	10/31/2017	5,599	5,599	S/L	3	156	1,866	1,866	3,732	1,867
TM Technology	2 hp notebooks- pam & sheila	11/30/2017	1,813	1,813	S/L	3	50	604	604	1,208	605
Medline Industries	Trainer, sit to stand, Neurogym	12/31/2017	5,371	5,371	S/L	5	90	1,074	1,074	2,148	3,223
Perkins	Epoxy Coated Steel Hose Reel	12/31/2017	967	967	S/L	7	12	138	138	276	691
Sysco Connecticut	spectrum electric conveyor toaster	2/28/2018	572	572	S/L	10	5	57	57	114	458
WB Mason	new furniture for HR	3/31/2018	1,429	1,429	S/L	10	12	143	143	286	1,143
Loves	new freezer	7/31/2018	625	625	S/L	5	10	125	125	250	375
2018 Disposals:											
Disposal of Assets From Prior P	Various	Various	\$ (555,666)	\$ (555,666)	S/L	Var		(555,666)	-	(555,666)	-
2018 Balance		Totals	\$ 497,696	\$ 498,324				\$ (649,081)	\$ 10,409	\$ (528,446)	\$ 94,893
	special bed	10/31/2018	3,627	3,627	S/L	12	\$ 25	-	302	302	3,325
	intel nuc 7i5BNK mini pc for nursing supervisor's office	10/31/2018	904	904	S/L	5	15	-	181	181	723
	user refurbished nuc mini pc for south wing nursing station	10/31/2018	978	978	S/L	5	16	-	196	196	782
	maxi 500 2H SP Bar & Scale	12/31/2018	3,097	3,097	S/L	5	52	-	619	619	2,478
	hardware, software, setup, & installation	12/31/2018	2,556	2,556	S/L	5	43	-	511	511	2,045
	hardware, software, setup, & installation	12/31/2018	2,815	2,815	S/L	5	47	-	563	563	2,252
	ELO 17" all in one touch (backup touchscreens for cnas)	2/28/2019	3,171	3,171	S/L	5	53	-	634	634	2,537
	air curtain refrigerator, dinex model #DX1RAC12LS	3/31/2019	4,707	4,707	S/L	10	39	-	471	471	4,236
	10 chairs, 4 tables for professional development (Marla)	4/30/2019	3,372	3,372	S/L	10	28	-	337	337	3,035
	NUC computers #741, 742 admissions/A/P	7/31/2019	2,122	2,122	S/L	5	35	-	424	424	1,698
	dinex air curtain refrigerators	9/30/2019	3,767	3,767	S/L	10	31	-	377	377	3,390
	TM nuc 3748-Liz social services, TM nuc #749- south wing	9/30/2019	3,339	3,339	S/L	5	56	-	668	668	2,671
	Vacuum	1/31/2005	(624)	(624)			-	-	-	(624)	-
	Cali Cord	1/31/2005	(1,945)	(1,945)			-	-	-	(1,945)	-

AVON HEALTH CENTER
FURNITURE FIXTURES

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (YEARS)	MONTHLY DEPREC	Accum. 30-Sep-18	Depreciation 30-Sep-19	Accum. 30-Sep-19	NET VALUE
	Computer	3/31/2005	(525)	(525)			-	-	-	(525)	-
	Food Warmer	4/30/2005	(4,056)	(4,056)			-	-	-	(4,056)	-
	Area Rug	6/30/2005	(1,973)	(1,973)			-	-	-	(1,973)	-
	Chart Racks	11/30/2005	(3,168)	(3,168)			-	-	-	(3,168)	-
	Rehab equipment	10/31/2006	(3,129)	(3,129)			-	-	-	(3,129)	-
	Termal Base to Plate/Tray for patient meals	11/30/2006	(1,475)	(1,475)			-	-	-	(1,475)	-
	Secretary/base: server (furniture for lobby)	1/31/2007	(912)	(912)			-	-	-	(912)	-
	3 Round tables	6/30/2007	(1,103)	(1,103)			-	-	-	(1,103)	-
	12 Arm chairs	6/30/2007	(2,424)	(2,424)			-	-	-	(2,424)	-
	27 LCD TV	11/29/2007	(8,589)	(8,589)			-	-	-	(8,589)	-
	Rotary Toaster	1/10/2008	(1,032)	(1,032)			-	-	-	(1,032)	-
	Bookcase & console	1/31/2008	(1,107)	(1,107)			-	-	-	(594)	(513)
	2 LCD TV	2/6/2008	(3,173)	(3,173)			-	-	-	(3,173)	-
	Smart Them Base Dinec	4/16/2008	(1,719)	(1,719)			-	-	-	(1,719)	-
	Smart Them Base Dinec	8/31/2008	(3,392)	(3,392)			-	-	-	(3,392)	-
	8 Overbed Tables	2/25/2009	(856)	(856)			-	-	-	(856)	-
	6 Overbed Tables	5/12/2009	(647)	(647)			-	-	-	(647)	-
	3 Refrigerators for Rehab	7/15/2009	(676)	(676)			-	-	-	(676)	-
	6 Overbed Tables	10/30/2009	(667)	(667)			-	-	-	(667)	-
	42" LCD HDTV	12/11/2009	(848)	(848)			-	-	-	(848)	-
	2 HP 2035n Printers	3/14/2010	(732)	(732)			-	-	-	(732)	-
	6 Overbed Tables	4/9/2010	(665)	(665)			-	-	-	(665)	-
	6 Overbed Tables	5/14/2010	(665)	(665)			-	-	-	(665)	-
	6 Overbed Tables	6/17/2010	(658)	(658)			-	-	-	(658)	-
	Vital Signs Monitor (South Wing)	11/9/2010	(1,604)	(1,604)			-	-	-	(1,604)	-
	47" TV for PUB	4/12/2011	(954)	(954)			-	-	-	(954)	-
	HP 4530 Laptop for Dietician	1/31/2012	(1,059)	(1,059)			-	-	-	(1,059)	-
	Desktop for Medical Records	3/31/2012	(1,579)	(1,579)			-	-	-	(1,579)	-
	Desktop - Administrator	5/16/2012	(798)	(798)			-	-	-	(798)	-
	Epson GTS80 Scanner - Med Records	5/16/2012	(956)	(956)			-	-	-	(956)	-
	Desktop for A Wing #524	6/30/2012	(803)	(803)			-	-	-	(803)	-
	6 Overbed Tables	10/1/2012	(626)	(626)			-	-	-	(626)	-
	Blood Pressure Unit & Oximeter	4/5/2013	(1,371)	(1,371)			-	-	-	(1,371)	-
	TM Desktop Machines #563 and 564	7/13/2013	(1,284)	(1,284)			-	-	-	(1,284)	-
	Inwin Mini Desktop	7/13/2013	(1,957)	(1,957)			-	-	-	(1,957)	-
	4 Grey Task Chairs - South Unit	7/19/2013	(583)	(583)			-	-	-	(349)	(234)
	Computer Nursing Supervisor	8/31/2013	(1,637)	(1,637)			-	-	-	(1,637)	-
	Microsoft Office 2013	7/31/2014	(3,191)	(3,191)			-	-	-	(3,191)	-
	DNS Laptop	8/31/2014	(744)	(744)			-	-	-	(744)	-
2019 Balance		Totals	\$ 466,248	\$ 466,876				\$ 15,692	\$ 588,319	\$ 123,318	

Per TB 518,513
Difference \$ (51,637) \$ (649,081) \$ (14,549) \$ (863,816) \$ (395,195)

Related Party Assets

Related Party Assets		Date Acquired	Cost	Method	Life	Accum Depr 9/30/2018	Depreciation 9/30/2019	Accum Depr 9/30/2019	NET VALUE	
Asset No.	Asset Description									
Movable Equipment										
25	56 Electric Beds	9-Feb-09	\$ 73,141	\$	S/L	12	58,866	6,095	64,961	8,179.92
17	56 Electric Beds	9-Mar-09	70,346		S/L	12	56,136	5,862	61,998	8,347.72
16	120 Chairs, Cabinets & Dressers	12-May-09	166,979		S/L	15	104,691	11,132	115,823	51,156.11
	21 Arm Chairs	3-Jun-10	6,247		S/L	15	3,885	416	4,301	1,945.61
	7 Round Table	4-Apr-10	2,041		S/L	15	1,292	136	1,428	612.56
	2 Ice Makers	14-Jul-10	5,583		S/L	10	5,163	420	5,583	(0.00)
	Steam Cooker	14-Dec-10	5,607		S/L	10	4,345	561	4,906	700.98
	2 Watt Sconces For Lobby	27-Jun-11	204		S/L	10	148	20	168	35.70
	8 Doz Warming Trays	24-Jun-11	1,583		S/L	10	1,156	158	1,314	269.83
	Plate Warming System	4-May-11	12,934		S/L	10	9,588	1,293	10,881	2,053.74
	Lobby Chandelairs	20-Apr-11	937		S/L	10	702	94	796	141.49
	Security Camera	28-Mar-11	9,467		S/L	5	9,467	-	9,467	-
	Lobby & Admin Office Furniture	8-Jul-11	13,616		S/L	15	6,573	908	7,481	6,135.48
	4 Tilt Tables for Pub	11-May-11	2,444		S/L	15	1,207	163	1,370	1,074.44

AVON HEALTH CENTER
FURNITURE FIXTURES

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (YEARS)	MONTHLY DEPREC	Accum. 30-Sep-18	Depreciation 30-Sep-19	Accum. 30-Sep-19	NET VALUE
	Computer Equipment for EMAR	3-Aug-11	22,251	22,251	S/L	5		22,251	-	22,251	-
	10 Elo touch screen computers	12-Sep-12	12,560	12,560	S/L	5		12,560	-	12,560	-
	Computer Equipment EMAR/ETAR	1-Oct-11	23,835	23,835	S/L	5		23,835	-	23,835	-
	13 Dining Room Tables for lower	5-Apr-12	7,256	7,256	S/L	15		3,143	484	3,627	3,629.43
	22 Blinds/61 Valances	23-Aug-13	14,615	14,615	S/L	5		14,615	-	14,615	-
	Recumbent Stepper Machine	20-Jun-13	4,694	4,694	S/L	10		2,816	469	3,285	1,409.25
	Wood Blinds for dining room windows	14-Jul-14	772	772	S/L	10		315	77	392	380.55
	4 time clocks & time & time & attendance	2-Apr-14	17,022	17,022	S/L	10		6,950	1,702	8,652	8,370.05
	New Arjo Sara 3000 patient fit	19-Mar-14	2,745	2,745	S/L	10		1,120	274	1,394	1,351.04
	Wood blinds for A & B Wing Lounge	8-Dec-14	459	459	S/L	10		184	46	230	229.10
	Light Fixtures for dining room & lo	24-Nov-14	940	940	S/L	15		252	63	315	625.33
	3 door reach-in refrigerator to re	14-Apr-15	5,621	5,621	S/L	10		2,248	562	2,810	2,810.90
	Reupholster 24 dining room chair	31-Mar-15	16,793	16,793	S/L	10		6,716	1,679	8,395	8,397.70
	Loveseat for connector hall/sofa	10-Mar-15	2,392	2,392	S/L	12		796	199	995	1,396.67
	Samsung Security Camera RearL	27-Feb-15	2,918	2,918	S/L	5		2,336	582	2,918	-
	New artwork resident corridors	27-Feb-15	8,418	8,418	S/L	10		3,368	842	4,210	4,208.20
	Pleated Valence North Day Rm	5-Jan-15	1,075	1,075	S/L	10		432	108	540	535.50
	Square Scrup floor finish machine	30-Jun-15	3,717	3,717	S/L	5		2,972	743	3,715	1.60
	3 Pictures	1-Jun-15	615	615	S/L	10		248	62	310	305.50
	Disposal of 3 Elo Touch Screen Computers	12-Sep-12	(3,768)	(3,768)						(3,768)	-
			<u>\$ 516,058</u>	<u>\$ 516,058</u>				<u>\$ 370,371</u>	<u>\$ 35,151</u>	<u>\$ 401,754</u>	<u>\$ 114,304</u>

COMBINED TOTALS

<u>\$ 982,934</u>	<u>\$ 370,371</u>	<u>\$ 50,843</u>	<u>\$ (186,565)</u>	<u>\$ 237,622</u>
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					Variance
Buildings & Building Improvements	\$ 7,495	\$ 1,500	\$ 375	\$ 1,875	\$ 5,620
Additions	-	-	-	-	-
Disposals	-	-	-	-	-
Total	\$ 7,495	\$ 1,500	\$ 375	\$ 1,875	\$ 5,620
Movable Equipment	\$ 498,324	\$ 923,823	\$ 13,855	\$ 385,458	\$ 112,866
Additions	34,454	4,007	5,283	9,290	25,164
Disposals	(65,902)	(65,666)	-	(65,156)	(746)
Related Party Movable Equipment	519,826	382,305	35,151	417,456	102,371
Related Party Additions / Disposals	(3,768)	-	-	(3,768)	-
Prior Year C/R Variance	-	3,446	-	-	-
Total	\$ 982,934	\$ 757,915	\$ 54,289	\$ 743,280	\$ 239,654
Leasehold Improvements	\$ 2,585,149	\$ 2,502,381	\$ 123,450	\$ 1,937,494	\$ 647,655
Additions	51,033	8,702	3,402	12,104	38,929
Disposals	(270,454)	(685,095)	-	(270,454)	-
Related Party Leasehold improvements	1,346,738	745,894	75,454	821,348	525,390
Related Party Additions	99,943	3,720	6,414	10,134	89,809
Prior Year C/R Variance	-	-	-	-	-
Total	\$ 3,812,409	\$ 2,572,360	\$ 208,720	\$ 2,510,626	\$ 1,301,783

Per Trial Balance	\$ 2,902,706	\$ 2,080,189	\$ 152,005	\$ 2,080,189	\$ 822,517
Per Cost Report Depreciation	4,802,838	3,331,775	263,384	3,255,781	1,547,057
Related Party	1,962,740	1,131,919	117,019	1,245,170	717,570
F/S vs C/R Variance	62,608	(119,667)	(111,379)	69,578	(6,970)
Rounding Variance			(\$1)		
			(111,380)		(6,970)

F/S vs C/R NBV - Page 31, Line 9B	(6,970)
F/S vs C/R Dep. - Page 36, Line F1	(111,380)
Reserve for Dep. - Page 35, Line A3	717,570

AVON HEALTH CENTER
LEASEHOLD IMPROVEMENTS

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (IN YEARS)	MONTHLY DEPRECIATION	ACC'D EXPENSE as of 9/30/17	Depreciation EXPENSE FY 2018	ACC'D EXPENSE as of 9/30/18	Depreciation EXPENSE FY 2019	ACC'D EXPENSE as of 9/30/19	NET VALUE
BALANCE FORWARD prior 2008			\$ 2,599,083	\$ 2,603,503			\$ 10,441	\$ 2,108,957	\$ 84,077.43	\$ 2,193,034	\$ 84,077.43	\$ 2,277,111	326,392
Titan Mechanical	Hot water holding tank	27-Nov-07	4,770	4,770	S/L	10	40	\$4,730	40	\$4,770	-	\$4,770	-
Build N Serve	Wiring	1-Nov-07	1,968	1,968	S/L	5	33	\$1,968	-	\$1,968	-	\$1,968	-
Titan Mechanical	Hot water tank Motor	14-Dec-07	1,748	1,748	S/L	10	15	\$1,719	29	\$1,748	-	\$1,748	-
Titan Mechanical	Insulation	28-Feb-08	4,235	4,235	S/L	15	24	\$2,729	282	\$3,011	\$ 282.00	\$3,293	942
Total Building Svcs.	Dish room floor	23-May-08	1,095	1,095	S/L	10	9	\$329	110	\$439	\$ 110.00	\$549	546
RC Restoration	Shed	30-Jun-08	6,985	6,985	S/L	20	29	\$3,259	349	\$3,608	\$ 349.00	\$3,957	3,028
W.B.Morrison	7 wood doors	31-Jul-08	3,073	3,073	S/L	15	17	\$1,895	205	\$2,100	\$ 205.00	\$2,305	768
Titan Mechanical	Compressor HVAC unit	31-Jul-08	5,014	5,014	S/L	12	35	\$3,865	418	\$4,283	\$ 418.00	\$4,701	313
The Barn Yard	Smoking Shed	31-Jul-08	1,494	1,494	S/L	20	6	\$691	75	\$766	\$ 75.00	\$841	653
Sexaur	Grab Bars	31-Aug-08	6,067	6,067	S/L	15	34	\$3,707	404	\$4,111	\$ 404.00	\$4,515	1,552
Sexaur	Smoke Detectors	31-Aug-08	1,209	1,209	S/L	10	10	\$1,108	101	\$1,209	-	\$1,209	-
Sexaur	Returned Grab Bars	31-Aug-08	(4,119)	(4,119)	S/L	15	(23)	(\$2,517)	(275)	(\$2,792)	\$ (275.00)	(\$3,067)	(1,051)
2008 Ending			\$ 2,632,621	\$ 2,637,041			\$ 10,669	\$ 2,132,439	\$ 85,815	\$ 2,218,254	\$ 85,645	\$ 2,303,900	\$ 333,141
CL&P	Retrofit Lighting	15-Oct-08	\$ 43,457	\$ 43,457	S/L	15	\$ 241	\$ 26,074	\$ 2,897	\$28,971	\$ 2,897.00	\$31,868	11,589
Best Welding	Wrought Iron Railings	30-Oct-08	1,487	1,487	S/L	15	8	892	99	\$991	\$ 99.00	\$1,090	397
WH Morrison Co	3 Wooden Doors #14 & Dietary	8-Dec-08	1,695	1,695	S/L	15	9	998	113	\$1,111	\$ 113.00	\$1,224	471
Titan Mechanical	Second Compressor	31-Dec-08	1,465	1,465	S/L	12	10	1,078	122	\$1,200	\$ 122.00	\$1,322	143
Jay LaChance	Ceiling Tiles	28-Feb-09	3,600	3,600	S/L	8	38	3,900	(300)	\$3,600	-	\$3,600	-
Riley Plumbing	2 Utility Sinks	28-Feb-09	3,450	3,450	S/L	20	14	1,496	173	\$1,669	\$ 173.00	\$1,842	1,608
Fire Protection	Permit & Sprinkler Heads over Dryers	31-Mar-09	1,236	1,236	S/L	25	4	424	49	\$473	\$ 49.00	\$522	714
Huntington Power	Generator Rental on Replacement (Generator on Realty Bc	31-Mar-09	3,313	3,313	S/L	20	14	1,422	166	\$1,588	\$ 166.00	\$1,754	1,559
Perfectemp Heating	Replace Compressor Walk-in Freezer	31-Mar-09	2,441	2,441	S/L	15	14	1,397	163	\$1,560	\$ 163.00	\$1,723	718
INPro Corporation	Wall Covering	17-Apr-09	1,666	1,666	S/L	5	28	1,999	(333)	\$1,666	-	\$1,666	-
Saucier Mechanical Svcs	Air Conditioning System for new Server Room	21-Apr-09	3,740	3,740	S/L	10	31	3,179	374	\$3,553	-	\$3,553	187
Collier Electrical Corp	Prepare electrical feed for new Server Room	30-Apr-09	2,955	2,955	S/L	15	16	1,674	197	\$1,871	\$ 197.00	\$2,068	887
Collier Electric/Saucier Mec	7.5 Ton Roof Top AC	29-May-09	19,149	19,149	S/L	10	160	16,118	1,915	\$18,033	\$ 1,117.00	\$19,150	(0)
Ward Kipp	Computer wiring	31-May-09	900	900	S/L	5	15	1,080	(180)	\$900	-	\$900	-
Build N Serve	Server Wiring	1-Jun-09	1,458	1,458	S/L	5	24	1,750	(292)	\$1,458	-	\$1,458	-
Susaya Concrete	Concrete Walk at Rear Entrance/Driveway Repair/New W	16-Jun-09	8,425	8,425	S/L	15	47	4,681	562	\$5,243	\$ 562.00	\$5,805	2,620
SMD	Electromag Door Locks Back & Service Entrances	19-Jun-09	7,440	7,440	S/L	10	62	6,200	744	\$6,944	\$ 496.00	\$7,440	(0)
First American	Permits for Cogeneration System	22-Jun-09	2,183	2,183	S/L	15	12	1,213	146	\$1,359	\$ 146.00	\$1,505	678
Jay LaChance	Elevator Panels	30-Jun-09	5,085	5,085	S/L	10	42	4,238	509	\$4,747	\$ 338.00	\$5,085	(0)
First American	Cogeneration System	2-Jul-09	169,222	169,222	S/L	20	705	69,804	8,461	\$78,265	\$ 8,461.00	\$86,726	82,496
Courtesy Carpet	Elevator Flooring	4-Aug-09	737	737	S/L	10	6	602	74	\$676	\$ 61.00	\$737	(0)
Fournier Irrigation/Collier	Lawn Sprinkler System	28-Aug-09	10,957	10,957	S/L	15	61	5,965	730	\$6,695	\$ 730.00	\$7,425	3,532
Michael Gervais	Wallpaper Hallway and Nurses Station	28-Aug-09	1,651	1,651	S/L	5	28	1,981	(330)	\$1,651	-	\$1,651	-
Collier Electric	Electrical upgrades	31-Aug-09	2,694	2,694	S/L	15	15	1,467	180	\$1,647	\$ 180.00	\$1,827	867
Jay LaChance	Fire Door Glass	2-Sep-09	804	804	S/L	10	7	649	80	\$729	\$ 74.00	\$803	0
Ward Kipp	Server Wiring	8-Sep-09	6,173	6,173	S/L	5	103	7,408	(1,235)	\$6,173	-	\$6,173	-
Custom Exterior Landscape	Front Entrance Landscaping	10-Sep-09	8,787	8,787	S/L	10	73	7,103	879	\$7,982	\$ 805.00	\$8,787	(0)
Build N Serve	Network Upgrade Hardware & Labor	10-Sep-09	6,189	6,189	S/L	5	103	7,427	(1,238)	\$6,189	-	\$6,189	-
Build N Serve	Network Wiring	15-Sep-09	3,751	3,751	S/L	5	63	4,501	(750)	\$3,751	-	\$3,751	-
WH Morrison Co	Automatic Door Openers	30-Sep-09	9,986	9,986	S/L	15	55	5,382	666	\$6,048	\$ 666.00	\$6,714	3,273
Riley Signs	Front Sign	30-Sep-09	755	755	S/L	5	13	906	(151)	\$755	-	\$755	-
	Disposed Assets			(4,666)									(4,666)
2009 Balance			TOTALS \$ 2,969,471	\$ 2,969,224			\$ 12,690	\$ 2,325,448	\$ 100,305	\$ 2,425,753	\$ 103,260	\$ 2,529,013	\$ 440,211
	Front Sign Sales Tax	10/1/2009	\$ 45	\$ 45	S/L	5	\$ 1	\$ 45	\$ -	\$45	\$ -	\$45	-
	Access Doors for Hot Water Coils	10/29/2009	936	936	S/L	20	4	375	47	\$422	\$ 47.00	\$469	467
	Door Locks	10/29/2010	1,009	1,009	S/L	15	6	538	67	\$605	\$ 67.00	\$672	337
	5 More Registers from Air Handler to Wings	11/30/2009	3,700	3,700	S/L	20	15	1,418	185	\$1,603	\$ 185.00	\$1,788	1,912
	Exhaust for boiler room	11/30/2009	1,525	1,525	S/L	20	6	584	76	\$660	\$ 76.00	\$736	789
	Fix doors not hanging properly	12/3/2009	1,914	1,914	S/L	15	11	936	128	\$1,064	\$ 128.00	\$1,192	722
	All 3 Nurses Stations Counters Refaced	12/14/2009	13,036	13,036	S/L	15	72	6,373	869	\$7,242	\$ 869.00	\$8,111	4,925
	Fron Arch Walkway	12/17/2009	14,814	14,814	S/L	15	82	7,243	988	\$8,231	\$ 988.00	\$9,219	5,595
	Handrails	1/15/2010	5,499	5,499	S/L	15	31	2,567	367	\$2,934	\$ 367.00	\$3,301	2,199
	Exhaust Duct for Dishmachine	1/29/2010	1,245	1,245	S/L	20	5	436	62	\$498	\$ 62.00	\$560	685
	Formica	2/19/2010	1,462	1,462	S/L	15	8	649	97	\$746	\$ 97.00	\$843	619
	Exhaust fan in Oxygen room	3/22/2010	1,095	1,095	S/L	20	5	347	55	\$402	\$ 55.00	\$457	638

AVON HEALTH CENTER
LEASEHOLD IMPROVEMENTS

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (IN YEARS)	MONTHLY DEPRECIATION	ACC'D EXPENSE as of 9/30/17	Depreciation EXPENSE FY 2018	ACC'D EXPENSE as of 9/30/18	Depreciation EXPENSE FY 2019	ACC'D EXPENSE as of 9/30/19	NET VALUE
	Install Wallpaper	4/9/2010	1,908	1,908	S/L	5	32	1,908	-	\$1,908	\$-	\$1,908	-
	Concrete Walk Rear Entrance	4/15/2010	2,133	2,133	S/L	15	12	853	142	\$995	\$142.00	\$1,137	996
	Cobblestone along Entranceway	5/22/2010	2,438	2,438	S/L	5	41	2,438	-	\$2,438	\$-	\$2,438	-
	Outlet in Maintenance Workshop	6/30/2010	1,362	1,362	S/L	15	8	485	91	\$576	\$91.00	\$667	696
	Resident Bathroom Door Protectors	8/16/2010	8,890	8,890	S/L	15	49	2,766	593	\$3,359	\$593.00	\$3,952	4,938
	2010 Balance	TOTALS	\$ 3,032,481	\$ 3,032,235			\$ 13,078	\$ 2,355,408	\$ 104,072	\$ 2,459,480	\$ 107,027	\$ 2,566,507	\$ 465,728
	Walkway to Gazebo	10/22/2010	\$ 4,688	\$ 4,688	S/L	15	\$ 26	\$ 2,188	313	\$2,501	\$ 313.00	\$2,814	1,874
	New outlets in Breakroom and Dietary Office	10/28/2010	1,046	1,046	S/L	15	6	488	70	\$558	\$ 70.00	\$628	418
	2 Pressure Regulators A/B Wings	11/10/2010	869	869	S/L	20	4	300	43	\$343	\$ 43.00	\$386	483
	Lines for installation of Steamer	12/29/2010	1,301	1,301	S/L	10	11	889	130	\$1,019	\$ 130.00	\$1,149	152
	Water main Pressure Regulator N/S Wing	1/31/2011	1,198	1,198	S/L	10	10	809	120	\$929	\$ 120.00	\$1,049	149
	Electrical Installation of Steamer	1/31/2011	1,544	1,544	S/L	10	13	1,042	154	\$1,196	\$ 154.00	\$1,350	194
	Renovate "Pub" room	2/28/2011	1,570	1,570	S/L	15	9	698	105	\$803	\$ 105.00	\$908	662
	Main Reception Counters & Cabinets	8/5/2011	3,998	3,998	S/L	15	22	1,644	267	\$1,911	\$ 267.00	\$2,178	1,820
	2011 Balance	TOTALS	\$ 3,048,697	\$ 3,048,450			\$ 13,178	\$ 2,363,467	\$ 105,274	\$ 2,468,741	\$ 108,229	\$ 2,576,970	\$ 471,480
2012 Additions:													
	Attic Lighting	3/23/2012	\$ 4,884	\$ 4,884	S/L	20	\$ 20	\$ 1,221	244	\$1,465	\$ 244.00	\$1,709	3,175
	Cabinetry in Beauty Salon for Dentist	5/25/2012	1,487	1,487	S/L	15	8	495	99	\$594	\$ 99.00	\$693	793
	Emergency Water Main Hook up	9/18/2012	2,340	2,340	S/L	25	8	468	94	\$562	\$ 94.00	\$656	1,683
	Outlets for ELO Touch Screens	9/27/2012	3,294	3,294	S/L	10	27	1,647	329	\$1,976	\$ 329.00	\$2,305	989
	2012 Balance		\$ 3,060,701	\$ 3,060,455			\$ 13,241	\$ 2,367,298	\$ 106,040	\$ 2,473,338	\$ 108,995	\$ 2,582,333	\$ 478,122
2013 Additions:													
	Electrical Outlets for PT Office	31-Oct-12	\$ 1,026	\$ 1,026	S/L	15	\$ 6	\$ 342	68	\$410	\$ 68.00	\$478	549
	Water Main Repair	18-Oct-12	890	890	S/L	10	7	445	89	\$534	\$ 89.00	\$623	267
	Water Softener	13-Nov-12	2,606	2,606	S/L	10	22	1,303	261	\$1,564	\$ 261.00	\$1,825	780
	Wall Guards	27-Dec-12	2,420	2,420	S/L	5	40	2,420	-	\$2,420	\$-	\$2,420	(0)
	Blower Motor for RTU #7	2-Jan-13	2,200	2,200	S/L	20	9	550	110	\$660	\$ 110.00	\$770	1,430
	Roof Mounted Exhaust Fan A Wing	18-Feb-13	1,520	1,520	S/L	20	6	380	76	\$456	\$ 76.00	\$532	988
	Dedicated Hot Water lines to Laundry	12-Feb-13	4,243	4,243	S/L	25	14	849	170	\$1,019	\$ 170.00	\$1,189	3,054
	2013 Balance		\$ 3,075,606	\$ 3,075,359			\$ 13,346	\$ 2,373,587	\$ 106,814	\$ 2,480,400	\$ 109,769	\$ 2,590,170	\$ 485,190
2014 Additions:													
	Replace Panel in Boiler Room	23-Oct-13	\$ 1,595	\$ 1,595	S/L	15	\$ 9	\$ 425	106	\$531	\$ 106.00	\$637	958
	Outlets for De-icing Cables	8-Nov-13	1,638	1,638	S/L	15	9	437	109	\$546	\$ 109.00	\$655	983
	Covebase Elevator, Dining Room & Lower Lobby	3-Jan-14	1,079	1,079	S/L	5	18	864	216	\$1,080	\$-	\$1,080	(0)
	Wall Guards	31-Jan-14	2,029	2,029	S/L	5	34	1,623	405	\$2,028	\$-	\$2,028	0
	Kitchen Cook Exhaust Fan	30-Jun-14	2,680	2,680	S/L	10	22	1,072	268	\$1,340	\$ 268.00	\$1,608	1,072
	Compressor in South Wing	31-Jul-14	6,522	6,522	S/L	10	54	2,609	652	\$3,261	\$ 652.00	\$3,913	2,610
	Compressor #3 over Cooks Line	28-Aug-14	2,070	2,070	S/L	10	17	828	207	\$1,035	\$ 207.00	\$1,242	828
	Vinyl Cove Base	31-Aug-14	1,888	1,888	S/L	5	31	1,511	377	\$1,888	\$-	\$1,888	0
	2014 Balance		\$ 3,095,107	\$ 3,094,861			\$ 2,382,955	\$ 109,154	\$ 2,492,108	\$ 111,111	\$ 2,603,220	\$ 491,641	
Saucier Mechanical Svrs	Exhaust Fans Bathrooms A Wing/B Lounge	11-Dec-14	\$ 1,745	\$ 1,745	S/L	10	\$ 15	\$ 525	175	\$700	\$ 175.00	\$875	871
Saucier Mechanical Svrs	Motor for Boiler #3	7-Jan-15	1,320	1,320	S/L	15	7	264	88	\$352	\$ 88.00	\$440	880
Saucier Mechanical Svrs	Motor for Boiler #2	12-Feb-15	1,050	1,050	S/L	15	6	210	70	\$280	\$ 70.00	\$350	700
Precision Electrical	Outlets in Nurses Office	2-Mar-15	973	973	S/L	15	5	195	65	\$260	\$ 65.00	\$325	648
SMD	Electromagnetic Door Lock	11-Aug-15	2,132	2,132	S/L	15	12	426	142	\$568	\$ 142.00	\$710	1,422
Fire Protection	8 Sprinkler Heads	11-Aug-15	1,042	1,042	S/L	25	3	126	42	\$168	\$ 42.00	\$210	832
Proline	Hatco Water Booster	31-Aug-15	4,268	4,268	S/L	10	36	1,281	427	\$1,708	\$ 427.00	\$2,135	2,133
	2015 Balance		\$ 3,107,637	\$ 3,107,391			\$ 2,385,981	\$ 110,163	\$ 2,496,143	\$ 112,120	\$ 2,608,264	\$ 499,127	
Joel Martin	2 Mixing Valves	31-Oct-15	\$ 1,776	\$ 1,776	S/L	7	\$ 21.14	\$ 508	254	\$762	\$ 254.00	\$1,016	760

AVON HEALTH CENTER
LEASEHOLD IMPROVEMENTS

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Magnum Insutries LLC	North and South Shower Room Remodel and Repair	1-Sep-16	10,915	10,915	S/L	15	60.64	1,456	728	\$2,184	\$ 728.00	\$2,912	8,004
2016 Balance			\$ 3,120,328	\$ 3,120,082				\$ 2,387,944	\$ 111,145	\$ 2,499,089	\$ 113,102	\$ 2,612,191	\$ 507,891
Magnum Insutries LLC	50% dposit on back wing 3 ea. Shower stalls, common are	30-Nov-16	\$ 3,656	\$ 3,656	S/L	15	\$ 20.31	\$ 244	244	\$488	\$ 244.00	\$732	2,924
Plimpton & Hills	wade drains for back wing shower project	31-Dec-16	1,318	1,318	S/L	15	7.32	88	88	\$176	\$ 88.00	\$264	1,054
Accurate Commercial Door	new fire door on the elevator machine room	31-Jan-17	935	935	S/L	20	3.90	47	47	\$94	\$ 47.00	\$141	794
Fire Protection Testing	replaced 9 dry sidewall sprinklers above rear double doors	31-Jan-17	1,820	1,820	S/L	25	6.07	73	73	\$146	\$ 73.00	\$219	1,601
Martin, Joel	shower renovation phase ii, removed and replaced 4 showe	14-Feb-17	1,787	1,787	S/L	15	9.93	119	119	\$238	\$ 119.00	\$357	1,430
Magnum Insutries LLC	balance due on the back wing	13-Mar-17	3,656	3,656	S/L	15	20.31	244	244	\$488	\$ 244.00	\$732	2,924
Saucier Mechanical	first installment for replacement of indoor fan	31-Jul-17	1,695	1,695	S/L	5	28.25	339	339	\$678	\$ 339.00	\$1,017	678
Accurate Security	additional secure care system	30-Sep-17	1,728	1,728	S/L	10	14.40	173	173	\$346	\$ 173.00	\$519	1,209
Saucier Mechanical	final installment for replacement of indoor fan motor	30-Sep-17	1,594	1,594	S/L	5	26.57	319	319	\$638	\$ 319.00	\$957	637
2017 Balance			\$ 3,138,517	\$ 3,138,271				\$ 2,389,590	\$ 112,791	\$ 2,502,381	\$ 114,748	\$ 2,617,129	\$ 521,142
2018 Additions													
Chem Aqua	water softener with pvc piping option	28-Feb-18	\$ 13,559	\$ 13,559	S/L	10	112.99	-	1,356	\$1,356	\$ 1,356.00	\$2,712	10,847
Saucier Mechanical	new taco pump	28-Feb-18	1,181	1,181	S/L	5	19.68	-	236	\$236	\$ 236.00	\$472	709
Saucier Mechanical	replacement of base board heat in 8 rooms	31-Mar-18	11,135	11,135	S/L	10	92.79	-	1,114	\$1,114	\$ 1,114.00	\$2,228	8,907
Saucier Mechanical	replacement of base board heat in room 12A	31-Mar-18	1,315	1,315	S/L	10	10.96	-	132	\$132	\$ 132.00	\$264	1,051
Saucier Mechanical	installation of water softener	31-Mar-18	7,900	7,900	S/L	10	65.83	-	790	\$790	\$ 790.00	\$1,580	6,320
Saucier Mechanical	first installation for the shot feeder (for the boiler system)	31-Mar-18	1,150	1,150	S/L	15	6.39	-	77	\$77	\$ 77.00	\$154	996
Saucier Mechanical	final installation of the water softener	30-Apr-18	875	875	S/L	10	7.29	-	88	\$88	\$ 88.00	\$176	699
Sexauer	replaced wall water faucet	31-May-18	649	649	S/L	15	3.61	-	43	\$43	\$ 43.00	\$86	563
CL&P Loan	lighting project	31-May-18	86,231	86,231	S/L	20	359.30	-	4,312	\$4,312	\$ 4,312.00	\$8,624	77,607
Dunning Stone	materials needed for stone box built around ahc sign	30-Jun-18	728	728	S/L	15	4.04	-	49	\$49	\$ 49.00	\$98	630
Peters Landscaping	labor to build new stone wall around ahc sign	30-Jun-18	2,291	2,291	S/L	15	12.73	-	153	\$153	\$ 153.00	\$306	1,985
Saucier Mechanical	first installment for replacement of compressor and filter c	30-Jun-18	920	920	S/L	15	5.11	-	61	\$61	\$ 61.00	\$122	798
Saucier Mechanical	final installment for replacement of compressor and filter c	3-Jul-18	920	920	S/L	15	5.11	-	61	\$61	\$ 61.00	\$122	798
Saucier Mechanical	part of installation of water softener	31-Jul-18	660	660	S/L	10	5.50	-	66	\$66	\$ 66.00	\$132	528
Plimpton & Hills	work done to existing water line	31-Jul-18	1,614	1,614	S/L	15	8.97	-	108	\$108	\$ 108.00	\$216	1,398
Saucier Mechanical	north & south wing, replace all heating registers	30-Sep-18	845	845	S/L	15	4.69	-	56	\$56	\$ 56.00	\$112	733
2018 Disposals													
Various	Disposal of Assets Prior to 2008	Various	(685,095)	(685,095)	S/L	Var	-	-	-	(685,095)	\$ -	(\$685,095)	-
2018 Balance			\$ 2,585,395	\$ 2,585,149				\$ 2,389,590	\$ 121,493	\$ 1,825,988	\$ 123,450	\$ 1,949,438	\$ 635,711
2019 Additions													
Saucier Mechanical	north & south wing, replace all heating registers	31-Oct-18	\$ 1,340	\$ 1,340	S/L	15	7.44	-	-	\$ -	\$ 89.00	\$89	1,251
Door & Security Solutions.	3 doors & associated hardware	31-Dec-18	4,493	4,493	S/L	15	24.96	-	-	-	300	\$300	4,193
Encore Fire Protectino	new backflow preventers- sprinklers	31-Dec-18	5,161	5,161	S/L	15	28.67	-	-	-	344	\$344	4,817
Door & Security Solutions.	loading dock door	28-Feb-19	2,309	2,309	S/L	15	12.83	-	-	-	154	\$154	2,155
Reed Mechanical	Install new air scoop, install new high capacity vent	31-May-19	5,143	5,143	S/L	15	28.57	-	-	-	343	\$343	4,800
Artfx	visitor entrance & additional parking signs	30-Jun-19	2,287	2,287	S/L	15	12.70	-	-	-	152	\$152	2,135
Dunning Stone	estate wall & patio courtyard	31-Jul-19	6,669	6,669	S/L	15	37.05	-	-	-	445	\$445	6,224
Peters Landscaping	install patio in courtyard	31-Jul-19	10,890	10,890	S/L	15	60.50	-	-	-	726	\$726	10,164
New Britain Fence	installed 79" of 5' high vinyl fencing	31-Jul-19	3,935	3,935	S/L	15	21.86	-	-	-	262	\$262	3,673
Saucier Electrical	replacement of compressor, filter drier...	31-Aug-19	3,570	3,570	S/L	15	19.83	-	-	-	238	\$238	3,332
Precision Electrical	fenced in patio area delayed egress lock alternate	30-Sep-19	3,690	3,690	S/L	15	20.50	-	-	-	246	\$246	3,444
Precision Electrical	outdoor patio wiring	30-Sep-19	1,546	1,546	S/L	15	8.59	-	-	-	103	\$103	1,443
2019 Disposals													
Various	Disposal of assets prior to 2008	9/30/1989	(160,667)	(160,667)			-	-	-	-	-	(160,667)	-
Hartford Provision (HPC)	Dish machine work	4/30/2006	(723)	(723)			-	-	-	-	-	(723)	-
Hartford Provision (HPC)	Dish machine upgrade	8/31/2006	(873)	(873)			-	-	-	-	-	(873)	-
Direct Supply	Commercial disposal	8/31/2006	(1,403)	(1,403)			-	-	-	-	-	(1,403)	-
Otis Elevator	Install heaters in elevator cabs	11/30/2006	(1,000)	(1,000)			-	-	-	-	-	(1,000)	-
Otis Elevator	Install heaters in elevator cabs	11/30/2006	(3,079)	(3,079)			-	-	-	-	-	(3,079)	-
Casle	Facility upgrades: paint,wallpaper, carpet, electrical...	3/31/2007	(45,625)	(45,625)			-	-	-	-	-	(45,625)	-

AVON HEALTH CENTER
LEASEHOLD IMPROVEMENTS

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (IN YEARS)	MONTHLY DEPRECIATION	ACC'D EXPENSE as of 9/30/17	Depreciation EXPENSE FY 2018	ACC'D EXPENSE as of 9/30/18	Depreciation EXPENSE FY 2019	ACC'D EXPENSE as of 9/30/19	NET VALUE
Sherwin Williams	Wallpaper	3/31/2007	(954)	(954)			-	-	-	-	-	(954)	-
Titan Mechanical	Hot water tank Motor	12/14/2007	(1,748)	(1,748)			-	-	-	-	-	(1,748)	-
The Barn Yard	Smoking Shed	7/31/2008	(1,494)	(1,494)			-	-	-	-	-	(1,494)	-
Perfectemp Heating	Replace Compressor Walk-in Freezer	3/31/2009	(2,441)	(2,441)			-	-	-	-	-	(2,441)	-
Build 'N Serve	Network Upgrade Hardware & Labor	9/10/2009	(6,189)	(6,189)			-	-	-	-	-	(6,189)	-
Riley Signs	Front Sign	9/30/2009	(755)	(755)			-	-	-	-	-	(755)	-
Riley Signs	Front Sign Sales Tax	10/1/2009	(45)	(45)			-	-	-	-	-	(45)	-
CL&P	Retrofit Lighting	10/15/2008	(43,457)	(43,457)			-	-	-	-	-	(43,457)	-
2019 Balance			\$ 2,365,974	\$ 2,365,727				\$ 2,389,590	\$ 121,493	\$ 1,825,988	\$ 126,852	\$ 1,682,386	\$ 683,342

Per TB	2,376,698	117,270	1,688,528	117,270	1,688,528	2,376,698
Difference	\$ (10,971)	\$ 4,223	\$ 137,460	\$ 9,582	\$ (6,142)	\$ (1,693,356)

RELATED PARTY ASSETS

Asset No.	Asset Description	Date Acquired	Cost	Method	Life	Accum Depr 9/30/2017	Depreciation 9/30/2018	Accum Depr 9/30/2018	Depreciation 9/30/2019	Accum Depr 9/30/2019	NBV		
Building Improvements													
20	Ceiling Tile Replacement	02/28/09	\$ 24,216	\$	24,216	S/L	8	\$ 24,216	\$ -	\$24,216	\$ -	\$24,216	-
21	Laundry Room Upgrades	02/28/09	6,430		6,430	S/L	20	2,778	321	\$3,099	\$ 321.00	\$3,420	3,010
22	3 Washers & 4 Dryers	02/28/09	75,711		75,711	S/L	10	65,429	7,571	\$73,000	\$ 2,711.00	\$75,711	(0)
13	Shower Renovation Project	05/31/09	28,282		28,282	S/L	20	11,785	1,414	\$13,199	\$ 1,414.00	\$14,613	13,669
14	New Windows	06/30/09	49,820		49,820	S/L	20	20,658	2,491	\$23,149	\$ 2,491.00	\$25,640	24,180
15	Levered Door Hardware	06/30/09	4,198		4,198	S/L	15	2,309	280	\$2,589	\$ 280.00	\$2,869	1,328
19	Generator	06/30/09	147,807		147,807	S/L	20	61,290	7,390	\$68,680	\$ 7,390.00	\$76,070	71,738
23	Wood Laminate Flooring	06/30/09	70,580		70,580	S/L	10	58,534	7,058	\$65,592	\$ 4,988.00	\$70,580	0
24	Doors	06/30/09	79,073		79,073	S/L	15	43,718	5,272	\$48,990	\$ 5,272.00	\$54,262	24,810
18	Boiler	07/31/09	86,425		86,425	S/L	20	35,440	4,321	\$39,761	\$ 4,321.00	\$44,082	42,343
	Repair Patio Ceiling	11/6/2008	8,500		8,500	S/L	12	6,196	708	\$6,904	\$ 708.00	\$7,612	888
	Exterior Painting	11/7/2008	16,000		16,000	S/L	5	16,000	-	\$16,000	\$ -	\$16,000	-
	Automated Doors	11/24/2008	17,850		17,850	S/L	10	15,615	1,785	\$17,400	\$ 450.00	\$17,850	(0)
	Electric Upgrades	5/31/2008	28,631		28,631	S/L	15	14,789	1,909	\$16,698	\$ 1,909.00	\$18,607	10,024
	Roof Repairs	6/23/2010	9,910		9,910	S/L	10	7,678	991	\$8,669	\$ 991.00	\$9,660	250
	Electrical Panel Upgrades	5/26/2010	3,800		3,800	S/L	15	1,962	253	\$2,215	\$ 253.00	\$2,468	1,332
	2 5 Ton A/C Roof Top Units	7/31/2010	32,965		32,965	S/L	10	25,540	3,296	\$28,836	\$ 3,296.00	\$32,132	832
	Wander Control System	10/29/2010	7,086		7,086	S/L	10	4,782	709	\$5,491	\$ 709.00	\$6,200	886
	Repl Roof Top Exhaust	12/30/2010	1,595		1,595	S/L	10	1,077	160	\$1,237	\$ 160.00	\$1,397	198
	Baseboard	12/14/2010	1,568		1,568	S/L	10	1,058	157	\$1,215	\$ 157.00	\$1,372	195
	Volumed Dampers Dining & Rehab	11/30/2010	997		997	S/L	10	673	100	\$773	\$ 100.00	\$873	124
	Economizer Motors & Controls	11/1/2010	2,820		2,820	S/L	10	2,820	-	\$2,820	\$ -	\$2,820	-
	Lobby/Office Renovations	5/31/2011	24,011		24,011	S/L	15	10,215	1,601	\$11,816	\$ 1,601.00	\$13,417	10,594
	Phone System Upgrades	6/30/2011	7,696		7,696	S/L	10	4,843	770	\$5,613	\$ 770.00	\$6,383	1,312
	Carpet of Lobby/Offices	5/31/2011	15,492		15,492	S/L	5	15,492	-	\$15,492	\$ -	\$15,492	-
	Painting lobby/offices	5/16/2011	3,900		3,900	S/L	5	3,900	-	\$3,900	\$ -	\$3,900	-
	Wallpaper lobby & offices	5/18/2011	3,053		3,053	S/L	5	3,053	-	\$3,053	\$ -	\$3,053	-
	Phone system upgrade wiring	7/6/2011	447		447	S/L	10	279	45	\$324	\$ 45.00	\$369	77
	Wiring for phone system upgrade	5/10/2011	1,155		1,155	S/L	20	370	58	\$428	\$ 58.00	\$486	669
	Lower Level Emp Entrance	6/28/2011	4,140		4,140	S/L	15	1,738	276	\$2,014	\$ 276.00	\$2,290	1,850
	Wiring for Security Cameras	2/20/2011	2,473		2,473	S/L	5	2,473	-	\$2,473	\$ -	\$2,473	-
	Deliver Entrance Doors	9/16/2011	4,850		4,850	S/L	10	2,933	485	\$3,418	\$ 485.00	\$3,903	947
	Windows for N & S Wings	3/20/2012	25,577		25,577	S/L	20	6,394	1,279	\$7,673	\$ 1,279.00	\$8,952	16,625
	Install pull-down stairs by N & S	6/7/2012	2,400		2,400	S/L	10	1,200	240	\$1,440	\$ 240.00	\$1,680	720
	New fire alarm panel & annunciator	7/11/2012	3,403		3,403	S/L	10	1,701	340	\$2,041	\$ 340.00	\$2,381	1,022
	Parking Lot Repairs	10/29/2011	14,384		14,384	S/L	8	8,990	1,798	\$10,788	\$ 1,798.00	\$12,586	1,798
	Oil Tank Removal	3/5/2012	2,800		2,800	S/L	20	700	140	\$840	\$ 140.00	\$980	1,820
	7.5 Ton AC Rooftop Unit #5	6/18/2013	13,695		13,695	S/L	10	6,848	1,370	\$8,218	\$ 1,370.00	\$9,588	4,107
	Elevator Upgrades	11/30/2012	95,544		95,544	S/L	20	23,886	4,777	\$28,663	\$ 4,777.00	\$33,440	62,104

AVON HEALTH CENTER
LEASEHOLD IMPROVEMENTS

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (IN YEARS)	MONTHLY DEPRECIATION	ACC'D EXPENSE as of 9/30/17	Depreciation EXPENSE FY 2018	ACC'D EXPENSE as of 9/30/18	Depreciation EXPENSE FY 2019	ACC'D EXPENSE as of 9/30/19	NET VALUE
	Stainless Steel Door Buck Wraps	5/29/2013	2,355	2,355	S/L	15		785	157	\$942	\$ 157.00	\$1,099	1,256
	Carpet for Rehab Gym	4/23/2013	2,394	2,394	S/L	5		2,394	-	\$2,394	\$ -	\$2,394	-
	Rehab Gym Renovation	4/5/2013	1,850	1,850	S/L	15		616	123	\$739	\$ 123.00	\$862	988
	Electrical Panel-Connector Hall	9/24/2013	2,840	2,840	S/L	10		1,420	284	\$1,704	\$ 284.00	\$1,988	852
	Front Column Repairs	7/23/2013	1,025	1,025	S/L	10		513	103	\$616	\$ 103.00	\$719	306
	2.5 ton AC Unit for Lobby	10/15/2013	10,665	10,665	S/L	10		4,267	1,067	\$5,334	\$ 1,067.00	\$6,401	4,265
	Rooftop kitchen air unit	3/31/2014	22,110	22,110	S/L	15		5,896	1,474	\$7,370	\$ 1,474.00	\$8,844	13,266
	North Wing AC Condesnor	8/5/2014	15,225	15,225	S/L	15		4,060	1,015	\$5,075	\$ 1,015.00	\$6,090	9,135
	Wallpaper Northington/Dining/Ele	12/17/2013	24,929	24,929	S/L	5		19,944	4,986	\$24,930	\$ -	\$24,930	(0)
	Corridors & Lounges Wallpaper	9/12/2014	59,293	59,293	S/L	5		47,435	11,858	\$59,293	\$ -	\$59,293	0
	Repair to rear parking lot	7/18/2014	11,029	11,029	S/L	8		5,515	1,379	\$6,894	\$ 1,379.00	\$8,273	2,756
	New ductless split A/C unit for kit	8/20/2015	9,085	9,085	S/L	10		2,727	909	\$3,636	\$ 909.00	\$4,545	4,541
	Dining Room 10ton AC rooftop	6/30/2015	17,990	17,990	S/L	10		5,397	1,799	\$7,196	\$ 1,799.00	\$8,995	8,995
	New cabinets/workstations/counters	3/10/2015	5,271	5,271	S/L	15		1,053	351	\$1,404	\$ 351.00	\$1,755	3,516
	Modify HVAC ductwork nurse su	3/6/2015	980	980	S/L	20		147	49	\$196	\$ 49.00	\$245	735
	Relocate 2 Sprinklers Nurse Spr	2/23/2015	700	700	S/L	25		84	28	\$112	\$ 28.00	\$140	560
	Wall /poclet door Nurse Super	2/10/2015	3,420	3,420	S/L	15		684	228	\$912	\$ 228.00	\$1,140	2,280
	New Carpeting Social Service	2/10/2015	3,415	3,415	S/L	5		2,049	683	\$2,732	\$ 683.00	\$3,415	-
	Reseal/Insulate windows&wrap	8/29/2015	12,299	12,299	S/L	5		7,380	2,460	\$9,840	\$ 2,459.00	\$12,299	0
	New handrails for North & South	9/28/2015	8,454	8,454	S/L	20		1,269	423	\$1,692	\$ 423.00	\$2,115	6,339
	Exterior doors in lower hall way	9/28/2015	26,651	26,651	S/L	20		3,999	1,333	\$5,332	\$ 1,333.00	\$6,665	19,986
	1 set Exterior doors in rehab	12/10/2015	4,887	4,887	S/L	10		978	489	\$1,467	\$ 489.00	\$1,956	2,931
	Two Doors Exterior	1/1/2016	9,774	9,774	S/L	10		1,954	977	\$2,931	\$ 977.00	\$3,908	5,865
	Sign & Post Front of Building	5/1/2016	3,026	3,026	S/L	10		606	303	\$909	\$ 303.00	\$1,212	1,814
	New Shingled Roof	9/30/2016	78,870	78,870	S/L	30		5,258	2,629	\$7,887	\$ 2,629.00	\$10,516	68,354
	Parking lot repairs; drainage insta	12/2/2015	9,200	9,200	S/L	8		2,300	1,150	\$3,450	\$ 1,150.00	\$4,600	4,600
	HVAC rooftop unit- B wing	10/25/2016	18,335	18,335	S/L	15		1,222	434	\$2,444	\$ 434.00	\$3,666	14,669
	9 Metal Smoke & Fire Doors	3/31/2018	8,678	8,678	S/L	20		-	434	\$434	\$ 434.00	\$868	7,810
	Dish Machine	2/28/2018	23,000	23,000	S/L	10		-	2,300	\$2,300	\$ 2,300.00	\$4,600	18,400
	Modcon Boiler	2/28/2018	16,630	16,630	S/L	20		-	832	\$832	\$ 832.00	\$1,664	14,966
	Electrical Work for New Dish Machine	3/31/2018	2,203	2,203	S/L	20		-	110	\$110	\$ 110.00	\$220	1,983
	Removal & Installation of new Smoke & Fire Doors	8/31/2018	875	875	S/L	20		-	44	\$44	\$ 44.00	\$88	787
	Replace RU #6 & heat exchange	10/31/2018	14,945	14,945	S/L	20		-	-	\$ -	\$ 747.00	\$747	14,198
	Flooring in pub. elevators, rehab gym, & front entry	5/31/2019	19,029	19,029	S/L	15		-	-	\$ -	\$ 1,269.00	\$1,269	17,760
	Resident room wallpaper	7/31/2019	48,969	48,969	S/L	15		-	-	\$ -	\$ 3,265.00	\$3,265	45,704
	Painting of building exterior	8/31/2019	17,000	17,000	S/L	15		-	-	\$ -	\$ 1,133.00	\$1,133	15,867
			\$ 1,446,681	\$ 1,446,681				\$ 649,313	\$ 100,564	\$ 749,877	\$ 81,868	\$ 831,745	\$ 614,937

LHI Combined Totals for Cost Report

\$ 3,812,655	\$ 3,812,409	\$ 3,038,903	\$ 222,057	\$ 2,575,864	\$ 208,720	\$ 2,514,130	\$ 1,298,279
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Leasehold Improvements	\$ 2,585,149	2,389,590	112,791	2,502,381	123,450	1,937,494	\$ 647,655
Additions	51,033	-	8,702	8,702	3,402	12,104	\$ 38,929
Disposals	(270,454)	-	-	(685,095)	-	(270,454)	\$ -
Related Party Leasehold improvements	1,346,738	649,050	96,844	745,894	75,454	821,348	\$ 525,390
Related Party Additions	99,943	-	3,720	3,720	6,414	10,134	\$ 89,809
Prior Year C/R Variance	-	-	-	(3,242)	-	-	\$ -
Total	\$ 3,812,409	\$ 3,038,640	\$ 222,057	\$ 2,572,360	\$ 208,720	\$ 2,510,626	\$ 1,301,783

C. Expenditures Other Than Salaries (cont'd) - Property Questionnaire

Name of Facility Avon Convalescent Home, Inc., d/b/a	License No. 938-C	Report for Year Ended 9/30/2019	Page 25	of 37
11. Property Questionnaire				
Part A				
Is the property either owned by the Facility or leased from a Related Party?*				
		<input checked="" type="radio"/> Yes	<input type="radio"/> No	If "Yes," complete Part B. If "No," complete Part C.
*If any owner or operator of this facility is related by family, marriage, ownership, ability to control or business association to any person or organization from whom buildings are leased, then it is considered a related party transaction.				
Description		Total		
1. Date Land Purchased				
2. Date Structure Completed				
3. If NOT Original Owner, Date of Purchase				
4. Date of Initial Licensure				
5. Total Licensed Bed Capacity		120		
6. Square Footage				
7. Acquisition Cost				
a. Land				
b. Building				
Part B - Owner and Related Parties		1st Mortgage	2nd Mortgage	3rd Mortgage
1. Financing				
a. Type of Financing (e.g., fixed, variable)		Fixed		
b. Date Mortgage Obtained		08/26/13		
c. Interest Rate for the Cost Year		3.78%		
d. Term of Mortgage (number of years)		30		
e. Amount of Principal Borrowed		3,903,200		
f. Principal balance outstanding as of 9/30/19		3,462,930		
Complete if Mortgage was Refinanced During Current Cost Year				
g. Type of Financing (e.g., fixed, variable)				
h. Date of Refinancing				
i. New Interest Rate				
j. Term of Mortgage (number of years)				
k. Amount of Principal Borrowed				
l. Principal Outstanding on Note Paid-Off				
Part C - Arms-Length Leases for Real Property Improvements Only				
Name and Address of Lessor	Property Leased	Date of Lease	Term of Lease	Annual Amount of Lease

Note: Be sure required copies of leases are attached to Page 25 and real estate taxes paid by lessor are included on Page 22, Item 10b.

C. Expenditures Other Than Salaries (cont'd) - Interest

Name of Facility		License No.	Report for Year Ended		Page	of
Avon Convalescent Home, Inc., d/b/a		938-C	9/30/2019		26	37
Item			Total	CCNH	RHNS	(Specify)
12. Interest						
A. Building, Land Improvement & Non-Movable Equipment						
1. First Mortgage			\$			
Name of Lender		Rate				
Address of Lender						
2. Second Mortgage			\$			
Name of Lender		Rate				
Address of Lender						
3. Third Mortgage			\$			
Name of Lender		Rate				
Address of Lender						
4. Fourth Mortgage			\$			
Name of Lender		Rate				
Address of Lender						
B. CHEFA Loan Information						
1. Original Loan Amount			\$			
2. Loan Origination Date						
3. Interest Rate %						
4. Term						
5. CHEFA Interest Expense						
12 B7. Total Building Interest Expense (A1 - A4 + B5)			\$			

(Carry Subtotals forward to next page)

C. Expenditures Other Than Salaries (cont'd) - Interest and Insurance

Name of Facility		License No.		Report for Year Ended		Page	of
Avon Convalescent Home, Inc., d/b/		938-C		9/30/2019		27	37
Item				Total	CCNH	RHNS	(Specify)
Subtotals Brought Forward:							
12. C. Movable Equipment							
1. Automotive Equipment				\$			
A. Item		Rate	Amount				
Lender							
Address of Lender							
2. Other (Specify)				\$			
A. Item		Rate	Amount				
Lender							
Address of Lender							
B. Item		Rate	Amount				
Lender							
Address of Lender							
12. C. 3. Total Movable Equipment Interest Expense (C1 + 2)				\$			
12. D. Other Interest Expense (Specify) Capital Lease Interest				\$	111	111	
13. Total All Interest Expense (12B7 + 12C3 + 12D)				\$	111	111	
14. Insurance							
a. Insurance on Property (buildings only)				\$	86,000	86,000	
b. Insurance on Automobiles				\$			
c. Insurance other than Property (as specified above)							
1. Umbrella (Blanket Coverage)				\$			
2. Fire and Extended Coverage				\$			
3. Other (Specify)				\$			
14d. Total Insurance Expenditures (14a + b + c)				\$	86,000	86,000	
15. Total All Expenditures (A-13 thru C-14)				\$	12,062,047	12,062,047	

Annual Report of Long-Term Care Facility

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D. Adjustments to Statement of Expenditures

Name of Facility				License No.	Report for Year Ended	Page	of
Avon Convalescent Home, Inc., d/b/a Avon Health Center				938-C	9/30/2019	28	37
Item No.	Page No.	Line No.	Item Description	Total Amount of Decrease	CCNH	RHNS	(Specify)
Page 10 - Salaries and Wages							
1.			Outpatient Service Costs	\$			
2.			Salaries not related to Resident Care	\$			
3.			Occupational Therapy	\$			
4.			Other - See attached Schedule	\$			
Page 13 - Professional Fees							
5.			Resident Care Physicians **	\$			
6.	13	B10a	Occupational Therapy	\$ 238,286	238,286		
7.			Other - See attached Schedule	\$			
Pages 15 & 16 - Administrative and General							
8.			Discriminatory Benefits	\$			
9.	15	1c	Bad Debts	\$ 60,000	60,000		
10.			Accounting	\$			
10a.			Legal	\$ 5,328	5,328		
11.			Telephone	\$			
12.			Cellular Telephone	\$			
13.			Life insurance premiums on the life of Owners, Partners, Operators	\$			
14.			Gifts, flowers and coffee shops	\$			
15.			Education expenditures to colleges or universities for tuition and related costs for owners and employees	\$			
16.	16	14	Travel for purposes of attending conferences or seminars outside the continental U.S. Other out-of-state travel in excess of one representative	\$ 2,305	2,305		
17.			Automobile Expense (e.g. personal use)	\$			
18.	16	m2/3	Unallowable Advertising *	\$ 48,025	48,025		
19.	15	1k1	Income Tax / Corporate Business Tax	\$ 27,750	27,750		
20.	16	m10	Fund Raising / Contributions	\$ 1,817	1,817		
21.			Unallowable Management Fees	\$			
22.			Barber and Beauty	\$			
23.			Other - See attached Schedule	\$ 20,178	20,178		
Page 18 - Dietary Expenditures							
24.			Meals to employees, guests and others who are not residents	\$			
Page 19 - Laundry Expenditures							
25.			Laundry services to employees, guests and others who are not residents	\$			
Page 20 - Housekeeping Expenditures							
26.			Housekeeping services to employees, guests and others who are not residents	\$			
Subtotal (Items 1 - 26)				\$ 403,689	403,689		

* All except "Help Wanted".

(Carry Subtotal forward to next page)

** Physicians who provide services to Title 19 residents are required to bill the Department of Social Services directly for each individual resident.

Schedule of Other Salaries Adjustment

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Total Other Salaries Adjustment			\$ -	\$ -	\$ -

Schedule of Fees Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Total Other Fees Adjustments			\$ -	\$ -	\$ -

Schedule of Other A&G Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
16	m13	Employee Relations	\$ 14,343		
16	m13	Employee Food	5,208		
16	m8a	Chamber of Commerce Dues	140		
16	1a5	Owners Health Insurance (Dental)	487		
Total Other A&G Adjustments			\$ 20,178	\$ -	\$ -

D. Adjustments to Statement of Expenditures (cont'd)

Name of Facility			License No.	Report for Year Ended	Page	of	
Avon Convalescent Home, Inc., d/b/a Avon Health Center			938-C	9/30/2019	29	37	
Item No.	Page No.	Line No.	Item Description	Total Amount of Decrease	CCNH	RHNS	(Specify)
Subtotals Brought Forward				\$ 403,689	403,689		
Page 20 - Resident Care Supplies***							
27.	20	5a2	Prescription Drugs	\$ 186,017	186,017		
28.	20	5d	Ambulance/Limousine	\$ 3,021	3,021		
29.	20	5f	X-rays, etc	\$ 6,055	6,055		
30.	20	5h	Laboratory	\$ 24,431	24,431		
31.			Medical Supplies	\$			
32.	20	5e2	Oxygen (non emergency)	\$ 19,604	19,604		
33.			Occupational Therapy	\$			
34.			Other - See Attached Schedule	\$ 32,101	32,101		
Page 22 - Maintenance and Property							
35.			Excess Movable Equipment Depreciation See Attached Schedule	\$			
36.			Depreciation on Unallowable Motor Vehicles	\$			
37.			Unallowable Property and Real Estate Taxes	\$			
38.			Rental of Building Space or Rooms	\$			
39.			Other - See Attached Schedule	\$			
Page 27 - Insurance							
40.			Mortgage Insurance	\$			
41.			Property Insurance	\$			
Other - Miscellaneous							
42.			Other - Indirect	\$			
43.			Interest Income on Account Rec.	\$			
44.			Other - Miscellaneous Administrative	\$			
45.			Management Fees Direct	\$			
46.			Management Fees Indirect	\$			
47.			Other - Direct	\$ (7,214)	(7,214)		
Not For Profit Providers Only							
48.			Building/Non Movable Eq. Depreciation Unallowable Building Interest - See Attached Schedule	\$			
49. Total Amount of Decrease (Items 1 - 48)				\$ 667,704	667,704		

*** Items billed directly to Department of Social Services and/or Health Services in CT, or other states, Medicare, and private-pay residents. Identify separately by category as indicated on Page 20.

Schedule of Other Ancillary Costs

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
20	51	Therapy Equipment Rental - OT Disallowance (See Attached)	\$ 5,395		
20	51	Cable TV Disallowance (See Attached)	3,105		
20	51	IV Therapy Expense	8,639		
20	51	Supplies Patient Personal	3,404		
20	51	Nursing Equipment Med A	7,814		
20	51	Nursing Equipment Rental	3,744		
Total Other Ancillary Costs			\$ 32,101	\$ -	\$ -

Schedule of Excess Movable Equipment Depreciation

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Total Excess Movable Equipment Depreciation			\$ -	\$ -	\$ -

Schedule of Other Property Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Total Other Property Adjustments			\$ -	\$ -	\$ -

Schedule of Other - Indirect Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)

Total Other Adjustments			\$ -	\$ -	\$ -

Schedule of Other - Miscellaneous Administrative Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Total Other Adjustments			\$ -	\$ -	\$ -

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
30	IV 8	Bad Debt Recoveries (Reduction of Bad Debt Disallowance on Pg 28)	(7,214)		
Total Other Adjustments			\$ (7,214)	\$ -	\$ -

Schedule of Unallowable Building Interest

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Total Unallowable Building Interest			\$ -	\$ -	\$ -

Avon Health Care
 OT Therapy Equipment Rental Disallowance
 September 30, 2019

	<u># of Treatments Page 9</u>	<u>Percentage</u>
Physical Therapy	14,401	50.76%
Occupational Therapy	13,968	49.24% {a}
	<hr/> 28,369	100.00%
Therapy Equipment Rental	Pg. 20 / Line 5j	10,958 {b}
OT Equipment Rental Disallowed	Pg. 29 attachment	5,395 {a} x {b}

**Avon Health Care 2019 Cost Report
Disallowance Schedule for Cable TV
September 30, 2019**

	<u>Amount</u>	
Total Cable TV Expense acct #65450	\$ 6,705	TB Linked
Monthly Allowable amount	\$ 300	
Months in Year	12	
% of Actual Days in Cost Year (365 Days)	<u>100%</u>	
Total Allowable Cost	\$ 3,600	
Disallowed Cable TV	<u><u>\$ 3,105</u></u>	

F. Statement of Revenue

Name of Facility	License No.	Report for Year Ended		Page	of
Avon Convalescent Home, Inc., d/b/a Av	938-C	9/30/2019		30	37
Item	Total	CCNH	RHNS	(Specify)	
I. Resident Room, Board & Routine Care Revenue					
1. a. Medicaid Residents (<i>CT only</i>)	\$ 12,714,450	12,714,450			
b. Medicaid Room and Board Contractual Allowance **	\$ (5,849,124)	(5,849,124)			
2. a. Medicaid (<i>All other states</i>)	\$				
b. Other States Room and Board Contractual Allowance **	\$				
3. a. Medicare Residents (<i>all inclusive</i>)	\$ 1,261,981	1,261,981			
b. Medicare Room and Board Contractual Allowance **	\$ 189,790	189,790			
4. a. Private-Pay Residents and Other	\$ 3,825,349	3,825,349			
b. Private-Pay Room and Board Contractual Allowance **	\$				
II. Other Resident Revenue					
1. a. Prescription Drugs - Medicare	\$ 103,552	103,552			
b. Prescription Drugs - Medicare Contractual Allowance **	\$ (116,574)	(116,574)			
c. Prescription Drugs - Non-Medicare	\$ 63,394	63,394			
d. Prescription Drugs - Non-Medicare Contractual Allowance **	\$ (63,394)	(63,394)			
2. a. Medical Supplies - Medicare	\$				
b. Medical Supplies - Medicare Contractual Allowance **	\$				
c. Medical Supplies - Non-Medicare	\$				
d. Medical Supplies - Non-Medicare Contractual Allowance **	\$				
3. a. Physical Therapy - Medicare	\$ 136,045	136,045			
b. Physical Therapy - Medicare Contractual Allowance **	\$ (36,021)	(36,021)			
c. Physical Therapy - Non-Medicare	\$ 105,277	105,277			
d. Physical Therapy - Non-Medicare Contractual Allowance **	\$ (106,557)	(106,557)			
4. a. Speech Therapy - Medicare	\$ 244,296	244,296			
b. Speech Therapy - Medicare Contractual Allowance **	\$ (126,049)	(126,049)			
c. Speech Therapy - Non-Medicare	\$ 49,467	49,467			
d. Speech Therapy - Non-Medicare Contractual Allowance **	\$ (52,062)	(52,062)			
5. a. Occupational Therapy - Medicare	\$ 230,355	230,355			
b. Occupational Therapy - Medicare Contractual Allowance **	\$ (139,007)	(139,007)			
c. Occupational Therapy - Non-Medicare	\$ 110,207	110,207			
d. Occupational Therapy - Non-Medicare Contractual Allowance **	\$ (109,325)	(109,325)			
6. a. Other (<i>Specify</i>) - Medicare	\$ (6,725)	(6,725)			
b. Other (<i>Specify</i>) - Non-Medicare	\$ (2,040)	(2,040)			
III. Total Resident Revenue (Section I. thru Section II.)	\$ 12,427,285	12,427,285			
IV. Other Revenue*					
1. Meals sold to guests, employees & others	\$				
2. Rental of rooms to non-residents	\$				
3. Telephone	\$				
4. Rental of Television and Cable Services	\$				
5. Interest Income (<i>Specify</i>)	\$				
6. Private Duty Nurses' Fees	\$				
7. Barber, Coffee, Beauty and Gift shops	\$				
8. Other (<i>Specify</i>)	\$ 18,626	18,626			
V. Total Other Revenue (1 thru 8)	\$ 18,626	18,626			
VI. Total All Revenue (III + V)	\$ 12,445,911	12,445,911			

* Facility should off-set the appropriate expense on Page 28 or Page 29 of the Cost Report.

** Facility should report all contractual allowances and/or payer discounts.

Schedule of Other Resident Revenue - Medicare

Related Exp

Page Ref	Description	CCNH	RHNS	(Specify)
		-		
30 II 6a	Pharmacy Medicare A	\$ (26,820)		
30 II 6a	X-ray Medicare A	14,573		
30 II 6a	Allow X-ray MCR A	(14,573)		
30 II 6a	X-ray Medicare A	3,161		
30 II 6a	Allow X-ray MCR A	(3,161)		
30 II 6a	Pharmacy MCR B	20,095		
30 II 6a	Lab Insurance B	2,177		
30 II 6a	Allow Lab Insurance B	(2,177)		
Total Other Resident Revenue - Medicare		\$ (6,725)	\$ -	\$ -

Schedule of Other Non-Medicare Resident Revenue

Related Exp

Page Ref	Description	CCNH	RHNS	(Specify)
		-		
30 II 6b	Lab Private	\$ 154		
30 II 6b	Allow OT MCD	(2,194)		
30 II 6b	Room & Board Medicare	22		
30 II 6b	Allowance R&B Medicare	(22)		
30 II 6b	Lab Insurance Other	77,371		
30 II 6b	Allow Lab Insurance Other	(77,371)		
30 II 6b	X-ray Insurance Other	4,711		
30 II 6b	Allow X-ray Insurance Other	(4,711)		
Total Other Resident Revenue		\$ (2,040)	\$ -	\$ -

Interest Income

Account

Page Ref	Account	Balance	CCNH	RHNS	(Specify)
			-		
Total Interest Income			\$ -	\$ -	\$ -

Schedule of Other Revenue

Page Ref	Description	CCNH	RHNS	(Specify)
		-		
30 IV 8	RehabCare / Stericycle Settlement Revenue	\$ 33		
30 IV 8	Insurance Other Dividends	14,360		
30 IV 8	Retro Ancillaries	(2,981)		
30 IV 8	Bad Debt Recovery	7,214		
Total Other Revenue		\$ 18,626	\$ -	\$ -

G. Balance Sheet

Name of Facility	License No.	Report for Year Ended	Page	of
Avon Convalescent Home, Inc., d/b/a A	938-C	9/30/2019	31	37
Account			Amount	
Assets				
A. Current Assets				
1. Cash (on hand and in banks)			\$	571,888
2. Resident Accounts Receivable (Less Allowance for Bad Debts)			\$	1,884,964
3. Other Accounts Receivable (Excluding Owners or Related Parties)			\$	
4 Inventories			\$	34,006
5. Prepaid Expenses			\$	63,511
a. Prepaid Insurance	43,918			
b. Prepaid Other	19,593			
c. _____				
d. See Schedule				
6. Interest Receivable			\$	
7. Medicare Final Settlement Receivable			\$	
8. Other Current Assets (itemize)			\$	1,562
Deposits	1,562			

See Schedule				
A-9. Total Current Assets (Lines A1 thru 8)			\$	2,555,931
B. Fixed Assets				
1. Land			\$	
2. Land Improvements	*Historical Cost _____		\$	
	Accum. Depreciation _____	Net		
3. Buildings	*Historical Cost <u>7,495</u>		\$	5,620
	Accum. Depreciation <u>1,875</u>	Net		
4. Leasehold Improvements	*Historical Cost <u>3,812,409</u>		\$	1,301,783
	Accum. Depreciation <u>2,510,626</u>	Net		
5. Non-Movable Equipment	*Historical Cost _____		\$	
	Accum. Depreciation _____	Net		
6. Movable Equipment	*Historical Cost <u>982,936</u>		\$	239,654
	Accum. Depreciation <u>743,282</u>	Net		
7. Motor Vehicles	*Historical Cost _____		\$	
	Accum. Depreciation _____	Net		
8. Minor Equipment-Not Depreciable			\$	
9. Other Fixed Assets (itemize)			\$	(6,970)
F/S vs C/R NBV	(6,970)			
See Schedule				
B-10. Total Fixed Assets (Lines B1 thru 9)			\$	1,540,088

* Historical Costs must agree with Historical Cost reported in Schedules on Depreciation and Amortization (Pages 23 and 24).

Schedule of Prepaid Expenses Page 31 Line A5

Page Ref	Line Ref	Description	
Total Prepaid Expenses			\$ -

Schedule of Other Current Assets (Itemized) Page 31 Line A8

Page Ref	Line Ref	Description	
Total Other Current Assets (Itemize)			\$ -

Schedule of Other Fixed Assets (Itemize) Page 31 Line B9

Page Ref	Line Ref	Description	
Total Other Fixed Assets (Itemize)			\$ -

Schedule of Other Assets Page 32 Line D7

Page Ref	Line Ref	Description	
Total Other Assets			\$ -

Schedule of Notes Payable (Itemize) Page 33 Line A2

Page Ref	Line Ref	Description	
Total Notes Payable			\$ -

Schedule of Other Current Liabilities (Itemize) Page 33 Line A12

Page Ref	Line Ref	Description	
33	A12	Credit Balance Liabilities	\$ 360,094
33	A12	Due to Cash Resident Fund	30,072
33	A12	Accrued Pension	109,854
33	A12	Accrued Accounting	16,950
33	A12	Accrued User Fee	185,523
33	A12	Accrued Property Taxes	1,623
33	A12	Accrued Insurance Financing	23,470
33	A12	Accrued Expense Other	8,360
Total Other Current Liabilities (Itemize)			\$ 735,946

Schedule of Other Long-Term Liabilities (Itemize) Page 34 Line B4

Page Ref	Line Ref	Description	
Total Other Current Liabilities (Itemize)			\$ -

G. Balance Sheet (cont'd)

Name of Facility	License No.	Report for Year Ended	Page	of
Avon Convalescent Home, Inc., d/b/a A	938-C	9/30/2019	32	37
Account			Amount	
Total Brought Forward:			\$	4,096,019
C. Leasehold or like property recorded for Equity Purposes.				
1. Land				
\$				
2. Land Improvements				
	*Historical Cost	_____		
	Accum. Depreciation	_____	Net	\$
3. Buildings				
	*Historical Cost	_____		
	Accum. Depreciation	_____	Net	\$
4. Non-Movable Equipment				
	*Historical Cost	_____		
	Accum. Depreciation	_____	Net	\$
5. Movable Equipment				
	*Historical Cost	_____		
	Accum. Depreciation	_____	Net	\$
6. Motor Vehicles				
	*Historical Cost	_____		
	Accum. Depreciation	_____	Net	\$
7. Minor Equipment-Not Depreciable				
\$				
C-8 Total Leasehold or Like Properties (C1 thru 7)				
\$				
D. Investment and Other Assets				
1. Deferred Deposits				
\$				
2. Escrow Deposits				
\$				
3. Organization Expense				
	*Historical Cost	_____		
	Accum. Depreciation	_____	Net	\$
4. Goodwill (Purchased Only)				
\$				
5. Investments Related to Resident Care (<i>itemize</i>)				
\$				

6. Loans to Owners or Related Parties (<i>itemize</i>)				
			\$	641,479
Name and Address		Amount	Loan Date	
Due from Avon Realty / West Hartford Rehab		641,479		
7. Other Assets (<i>itemize</i>)				
\$				

See Schedule				
D-8. Total Investments and Other Assets (Lines D1 thru 7)			\$	641,479
D-9. Total All Assets (Lines A9 + B10 + C8 + D8)			\$	4,737,498

* Historical Costs must agree with Historical Cost reported in Schedules on Depreciation and Amortization (Pages 23 and 24).

G. Balance Sheet (cont'd)

Name of Facility		License No.	Report for Year Ended	Page	of
Avon Convalescent Home, Inc., d/b/a Avon He		938-C	9/30/2019	33	37
Account				Amount	
Liabilities					
A. Current Liabilities					
1. Trade Accounts Payable				\$	202,469
2. Notes Payable (<i>itemize</i>)				\$	1,135
Capital Lease Current Portion					1,135

See Schedule					
3. Loans Payable for Equipment (<i>Current portion</i>) (<i>itemize</i>)				\$	38,655
Name of Lender		Purpose	Amount	Date Due	
CL&P Loan			38,655		
4. Accrued Payroll (<i>Exclusive of Owners and/or Stockholders only</i>)				\$	335,836
5. Accrued Payroll (<i>Owners and/or Stockholders only</i>)				\$	
6. Accrued Payroll Taxes Payable				\$	10,952
7. Medicare Final Settlement Payable				\$	
8. Medicare Current Financing Payable				\$	
9. Mortgage Payable (<i>Current Portion</i>)				\$	
10. Interest Payable (<i>Exclusive of Owner and/or Related Parties</i>)				\$	
11. Accrued Income Taxes*				\$	
12. Other Current Liabilities (<i>itemize</i>)				\$	735,946

See Schedule					735,946
A-13. Total Current Liabilities (Lines A1 thru 12)				\$	1,324,993

* Business Income Tax (not that withheld from employees). Attach copy of owner's Federal Income Tax Return.

(Carry Total forward to next page)

G. Balance Sheet (cont'd)

Name of Facility Avon Convalescent Home, Inc., d/b/a Avon	License No. 938-C	Report for Year Ended 9/30/2019	Page 34	of 37
Account				Amount
Total Brought Forward:				1,324,993
Liabilities (cont'd)				
B. Long-Term Liabilities				
1. Loans Payable-Equipment (<i>itemize</i>)				
Name of Lender	Purpose	Amount	Date Due	\$
2. Mortgages Payable				\$
3. Loans from Owners or Related Parties (<i>itemize</i>)				\$
Name and Address of Lender	Amount	Loan Date		
4. Other Long-Term Liabilities (<i>itemize</i>)				\$
See Schedule				
B-5. Total Long-Term Liabilities (Lines B1 thru 4)				\$
C. Total All Liabilities (Lines A-13 + B-5)				\$ 1,324,993

G. Balance Sheet (cont'd)
Reserves and Net Worth

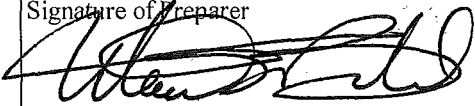
Name of Facility	License No.	Report for Year Ended	Page	of
Avon Convalescent Home, Inc., d/b/a A	938-C	9/30/2019	35	37
Account			Amount	
A. Reserves				
1. Reserve for value of leased land			\$	
2. Reserve for depreciation value of leased buildings and appurtenances to be amortized			\$	
3. Reserve for depreciation value of leased personal property (<i>Equity</i>)			\$	717,570
4. Reserve for leasehold real properties on which fair rental value is based			\$	
5. Reserve for funds set aside as donor restricted			\$	
6. Total Reserves			\$	717,570
B. Net Worth				
1. Owner's Capital			\$	
2. Capital Stock			\$	156,000
3. Paid-in Surplus			\$	
4. Treasury Stock			\$	
5. Cumulated Earnings			\$	2,043,691
6. Gain or Loss for Period			\$	495,244
7. Total Net Worth			\$	2,694,935
C. Total Reserves and Net Worth			\$	3,412,505
D. Total Liabilities, Reserves, and Net Worth			\$	4,737,498

H. Changes in Total Net Worth

Name of Facility	License No.	Report for Year Ended	Page	of		
Avon Convalescent Home, Inc., d/b/a Av	938-C	9/30/2019	36	37		
Account			Amount			
A. Balance at End of Prior Period as shown on Report of 09/30/2018			\$	2,199,691		
B. Total Revenue <i>(From Statement of Revenue Page 30)</i>			\$	12,445,911		
C. Total Expenditures <i>(From Statement of Expenditures Page 27)</i>			\$	11,950,667		
D. Net Income or Deficit			\$	495,244		
E. Balance			\$	2,694,935		
F. Additions						
1. Additional Capital Contributed <i>(itemize)</i>						
Expenses per Page 27 \$12,062,047						
F/S vs C/R Depreciation (\$111,380)						
Total Expenses per FS \$11,950,667						
2. Other <i>(itemize)</i>						
F-3. Total Additions					\$	
G. Deductions						
1. Drawings of Owners/Operators/Partners <i>(Specify)</i>					\$	
Name and Address <i>(No., City, State, Zip)</i>		Title			Amount	
2. Other Withdrawings <i>(Specify)</i>			\$			
Purpose		Amount				
3. Total Deductions			\$			
H. Balance at End of Period			\$	2,694,935		
				09/30/19		

**PP Balance includes PP Adjustment of (\$144,361)

I. Preparer's/Reviewer's Certification

Name of Facility Avon Convalescent Home, Inc., d/b/a Avon		License No. 938-C	Report for Year Ended 9/30/2019	Page 37	of 37
<i>Check appropriate category</i>					
<input checked="" type="checkbox"/> Chronic and Convalescent Nursing Home only (CCNH)		<input type="checkbox"/> Rest Home with Nursing Supervision only (RHNS)		<input type="checkbox"/> (Specify)	
Preparer/Reviewer Certification					
<p>I have prepared and reviewed this report and am familiar with the applicable regulations governing its preparation. I have read the most recent Federal and State issued field audit reports for the Facility and have inquired of appropriate personnel as to the possible inclusion in this report of expenses which are not reimbursable under the applicable regulations. All non-reimbursable expenses of which I am aware (except those expenses known to be automatically removed in the State rate computation system) as a result of reading reports, inquiry or other services performed by me are properly reported as such in this report on Pages 28 and 29 (adjustments to statement of expenditures). Further, the data contained in this report is in agreement with the books and records, as provided to me, by the Facility.</p>					
Signature of Preparer 		Title PRINCIPAL		Date Signed 1/17/20	
Printed Name of Preparer Matthew S. Bivolack					
Address 555 Long Wharf Drive, New Haven, CT 06511				Phone Number 203-781-9600	
Contacted Person Regarding Additional Information Needed Regarding This Report Russell Schwartz				Phone Number 860-673-2521	
Contact Email Address russell.schwartz@sbcglobal.net					

ACCOUNTANTS' CONSULTING REPORT

Management is responsible for the accompanying Annual Report of Long-Term Care Facility (the "Cost Report") for Avon Convalescent Home, Inc. for the year ended September 30, 2019, included in the accompanying prescribed form. We have prepared the Cost Report in accordance with the American Institute of Certified Public Accountants' Statements on Standards for Consulting Services. The Cost Report was prepared in conformity with regulations prescribed by The State of CT Department of Social Services (DSS) from data provided to us by the management of Avon Convalescent Home, Inc.. We did not audit or review the Cost Report included in the accompanying prescribed form, nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the Cost Report included in the accompanying prescribed form.

Management is responsible for maintaining its records in accordance with accounting principles generally accepted in the United States of America and in accordance with reimbursement regulations set forth by DSS. Management is also responsible for designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of the financial data and supplemental information included in the Cost Report.

This report is intended solely for the information and use of the management of Avon Convalescent Home, Inc. and DSS and is not intended to be, and should not be, used by anyone other than these specified parties.

MARCUM LLP

New Haven, CT
January 15, 2020

Annual Report of Long-Term Care Facility Cost Year 2019 Checklist

This checklist is not required to be submitted with the Annual Report

Facility Name Avon Convalescent Home, Inc. d/b/a Avon Health Care

Complete the following check list. **Provide an explanation for any "No" answers.** Attach additional sheets to explain further, if necessary.

Yes No

1. Have all related parties been properly disclosed on Pages 4, 11, 12, 14, 17 and 21?

Explanation:

Yes No

2. Are the methods of allocating costs consistent with prior year? If not, explain the reporting change.

Explanation:

Yes No

3. Are costs allocated based on the methods prescribed on Page 5 of the Annual Report? If not, provide the basis of your allocation.

Explanation:

Yes No

4. Do equipment leases listed on Page 6 agree with equipment leases reported on Page 22, Line 6e? If not, state where these costs are included in the Annual Report.

Explanation:

Yes No

5. Do accounting and legal fees reported on Page 7 agree with Page 15, Lines 1d and 1e, respectively?

Explanation: _____

Yes No

6. During cost year, did you report all certified bed changes on Page 9? Do the bed change dates agree to the license issued by the Department of Health?

Explanation: _____

Yes No

7. If there has been a change in Administrators, have the dates of employment and applicable hours for each Administrator been reported on Page 12?

Explanation: _____

Yes No

8. Have hours been reported for all expenses claimed on Page 13? Hours must be actual rather than estimated.

Explanation: _____

Yes No

9. Has resident day user fee expense been properly reported on Page 15, Line 1k3?

Explanation: _____

Yes No

10. Have purchased services greater than \$10,000 reported on Pages 16, 18, 19, 20 and 22 been detailed on Page 21?

Explanation: _____

Yes No

11. Have the dietary and laundry questionnaires on Pages 18 and 19 been completed?

Explanation: _____

Yes No

12. Has the personal use portion of automobile expense been disallowed, including, depreciation, lease payments, insurance and taxes?

Explanation: _____

Yes No

13. Does historical cost and accumulated depreciation of all assets reported on Pages 23 and 24 roll forward from the prior cost year?

Explanation: _____

Yes No

14. Does the net book value of all assets reported on Pages 23 and 24 agree with the net book value reported on Pages 31 and 32?

Explanation: _____

Yes No

15. Has asset useful life been reported in accordance with the 2013 edition of the American Hospital Association guidelines?

Explanation: _____

Yes No

16. Have all assets been categorized between movable and fixed in accordance with the 2013 edition of the American Hospital Association guidelines?

Explanation: _____

Yes No

17. Have all contractual allowances been properly reported on Page 30?

Explanation:

Yes No

18. Were all discrepancies on the Error Page addressed?

Explanation:

Yes No

19. Have Pages 1 and 37 been signed? *Cost reports without a signed Page 1 and 37 will not be accepted.*

Explanation:

Yes No

20. Have detailed schedules been provided for all "other" line items, fixed asset and movable equipment additions? *If detail is not provided, appropriate disallowances will be made.*

Explanation:

Yes No

21. Have all costs associated with non-nursing home businesses (i.e., Adult Daycare, Meals on Wheels, Outpatient Therapy Services, etc.) been disallowed on Pages 28 and/or 29 of the Annual Report?

Explanation:

Yes No

22. Has all required documentation been submitted to the Annual Report review and audit contractor?

Explanation:
