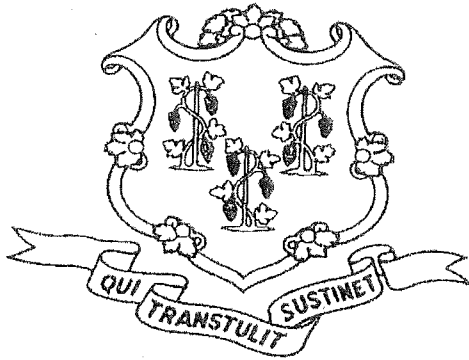


State of Connecticut



Annual Report of Long-Term Care Facility Cost Year 2019

Name of Facility (as licensed) Brookview Corporation d/b/a West Hartford Health & Rehabilitation Center	
Address (No. & Street, City, State, Zip Code) 130 Loomis Drive, West Hartford, CT 06107	
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 1057	RHNS	(Specify)	Medicare Provider 07-5278
------------------	--------------	------	-----------	------------------------------

Medicaid Provider Numbers:	CCNH 000009738	RHNS	ICF-IID
----------------------------	-------------------	------	---------

For Department Use Only

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

General Information

Name of Facility (as licensed)	License No.	Report for Year Ended	Page	of
Brookview Corporation d/b/a West Hartford Health &	1057	9/30/2019	1	37

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 Brookview Corporation d/b/a West Hartford Health & Rehabilitation 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) Theresa Sanderson			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)

Table of Contents

General Information - Administrator's/Owner's Certification	1
General Information and Questionnaire - Data Required for Real Wage Adjustment	1A
General Information and Questionnaire - Type of Facility - Organization Structure	2
General Information and Questionnaire - Partners/Members	3
General Information and Questionnaire - Corporate Owners	3A
General Information and Questionnaire - Individual Proprietorship	3B
General Information and Questionnaire - Related Parties	4
General Information and Questionnaire - Basis for Allocation of Costs	5
General Information and Questionnaire - Leases	6
General Information and Questionnaire - Accounting Basis	7
Schedule of Resident Statistics	8
Schedule of Resident Statistics (Cont'd)	9
A. Report of Expenditures - Salaries & Wages	10
Schedule A1 - Salary Information for Operators/Owners; Administrators, Assistant Administrators and Other Relatives	11
Schedule A1 - Salary Information for Operators/Owners; Administrators, Assistant Administrators and Other Relatives (Cont'd)	12
B. Report of Expenditures - Professional Fees	13
Report of Expenditures - Schedule B-1 - Information Required for Individual(s) Paid on Fee for Service Basis	14
C. Expenditures Other than Salaries - Administrative and General	15
C. Expenditures Other than Salaries (Cont'd) - Administrative and General	16
Schedule C-1 - Management Services	17
C. Expenditures Other than Salaries (Cont'd) - Dietary	18
C. Expenditures Other than Salaries (Cont'd) - Laundry	19
C. Expenditures Other than Salaries (Cont'd) - Housekeeping and Resident Care	20
Report of Expenditures - Schedule C-2 - Individuals or Firms Providing Services by Contract	21
C. Expenditures Other than Salaries (Cont'd) - Maintenance and Property	22
Depreciation Schedule	23
Amortization Schedule	24
C. Expenditures Other than Salaries (Cont'd) - Property Questionnaire	25
C. Expenditures Other than Salaries (Cont'd) - Interest	26
C. Expenditures Other than Salaries (Cont'd) - Interest and Insurance	27
D. Adjustments to Statement of Expenditures	28
D. Adjustments to Statement of Expenditures (Cont'd)	29
F. Statement of Revenue	30
G. Balance Sheet	31
G. Balance Sheet (Cont'd)	32
G. Balance Sheet (Cont'd)	33
G. Balance Sheet (Cont'd)	34
G. Balance Sheet (Cont'd) - Reserves and Net Worth	35
H. Changes in Total Net Worth	36
I. Preparer's/Reviewer's Certification	37

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 Brookview Corporation d/b/a West Hartford Health & Rehabilitation Center		Period Covered:	From 10/1/2018	To 9/30/2019
Address of Facility 130 Loomis Drive, West Hartford, CT 06107				
Report Prepared By Marcum LLP		Phone Number 203-781-9600	Date 12/31/2019	
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 860-521-8700		Report for Year Ended 9/30/2019		Page 2	of 37
Name of Facility (as shown on license) Brookview Corporation d/b/a West Hartford Health & Rehabil			Address (No. & Street, City, State, Zip) 130 Loomis Drive, West Hartford, CT 06107		
License Numbers:		CCNH 1057	RHNS (Specify)	Medicare Provider No. 07-5278	
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 Theresa Sanderson			Nursing Home Administrator's License No.:	001457	
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 Brookview Corporation d/b/a West Hartford H	License No. 1057	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		
Brookview Corporation	130 Loomis Drive, West Hartford, CT 06107	CT		
Name of Directors, Officers	Business Address	Title	No. Shares Held by Each	
Freda Schwartz	130 Loomis Drive, West Hartford, CT 06107	older / Pres / Se	100	
Russell Schwartz	130 Loomis Drive, West Hartford, CT 06107	VP/ Treasurer		
Names of Stockholders Owning at Least 10% of Shares				
Freda Schwartz	130 Loomis Drive, West Hartford, CT 06107	Stockholder	100	

General Information and Questionnaire Individual Proprietorship

Name of Facility	License No.	Report for Year Ended	Page	of
Brookview Corporation d/b/a West Hartford Health	1057	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 Brookview Corporation d/b/a West Hartford Health &	License No. 1057	Report for Year Ended 9/30/2019	Page 4	of 37
--	---------------------	------------------------------------	-----------	----------

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	%**				
Russell Schwartz	130 Loomis Drive, West Hartford, CT 06107	<input type="radio"/>	<input checked="" type="radio"/>		Administrative Support	Pg 16 / Line M11	185,821	185,821
Brookview Manor Associates, LLC	130 Loomis Drive, West Hartford, CT 06107	<input type="radio"/>	<input checked="" type="radio"/>		Depreciation (Non-movable Equipment)	Pg 22 / Line 7c	10,828	10,828
Brookview Manor Associates, LLC	130 Loomis Drive, West Hartford, CT 06107	<input type="radio"/>	<input checked="" type="radio"/>		Depreciation (Movable Equipment)	Pg 22 / Line 7d	46,322	46,322
Brookview Manor Associates, LLC	130 Loomis Drive, West Hartford, CT 06107	<input type="radio"/>	<input checked="" type="radio"/>		Depreciation (Leasehold Equipment)	Pg 22 / Line 8c	90,933	90,933
Brookview Manor Associates, LLC	130 Loomis Drive, West Hartford, CT 06107	<input type="radio"/>	<input checked="" type="radio"/>		Rental of Real Property	Various see attached	815,440	815,440
		<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.

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

West Hartford Healthcare
Reconciliation of Related Party Rent
September 30, 2019

Pg. 4a

	Cost Reported	Actual Cost to Provider	Page on Cost Report	Line on Page
Portion Related to Real Estate Taxes	174,720	174,720	22	10b
Portion Related to Pers. Prop. Taxes	6,538	6,538	22	10c
Portion Related to Insurance	89,718	89,718	27	14a
Portion Related to Mortgage Insurance	33,605	33,605	22	9
Actual Rent per Cost Report	<u>510,859</u>	<u>510,859</u>	22	9
Total	<u>815,440</u>	<u>815,440</u>		

General Information and Questionnaire
Basis for Allocation of Costs

Name of Facility Brookview Corporation d/b/a West Hartford He	License No. 1057	Report for Year Ended 9/30/2019	Page 5	of 37
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? <input checked="" type="radio"/> Yes <input type="radio"/> 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. The facility allocates the cost of the Director of Operations (Russell Schwartz) salary and shared insurances based upon beds. This split represents 57% being allocated to West Hartford Health Care and 43% to Avon Convalescent Home.				
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.) <input checked="" type="radio"/> Yes <input type="radio"/> 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	
Brookview Corporation d/b/a West Hartford Health & Rehabil			1057	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							
CIT Technology, 4600 Touchton Road, Bldg 100, Suite 300, Jacksonville, FL 32099	<input type="radio"/>	<input checked="" type="radio"/>	Copier	05/27/15	63 Months	17,837		17,837	
Neopost New England, 3 Metals Drive, Southington, CT 06489	<input type="radio"/>	<input checked="" type="radio"/>	Postage Machine	07/22/15	63 Months	1,286		1,286	
	<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 ***	19,123

* 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.

General Information and Questionnaire
Accounting Basis

Name of Facility Brookview Corporation d/b/a West	License No. 1057	Report for Year Ended 9/30/2019	Page 7	of 37
--	---------------------	------------------------------------	-----------	----------

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	180 Glastonbury Blvd, Glastonbury, CT 06003
3	
4	

Services Provided by This Firm (*describe fully*)

1 Cost Report Preparation / HUD Audit / 401k Audit / Financial Statement Review	\$ 17,280
2 Tax Returns	\$ 20,325
3	\$
4	\$
	Charge for Services Provided
	\$ 37,605

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 American Arbitration	212-484-4000
2 Jackson Lewis	914-328-0404
3 Murtha Cullina Richter	860-240-6000
4 Shipman, Sosensky	860-606-1700
5 Musillounkenholt, LLC	513-381-8472

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

1 150 E 42nd Street 17th Floor, New York, NY 10017
2 One North Broadway, White Plains, NY 10601
3 185 Asylum Street, Hartford, CT 06106-3469
4 20 Batterson Park Road, Farmington, CT 06032
5 302 W 3rd St Suite 710, Cincinnati, OH 45202

Services Provided by This Firm (*describe fully*)

1 Legal Matters Relating to Employee Dispute	\$ 275
2 Labor Attorney	\$ 5,955
3 General Matters / Collections (\$5,533 Disallowed on Pg 28)	\$ 11,617
4 Corporate Matters	\$ 2,130
5 Immigration Related Matters	\$ 2,300
	Charge for Services Provided
	\$ 22,277

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 Brookview Corporation d/b/a West Hartford Health & Rehabilitation Ce				License No. 1057		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	160	160			160	160			160	160			
B. On last day of THIS report period	160	160			160	160			160	160			
2. Number of Residents													
A. As of midnight of PREVIOUS report period	129	129			129	129			130	130			
B. As of midnight of THIS report period	128	128			130	130			128	128			
3. Total Number of Days Care Provided During Period													
A. Medicare	3,500	3,500			2,631	2,631			869	869			
B. Medicaid (Conn.)	38,542	38,542			28,964	28,964			9,578	9,578			
C. Medicaid (other states)													
D. Private Pay	4,208	4,208			3,006	3,006			1,202	1,202			
E. State SSI for RCH													
F. Other (Specify) Managed Care / Commercial / H	3,128	3,128			2,431	2,431			697	697			
G. Total Care Days During Period (3A thru F)	49,378	49,378			37,032	37,032			12,346	12,346			
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													
5. Total Resident Days (3G + 4A + 4B)	49,378	49,378			37,032	37,032			12,346	12,346			

Schedule of Resident Statistics (Cont'd)

Name of Facility Brookview Corporation d/b/a West Hartford			License No. 1057			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)				
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	5		102		21								
Per Diem Rate													
a. One bed rm.	Various		255.64		510.00								
b. Two bed rms.	Various		255.64		490.00								
c. Three or more bed rms.													
7. Total Number of Physical Therapy Treatments								TOTAL	CCNH	RHNS	(Specify)		
A. Medicare - Part B								2,116	2,116				
B. Medicaid (Exclusive of Part B)													
1. Maintenance Treatments								1,197	1,197				
2. Restorative Treatments													
C. Other								12,151	12,151				
D. Total Physical Therapy Treatments								15,464	15,464				
8. Total Number of Speech Therapy Treatments													
A. Medicare - Part B								772	772				
B. Medicaid (Exclusive of Part B)													
1. Maintenance Treatments								154	154				
2. Restorative Treatments													
C. Other								1,164	1,164				
D. Total Speech Therapy Treatments								2,090	2,090				
9. Total Number of Occupational Therapy Treatments													
A. Medicare - Part B								2,723	2,723				
B. Medicaid (Exclusive of Part B)													
1. Maintenance Treatments								1,827	1,827				
2. Restorative Treatments													
C. Other								12,481	12,481				
D. Total Occupational Therapy Treatments								17,031	17,031				

Report of Expenditures - Salaries & Wages

Name of Facility	License No.	Report for Year Ended	Page	of		
Brookview Corporation d/b/a West Hartford Health & Rehab	1057	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)	157,100	2,080				
3. Assistant Administrator (Complete also Sec. IV of Schedule A1)						
4. Other Administrative Salaries (telephone operator, clerks, receptionists, etc.)	317,989	12,208				
5. Dietary Service						
a. Head Dietitian						
b. Food Service Supervisor						
c. Dietary Workers	543,479	28,808				
6. Housekeeping Service						
a. Head Housekeeper						
b. Other Housekeeping Workers						
7. Repairs & Maintenance Services						
a. Engineer or Chief of Maintenance	72,151	2,146				
b. Other Maintenance Workers	64,886	2,152				
8. Laundry Service						
a. Supervisor						
b. Other Laundry Workers						
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	219,444	4,269				
b. RN						
1. Direct Care	747,048	17,942				
2. Administrative**	445,903	13,876				
c. LPN						
1. Direct Care	1,694,807	50,788				
2. Administrative**						
d. Aides and Attendants	2,318,955	132,178				
e. Physical Therapists						
f. Speech Therapists						
g. Occupational Therapists						
h. Recreation Workers	166,733	7,509				
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	228,065	8,060				
n. Marketing						
o. Other (Specify) See Attached Schedule						
<i>A-13. Total Salary Expenditures</i>	6,976,560	282,016				

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

Name of Facility				License No.	Report for Year Ended			Page	of	
Brookview Corporation d/b/a West Hartford Health & Rehabilitation				1057	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										
Freda Schwartz					President			Avon Convalescent, 652 West Avon Rd, Avon, CT	See C/R	
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).										

* 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	
Brookview Corporation d/b/a West Hartford Health & Rehabilitation C				1057	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***										
Theresa Sanderson	157,100			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		
Brookview Corporation d/b/a West Hartford Health	1057	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	80,160	1,205				
2. Dentist	8,031	248				
3. Pharmacist	12,220	188				
4. Podiatrist						
5. Physical Therapy						
a. Resident Care	264,659	4,673				
b. Other	5,315	Supplies				
6. Social Worker						
7. Recreation Worker						
8. Physicians						
a. Medical Director (entire facility)	36,800	217				
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) Resp Ther / Nrsng Con / Psychiatrist	17,718	135				
9. Speech Therapist						
a. Resident Care	79,550	1,189				
b. Other						
10. Occupational Therapist						
a. Resident Care	291,402	4,779				
b. Other						
11. Nurses and aides and attendants						
a. RN						
1. Direct Care						
2. Administrative***						
b. LPN						
1. Direct Care						
2. Administrative***						
c. Aides						
d. Other						
12. Other (Specify) See Attached Schedule						
B-13 Total Fees Paid in Lieu of Salaries	795,855	12,634				

* 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		License No.	Report for Year Ended		Page	of
Brookview Corporation d/b/a West Hartford Health & R		1057	9/30/2019		14	37
Name & Address of Individual	Full Explanation of Service	Related** to Owners, Operators, Officers		Explanation of Relationship		
		Yes	No			
Healthcare Services, 3220 Tillman Drive, Bensalem, PA 19020	Dietician	<input type="radio"/>	<input checked="" type="radio"/>	N/A		
Geri Dent, PO Box 290539, Wethersfield, CT, 06129-0539	Dentist	<input type="radio"/>	<input checked="" type="radio"/>	N/A		
Value Rx, 54 Tuttle Place, Middletown, CT 06457	Pharmacist	<input type="radio"/>	<input checked="" type="radio"/>	N/A		
Symbria Rehabilitation, 28100 Torch Parkway, Warrenville, IL 60555	Physical, Speech and Occupational Therapy	<input type="radio"/>	<input checked="" type="radio"/>	N/A		
Matthew Colliton, 20 Isham Road, West Hartford, CT 06107	Medical Director	<input type="radio"/>	<input checked="" type="radio"/>	N/A		
Raymond Chagnon, 490 Blue Hills Ave, Hartford, CT 06112	Sub-Acute Medical Director	<input type="radio"/>	<input checked="" type="radio"/>	N/A		
ProCaire, PO Box 801, Tolland, CT 06084	Bedside Evaluations (Resp. Therapist)	<input type="radio"/>	<input checked="" type="radio"/>	N/A		
Celtic Consulting, 507 East Main Street, Suite 308, Torrington, CT 06790	Nursing Department Consultants	<input type="radio"/>	<input checked="" type="radio"/>	N/A		
Valley Psych, 558 Hopmeadow Street, Simsbury, CT, 06070	Consult 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"/>			
		<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
Brookview Corporation d/b/a West Hartford Health	1057	9/30/2019		15	37
Item	Total	CCNH	RHNS	(Specify)	
1. Administrative and General					
a. Employee Health & Welfare Benefits					
1. Workmen's Compensation	\$ 144,529	144,529			
2. Disability Insurance	\$				
3. Unemployment Insurance	\$ 67,956	67,956			
4. Social Security (F.I.C.A.)	\$ 443,423	443,423			
5. Health Insurance	\$ 963,392	963,392			
6. Life Insurance (employees only) (not-owners and not-operators)	\$				
7. Pensions (Non-Discriminatory) (not-owners and not-operators)	\$ 263,510	263,510			
8. Uniform Allowance	\$				
9. Other (<i>Specify</i>) See Attached Schedule	\$ 35,977	35,977			
b. Personal Retirement Plans, Pensions, and Profit Sharing Plans for Owners and Operators (Discriminatory)*	\$				
c. Bad Debts*	\$ 249,179	249,179			
d. Accounting and Auditing	\$ 37,605	37,605			
e. Legal (<i>Services should be fully described on Page 7</i>)	\$ 22,277	22,277			
f. Insurance on Lives of Owners and Operators (<i>Specify</i>)*	\$				
g. Office Supplies	\$ 23,391	23,391			
h. Telephone and Cellular Phones					
1. Telephone & Pagers	\$ 8,605	8,605			
2. Cellular Phones	\$ 1,768	1,768			
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*	\$ 21,000	21,000			
2. Other (<i>Specify</i>) See Attached Schedule	\$ 408	408			
3. Resident Day User Fee	\$ 904,974	904,974			
Subtotal	\$ 3,187,994	3,187,994			

* 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)
	-		
Union Training Fund	\$ 26,096		
Union Dues	(6)		
Tuition Expense	3,728		
New Hire Expense	4,774		
Employee Physicals/Medication	1,385		
Total	\$ 35,977	\$ -	\$ -

Schedule of Other Taxes

Description	CCNH	RHNS	(Specify)
	-		
Sales & Use Tax	\$ 408		
Total	\$ 408	\$ -	\$ -

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

Name of Facility	License No.	Report for Year Ended		Page	of
Brookview Corporation d/b/a West Hartford Health & H	1057	9/30/2019		16	37
Item	Total	CCNH	RHNS	(Specify)	
Subtotals Brought Forward:	3,187,994	3,187,994			
i. Travel and Entertainment					
1. Resident Travel and Entertainment	\$				
2. Holiday Parties for Staff	\$				
3. Gifts to Staff and Residents	\$	7,452	7,452		
4. Employee Travel	\$	4,678	4,678		
5. Education Expenses Related to Seminars and Conventions	\$	21,309	21,309		
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>)	\$	4,809	4,809		
2. Advertising Telephone Directory (<i>all such expenses</i>)***	\$				
3. Advertising Other (<i>Specify</i>)***	\$	59,513	59,513		
See Attached Schedule					
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	\$	6,533	6,533		
* 8. Dues and Membership Fees to Professional Associations (<i>Specify</i>)	\$	11,496	11,496		
See Attached Schedule					
8a. Dues to Chamber of Commerce & Other Non-Allowable Org.***	\$				
9. Subscriptions	\$				
10. Contributions***	\$	1,025	1,025		
See Attached Schedule					
11. Services Provided by Contract (<i>Specify and Complete Schedule C-2, Page 21 for each firm or individual</i>)	\$	312,152	312,152		
12. Administrative Management Services**	\$				
13. Other (<i>Specify</i>)	\$	10,214	10,214		
See Attached Schedule					
C-14 Total Administrative & General Expenditures	\$	3,627,175	3,627,175		

* 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)
	-		
Promotional Advertising (Disallowed on Pg 28)	\$ 59,513		
Total Other Advertising	\$ 59,513	\$ -	\$ -

Schedule of Dues

Description	CCNH	RHNS	(Specify)
	-		
ACHCA Dues	\$ 225		
ALTCFM Dues	85		
CTAHCF Dues	10,836		
LTCMAP Dues	350		
Total Dues	\$ 11,496	\$ -	\$ -

Schedule of Contributions

Description	CCNH	RHNS	(Specify)
	-		
Donations Expense (Disallowed on Pg 28)	1,025		
Total Contributions	\$ 1,025	\$ -	\$ -

Schedule of Other Administrative and General

Description	CCNH	RHNS	(Specify)
	-		
Licenses	\$ 4,287		
Late Fees & Fines (Disallowed on Pg 28a)	186		
Bank Charges	4,926		
Hospital Credentialing	815		
Total Other Administrative and General	\$ 10,214	\$ -	\$ -

Schedule C-1 - Management Services*

Name of Facility Brookview Corporation d/b/a West Hartfo	License No. 1057	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 Brookview Corporation d/b/a West Hartford Health & I	License No. 1057	Report for Year Ended 9/30/2019	Page 18	of 37
Item	Total	CCNH	RHNS	(Specify)
2. Dietary				
a. In-House Preparation & Service				
1. Raw Food	\$ 403,377	403,377		
2. Non-Food Supplies	\$ 15,353	15,353		
3. Other (Specify) _____	\$			
b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21)	\$ 58,073	58,073		
c. Other (Specify) _____	\$			
2D. Total Dietary Expenditures (2a + b + c + d)	\$ 476,803	476,803		
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
Brookview Corporation d/b/a West Hartford Health & R		1057	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. \$	12,495	12,495		
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)	\$	357,546	357,546		
c. Other (Specify) Laundry Supplies	\$	12,690	12,690		
3D. Total Laundry Expenditures (3a + b + c)	\$	382,731	382,731		
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
Brookview Corporation d/b/a West Hartford Hea		1057	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. \$	18,254	18,254		
	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. \$	552,405	552,405		
	C. Other (<i>Specify</i>)		\$			
4D.	Total Housekeeping Expenditures (4a + b + c)		\$ 570,659	570,659		
5.	Resident Care (Supplies)**					
	a. Prescription Drugs***					
	1. Own Pharmacy		\$			
	2. Purchased from Value Rx, Mckesson, Value Pharmacy Svs, Omnicare, Synergy Rx		\$ 269,569	269,569		
	b. Medicine Cabinet Drugs		\$ 216,610	216,610		
	c. Medical and Therapeutic Supplies		\$ 67,174	67,174		
	d. Ambulance/Limousine***		\$ 9,084	9,084		
	e. Oxygen					
	1. For Emergency Use		\$			
	2. Other***		\$ 6,008	6,008		
	f. X-rays and Related Radiological Procedures***		\$ 13,228	13,228		
	g. Dental (<i>Not dentists who should be included under salaries or fees</i>)		\$			
	h. Laboratory***		\$ 34,721	34,721		
	i. Recreation		\$ 18,975	18,975		
	j. Direct Management Services*		\$			
	k. Indirect Management Services*		\$			
	l. Other (Specify)**** See Attached Schedule		\$ 170,030	170,030		
5M.	Total Resident Care Expenditures (5a - 5j)		\$ 805,399	805,399		

* 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.

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

Name of Facility Brookview Corporation d/b/a West Hartford Health & Rehabilitation Center				License No. 1057	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
Aegis Energy Service	PO Box 2511, Springfield, MA 01101	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Co-generation maintenance	14,033			16	m11
Saucier Mechanical Services	148 Norton St, Plantsville, CT 06479	<input type="radio"/>	<input checked="" type="radio"/>	N/A	HVAC	27,378			Var	Var
Avon Health Center	652 W Avon Road, Avon, CT 06001	<input checked="" type="radio"/>	<input type="radio"/>	Director of Operations - Russell Schwartz	Administrative Support	178,218			16	m11
TM Technology	60 High Hill Road, Wallingford, CT 06492	<input type="radio"/>	<input checked="" type="radio"/>	N/A	IT installation, maintenance and support	62,256			Var	Var
Matrix/SigmaCare/Ehealth	floor, New York, NY 10018	<input type="radio"/>	<input checked="" type="radio"/>	N/A	system maintenance and support	53,480			20	5l
Healthcare Services	3220 Tillman Drive, Bensalem, PA 19020	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Housekeeping, Laundry and Dietary Services	1,445,545			Var	Var
Collaborative Lab Service	114 Woodland St, Hartford, CT	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Laboratory services	32,589			20	5h
Paine's Recycling	P.O. Box 307, Simsbury, CT	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Rubbish Removal	19,733			22	6f
Peter's Landscaping	806 Hillstown Rd, Manchester, CT 06040	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Groundskeeping	11,058			22	6f
Imagine IT	P.O. Box 310629, Newington, CT 06131	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Website design and content	12,000			16	m11
Relias Learning	111 Corning Rd, Suite 250, Cary, NC 27518	<input type="radio"/>	<input checked="" type="radio"/>	N/A	on-line education software	12,051			16	L5
LTC Consulting Services	Americas, Lakewood, NJ 08701	<input type="radio"/>	<input checked="" type="radio"/>	N/A	monthly close financials	16,767			16	m11
Marsh & McLennan	344 West Main Street, Milford, CT 06460	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Health and related benefits broker	17,100			16	1a5
See attached for continued list		<input type="radio"/>	<input checked="" type="radio"/>		Var	43,644			Var	Var

* 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).

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

Name of Facility		License No.	Report for Year Ended			Page	of			
Brookview Corporation d/b/a West Hartford Health & Rehabilitation Center		1057-C	9/30/2019			21a	37			
Name of Individual or Company	Address	Related ** to		Explanation of Relationship	Full Explanation of Service Provided*	Total Cost/Page Ref.***				
		Yes	No			CCNH	RHNS	(Specify)	Pg	Line
Accelerated Care Plus	13828 Collections Center Drive, Chicago, IL 60693	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Therapy Equipment & Training	13,140			var	var
Custom Exterior	632 North Mountain Road, Newington, CT 06111	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Snow Removal	15,128			22	6f
Otis Elevator	PO Box 13716, Newark, NJ 07188-0716	<input type="radio"/>	<input checked="" type="radio"/>	N/A	Elevator Maintenance	15,376			Var	Var

* 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
Brookview Corporation d/b/a West Hartford H	1057	9/30/2019			22	37
Item	Total	CCNH	RHNS	(Specify)		
6. Maintenance & Operation of Plant						
a. Repairs & Maintenance	\$ 64,085	64,085				
b. Heat	\$ 71,874	71,874				
c. Light & Power	\$ 50,551	50,551				
d. Water	\$ 57,830	57,830				
e. Equipment Lease (<i>Provide detail on page 6</i>)	\$ 19,123	19,123				
f. Other (<i>itemize</i>)	\$ 96,610	96,610				
See Attached Schedule						
6g. Total Maint. & Operating Expense (6a - 6f)	\$ 360,073	360,073				
7. Depreciation (<i>complete schedule page 23*</i>)						
a. Land Improvements	\$					
b. Building & Building Improvements	\$					
c. Non-Movable Equipment	\$ 15,536	15,536				
d. Movable Equipment	\$ 104,626	104,626				
*7e. Total Depreciation Costs (7a + b + c + d)	\$ 120,162	120,162				
8. Amortization (<i>Complete att. Schedule Page 24*</i>)						
a. Organization Expense	\$					
b. Mortgage Expense	\$					
c. Leasehold Improvements	\$ 164,633	164,633				
d. Other (<i>Specify</i>)	\$					
*8e. Total Amortization Costs (8a + b + c + d)	\$ 164,633	164,633				
9. Rental payments on leased real property less real estate taxes included in item 10b	\$ 544,464	544,464				
10. Property Taxes						
a. Real estate taxes paid by owner	\$					
b. Real estate taxes paid by lessor	\$ 174,720	174,720				
c. Personal property taxes	\$ 16,275	16,275				
11. Total Property Expenses (7e + 8e + 9 + 10)	\$ 1,020,254	1,020,254				

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

Schedule of Movable Equipment Acquired during this report period

Acquisition Date	Description of Item	Cost	Useful Life	Depreciation
Additions:				
10/31/2018	15 black conference room chairs	\$ 1,515	15	\$ 101
10/31/2018	digital chair scale	1,215	10	121
11/30/2018	1 bariatric bed	1,832	15	122
11/30/2018	window blinds	4,766	15	318
12/31/2018	adns hp probook	2,197	5	439
12/31/2018	3 NUC computers- finance, payroll, scheduling	2,974	5	595
1/31/2019	12 raised edge mattresses	1,717	5	343
1/31/2019	wanderguards	42	5	8
1/31/2019	2 refurbished nurseries vital signs monitor	2,800	5	560
2/28/2019	2 ELO touch kiosks	3,171	5	634
3/31/2019	bariatric bed	1,959	15	131
3/31/2019	Maxi move hoier lift	5,428	10	543
4/30/2019	4 chairs with wheels and brakes, resident tranquility hallway	2,423	10	242
5/31/2019	Purchase & Install of 4 surveillance cameras	2,196	5	439
8/31/2019	strike reimbursement for cameras	(1,781)	5	(356)
5/31/2019	replacement cafeteria trays	1,988	10	199
7/31/2019	100 resident room screens	4,222	15	281
7/31/2019	HR computer	1,635	5	327
8/31/2019	clinical liason laptop & hr desktop replacement	2,021	5	404
8/31/2019	dishes	4,802	10	480
Total additions for Movable Equipment		\$ 47,121		\$ 5,931 *
Deletions:				
3/31/2006	Food Truck Doors	\$ (1,410)		
1/31/2007	Office Furniture	(651)		
10/31/2007	Wheelchair	(585)		
1/24/2008	Wheelchair	(585)		
1/24/2008	Wheelchair	(585)		
1/28/2008	5 Nite Tables	(583)		
5/22/2008	2 Wheelchairs	(1,222)		
6/12/2008	Bariatric Bed	(1,592)		
6/20/2008	2 Wheelchairs	(819)		
1/21/2009	4 Telephones	(1,251)		
1/29/2009	2 Wheelchairs	(409)		
1/29/2009	Wheelchair	(409)		
2/1/2009	SS & Fette Monitors	(739)		
3/16/2009	2 Telephones	(625)		
3/17/2009	10 Nite Tables	(1,166)		
5/8/2009	2 Cameras, 2 Monitors	(649)		
5/20/2009	3 Wheelchairs	(614)		
6/1/2009	6 night tables	(700)		
6/12/2009	10 night tables	(1,166)		
6/15/2009	2 Telephones	(625)		
7/14/2009	Scale Dig Chair	(1,474)		
2/4/2010	Night Tables	(1,166)		
3/10/2010	Night Tables	(1,166)		
5/14/2010	Bedside mattress	(1,246)		
7/1/2010	Night Tables	(1,166)		
12/28/2010	Mattress	(1,227)		
2/24/2011	4 Mattress	(1,172)		
6/22/2011	8 Phones	(1,542)		
6/24/2011	Bariatric Bed	(1,895)		
9/30/2011	Over Bed Night Tables	(1,010)		
10/7/2011	Over Bed Night Tables	(1,010)		
11/1/2011	Heavy Duty Imm Blender	(979)		
11/23/2011	Over Bed Night Tables	(957)		
12/1/2011	Over Bed Night Tables	(957)		
3/21/2012	10 Mattresses	(2,630)		
4/27/2012	10 Mattresses	(2,801)		
4/30/2012	Mini Desktop Inf Control	(1,146)		
6/30/2012	Recr Color/AR Multi Printers	(1,269)		
7/20/2012	10 Mattresses	(2,630)		
8/22/2012	Lounge Blinds	(2,023)		
9/11/2012	Food Truck Doors	(1,702)		

10/5/2012	Oral Thermometer	(622)	
3/31/2013	HP Tablet for Dietary	(558)	
7/31/2013	Hands Free Wireless Headsets	(1,536)	
8/15/2013	1/2 of Clinical Liason Laptop	(915)	
10/31/2013	2 Laptops & Monitor Harmony	(2,759)	
11/12/2013	4 Tablet Chair w/lockable casters	(2,127)	
11/25/2013	2 Swival Oversized Chairs TranQ 1 chair disposed 10/1/17	(522)	
6/30/2014	DNS HP Laptop	(896)	
12/30/2014	Administrator Laptop 450 G2	(1,042)	
12/30/2014	Cicso Router & 3Yr License	(4,924)	
09/21/12	2 Elo touch screen computers	(2,512)	
10/31/12	Install 2 ELO Touch Computers	(553)	
Total deletions for Movable Equipment		\$ (66,520)	\$ - **

*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:				
12/31/2018	sewer pipe repairs installment 1 of 2	\$ 2,835	20	\$ 142
3/31/2019	patient rooms	8,720	5	1,744
5/31/2019	Exhaust fans (two rooftop exhaust fans)	1,755	10	176
6/30/2019	excavate and replace sewer outside Bliss B	2,875	20	144
6/30/2019	elevator repair	6,913	15	461
7/31/2019	2 of 2 installments for 2 rooftop fans	2,140	10	214
7/31/2019	sewer repair job j2284	3,470	20	174
8/31/2019	Warren stripe cottonseed	1,844	15	123
8/31/2019	replaced fdc line one sprinkler	4,050	15	270
8/31/2019	Waterproof Elevator pit	2,552	15	170
9/30/2019	wallpaper ground floor hallway	2,127	10	213
9/30/2019	Waterproof Elevator pit	2,552	15	170
9/30/2019	building exterior cleaning & painting of window frames	62,500	20	3,125
Total additions for Leasehold Improvement		\$ 104,334		\$ 7,126 *
Deletions:				
9/30/1993	Repairs to roof	\$ (1,272)		
9/30/1993	Handicap Door Operations	(2,640)		
9/30/1993	Room #1 Patient Plaques	(1,537)		
9/30/1995	Heat Exchanger	(4,818)		
9/30/1996	Nurses Station	(5,523)		
9/30/1996	Nurses Station	(1,600)		
9/30/1997	Roof Replacement	(2,067)		
9/30/1997	Roof Replacement	(1,654)		
9/30/1997	Roof Replacement	(413)		
9/30/1997	Roof Replacement	(2,717)		
9/30/1997	Roof Replacement	(2,717)		
9/30/1997	Roof Replacement	(2,864)		
9/30/1998	2 A/C compressors	(4,058)		
9/30/1998	Drapery Track	(4,000)		
9/30/1998	Heat Exchanger/Limit Switch	(2,132)		
9/30/1999	Burners/Motor for Boiler	(1,495)		
9/30/1999	Hydraulic Motors for Boiler	(1,166)		
9/30/1999	Gas Valve for Boiler	(991)		
9/30/1999	Flow Switch/Gas Valve for H2O heat	(889)		
9/30/1999	Control Valve for Elevator	(2,650)		
9/30/1999	Watercooled Unit	(3,710)		
9/30/1999	Water Range Guard System	(1,772)		
9/30/2000	Man to Elec conv kit-flex	(965)		
9/30/2004	Carpet & Vinyl flooring	(3,508)		
9/30/2005	Flooring Special Care Unit	(9,177)		
9/30/2005	a/c condensing unit	(1,007)		
6/17/2009	Linksys wiring	(5,793)		
Total deletions for Leasehold Improvement		\$ (73,136)		\$ - **

*Ties to Page 24, Line C3

**Ties to Page 24, Line C2

Amortization Schedule*

Name of Facility Brookview Corporation d/b/a West Hartford Health & Rehab			License No. 1057		Report for Year Ended 9/30/2019			Page 24	of 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	3,325,299	2,175,581	S/L	Various	157,507	
2. Disposals (attach schedule)	Var	Var	Various	(73,136)	(73,136)				
3. Acquired during this report period (attach schedule)									
	Var	Var	Various	104,334		S/L	Various	7,126	
C-4. Subtotal									164,633
D. Total Amortization									164,633

* 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.

WEST HARTFORD HEATH AND REHAB CENTER
DEPRECIATION SCHEDULES
September 30, 2019

Description	Date of Acquisitions	Historical Cost	Useful Life (In years)	2017 Acc. Dep	2018 Depreciation	2018 Acc. Dep	2019 Depreciation	2019 Acc. Dep	Net Book Value
MOVABLE EQUIPMENT - VEHICLE									
Acquisitions	7/1/2001	\$ 24,645	5	\$ 24,645	\$ -	\$ 24,645	-	24,645	-
2010 Disposals		(24,645)		(24,645)	-	(24,645)	-	(24,645)	-
Grand Total		\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

LEASEHOLD IMPROVEMENTS									
9/30/89	\$34,789	5	\$ 34,789	-	-	34,789	-	34,789	-
9/30/89	\$18,876	10	18,876	-	-	18,876	-	18,876	-
9/30/89	\$202,875	15	202,875	-	-	202,875	-	202,875	-
9/30/90	\$16,592	10	16,592	-	-	16,592	-	16,592	-
9/30/90	\$12,388	15	12,388	-	-	12,388	-	12,388	-
9/30/91	\$10,327	5	10,327	-	-	10,327	-	10,327	-
9/30/91	\$32,449	10	32,449	-	-	32,449	-	32,449	-
9/30/91	\$11,054	15	11,054	-	-	11,054	-	11,054	-
9/30/92	\$4,535	5	4,535	-	-	4,535	-	4,535	-
9/30/92	\$31,910	10	31,910	-	-	31,910	-	31,910	-
9/30/93	\$1,272	5	1,272	-	-	1,272	-	1,272	-
9/30/93	\$38,561	10	38,561	-	-	38,561	-	38,561	-
9/30/94	\$9,738	5	9,738	-	-	9,738	-	9,738	-
9/30/94	\$32,381	10	32,381	-	-	32,381	-	32,381	-
9/30/95	\$8,072	10	8,072	-	-	8,072	-	8,072	-
9/30/00	\$1,350	5	1,350	-	-	1,350	-	1,350	-
9/30/89	\$42,874	17	42,874	-	-	42,874	-	42,874	-
9/30/94	\$56,232	12	56,232	-	-	56,232	-	56,232	-
9/30/96	\$5,171	10	5,171	-	-	5,171	-	5,171	-
9/30/02	\$929	5	929	-	-	929	-	929	-
9/30/89	\$2,668	20	2,668	-	-	2,668	-	2,668	-
9/30/89	\$2,800	25	2,800	-	-	2,800	-	2,800	-
9/30/91	\$4,472	17	4,472	-	-	4,472	-	4,472	-
9/30/92	\$3,299	15	3,299	-	-	3,299	-	3,299	-
9/30/93	\$2,921	20	2,921	-	-	2,921	-	2,921	-
9/30/94	\$18,479	15	18,479	-	-	18,479	-	18,479	-
9/30/94	\$14,570	15	14,570	-	-	14,570	-	14,570	-
9/30/95	\$117,082	20	117,082	-	-	117,082	-	117,082	-
9/30/95	\$716	15	716	-	-	716	-	716	-
9/30/96	\$12,975	20	12,975	-	-	12,975	-	12,975	-
9/30/97	\$7,123	20	7,123	-	-	7,123	-	7,123	-
9/30/97	\$21,294	10	21,294	-	-	21,294	-	21,294	-
9/30/98	\$4,058	15	4,058	-	-	4,058	-	4,058	-
9/30/98	\$4,600	10	4,600	-	-	4,600	-	4,600	-
9/30/98	\$19,551	15	19,551	-	-	19,551	-	19,551	-
9/30/99	\$1,357	20	1,291	66	-	1,357	-	1,357	-
9/30/99	\$3,003	10	3,003	-	-	3,003	-	3,003	-
9/30/99	\$15,446	15	15,446	-	-	15,446	-	15,446	-
9/30/00	\$13,200	25	9,768	528	-	10,296	528	10,824	2,376
9/30/00	\$12,182	12	12,182	-	-	12,182	-	12,182	-
9/30/00	\$27,902	10	27,902	-	-	27,902	-	27,902	-
10/31/00	\$1,246	20	1,088	62	-	1,150	62	1,212	34
2/28/01	\$9,520	10	9,520	-	-	9,520	-	9,520	-
9/30/02	\$15,571	10	15,571	-	-	15,571	-	15,571	-
9/30/03	\$17,133	5	17,133	-	-	17,133	-	17,133	-
9/30/04	\$5,064	5	5,064	-	-	5,064	-	5,064	-
9/30/04	\$8,369	5	8,369	-	-	8,369	-	8,369	-
9/30/05	\$26,467	10	26,467	-	-	26,467	-	26,467	-
9/30/05	\$57,814	10	57,814	-	-	57,814	-	57,814	-
9/30/05	\$405,372	20	253,360	20,269	-	273,629	20,269	293,898	111,475
9/30/05	\$5,088	15	4,239	339	-	4,578	339	4,917	171
9/30/05	1,007	5	1,007	-	-	1,007	-	1,007	-
10/31/05	8,933	20	5,325	447	-	5,772	447	6,219	2,714
10/31/05	6,159	20	3,670	308	-	3,978	308	4,286	1,873
10/31/05	4,375	20	2,846	219	-	3,065	219	3,284	1,091
11/30/05	3,494	20	2,069	175	-	2,244	175	2,419	1,075
12/31/05	68,205	30	40,353	3,410	-	43,763	3,410	47,173	21,032
12/31/05	6,940	20	4,406	347	-	4,753	347	5,100	2,140
2/28/05	661	20	382	33	-	415	33	448	213
3/31/06	6,200	20	3,565	310	-	3,875	310	4,185	2,015
3/31/06	2,463	20	1,416	123	-	1,539	123	1,662	802
3/31/06	49,500	20	28,463	2,475	-	30,938	2,475	33,413	16,087
3/31/06	3,229	20	1,854	161	-	2,015	161	2,176	1,052
3/31/06	4,774	20	2,747	239	-	2,986	239	3,225	1,549
11/30/05	10,558	20	6,248	528	-	6,776	528	7,304	3,255
11/30/05	4,900	20	2,899	245	-	3,144	245	3,389	1,511
1/31/06	2,263	20	1,319	113	-	1,432	113	1,545	717
1/31/06	1,349	20	781	67	-	851	67	918	430
3/31/06	2,832	20	1,631	142	-	1,773	142	1,915	917
3/31/06	3,922	20	2,254	196	-	2,450	196	2,646	1,275
4/30/06	1,160	20	662	58	-	720	58	778	382
4/30/06	1,780	20	1,016	89	-	1,105	89	1,194	586
4/30/06	4,223	20	2,410	211	-	2,621	211	2,832	1,392
4/30/06	3,017	20	1,724	151	-	1,875	151	2,026	991
5/31/06	3,154	20	1,789	158	-	1,947	158	2,105	1,049
5/31/06	1,948	20	1,101	97	-	1,198	97	1,295	653
7/31/06	16,113	20	8,999	806	-	9,805	806	10,611	5,502
7/31/06	1,080	20	558	50	-	608	50	658	342
8/31/06	56,392	20	31,253	2,820	-	34,073	2,820	36,893	19,499
9/30/06	24,714	20	13,594	1,236	-	14,830	1,236	16,066	8,648
9/30/06	25,088	20	13,796	1,254	-	15,050	1,254	16,304	8,784
9/30/06	25,088	20	13,796	1,254	-	15,050	1,254	16,304	8,784

Prior Years Totals \$1,789,153 \$ 1,480,831 \$ 38,986 \$ 1,519,817 \$ 38,920 \$ 1,558,737 \$ 230,416

GENERATOR REPLACEMENT	11/30/06	\$ 2,650	20	\$ 1,395	\$ 133	\$ 1,528	133	1,661	990
GENERATOR REPLACEMENT	11/30/06	8,331	20	4,377	417	4,794	417	5,211	3,120
RENOVATE 2 BATHROOMS	11/30/06	10,000	20	5,250	500	5,750	500	6,250	3,750
RENOVATE 2 BATHROOMS	11/30/06	10,000	20	5,250	500	5,750	500	6,250	3,750
RENOVATE 2 BATHROOMS	10/30/06	8,000	20	4,200	400	4,600	400	5,000	3,000
RENOVATE 2 BATHROOMS	11/1/06	7,200	20	3,780	360	4,140	360	4,500	2,700
ELEVATOR ELECTRICAL	11/30/06	2,353	20	1,237	118	1,355	118	1,473	880
ELEVATOR ELECTRICAL	11/30/06	2,353	20	1,237	118	1,355	118	1,473	880
ELEVATOR ELECTRICAL	11/30/06	2,353	20	1,237	118	1,355	118	1,473	880
ELEVATOR ELECTRICAL	11/30/06	2,352	20	1,237	118	1,355	118	1,473	879
ELECTRICAL WORK	11/30/06	614	20	324	31	355	31	386	227
ELECTRICAL WORK	11/30/06	204	20	106	10	116	10	126	78
ELECTRICAL WORK	11/30/06	548	20	285	27	312	27	339	208
ELECTRICAL WORK	11/30/06	274	20	178	14	192	14	206	68
W/PAINTER & PAINT ON UNITS	11/30/06	11,288	10	11,288	-	11,288	-	11,288	-
ELEVATOR MECHANICAL	12/31/06	8,340	10	8,340	-	8,340	-	8,340	-
AIR CONDITIONING	1/31/07	1,072	10	1,072	-	1,072	-	1,072	-
ELECTRICAL WORK	1/31/07	53,000	10	53,000	-	53,000	-	53,000	-
ELECTRICAL WORK	1/31/07	3,392	10	3,392	-	3,392	-	3,392	-
ELECTRICAL WORK	1/31/07	825	20	438	41	479	41	520	305
ALARM SYSTEM	1/31/07	1,557	20	776	78	854	78	932	583
WATERPROOFING ELEVATOR PIT	1/31/07	1,476	20	738	74	812	74	886	552
WATERPROOFING ELEVATOR PIT	1/31/07	1,476	20	738	74	812	74	886	552
ELECTRICAL WORK	2/28/07	734	10	734	-	734	-	734	-
AIR CONDITIONING	3/31/07	1,670	10	1,670	-	1,670	-	1,670	-
BATHROOM RENOVATIONS	3/31/07	1,865	10	1,865	-	1,865	-	1,865	-
ELEVATOR ELECTRICAL	3/31/07	545	10	545	-	545	-	545	-
HANDRAILS	3/31/07	2,717	10	2,717	-	2,717	-	2,717	-
HANDRAILS	3/31/07	2,717	10	2,717	-	2,717	-	2,717	-

WEST HARTFORD HEATH AND REHAB CENTER
DEPRECIATION SCHEDULES
September 30, 2019

Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017 Acc. Dep	2018 Depreciaton	2018 Acc. Dep	2019 Depreciaton	2019 Acc. Dep	Net Book Value
FIRE ALARM SYSTEM	3/31/07	1,116	10	1,116	-	1,116	-	1,116	-
FIRE ALARM SYSTEM	3/31/07	2,154	10	2,154	-	2,154	-	2,154	-
MISCELLANEOUS SIGNAGE	3/31/07	2,230	10	2,230	-	2,230	-	2,230	-
FRONT DOOR AWNING	4/30/07	950	10	950	-	950	-	950	-
FRONT DOOR AWNING	4/30/07	1,000	10	1,000	-	1,000	-	1,000	-
WATERPROOFING ELEVATOR PIT	4/30/07	1,267	10	1,267	-	1,267	-	1,267	-
WATERPROOFING ELEVATOR PIT	4/30/07	1,267	10	1,267	-	1,267	-	1,267	-
WATERPROOFING ELEVATOR PIT	4/30/07	1,267	10	1,267	-	1,267	-	1,267	-
AIR CONDITIONING	5/31/07	9,816	10	9,816	-	9,816	-	9,816	-
RENOVATE 2 BATHROOMS	5/31/07	7,970	10	7,970	-	7,970	-	7,970	-
RENOVATE 2 BATHROOMS	5/31/07	5,781	10	5,781	-	5,781	-	5,781	-
HANDRAILS	5/31/07	310	10	310	-	310	-	310	-
HANDRAILS	5/31/07	282	10	282	-	282	-	282	-
AIR CONDITIONING	5/31/07	3,003	10	3,003	-	3,003	-	3,003	-
AIR CONDITIONING	5/31/07	3,003	10	3,003	-	3,003	-	3,003	-
AIR CONDITIONING	5/31/07	3,003	10	3,003	-	3,003	-	3,003	-
LOBBY CARPET	6/30/07	2,300	10	2,185	115	2,300	-	2,300	-
REPLACE 15 INTERIOR DOORS	6/30/07	4,756	10	4,756	-	4,756	-	4,756	-
LOBBY CARPET	8/30/07	2,759	10	2,759	-	2,759	-	2,759	-
2007 TOTALS		\$ 204,136		\$ 174,358	\$ 3,246	\$ 177,604	\$ 3,131	\$ 180,735	23,401
2007 AND PRIOR YEARS TOTALS		\$ 1,993,289		\$ 1,655,189	\$ 42,232	\$ 1,697,421	\$ 42,051	\$ 1,739,472	253,817
2008 Additions									
ELECTRIC WORK	10/31/07	\$ 601	20	\$ 300	30	330	30	360	241
AIR CONDITIONER	11/30/07	5,000	10	4,790	210	5,000	-	5,000	-
REPLACE WINDOW GLASS	12/31/07	578	10	578	-	578	-	578	(0)
PAINTING	1/31/08	12,000	5	12,000	-	12,000	-	12,000	-
ELECTRIC WORK	2/29/08	659	20	275	33	308	33	341	318
ELECTRIC WORK	3/31/08	557	20	219	28	247	28	275	282
STAIR WELLS	5/30/08	645	15	305	43	348	43	391	254
EXHAUST FAN ON ROOF	5/30/08	2,491	10	1,765	249	2,014	249	2,263	228
CONDENSAN FAN MOTER	6/30/08	951	10	635	95	730	95	825	126
STAIR TREADS	7/2/08	3,055	5	3,055	-	3,055	-	3,055	-
RANGE GUARD CONTROL	7/24/08	1,466	20	456	73	529	73	602	863
ELEC FOR EXHAUST FAN	7/30/08	991	20	308	50	358	50	408	583
BEARING ON HOOD EXH FAN	7/1/08	4,546	20	1,421	227	1,648	227	1,875	2,671
STAIRS TREADS	8/21/08	572	5	572	-	572	-	572	-
90 DUAL ALARM JACKS	9/19/08	8,014	20	2,169	401	2,570	401	2,971	5,043
LINE EXHAUST AIR FAN	9/24/08	5,038	20	1,365	252	1,617	252	1,869	3,169
2008 Adjustment		1,212		-	-	-	-	-	1,212
2008 TOTALS		\$ 48,375		\$ 30,166	\$ 1,740	\$ 31,906	\$ 1,481	\$ 33,387	14,989
2009 Additions									
Recpt Glass Enclosure	10/2/2008	\$ 1,749	10	\$ 1,574	175	1,749	-	1,749	(0)
Back Door DE Panel	12/31/2008	738	10	664	74	738	-	738	(0)
Lighting	1/31/2009	60,333	15	36,200	4,022	40,222	4,022	44,244	16,090
Electrical Work	2/27/2009	1,829	20	823	91	914	91	1,005	824
Repairs to Freezer	2/25/2009	684	10	615	68	683	-	683	1
Cogeneration System	3/1/2009	171,428	20	77,142	8,571	85,713	8,571	94,284	77,144
Security System	3/26/2009	21,134	5	21,134	-	21,134	-	21,134	-
Tranquility Room Closet & Wall	3/26/2009	2,800	15	1,680	187	1,867	187	2,054	746
Septic Floats	4/1/2009	873	15	524	58	582	58	640	234
Shower Valves	4/2/2009	560	10	504	56	560	-	560	(0)
10 light Remote Annunciator	5/12/2009	2,293	20	1,032	115	1,147	115	1,262	1,031
Kitchen Freezer Work	5/1/2009	586	10	528	58	586	-	586	-
Security System	5/29/2009	5,939	5	5,939	-	5,939	-	5,939	-
Elect for Generator Panel	5/29/2009	1,367	20	588	65	653	65	718	589
Painting	5/28/2009	1,000	5	1,000	-	1,000	-	1,000	-
Linssys Wiring	6/17/2009	5,793	5	5,793	-	5,793	-	5,793	-
Cable Install Basement	6/18/2009	1,325	5	1,325	-	1,325	-	1,325	-
Handrail Caps	6/18/2009	1,498	15	899	100	999	100	1,099	399
Programmable Thermostat	6/23/2009	3,850	10	3,465	385	3,850	-	3,850	-
Permit Fees Cogen System	6/22/2009	2,231	15	1,339	149	1,488	149	1,637	594
Roof top AC Electrical Work	6/23/2009	3,117	20	1,403	156	1,559	156	1,715	1,402
Exterior Lighting	6/30/2009	5,798	10	5,219	580	5,799	-	5,799	(0)
Paint Resident Rooms & Bathroom	7/1/2009	17,000	5	17,000	-	17,000	-	17,000	-
Wiring	7/1/2009	15,232	5	15,232	-	15,232	-	15,232	-
41 Signs	7/9/2009	1,420	5	1,420	-	1,420	-	1,420	-
Misc	7/9/2009	5,000	15	3,012	333	3,345	333	3,678	1,322
		2,674		-	-	-	-	-	2,674
2009 TOTAL		\$ 338,192		\$ 206,054	\$ 15,243	\$ 221,297	\$ 13,847	\$ 235,144	103,049
2010 Additions									
Head board for Tranq Lounge	12/8/2009	\$ 635	5	\$ 635	-	635	-	635	-
Paint Resident Rooms & Bathrooms	12/18/2009	5,052	5	5,052	-	5,052	-	5,052	-
Walk in Freezer Work	1/22/2010	4,329	10	3,463	433	3,896	433	4,329	(0)
Ceiling Tiles	2/1/2010	787	10	630	79	709	78	787	0
Stemmer Part in Kitchen	2/18/2010	958	10	767	96	863	95	958	0
Glass in Tranq Wing	3/5/2010	1,200	10	960	120	1,080	120	1,200	(0)
Keypad Entry Lock	4/23/2010	597	10	478	60	538	59	597	(0)
Rebuild on 55th Washer	4/30/2010	1,099	10	879	110	989	110	1,099	(0)
Kitchen Exhaust Hood Exten	5/5/2010	827	20	330	41	371	41	412	415
Economizer Actuator & Control	5/12/2010	1,090	10	872	109	981	109	1,090	-
Compressor #6	5/17/2010	3,415	15	1,822	228	2,050	228	2,278	1,137
5 Motors for Exhaust Fans	5/24/2010	1,736	10	1,329	174	1,503	173	1,736	(0)
Gas Pipe New Dryer	6/3/2010	1,268	20	507	63	570	63	633	635
Require Washers & Dryer	6/30/2010	3,323	20	1,329	166	1,495	166	1,661	1,662
2 Linen Chute Doors	7/28/2010	1,261	5	1,261	-	1,261	-	1,261	-
Copier Outlet Upgrade	8/31/2010	600	20	240	30	270	30	300	309
Misc Interior Painting	8/31/2010	3,275	5	3,275	-	3,275	-	3,275	-
Drain Pan for AC in MDS	8/1/2010	1,706	10	1,365	171	1,536	170	1,706	(0)
Chopper Pump for Sewer	8/6/2010	2,262	5	2,262	-	2,262	-	2,262	-
Duct Work	9/1/2010	1,349	20	539	67	606	67	673	676
2010 TOTAL		\$ 36,768		\$ 28,055	\$ 1,947	\$ 30,002	\$ 1,942	\$ 31,944	4,824
2011 Additions									
Elevator Exhaust Fan	12/6/2010	918	20	321	46	367	46	413	505
Move Phones Rehab/Remov	12/6/2010	1,183	20	414	59	473	59	532	651
Electrical Work - Basement	12/30/2010	1,676	20	587	84	671	84	755	921
Door Access	4/18/2011	1,531	10	1,072	153	1,225	153	1,378	154
New Hot Water Line	4/20/2011	2,014	25	564	81	645	81	726	1,288
Employee Entrance Door	9/19/2011	4,951	10	3,466	495	3,961	495	4,456	496
2011 TOTAL		\$ 12,274		\$ 6,424	\$ 918	\$ 7,342	\$ 918	\$ 8,260	4,014
2012 Additions									
Keypad Entry Lock Amb Entr	12/5/2011	820	10	492	82	574	82	656	164
Exterior Lighting Bollard Base	12/23/2011	886	10	532	89	621	89	710	176
Elevator Emergency Light Units	3/19/2012	1,759	10	1,056	176	1,232	176	1,408	352
Domestic Hot Water Pump	4/17/2012	978	10	587	98	685	98	783	195
Pulleys & Contractors	4/20/2012	1,780	10	1,068	178	1,246	178	1,424	356
Motors & Switches Exhaust Fan	4/23/2012	2,375	10	1,426	238	1,664	238	1,902	474
3 Way Valve for Cogen Sys	5/17/2012	589	3	589	-	589	-	589	-
Outlets for Knocks	9/27/2012	3,983	10	2,390	398	2,788	398	3,186	798

WEST HARTFORD HEALTH AND REHAB CENTER
DEPRECIATION SCHEDULES
September 30, 2019

Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017		2018		2019		Net Book Value
				Acc. Dep	Depreciaton	Acc. Dep	Depreciaton	Acc. Dep	Depreciaton	
2012 TOTAL		\$ 13,170		\$ 8,139	\$ 1,259	\$ 9,398	\$ 1,259	\$ 10,657	\$ 2,514	
2013 Additions										
Acrobyn Dining Room	10/31/2012	\$ 606	10	\$ 303	61	364	61	425	181	
Sinks for Nourishment Rm	10/1/2012	990	20	247	49	296	49	345	645	
Digital Card for Phone System	11/29/2012	812	5	812	-	812	-	812	0	
New Service for Holding Oven	4/17/2013	1,193	20	299	60	359	60	419	775	
Aluminum Straps to stabilize WI Cooler	5/16/2013	1,050	3	1,750	(709)	318	-	1,050	-	
Reswire to 220v	5/29/2013	1,059	20	265	53	318	53	371	688	
Vacuum Breaker	5/30/2013	675	20	169	34	203	34	237	438	
Replace Exhaust Fans	6/21/2013	2,045	20	511	102	613	102	715	1,330	
Replace Motor/control Board Heat Zone	7/3/2013	1,253	10	626	125	751	125	876	377	
Hands Free Faucet	7/26/2013	1,714	20	429	86	515	86	601	1,113	
Replace Light Pole & Fixture	9/30/2013	2,504	10	1,252	250	1,502	250	1,752	753	
2013 Total		\$ 13,902	\$ 158	\$ 6,662	\$ 120	\$ 6,782	\$ 820	\$ 7,602	\$ 6,299	
2013 Disposals										
Lobby Carpet	6/30/2007	\$ (2,300)	10	\$ (2,300)	\$ -	(2,300)	-	(2,300)	-	
2013 Total		\$ (2,300)		\$ (2,300)	\$ -	(2,300)	\$ -	(2,300)	-	
2014 Additions										
Restripe & fill cracks	10/18/2013	\$ 1,755	2	\$ 2,632	(877)	1,755	-	1,755	-	
Replace Compressor AC #4	1/30/2014	915	15	244	61	305	61	366	549	
Kitchen Circulator in Boiler Room	6/3/2014	945	15	252	63	315	63	378	567	
Parking Lot Repair	7/31/2014	1,595	8	797	199	996	199	1,195	400	
3 New Fan Control Switches	8/4/2014	1,413	10	565	141	706	141	847	566	
1st Tilt Trap on Roof	8/25/2014	670	7	383	96	479	96	575	95	
2014 Total		\$ 7,293		\$ 4,873	\$ (317)	\$ 4,556	\$ 560	\$ 5,116	\$ 2,177	
2015 Additions										
Remote Stop for Generator	10/1/2014	\$ 1,339	15	\$ 267	89	356	89	445	894	
Repair 2 back flow preventors	3/17/2015	1,284	10	534	178	712	178	890	894	
Resident Toilets	3/23/2015	1,005	20	150	50	200	50	250	755	
Shower Drains	6/30/2015	1,679	20	252	84	336	84	420	1,259	
Resident Toilets	6/4/2015	1,249	20	186	62	248	62	310	939	
Bathcare Project	7/15/2015	2,139	20	321	107	428	107	535	1,604	
Dogwood Tree	7/15/2015	609	20	90	30	120	30	150	450	
Bathcare Project 1st Floor	8/19/2015	1,486	20	222	74	296	74	370	1,116	
2015 Total		\$ 11,282		\$ 2,024	\$ 674	\$ 2,698	\$ 674	\$ 3,372	\$ 7,911	
2016 Additions										
Bearing Assembly	4/12/2016	\$ 1,315	20	\$ 132	66	198	66	264	1,051	
Kitchen Combustion Fan Module	6/9/2016	2,364	20	236	118	354	118	472	1,892	
Bliss A/C Condenser #3 payment 1 of 2	7/8/2016	1,375	20	138	69	207	69	276	1,099	
Bliss A/C Condenser #3 payment 2 of 2	7/12/2016	1,680	20	168	84	252	84	336	1,344	
Bliss A/C condenser #1 payment 1 of 2	8/17/2016	1,375	20	138	69	207	69	276	1,099	
Bliss A/C condenser #1 payment 2 of 2	8/17/2016	1,680	20	168	84	252	84	336	1,344	
2016 Total		\$ 9,789		\$ 979	\$ 490	\$ 1,469	\$ 490	\$ 1,959	\$ 7,830	
2017 Additions										
walk in freezer - compressor	11/1/2016	\$ 3,201	15	\$ 213	213	426	213	639	2,562	
Resident's room faucets	11/23/2016	816	20	41	41	82	41	123	693	
recirculation line motor/pump replacement - heating/hot water	1/12/2017	1,362	10	136	136	272	136	408	954	
blower motor - and condactor RT10#	5/31/2017	1,390	10	139	139	278	139	417	973	
new economizer on rooftop unit	9/30/2017	1,182	10	118	118	236	118	354	828	
heat exchange replacement	9/30/2017	3,205	10	321	321	642	321	963	2,242	
2017 Total		\$ 11,156		\$ 968	\$ 968	\$ 1,936	\$ 968	\$ 2,904	\$ 8,252	
2018 Additions										
2 barrel type sprinklers in coolers	10/31/2017	1,619	15	-	108	108	108	216	1,403	
replace actuator on 2 way valve in pt office	1/31/2018	1,591	10	-	159	159	159	318	1,273	
replace stat in pt ah	1/31/2018	677	10	-	68	68	68	136	541	
monthly bill for lighting project	1/31/2018	62,999	20	-	3,150	3,150	3,150	6,300	56,699	
replace door gasket, thermometer and door heat	3/31/2018	1,014	3	-	338	338	338	676	338	
thermostat replacement for walk in cooler	7/31/2018	715	10	-	72	72	72	144	571	
Harmony dining room glass replacement	7/31/2018	1,111	10	-	111	111	111	222	889	
hot water project	8/31/2018	914	10	-	91	91	91	182	732	
front door automatic opener	8/31/2018	2,024	10	-	202	202	202	404	1,620	
Elevator Door Optiguard (Infrared Light Curtain)	9/30/2018	5,849	15	-	390	390	390	780	5,069	
2018 Disposals										
Disposals - No description Available	Various	(485,790)				(485,790)		(485,790)	-	
ICU Units - disposed 10/1/17	9/30/1997	(3,053)				(3,053)		(3,053)	-	
Refinish Lobby Furnitures disposed 10/1/17	9/30/1994	(865)				(865)		(865)	-	
Computer disposed 10/1/17	9/30/1994	(4,336)				(4,336)		(4,336)	-	
Lovesouts disposed 10/1/17	9/30/1994	(1,236)				(1,236)		(1,236)	-	
TELEPHONE-KEY, PORT, CORDLESS -diap 10/1/17	9/30/2000	(3,987)				(3,987)		(3,987)	-	
Carpet disposed 10/1/17	9/30/1994	(3,300)				(3,300)		(3,300)	-	
Hot Water Heating Booster-for Dictary dishwasher disposed 10	9/30/1995	(1,391)				(1,391)		(1,391)	-	
Telephone System disposed 10/1/17	9/30/1997	(3,830)				(3,830)		(3,830)	-	
Telephone System disposed 10/1/17	9/30/1997	(1,980)				(1,980)		(1,980)	-	
telephone system Disposed 10/1/17	9/30/1999	(3,003)				(3,003)		(3,003)	-	
Compressor and Crankcase Heater Disposed 10/1/17	9/30/1999	(1,945)				(1,945)		(1,945)	-	
Vertical window blinds Disposed 10/1/17	9/30/2000	(10,982)				(10,982)		(10,982)	-	
Block Heater, Battery Charger, Emergency Standby disposed 10	9/30/2002	(1,406)				(1,406)		(1,406)	-	
Generator --disposed 10/1/17	9/30/2005	(30,000)				(30,000)		(30,000)	-	
Rebuild on 55lb Washer - disposed 10/1/17	4/30/2010	(1,099)				(1,099)		(1,099)	-	
2018 Total		\$ (479,688)		\$ -	\$ 4,689	\$ (553,514)	\$ 4,689	\$ (548,825)	\$ 69,136	
2019 Additions										
sewer pipe repairs installment 1 of 2	12/31/2018	2,835	20	-	-	-	142	142	2,693	
patient rooms	3/31/2019	8,720	5	-	-	-	1,744	1,744	6,976	
Exhaust fans (two rooftop exhaust fans)	5/31/2019	1,755	10	-	-	-	176	176	1,579	
excavate and replace sewer outside Bliss B	6/30/2019	2,875	20	-	-	-	144	144	2,731	
elevator repair	6/30/2019	6,913	15	-	-	-	461	461	6,452	
2 of 2 installments for 2 rooftop fans	7/31/2019	2,140	10	-	-	-	214	214	1,926	
sewer repair job J2284	7/31/2019	3,470	20	-	-	-	174	174	3,296	
Warren stripe cottonseed	8/31/2019	1,844	15	-	-	-	123	123	1,721	
replaced fdc line one sprinkler	8/31/2019	4,050	15	-	-	-	270	270	3,780	
Waterproof Elevator pit	8/31/2019	2,552	15	-	-	-	170	170	2,382	
wallpaper ground floor hallway	9/30/2019	2,127	10	-	-	-	213	213	1,914	
Waterproof Elevator pit	9/30/2019	2,552	15	-	-	-	170	170	2,382	
2019 Disposals										
Repairs to roof	9/30/1993	(1,272)						(1,272)	-	
Handicap Door Operations	9/30/1993	(2,640)						(2,640)	-	
Room #1 Patient Plaques	9/30/1993	(1,537)						(1,537)	-	
Heat Exchanger	9/30/1995	(4,818)						(4,818)	-	
Nurses Station	9/30/1996	(5,523)						(5,523)	-	
Nurses Station	9/30/1996	(1,600)						(1,600)	-	

**WEST HARTFORD HEATH AND REHAB CENTER
DEPRECIATION SCHEDULES
September 30, 2019**

Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017 Acc. Dep	2018 Depreciation	2018 Acc. Dep	2019 Depreciation	2019 Acc. Dep	Net Book Value
Roof Replacement	9/30/1997	(2,067)		-	-	-	-	(2,067)	-
Roof Replacement	9/30/1997	(1,654)		-	-	-	-	(1,654)	-
Roof Replacement	9/30/1997	(413)		-	-	-	-	(413)	-
Roof Replacement	9/30/1997	(2,717)		-	-	-	-	(2,717)	-
Roof Replacement	9/30/1997	(2,717)		-	-	-	-	(2,717)	-
Roof Replacement	9/30/1997	(2,864)		-	-	-	-	(2,864)	-
2 AAC compressors	9/30/1998	(4,058)		-	-	-	-	(4,058)	-
Dampers Truck	9/30/1998	(4,000)		-	-	-	-	(4,000)	-
Heat Exchanger/Limit Switch	9/30/1998	(2,132)		-	-	-	-	(2,132)	-
Burners/Motor for Boiler	9/30/1999	(1,495)		-	-	-	-	(1,495)	-
Hydraulic Motors for Boiler	9/30/1999	(1,166)		-	-	-	-	(1,166)	-
Gas Valve for Boiler	9/30/1999	(991)		-	-	-	-	(991)	-
Flow Switch/Gas Valve for H2O heat	9/30/1999	(889)		-	-	-	-	(889)	-
Control Valve for Elevator	9/30/1999	(2,650)		-	-	-	-	(2,650)	-
Watercooled Unit	9/30/1999	(3,710)		-	-	-	-	(3,710)	-
Water Range Guard System	9/30/1999	(1,772)		-	-	-	-	(1,772)	-
Man to Elec conv kit-flex	9/30/2000	(965)		-	-	-	-	(965)	-
Carpet & Vinyl flooring	9/30/2004	(3,508)		-	-	-	-	(3,508)	-
Flooring Special Cure Unit	9/30/2005	(9,177)		-	-	-	-	(9,177)	-
a/c condensing unit	9/30/2005	(1,007)		-	-	-	-	(1,007)	-
Linksys wiring	6/17/2009	(5,793)		-	-	-	-	(5,793)	-
2019 Total		\$ (31,302)		\$ -	\$ -	\$ -	\$ 4,001	\$ (69,135)	\$ 37,833

Grand Total		\$ 1,982,202		\$ 1,947,233	\$ 69,963	\$ 1,458,993	\$ 73,700	\$ 1,459,558	\$ 522,644
--------------------	--	---------------------	--	---------------------	------------------	---------------------	------------------	---------------------	-------------------

Movable Equipment									
Prior Years & 2007 Totals		\$ 1,131,389		\$ 1,131,389	\$ -	\$ 1,131,389	\$ -	\$ 1,131,389	-

2008 Additions									
Perkins-Trays	31-Oct-07	\$ 301	10	\$ 301	-	301	-	301	-
WB Mason Table	31-Oct-07	803	15	536	54	590	54	644	159
Medline Industries Wheelchair	31-Oct-07	585	5	585	-	585	-	585	-
Build Nserve Computers	31-Oct-07	2,425	5	2,425	-	2,425	-	2,425	-
Artronick Medical Chart	31-Oct-07	2,228	10	2,228	-	2,228	-	2,228	-
Perkins-Trays	30-Nov-07	654	10	654	-	654	-	654	-
Build Nserve Computers Server	30-Nov-07	5,438	5	5,438	-	5,438	-	5,438	-
Buttler Power Equipment-Lawn Equipment	30-Nov-07	2,522	7	2,522	-	2,522	-	2,522	-
Build N Serve Computers	31-Dec-07	3,266	5	3,266	-	3,266	-	3,266	-
Romax	31-Dec-07	948	5	948	-	948	-	948	-
Romax	31-Dec-07	659	7	659	-	659	-	659	-
Build N Serve Computers	01-Jan-08	1,583	5	1,583	-	1,583	-	1,583	-
Cartersen's Window Treatments	03-Jan-08	586	5	586	-	586	-	586	-
Romax	04-Jan-08	541	7	541	-	541	-	541	-
Artronick Procedure Chart	07-Jan-08	1,188	10	1,039	119	1,158	30	1,188	(10)
Perkins-Dishes	08-Jan-08	1,821	7	1,821	-	1,821	-	1,821	-
Alimed-Merry Walker	10-Jan-08	795	7	795	-	795	-	795	-
WB Mason Table	21-Jan-08	485	15	281	32	313	32	345	140
Romax	23-Jan-08	996	8	996	-	996	-	996	-
Medline-Wheelchair	24-Jan-08	585	5	585	-	585	-	585	-
Romax	28-Jan-08	583	15	339	39	378	39	417	165
Raintech-4 chair sensors	31-Jan-08	1,022	7	1,022	-	1,022	-	1,022	-
Medline Wheelchair	24-Jan-08	585	5	585	-	585	-	585	-
WB Mason 7 Chairs	11-Feb-08	816	15	452	54	506	54	560	256
Alimed-Merry Walker	14-Feb-08	795	7	795	-	795	-	795	-
Mckesson Medical-Nursing Equipment	21-Feb-08	593	5	593	-	593	-	593	-
Medline-Nursing Equipment	22-Mar-08	740	5	740	-	740	-	740	-
Medline-Mattress	11-Mar-08	335	7	335	-	335	-	335	-
Romax-3 TVs, 3 night talbes	19-Mar-08	1,152	5	1,152	-	1,152	-	1,152	-
Mckesson Medical - 3 Multis	20-Mar-08	791	7	791	-	791	-	791	-
Cartersen's -Medication Divider Sets	31-Mar-08	1,527	7	1,527	-	1,527	-	1,527	-
Medline - Mattress	31-Mar-08	378	7	378	-	378	-	378	-
Build N Serve Computers	01-Apr-08	3,593	5	3,593	-	3,593	-	3,593	-
Hudson Home Health-Walkers with Wheels	01-May-08	650	7	650	-	650	-	650	-
Medline-Shower Gurney	01-May-08	926	10	658	93	751	93	844	82
Medline-2 Wheelchairs	22-May-08	1,222	5	1,222	-	1,222	-	1,222	-
Raintech-4 bed Sensors	20-May-08	1,306	5	1,306	-	1,306	-	1,306	-
BKM Total Office -5 files Cabinets	19-May-08	1,325	15	626	88	714	88	802	523
Mckesson Medical-10 Alarms	07-May-08	534	5	534	-	534	-	534	-
Mckesson Medical-12 Sensors	07-May-08	507	5	507	-	507	-	507	-
Medline -2 Wheelchairs	20-Jun-08	819	5	819	-	819	-	819	-
Gram-Field-Bariatric Bed	12-Jun-08	1,592	15	705	106	811	106	917	674
Sexauer-Smoke Alarms	30-Jul-08	1,724	10	1,076	172	1,248	172	1,420	303
sexauer-Grab Bars	31-Jul-08	4,444	15	1,851	296	2,147	296	2,443	2,001
Trimark United East-Heated Pellet Dispenser	27-Aug-08	5,849	10	3,410	585	3,995	585	4,580	1,269
Perkins-3 Utility Carts	15-Sep-08	592	10	321	59	380	59	439	153
Romax Room Service Table	04-Sep-08	889	15	321	59	380	59	439	450
Romax 5 OTB Nite Tables	20-Sep-08	635	15	606	29	635	-	635	(10)
Arjo Sara Light Lill	23-Sep-08	9,481	10	5,135	948	6,083	948	7,031	2,449
Raintech-40 Informer Plus	22-Sep-08	9,451	10	7,640	945	8,585	866	9,451	0
2008 Adjustment		95							95
2008 Totals		\$ 83,358		\$ 67,479	\$ 3,678	\$ 71,157	\$ 3,481	\$ 74,638	\$ 8,720

2009 Additions									
Utility Cart	8/26/2008	\$ 1,059	10	\$ 877	106	983	76	1,059	(10)
2 Mattresses	9/25/2008	679	7	679	-	679	-	679	-
12 SHOWER CHAIRS	10/27/2008	3,406	10	3,066	340	3,406	-	3,406	(10)
6 TRANSMITTERS	10/23/2008	620	5	620	-	620	-	620	-
2 CRANBERRY PELLETTS	10/28/2008	829	10	746	83	829	-	829	(10)
TIMECLOCK	10/1/2008	9,590	10	8,631	959	9,590	-	9,590	0
20 BIEDMATE SENSORS	11/14/2008	742	5	742	-	742	-	742	-
BAL. OF 3 SARA LITE LIFTS	12/8/2008	1,563	10	1,407	156	1,563	1	1,564	(10)
2 MONITORS	12/30/2008	4,471	5	4,471	-	4,471	-	4,471	-
SOFTWARE	1/1/2009	77,632	15	46,579	5,175	51,754	5,175	56,929	20,703
SERVER	1/1/2009	7,155	5	7,155	-	7,155	-	7,155	-
10 BED SENSORS	1/5/2009	2,432	5	2,432	-	2,432	-	2,432	-
10 MATTRESSES	1/8/2009	2,793	7	2,793	-	2,793	-	2,793	-
10 ALARMS	1/8/2009	973	5	973	-	973	-	973	-
5 CHAIRS	1/15/2009	1,286	15	772	86	858	86	944	342
3 TRANSMITTERS	1/16/2009	564	5	564	-	564	-	564	-
3 FLAT SCREE TVS	1/16/2009	934	5	934	-	934	-	934	-
4 TELEPHONES	1/21/2009	1,251	7	1,251	-	1,251	-	1,251	-
2 WHEELCHAIRS	1/29/2009	409	5	409	-	409	-	409	-
WHEELCHAIR	1/29/2009	409	5	409	-	409	-	409	-
ADMISS PC, SS & FETTE	2/1/2009	2,240	5	2,240	-	2,240	-	2,240	-
8 MATTRESSES	2/3/2009	745	7	745	-	745	-	745	-
5 NITE TABLES	2/9/2009	583	15	350	39	389	39	428	155
5 NITE TABLES	2/9/2009	583	15	350	39	389	39	428	155
5 NITE TABLES	2/26/2009	720	10	648	72	720	-	720	(10)
TRAYS	2/26/2009	2,138	10	1,924	214	2,138	-	2,138	(10)
INVERTER ON WASHER #3	2/24/2009	2,076	7	2,076	-	2,076	-	2,076	-
7 WALKERS	2/19/2009	786	15	471	52	523	52	575	211
FILING CABINET	2/25/2009	2,493	15	1,496	166	1,662	166	1,828	665
10 SMALL FILING CABINET	2/28/2009	808	10	728	81	809	-	809	(10)
DRYER #2	3/20/2009	1,421	20	639	71	710	71	781	639
4 DESKS	3/16/2009	625	7	625	-	625	-	625	-
2 TELEPHONES	3/31/2009	614	5	614	-	614	-	614	-
3 WHEELCHAIRS	3/17/2009	1,166	15	700	78	778	78	856	310

WEST HARTFORD HEATH AND REHAB CENTER
DEPRECIATION SCHEDULES
September 30, 2019

Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017 Acc. Dep	2018 Depreciation	2018 Acc. Dep	2019 Depreciation	2019 Acc. Dep	Net Book Value
10 ALARMS	3/13/2009	973	5	973	-	973	-	973	-
DRYER REBUILD #3	3/26/2009	666	10	666	66	666	-	666	-
10 ROUND TABLES	4/2/2009	1,897	15	1,138	126	1,264	126	1,390	507
5 ALARMS	4/8/2009	573	5	573	-	573	-	573	-
10 BED SENSORS	4/9/2009	2,525	5	2,525	-	2,525	-	2,525	-
TV BRACKETS	4/1/2009	824	5	824	-	824	-	824	-
3 WHEEL CHAIRS	4/7/2009	690	5	690	-	690	-	690	-
DESK	4/24/2009	907	20	408	45	453	45	498	409
3 DESKS	5/1/2009	1,218	20	548	61	609	61	670	548
2 CAMERAS, 2 MONITORS	5/8/2009	649	5	649	-	649	-	649	-
7 MATS	5/11/2009	2,616	7	2,616	-	2,616	-	2,616	-
3 WHEEL CHAIRS	5/20/2009	614	5	614	-	614	-	614	-
2 DESKS	5/21/2009	718	20	323	36	359	36	395	323
OFFICE FURNITURE	5/26/2009	2,987	15	1,792	199	1,991	199	2,190	797
DOOR LEVERS	5/29/2009	5,396	15	3,238	360	3,598	360	3,958	1,438
FOOD PROCESSOR	6/15/2009	739	10	665	74	739	-	739	(0)
DELL COMPUTER	6/1/2009	1,346	5	1,346	-	1,346	-	1,346	-
PIANO	6/10/2009	832	20	375	42	417	42	459	373
2 TELEPHONES	6/15/2009	625	7	625	-	625	-	625	-
CHAIR MATS	6/18/2009	644	7	644	-	644	-	644	-
6 NIGHT TABLES	6/1/2009	700	15	420	47	467	47	514	185
10 NIGHT TABLE	6/12/2009	1,166	15	700	78	778	78	856	310
CREDENZA	6/2/2009	1,400	15	840	93	933	93	1,026	374
DESK	6/1/2009	807	20	363	40	403	40	443	364
25 CAST IRON TABLES	7/24/2009	1,261	15	756	84	840	84	924	336
25 DINING ROOM TABLES	7/29/2009	2,833	15	1,700	189	1,889	189	2,078	755
3 LAFFONS & INSTALL	8/1/2009	9,255	5	9,255	-	9,255	-	9,255	-
SCALE DIG CHAIR	7/14/2009	1,474	5	1,474	-	1,474	-	1,474	-
6 ADULT TRANSMITTERS	7/2/2009	606	5	606	-	606	-	606	-
45 ARM CHAIRS	8/26/2009	13,122	15	7,873	875	8,748	875	9,623	3,499
10 HAMPER BAGS	8/9/2009	1,497	5	1,497	-	1,497	-	1,497	-
WALL MOUNTED SPRAY	8/17/2009	951	5	951	-	951	-	951	-
JUICE DISPENSER	8/24/2009	727	10	655	72	727	-	727	0
2 CARTS 3 SHELF W COVER	9/14/2009	676	10	609	67	676	-	676	0
MILL SHREDDER 225.2CR	9/14/2009	1,640	5	1,640	-	1,640	-	1,640	-
2 LATERAL 5 DRW FILE CABINET	9/25/2009	1,656	15	993	110	1,103	110	1,213	443
2009 End Totals		\$ 203,003		\$ 150,612	\$ 10,381	\$ 160,993	\$ 8,168	\$ 169,161	33,842
2010 Additions									
Computer Accessories	10/1/2009	\$ 1,015	5	\$ 1,015	-	1,015	-	1,015	-
Conacheck Machine	10/6/2009	1,152	5	1,152	-	1,152	-	1,152	-
10 Walkers	10/16/2009	874	5	874	-	874	-	874	-
Reclining Chair	10/19/2009	914	5	914	-	914	-	914	-
10 Overbed Tables	11/4/2009	1,166	15	622	78	700	78	778	388
Food Processor	11/5/2009	739	10	591	74	665	74	739	(0)
5 Mattresses	11/20/2009	793	7	793	-	793	-	793	-
6 Transmitters	12/4/2009	606	5	606	-	606	-	606	-
Flat Screen TV Trnq	12/18/2009	602	5	602	-	602	-	602	-
Rollators/Wheelchair	1/12/2010	696	5	696	-	696	-	696	-
Mattress	1/15/2010	996	7	996	-	996	-	996	-
Business Office Printer	2/2/2010	614	5	614	-	614	-	614	-
Night Tables	2/4/2010	1,166	15	622	78	700	78	778	388
Single Shelf Living Tra	2/8/2010	1,641	10	1,313	164	1,477	164	1,641	0
2 Computer	2/10/2010	1,010	5	1,010	-	1,010	-	1,010	-
Night Tables	3/10/2010	1,166	15	622	78	700	78	778	388
Admin Printer & Install	3/14/2010	1,189	5	1,189	-	1,189	-	1,189	-
5 Wheelchairs	3/20/2010	670	5	670	-	670	-	670	-
2 Antirroll Back Devices	3/31/2010	503	5	503	-	503	-	503	-
6 Transmitters	4/27/2010	606	5	606	-	606	-	606	-
2 Computers	4/30/2010	2,723	5	2,723	-	2,723	-	2,723	-
2 Fine Rated Cabinets	5/5/2010	951	15	507	63	570	63	633	318
2 Antirroll Back Devices	5/11/2010	503	5	503	-	503	-	503	-
2 Antirroll Back Devices	5/14/2010	1,246	7	1,246	-	1,246	-	1,246	-
TVs for Trans & Hurn	5/14/2010	816	5	816	-	816	-	816	-
2 Printers & Install	5/17/2010	1,460	5	1,460	-	1,460	-	1,460	-
Telephone	5/19/2010	625	7	625	-	625	-	625	-
Night Tables	6/7/2010	1,166	15	622	78	700	78	778	388
Washer	6/30/2010	625	10	501	63	564	62	626	(0)
Laptop	6/30/2010	2,597	3	2,597	-	2,597	-	2,597	-
Night Tables	7/1/2010	1,166	15	622	78	700	78	778	388
TVs and Wall Mounts	7/19/2010	1,693	5	1,693	-	1,693	-	1,693	-
Lateral Drawers	7/19/2010	2,092	15	1,115	139	1,254	139	1,393	699
Software	7/31/2010	73,349	3	73,349	-	73,349	-	73,349	-
LCD TV	8/2/2010	1,837	5	1,837	-	1,837	-	1,837	-
19" LCD TV	9/21/2010	933	5	933	-	933	-	933	-
Salon Sink	9/15/2010	653	20	262	33	295	33	328	326
Wanderguards	9/15/2010	606	5	606	-	606	-	606	-
2 HP Mini Notebooks	9/30/2010	1,701	3	1,701	-	1,701	-	1,701	-
2010 TOTAL		\$ 114,859		\$ 109,727	\$ 926	\$ 110,653	\$ 925	\$ 111,578	3,281
2011 Additions									
3 Love Seat Benches	10/8/2010	\$ 1,134	10	\$ 793	113	906	113	1,019	114
Wanderguard Tester	10/13/2010	1,030	3	1,030	-	1,030	-	1,030	-
5 High Speed Hand Dryers	10/15/2010	1,855	5	1,855	-	1,855	-	1,855	-
55" LCD TV	11/1/2010	1,696	5	1,696	-	1,696	-	1,696	-
Office Furniture	11/9/2010	2,035	15	950	136	1,086	136	1,222	813
Bladder Scanner	11/12/2010	13,640	5	13,640	-	13,640	-	13,640	-
2 Wheelchairs	11/16/2010	565	5	565	-	565	-	565	-
Projector	11/17/2010	518	5	518	-	518	-	518	-
Office Furniture	12/3/2010	1,692	15	748	107	855	107	962	640
Storage Cabinet	12/8/2010	678	15	316	45	361	45	406	272
Mattress	12/28/2010	1,227	7	1,227	-	1,227	-	1,227	0
Office Chair	1/1/2011	509	15	238	34	272	34	306	203
Food Processor	2/18/2011	1,125	10	787	112	899	112	1,011	114
4 Mattress	2/24/2011	1,172	7	1,172	-	1,172	-	1,172	0
2 Sheeper Chairs	3/1/2011	1,469	5	1,469	-	1,469	-	1,469	-
Care Plan Library	3/1/2011	1,961	3	1,961	-	1,961	-	1,961	-
Hall ID Signage	3/11/2011	720	10	504	72	576	72	648	72
6 Transmitters	3/21/2011	634	3	634	-	634	-	634	-
1 Laser & 1 Color Printer	3/31/2011	2,747	5	2,747	-	2,747	-	2,747	-
Heated Pellets	4/12/2011	6,142	10	4,299	614	4,913	614	5,527	615
Dishes	4/25/2011	3,888	3	3,888	-	3,888	-	3,888	-
4 Water Coolers	5/9/2011	2,120	10	1,484	212	1,696	212	1,908	212
3 Flat Screen TVs	5/11/2011	827	5	827	-	827	-	827	-
Grill	5/24/2011	582	3	582	-	582	-	582	-
Blood Pressure Cuffs	5/25/2011	655	3	655	-	655	-	655	-
4 Wheelchairs	6/1/2011	619	5	619	-	619	-	619	-
Scale Dig Chair	6/2/2011	1,312	10	1,312	-	1,312	-	1,312	-
6 Bed Alarms	6/2/2011	760	3	760	-	760	-	760	-
8 Phones	6/22/2011	1,542	10	1,079	154	1,233	154	1,387	155
Bariatric Bed	6/24/2011	1,895	15	884	126	1,010	126	1,136	759
Water Cooler	6/6/2011	693	10	485	69	554	69	623	70
Blood Pressure Cuffs	7/1/2011	819	3	819	-	819	-	819	-
2 Mini Laptops	7/31/2011	1,434	3	1,434	-	1,434	-	1,434	-
eMar/Clar Software	8/2/2011	13,510	3	13,510	-	13,510	-	13,510	-
eMar/Clar Software Interf	8/2/2011	727	3	727	-	727	-	727	-
Dryer Part	8/11/2011	787	10	551	79	630	79	709	78
Actuator for Loyer Lift	8/16/2011	647	10	453	65	518	65	583	64
5 Transmitters	8/18/2011	507	3	507	-	507	-	507	-
Over Bed Night Tables	9/30/2011	1,010	15	471	67	538	67	605	405
2011 TOTAL		\$ 76,791		\$ 68,194	\$ 2,005	\$ 70,199	\$ 2,005	\$ 72,204	4,587

WEST HARTFORD HEALTH AND REHAB CENTER
DEPRECIATION SCHEDULES
September 30, 2019

Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017 Acc. Dep	2018 Depreciaton	2018 Acc. Dep	2019 Depreciaton	2019 Acc. Dep	Net Book Value
2012 Additions									
Lateral Drawers	10/3/2011	\$ 620	15	\$ 248	41	289	41	330	290
Over Bed Night Tables	10/7/2011	1,010	15	404	67	471	67	538	472
Bariatric Bed	10/18/2011	1,895	15	758	126	884	126	1,010	886
Hamper Bags	10/27/2011	680	5	680	-	680	-	680	-
Heavy Duty Inven Blender	11/1/2011	979	10	588	98	686	98	784	196
Trash Container	11/1/2011	617	5	617	-	617	-	617	-
Over Bed Night Tables	11/23/2011	957	15	383	64	447	64	511	446
12 Bed Alarms	11/29/2011	4,490	3	4,490	-	4,490	-	4,490	-
21 Nursing Station Chairs	11/2/2011	2,602	15	1,040	173	1,213	173	1,386	1,216
Microwave	12/8/2011	562	5	562	-	562	-	562	-
Over Bed Night Tables	12/1/2011	957	15	383	64	447	64	511	446
1 Half ID Signage	1/4/2012	673	10	404	67	471	67	538	136
5 Transmitters	1/5/2012	508	3	508	-	508	-	508	-
15 Chair Alarms	1/24/2012	526	5	526	-	526	-	526	-
2 Rosebud Oximeters	1/27/2012	3,593	10	2,156	359	2,515	359	2,874	720
Dishes	2/7/2012	920	3	920	-	920	-	920	-
Nurac Call System Harmony	2/15/2012	2,044	10	1,226	204	1,430	204	1,634	410
2 22" Flat Screen TV Res Room	2/22/2012	574	5	574	-	574	-	574	-
3 Rec/MDS/Med Rec & Scans	2/29/2012	3,853	3	3,853	-	3,853	-	3,853	-
3 Shelf Cart	3/5/2012	770	10	462	77	539	77	616	154
Bariatric Bed	3/9/2012	1,787	15	715	119	834	119	953	834
Hooyer Lift w/Scale	3/14/2012	2,150	10	1,290	215	1,505	215	1,720	430
Bulletin Board	3/14/2012	1,038	10	623	104	727	104	831	207
Ultrasonic Cleaner	3/19/2012	522	10	313	52	365	52	417	105
10 Mattresses	3/21/2012	2,630	7	2,255	376	2,631	-	2,631	(0)
Computer - Recreation	3/30/2012	1,121	5	1,121	-	1,121	-	1,121	-
Triturator Sterilizing Unit-Dent	4/1/2012	1,009	12	500	83	583	83	666	334
6 Isolation Carts	4/4/2012	1,448	10	869	145	1,014	145	1,159	289
10 Mattresses	4/27/2012	2,801	7	2,401	400	2,801	-	2,801	0
Mini Desktop Inf Control	4/30/2012	1,146	5	1,146	-	1,146	-	1,146	-
NOVA Time Fingerprint Reader for Timeclock	5/31/2012	1,372	5	1,372	-	1,372	-	1,372	-
2 Bedside Mats	5/2/2012	721	3	721	-	721	-	721	-
4 Hamper Bags	5/21/2012	632	5	632	-	632	-	632	-
Staff Lounge Fridge	5/23/2012	533	10	319	53	372	53	425	107
6 Transmitters	5/22/2012	635	3	635	-	635	-	635	-
2 24" Acer Flat Monitors	5/22/2012	530	5	530	-	530	-	530	-
42" Flat Hamspre - Tranquillit	6/1/2012	617	5	617	-	617	-	617	-
Outdoor Love Seats	6/1/2012	1,616	15	647	108	755	108	863	754
Pulse Oximeter	6/7/2012	684	5	684	-	684	-	684	-
42" LCD Sanyo	6/10/2012	585	5	585	-	585	-	585	-
Warning Blanket	6/14/2012	1,164	7	997	166	1,163	1	1,164	(0)
Rosebud Oximeter	6/15/2012	1,797	10	1,078	180	1,258	180	1,438	358
Whirlpool Fridge/Freezer - Nursing	6/15/2012	638	10	383	64	447	64	511	127
42" Plasma Sanyo	6/20/2012	606	5	606	-	606	-	606	-
AP Office Computer	6/30/2012	2,319	5	2,319	-	2,319	-	2,319	-
Paging Server	6/30/2012	2,168	5	2,168	-	2,168	-	2,168	-
Inf Control Laptop	6/30/2012	2,383	3	2,383	-	2,383	-	2,383	-
Recr Color/AR Multi Printers	6/30/2012	1,269	5	1,269	-	1,269	-	1,269	-
Slicer-Medium Duty	6/7/2012	957	10	575	96	671	96	767	191
10 Mattresses	7/20/2012	2,630	7	2,255	376	2,631	-	2,631	(0)
STG Cabinet Cherry	7/16/2012	743	15	298	50	348	50	398	345
Mesh Back Chair	7/26/2012	638	10	383	64	447	64	511	127
Floor Scale	8/1/2012	585	10	350	58	408	58	466	118
Gluten Free Items	8/1/2012	586	3	586	-	586	-	586	-
Monitor for Reception	8/10/2012	777	5	777	-	777	-	777	-
4 Mini Computers Rehab	8/12/2012	1,762	3	1,762	-	1,762	-	1,762	-
Lounge Blinds	8/22/2012	2,023	5	2,023	-	2,023	-	2,023	-
Computer - Bookkeeping	8/31/2012	1,947	5	1,947	-	1,947	-	1,947	-
2 Square Laptops	8/31/2012	729	3	729	-	729	-	729	-
Food Truck Doors	9/1/2012	1,702	10	1,021	170	1,191	170	1,361	341
SLC-16 Phone Card for Fax	9/14/2012	2,432	5	2,432	-	2,432	-	2,432	-
6 Transmitters	9/14/2012	635	3	635	-	635	-	635	-
Rehub Mini Desktop	9/30/2012	1,455	5	1,455	-	1,455	-	1,455	-
Tranquility 11P NB 4530s	9/30/2012	729	3	729	-	729	-	729	-
2012 TOTAL		\$ 85,073		\$ 67,914	\$ 4,219	\$ 72,133	\$ 2,902	\$ 75,035	10,038

2013 Additions									
Oral Thermometer	10/5/2012	\$ 622	5	\$ 622	\$ -	622	-	622	-
Reception Desk	10/8/2012	1,323	20	331	66	397	66	463	860
EMR Software	10/9/2012	16,352	5	16,352	-	16,352	-	16,352	-
Ammicator Panels	10/9/12/2012	657	10	329	66	395	66	461	196
Copy Room Mailboxes	10/17/2012	536	5	536	-	536	-	536	-
7 Office Chairs	10/26/2012	1,936	15	645	129	774	129	903	1,032
Bookcases	11/9/2012	1,084	20	271	54	325	54	379	706
Bariatric Footstool	11/19/2012	603	20	151	30	181	30	211	393
Paging System	11/30/2012	1,622	10	811	162	973	162	1,135	487
2 Mesh Chairs	12/17/2012	596	15	199	40	239	40	279	317
Stair Trends	1/7/2013	1,947	20	486	97	583	97	680	1,267
Weather Proof Camera EE: Fat	1/21/2013	760	5	760	-	760	-	760	-
Fax Machine Kristen's office	1/23/2013	558	3	558	-	558	-	558	-
7 Transmitters/12 Chair Mats	1/24/2013	558	3	558	-	558	-	558	-
10 Overhead Bed Parts	1/31/2013	968	15	323	65	388	65	453	515
Bariatric Bed Parts	2/1/2013	612	15	204	41	245	41	286	326
Staff Lounge Chairs	2/1/2013	978	15	326	65	391	65	456	522
HR Desktop	2/13/2013	1,750	5	1,750	-	1,750	-	1,750	-
Patio Keypad	3/27/2013	938	10	469	94	563	94	657	281
HP Tablet for Dietary	3/31/2013	558	3	558	-	558	-	558	-
15 Side Arm Chairs	3/18/2013	1,467	15	489	98	587	98	685	782
Schedulier/PR Desks	3/25/2013	1,996	20	499	100	599	100	699	1,296
Kaivac Dispense & Vac	5/31/2013	862	8	530	108	647	108	755	107
20 Overhead Tables	6/19/2013	2,054	15	685	137	822	137	959	1,095
2 Bedside Mats	6/18/2013	1,231	3	1,231	-	1,231	-	1,231	-
20 Outdoor Stacking Chairs	6/3/2013	1,938	10	969	194	1,163	194	1,357	581
5 Patio Umbrellas	6/5/2013	1,923	3	1,923	-	1,923	-	1,923	-
Tranquility Lockers 30	6/30/2013	2,567	12	1,070	214	1,284	214	1,498	1,069
Battery Server	6/30/2013	616	5	616	-	616	-	616	-
15 Side Arm Chairs	6/17/2013	1,467	15	489	98	587	98	685	782
Outdoor Umbrellas	7/22/2013	1,675	3	1,675	-	1,675	-	1,675	-
Spring Platforms for Ldy	7/31/2013	638	5	638	-	638	-	638	-
Hands Free Wireless Headsets	7/31/2013	1,536	5	1,536	-	1,536	-	1,536	-
Admiss PC	8/15/2013	2,139	5	2,139	-	2,139	-	2,139	-
1/2 of Clinical Liason Laptop	8/15/2013	915	3	915	-	915	-	915	-
Cisco Wireless Network	8/15/2013	637	5	637	-	637	-	637	-
2 Bedside Mats	8/6/2013	1,305	3	1,305	-	1,305	-	1,305	-
2 37" LED Flat Screen TVs	8/14/2013	1,000	5	753	-	753	-	753	-
2 Patio Umbrellas w/stands	9/6/2013	753	3	753	-	753	-	753	-
2 Mesh Chairs DNS/ADNS	9/18/2013	638	15	213	43	256	43	299	339
Total 2013		\$ 62,315		\$ 45,560	\$ 1,901	\$ 47,461	\$ 1,901	\$ 49,362	12,953

2013 Disposals									
Admiss PC	2/1/2009	\$ (1,501)	5	\$ (1,501)	\$ -	(1,501)	-	(1,501)	-
9/30/1986	(406,445)			(406,445)	-	(406,445)	-	(406,445)	-
10 Alarms	5/7/2008	(534)	5	(534)	-	(534)	-	(534)	-
12 Sensors	5/7/2008	(507)	5	(507)	-	(507)	-	(507)	-
40 Infanter Plus	9/22/2008	(9,451)	10	(4,804)	-	(4,804)	-	(4,804)	(4,646)
6 Transmitters	10/23/2008	(620)	3	(620)	-	(620)	-	(620)	-
10 Alarms	3/13/2009	(973)	5	(973)	-	(973)	-	(973)	-
Wall Mounted Spray Hose	8/17/2009	(951)	5	(951)	-	(951)	-	(951)	-
6 Bed Alarms	6/13/2011	(760)	3	(760)	-	(760)	-	(760)	-
12 Bed Alarms	11/29/2011	(4,490)	3	(2,993)	-	(2,993)	-	(2,993)	(1,497)

WEST HARTFORD HEATH AND REHAB CENTER
DEPRECIATION SCHEDULES
 September 30, 2019

Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017 Acc. Dep	2018 Depreciation	2018 Acc. Dep	2019 Depreciation	2019 Acc. Dep	Net Book Value
15 Chair Arms	1/24/2012	(526)	5	(211)	-	(211)	-	(211)	(316)
Total 2013		\$ (426,758)		\$ (420,299)	\$ -	\$ (420,299)	\$ -	\$ (420,299)	\$ (6,459)
2014 Additions									
2 Bedside Mats	10/15/2013	\$ 1,239	3	\$ 1,239	-	1,239	-	1,239	-
2 Tablet Chair w/lockable casters	10/22/2013	1,117	15	297	74	371	74	445	671
2 24" LED TVs for Residents	10/11/2013	656	5	525	131	656	-	656	0
3 Printers	10/31/2013	1,801	5	1,440	360	1,800	-	1,800	0
2 Laptops & Monitor Harmony	10/31/2013	2,759	3	2,759	-	2,759	-	2,759	-
5 24" LED TVs for Residents	1/14/2013	1,640	5	1,312	328	1,640	-	1,640	0
2 Carondo Shower Chairs	1/17/2013	10,014	10	4,005	1,001	5,006	1,001	6,007	4,007
10 Over Bed Tables	1/14/2013	1,018	15	272	68	340	68	408	611
4 Tablet Chair w/lockable casters	1/12/2013	2,127	15	567	142	709	142	851	1,276
2 Swivel Oversized Chairs TranQ	1/12/2013	1,043	15	279	70	349	70	419	624
Bedside mattress	12/11/2013	615	7	352	88	440	88	528	88
Reception Desktop Computer	12/31/2013	1,042	5	833	208	1,041	1	1,042	(0)
Lift & Scale	1/17/2014	2,199	5	1,760	440	2,200	-	2,200	(0)
Mattresses	1/24/2014	4,216	7	2,409	602	3,011	602	3,613	603
Mobile Tablet Chair	1/6/2014	2,984	15	796	199	995	199	1,194	1,790
WAP Harmony A/Bliss B	1/31/2014	3,035	5	2,428	607	3,035	-	3,035	(0)
Mesh Back Chair	1/13/2014	723	15	193	48	241	48	289	434
Bedside mattress	2/6/2014	653	7	373	93	466	93	559	94
Desks for Marilyn & Mary	2/14/2014	1,839	20	368	92	460	92	552	1,287
Cubicle space for Tally Clerk	2/20/2014	1,743	10	697	174	871	174	1,045	698
Kitchen Dishwasher Motor	2/25/2014	1,681	10	672	168	840	168	1,008	673
4 Lateral File Drawers	3/7/2014	3,973	15	1,060	265	1,325	265	1,590	2,384
Metal Desk for MDS	4/4/2014	1,504	20	301	75	376	75	451	1,053
QuickBooks Server	4/30/2014	1,822	5	1,457	364	1,821	1	1,822	(0)
Harmony B Laptop	4/30/2014	637	3	637	-	637	-	637	-
Recreation Laptop	4/30/2014	637	3	637	-	637	-	637	-
Cogen Router	4/30/2014	1,081	5	865	216	1,081	-	1,081	0
Monitors/Mouse	4/30/2014	1,938	5	1,551	387	1,938	-	1,938	0
Wood Desk for Infc Control	5/19/2014	1,131	20	227	57	284	57	341	791
5 Mattresses	5/29/2014	1,430	5	1,144	286	1,430	-	1,430	0
6 Transmitters	5/29/2014	614	3	614	-	614	-	614	-
New Timeclock Installation	5/31/2014	3,116	10	1,247	312	1,559	312	1,871	1,245
3 Bariatric Mattresses	6/4/2014	657	5	525	131	656	1	657	(0)
10 Over Bed Night Tables	6/30/2014	976	15	260	65	325	65	390	586
DNS HP Laptop	6/30/2014	896	3	896	-	896	-	896	-
Russell Laptop Share	6/30/2014	1,318	3	1,318	-	1,318	-	1,318	-
Laminate Desk/Bookcase	7/22/2014	1,599	20	320	80	400	80	480	1,119
Bariatric Mattress	7/10/2014	1,039	5	831	207	1,038	-	1,038	0
7 ER 2-way Radios	7/23/2014	1,672	5	1,337	334	1,671	1	1,672	(0)
14 MS Office 2013 copies & install	7/31/2014	4,356	3	4,356	-	4,356	-	4,356	-
Hoyer Lift w/Scale	8/27/2014	3,341	10	1,336	334	1,670	334	2,004	1,337
5 Mattresses	9/4/2014	657	5	525	131	656	1	657	(0)
Bliss A Laptop	9/30/2014	637	3	637	-	637	-	637	-
Total 2014		\$ 79,177		\$ 45,657	\$ 8,137	\$ 53,794	\$ 4,012	\$ 57,806	21,371
Disposals 2014									
Mopitors	5/31/2005	\$ (772)	5	(772)	-	(772)	-	(772)	-
Hoyer Lift	12/31/2006	(2,327)	5	(2,327)	-	(2,327)	-	(2,327)	-
6 Transmitters	12/4/2009	(606)	3	(606)	-	(606)	-	(606)	-
Total 2014		\$ (3,705)		\$ (3,705)	\$ -	\$ (3,705)	\$ -	\$ (3,705)	-
2015 Additions									
Pill Shredder for Nursing	10/22/2014	\$ 2,938	5	\$ 1,764	588	2,352	587	2,939	(0)
Stainless Bowls for Robo Coupe	10/23/2014	660	3	660	-	660	-	660	-
Server Cabinet	10/31/2014	3,172	5	1,902	634	2,536	634	3,170	1
Bedside mattress	11/7/2014	657	7	282	94	376	94	470	187
Memory Boxes for Dementia Unit	12/17/2014	2,753	10	825	275	1,100	275	1,375	1,377
Administrator Laptop	12/30/2014	1,042	3	1,042	-	1,042	-	1,042	-
Cisco Router & 3Yr License	12/30/2014	4,924	3	4,924	-	4,924	-	4,924	-
TV for Annex	1/1/2015	915	5	549	183	732	183	915	(0)
Fin-HP Cop/Transq HP Desktop/Adm NH350	1/31/2015	4,926	5	2,955	985	3,940	985	4,925	1
Housekeeping Linen Carts	2/11/2015	583	5	351	117	468	115	583	0
Mattresses	2/24/2015	862	5	516	172	688	172	860	2
Hoyer Scale	3/6/2015	619	10	186	62	248	62	310	309
Sara Lift	3/16/2015	1,053	10	315	105	420	105	525	528
Laundry Cart	3/30/2015	520	10	156	52	208	52	260	260
2 Training Computers/SS 2 Monitors	3/30/2015	2,748	5	1,650	550	2,200	549	2,749	(0)
Automated External Defibrillator	4/8/2015	1,528	5	918	306	1,224	305	1,529	(0)
Hoyer Lift	5/18/2015	909	10	273	91	364	91	455	454
6 Transmitters	5/31/2015	614	3	614	-	614	-	614	-
Ilell Cushion Float	6/2/2015	711	3	711	-	711	-	711	-
Cloud Keel	6/4/2015	1,078	3	1,078	-	1,078	-	1,078	-
Admin Office Chairs	6/4/2015	966	15	192	64	256	64	320	645
Ilell Boots	6/23/2015	966	3	966	-	966	-	966	-
Phone System Card	6/24/2015	667	10	201	67	268	67	335	332
Mattresses	6/24/2015	923	5	555	185	740	184	924	(0)
2 Laptops Bliss B and SS	6/30/2015	2,434	3	2,434	-	2,434	-	2,434	-
Finance Office chairs	7/9/2015	744	15	150	50	200	50	250	495
Mattresses	7/9/2015	1,324	5	795	265	1,060	264	1,324	(0)
6 Transmitters	8/1/2015	614	3	614	-	614	-	614	-
Harmony Printer	8/1/2015	1,829	5	1,098	366	1,464	365	1,829	0
Trash Containers	8/5/2015	915	5	549	183	732	183	915	(0)
Generator Battery	8/25/2015	1,144	5	687	229	916	228	1,144	0
Washing Machine Inverter	8/26/2015	3,178	10	954	318	1,272	318	1,590	1,588
Bariatric Reclining Shower Chair	8/31/2015	861	10	258	86	344	86	430	431
20 Overbed Tables	9/10/2015	1,863	15	372	124	496	124	620	1,243
Battery and Battery Charger	9/2/2015	1,778	5	1,068	356	1,424	354	1,778	0
Complete Dish Set	9/24/2015	3,175	3	3,175	-	3,175	-	3,175	-
Server	9/30/2015	13,412	5	8,046	2,682	10,728	2,682	13,410	2
Total 2015		\$ 70,005		\$ 43,784	\$ 9,189	\$ 52,973	\$ 9,178	\$ 62,151	7,854
2016 Additions									
Staff Dv Pro Book/ Rec TM15 Machine	11/30/2015	\$ 3,063	3	\$ 2,042	1,021	3,063	-	3,063	(0)
Overbed Tables	12/16/2015	992	15	132	66	198	66	264	727
Fire Door for Laundry	1/8/2016	582	20	58	29	87	29	116	466
HP ProBook	1/15/2016	2,652	3	1,754	877	2,631	1	2,632	(0)
Lateral file cabinet	2/2/2016	596	5	238	119	357	119	476	119
Wanderguards	2/29/2016	646	5	258	129	387	129	516	130
Food Truck Doors	3/31/2016	1,410	20	142	71	213	71	284	1,127
Generator starter	4/29/2016	1,415	20	142	71	213	71	284	1,131
Kitchen equipment	5/31/2016	1,872	20	188	94	282	94	376	1,497
wanderguards	4/30/2016	646	5	258	129	387	129	516	130
Kitchen trucks/wanderguards	4/30/2016	1,268	20	126	63	189	63	252	1,015
mattresses	6/29/2016	599	5	240	120	360	120	480	119
mattresses	6/30/2016	599	5	240	120	360	120	480	119
Kiosk	6/30/2016	3,235	3	2,156	1,078	3,234	1	3,235	(0)
kitchen equipment	6/30/2016	2,482	10	496	248	744	248	992	1,490

WEST HARTFORD HEATH AND REHAB CENTER
DEPRECIATION SCHEDULES
September 30, 2019

Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017 Acc. Dep	2018 Depreciation	2018 Acc. Dep	2019 Depreciation	2019 Acc. Dep	Net Book Value
3 Laptops & install	8/1/2009	(9,255)				(9,255)	-	(9,255)	-
Computer Accessories	10/1/2009	(1,015)				(1,015)	-	(1,015)	-
2 Computers- Admissions/Document of	2/10/2010	(1,040)				(1,040)	-	(1,040)	-
6 Transmitters - disposed 10/1/17	4/27/2010	(606)				(606)	-	(606)	-
2 Computers	4/30/2010	(2,723)				(2,723)	-	(2,723)	-
1 Printer & install	5/17/2010	(814)				(814)	-	(814)	-
Laptop	6/30/2010	(2,597)				(2,597)	-	(2,597)	-
Transmitters - disposed 10/1/17	9/15/2010	(606)				(606)	-	(606)	-
2 HP Mini Notebooks	9/30/2010	(1,701)				(1,701)	-	(1,701)	-
6 Transmitters - disposed 10/1/17	3/21/2011	(634)				(634)	-	(634)	-
2 Mini Laptops - disposed 10/1/17	7/31/2011	(1,434)				(1,434)	-	(1,434)	-
5 Transmitters -disposed 10/1/17	8/18/2011	(507)				(507)	-	(507)	-
10 Nursing Station Chairs - disposed of 10 chairs 10/1/17	11/2/2011	(1,239)				(1,239)	-	(1,239)	-
5 Transmitters -disposed 10/1/17	1/5/2012	(508)				(508)	-	(508)	-
Computer - Recreation	3/30/2012	(1,121)				(1,121)	-	(1,121)	-
6 Transmitters - disposed 10/1/17	5/22/2012	(635)				(635)	-	(635)	-
Paging Server - disposed 10/1/17	6/30/2012	(2,168)				(2,168)	-	(2,168)	-
4 Mini Computers Rehab	8/12/2012	(1,762)				(1,762)	-	(1,762)	-
Computer - Bookkeeping	8/31/2012	(1,947)				(1,947)	-	(1,947)	-
2 Spare Laptops	8/31/2012	(729)				(729)	-	(729)	-
Rehab Mini Desktop	9/30/2012	(1,455)				(1,455)	-	(1,455)	-
Tranquility HP NB 4530s	9/30/2012	(728)				(728)	-	(728)	-
Fax Machine Kristen's office	12/3/2013	(558)				(558)	-	(558)	-
WAP Harmony A/B/Class B	1/31/2014	(3,035)				(3,035)	-	(3,035)	-
Office Furniture	10/5/2006	(1,442)				(1,442)	-	(1,442)	-
Office Furniture	11/30/2006	(619)				(619)	-	(619)	-
Walker	11/30/2005	(706)				(706)	-	(706)	-
Medical Cart - disposed 10/1/17	11/30/2006	(4,414)				(4,414)	-	(4,414)	-
Lawn Equipment - disposed 10/1/17	11/30/2007	(2,522)				(2,522)	-	(2,522)	-
Procedure cart - disposed 10/1/17	1/7/2008	(1,188)				(1,188)	-	(1,188)	-
Merry Walker - disposed 10/1/17	1/10/2008	(795)				(795)	-	(795)	-
Merry Walker - disposed 10/1/17	2/14/2008	(795)				(795)	-	(795)	-
3 Mats -disposed 10/1/17	3/20/2008	(791)				(791)	-	(791)	-
Nursing Equipment - disposed 10/1/17	3/22/2008	(740)				(740)	-	(740)	-
Mattress -disposed 10/1/17	3/31/2008	(378)				(378)	-	(378)	-
2 Mattresses -disposed 10/1/17	9/25/2008	(679)				(679)	-	(679)	-
8 Mattresses -disposed 10/1/17	2/5/2009	(745)				(745)	-	(745)	-
5 Mattresses -disposed 10/1/17	11/20/2009	(793)				(793)	-	(793)	-
Mattress -disposed 10/1/17	1/15/2010	(996)				(996)	-	(996)	-
Trash Container -disposed 10/1/17	11/11/2011	(617)				(617)	-	(617)	-
Microwave - disposed 10/1/17	12/8/2011	(562)				(562)	-	(562)	-
Inf Control Laptop - disposed 10/1/17	6/30/2012	(2,383)				(2,383)	-	(2,383)	-
Gluten Free Items -disposed 10/1/17	8/1/2012	(586)				(586)	-	(586)	-
6 Transmitters - disposed 10/1/17	9/14/2012	(635)				(635)	-	(635)	-
7 Transmitters/12 Chair Mats -disposed 10/1/17	1/24/2013	(558)				(558)	-	(558)	-
2 Bedside Mats -disposed 10/1/17	6/18/2013	(1,231)				(1,231)	-	(1,231)	-
2 Bedside Mats -disposed 10/1/17	8/6/2013	(1,305)				(1,305)	-	(1,305)	-
2 Swivel Oversized Chairs Tranq 1 chair disposed 10/1/17	11/25/2013	(522)				(522)	-	(522)	-
Software "Previously reported-item exempt from taxation, not i	7/31/2010	(73,349)				(73,349)	-	(73,349)	-
Care Plan Library "Previously reported-item exempt from taxa	3/1/2011	(1,961)				(1,961)	-	(1,961)	-
eMar/eTar Software "Previously reported-item exempt from tax	8/2/2011	(13,510)				(13,510)	-	(13,510)	-
eMar/eTar Software Interface "Previously reported-item exempt	8/2/2011	(727)				(727)	-	(727)	-
EMR Software "Previously reported-item exempt from taxation	10/9/2012	(16,352)				(16,352)	-	(16,352)	-
Total 2018		\$ (655,310)		\$ -	\$ 8,826	\$ (705,012)	\$ 8,826	\$ (696,186)	\$ 40,876

2019 Additions									
15 black conference room chairs	10/31/2018	1,515	15	-	-	-	101	101	1,414
digital chair scale	10/31/2018	1,215	10	-	-	-	121	121	1,094
1 bariatric bed	11/30/2018	1,832	15	-	-	-	122	122	1,710
window blinds	11/30/2018	4,766	15	-	-	-	318	318	4,448
adns hp probook	12/31/2018	2,197	5	-	-	-	439	439	1,758
3 NUC computers- finance, payroll, scheduling	12/31/2018	2,974	5	-	-	-	595	595	2,379
12 raised edge mattresses	1/31/2019	1,717	5	-	-	-	343	343	1,374
wanderguards	1/31/2019	42	5	-	-	-	8	8	34
2 refurbished nurseosie vital signs monitor	1/31/2019	2,800	5	-	-	-	560	560	2,240
2 ELO touch kiosks	2/28/2019	3,171	5	-	-	-	634	634	2,537
bariatric bed	3/31/2019	1,959	15	-	-	-	131	131	1,828
Maxi move hoyer lift	3/31/2019	5,428	10	-	-	-	543	543	4,885
4 chairs with wheels and brakes, resident tranqui	4/30/2019	2,423	10	-	-	-	242	242	2,181
Purchase & Install of 4 surveillance cameras	5/31/2019	2,196	5	-	-	-	439	439	1,757
strike reimbursement for cameras	8/31/2019	(1,781)	5	-	-	-	(356)	(356)	(1,425)
replacement cafeteria trays	5/31/2019	1,988	10	-	-	-	199	199	1,789
100 resident room screens	7/31/2019	4,222	15	-	-	-	281	281	3,941
HR computer	7/31/2019	1,635	5	-	-	-	327	327	1,308
clinical lliason laptop & hr desktop replacement	8/31/2019	2,021	5	-	-	-	404	404	1,617
dishes	8/31/2019	4,802	10	-	-	-	480	480	4,322

2019 Disposals									
Food Truck Doors	3/31/2006	(1,410)		-	-	-	-	(1,410)	-
Office Furniture	1/31/2007	(651)		-	-	-	-	(651)	-
Wheelchair	10/5/2007	(585)		-	-	-	-	(585)	-
Wheelchair	1/24/2008	(585)		-	-	-	-	(585)	-
Wheelchair	1/24/2008	(585)		-	-	-	-	(585)	-
5 Nite Tables	1/28/2008	(583)		-	-	-	-	(583)	-
2 Wheelchairs	5/22/2008	(1,222)		-	-	-	-	(1,222)	-
Bariatric Bed	6/12/2008	(1,592)		-	-	-	-	(1,592)	-
2 Wheelchairs	6/20/2008	(819)		-	-	-	-	(819)	-
4 Telephones	1/21/2009	(1,251)		-	-	-	-	(1,251)	-
2 Wheelchairs	1/29/2009	(409)		-	-	-	-	(409)	-
Wheelchair	1/29/2009	(409)		-	-	-	-	(409)	-
SS & Fette Monitors	2/1/2009	(739)		-	-	-	-	(739)	-
2 Telephones	3/16/2009	(625)		-	-	-	-	(625)	-
10 Nite Tables	3/17/2009	(1,166)		-	-	-	-	(1,166)	-
2 Cameras, 2 Monitors	5/8/2009	(649)		-	-	-	-	(649)	-
3 Wheelchairs	5/20/2009	(700)		-	-	-	-	(700)	-
6 night tables	6/1/2009	(700)		-	-	-	-	(700)	-
10 night tables	6/12/2009	(1,166)		-	-	-	-	(1,166)	-
2 Telephones	6/15/2009	(625)		-	-	-	-	(625)	-
Scale Dig Chair	7/14/2009	(1,474)		-	-	-	-	(1,474)	-
Night Tables	2/4/2010	(1,166)		-	-	-	-	(1,166)	-
Night Tables	3/10/2010	(1,166)		-	-	-	-	(1,166)	-
Bedside mattress	5/14/2010	(1,246)		-	-	-	-	(1,246)	-
Night Tables	7/1/2010	(1,166)		-	-	-	-	(1,166)	-
Mattress	12/28/2010	(1,227)		-	-	-	-	(1,227)	-
4 Mattress	2/24/2011	(1,172)		-	-	-	-	(1,172)	-
8 Phones	6/22/2011	(1,542)		-	-	-	-	(1,542)	-
Bariatric Bed	6/24/2011	(1,895)		-	-	-	-	(1,895)	-
Over Bed Night Tables	9/30/2011	(1,010)		-	-	-	-	(1,010)	-
Over Bed Night Tables	10/7/2011	(1,010)		-	-	-	-	(1,010)	-
Heavy Duty Inm Blender	11/1/2011	(979)		-	-	-	-	(979)	-
Over Bed Night Tables	11/23/2011	(957)		-	-	-	-	(957)	-
Over Bed Night Tables	12/1/2011	(957)		-	-	-	-	(957)	-
10 Mattresses	3/21/2012	(2,630)		-	-	-	-	(2,630)	-
10 Mattresses	4/27/2012	(2,801)		-	-	-	-	(2,801)	-
Mini Desktop Inf Control	4/30/2012	(1,146)		-	-	-	-	(1,146)	-
Resc Color/AR Multi Printers	6/30/2012	(1,269)		-	-	-	-	(1,269)	-
10 Mattresses	7/20/2012	(2,630)		-	-	-	-	(2,630)	-

WEST HARTFORD HEATH AND REHAB CENTER
DEPRECIATION SCHEDULES
September 30, 2019

Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017 Acc. Dep	2018 Depreciation	2018 Acc. Dep	2019 Depreciation	2019 Acc. Dep	Net Book Value
Lounge Blinds	8/22/2012	(2,023)		-	-	-	-	(2,023)	-
Food Truck Doors	9/11/2012	(1,702)		-	-	-	-	(1,702)	-
Oral Thermometer	10/5/2012	(622)		-	-	-	-	(622)	-
HP Tablet for Dietary	3/31/2013	(558)		-	-	-	-	(558)	-
Hand Free Wireless Headsets	7/31/2013	(1,536)		-	-	-	-	(1,536)	-
12 of Clinical Liaison Laptop	8/15/2013	(915)		-	-	-	-	(915)	-
2 Laptops & Monitor Harmony	10/31/2013	(2,759)		-	-	-	-	(2,759)	-
4 Tablet Chair wheelchair casters	11/12/2013	(2,127)		-	-	-	-	(2,127)	-
2 Swivel Overstuffed Chairs/Tram(1 chair disposed 10/1/17	11/25/2013	(522)		-	-	-	-	(522)	-
DNS HP Laptop	6/30/2014	(896)		-	-	-	-	(896)	-
Administrator Laptop +50 G2	12/30/2014	(1,042)		-	-	-	-	(1,042)	-
Cisco Router & 3Yr License	12/30/2014	(4,924)		-	-	-	-	(4,924)	-
Total 2019		\$ (16,334)		\$ -	\$ -	\$ -	\$ 5,931	\$ (57,524)	\$ 41,190

Grand Total		\$ 889,187		\$ 1,331,040	\$ 67,079	\$ 684,280	\$ 58,304	\$ 679,129	\$ 210,058
--------------------	--	-------------------	--	---------------------	------------------	-------------------	------------------	-------------------	-------------------

Non-Movable Equipment

2005									
Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017 Acc. Dep	2018 Depreciation	2018 Acc. Dep	2019 Depreciation	2019 Acc. Dep	Net Book Value
Acquisitions	9/30/2005	\$ 2,565	5	\$ 2,565	-	2,565	-	2,565	-
Acquisitions	9/30/2005	2,986	10	2,986	-	2,986	-	2,986	-
Acquisitions	9/30/2005	64,342	15	53,616	4,289	57,905	4,289	62,194	2,148
Acquisitions	9/30/2005	509	12	509	-	509	-	509	-
Allegiant-Satellite Dish	11/30/2005	11,301	10	11,301	-	11,301	-	11,301	-
SBC-Phone Lines	12/31/2005	1,505	10	1,505	-	1,505	-	1,505	-
2005 TOTAL		\$ 83,208		\$ 72,482	\$ 4,289	\$ 76,771	\$ 4,289	\$ 81,060	2,148

2012 Additions									
Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017 Acc. Dep	2018 Depreciation	2018 Acc. Dep	2019 Depreciation	2019 Acc. Dep	Net Book Value
Hot Water #1 Ignitor	12/24/2011	644	10	\$ 386	64	450	64	514	130
Hot Water #2 Motor	12/27/2011	1,654	10	992	165	1,157	165	1,322	332
Hot Water #1 Gas Valve	12/27/2011	877	10	527	88	615	88	703	175
Recharged Cylinder/New Hood	12/27/2011	1,018	10	611	102	713	102	815	203
2012 TOTAL		\$ 4,193		\$ 2,516	\$ 419	\$ 2,935	\$ 419	\$ 3,354	840

2018 Disposals									
Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017 Acc. Dep	2018 Depreciation	2018 Acc. Dep	2019 Depreciation	2019 Acc. Dep	Net Book Value
Acquisitions -no description available	9/30/2005	(2,565)		-	-	(2,565)	-	(2,565)	-
Acquisitions -no description available	9/30/2005	(2,986)		-	-	(2,986)	-	(2,986)	-
Acquisitions	9/30/2005	(509)		-	-	(509)	-	(509)	-
Allegiant- Satellite Dish	11/30/2005	(11,301)		-	-	(11,301)	-	(11,301)	-
2018 TOTAL		\$ (17,360)		\$ -	\$ -	\$ (17,360)	\$ -	\$ (17,360)	-

Grand Total		\$ 70,041		\$ 74,997	\$ 4,708	\$ 62,345	\$ 4,708	\$ 67,053	\$ 2,988
--------------------	--	------------------	--	------------------	-----------------	------------------	-----------------	------------------	-----------------

Total Non-Related Party Assets		\$ 2,941,430		\$ 3,353,270	\$ 141,750	\$ 2,205,619	\$ 136,712	\$ 2,205,740	735,690
---------------------------------------	--	---------------------	--	---------------------	-------------------	---------------------	-------------------	---------------------	----------------

Related Party Asset Additions

1400 Building									
Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017 Acc. Dep	2018 Depreciation	2018 Acc. Dep	2019 Depreciation	2019 Acc. Dep	Net Book Value
Wood Shed	10/20/2008	\$ 5,566	20	\$ 2,434	278	2,712	278	2,990	2,576
Total for (Building)		\$ 5,566		\$ 2,434	\$ 278	\$ 2,712	\$ 278	\$ 2,990	2,576

Building Improvements

Exterior Painting	11/7/2008	\$ 38,700	5	\$ 38,700	\$ -	38,700	-	38,700	-
Ceiling Tiles	12/18/2008	45,914	8	45,867	47	45,914	-	45,914	0
Corridor Handrails	01/31/09	17,946	15	9,453	1,196	10,649	1,196	11,845	6,101
Wall in Dining Room	2/28/2009	1,080	20	378	50	428	50	478	522
160 Resident Room Closets	3/24/2009	153,977	15	74,419	10,265	84,684	10,265	94,949	59,028
Shower Core Renovation	5/4/2009	42,537	20	14,150	2,127	16,277	2,127	18,404	24,133
Aerovya in Resident Room/Hallway	5/31/2009	50,855	10	33,187	5,086	38,273	5,086	43,359	7,497
Corridor Flooring	06/30/09	114,424	10	70,633	11,442	82,075	11,442	93,517	20,907
4 Condensing Units	6/30/2009	16,500	15	6,790	1,100	7,890	1,100	8,990	7,510
Door Replacement	06/30/09	107,879	15	44,396	7,192	51,588	7,192	58,780	49,100
Elevator Panels & Flooring	6/30/2009	5,822	10	3,594	582	4,176	582	4,758	1,064
Boiler	7/15/2009	102,080	20	30,180	5,100	35,280	5,100	40,380	61,620
Ambulance Glass Doors & Window	7/15/2009	11,399	20	3,286	555	3,841	555	4,396	6,712
7.5 ton Roof Top AC Unit	8/15/2009	12,950	10	7,205	1,295	8,500	1,295	9,795	3,155
Stainless Steel in Kitchen	8/28/2009	1,780	15	647	119	766	119	885	895
Carpeting in Truro Lounge	2/28/2010	4,309	5	4,309	-	4,309	-	4,309	-
Basement Flooring	11/30/2010	19,009	5	19,009	-	19,009	-	19,009	-
Basement Renovations	11/30/2010	34,478	20	12,067	1,724	13,791	1,724	15,515	18,963
Roof top AC & Electrical	11/22/2010	37,704	20	13,196	1,885	15,081	1,885	16,966	20,738
Cabinet for Beauty Salon	12/24/2010	2,045	15	954	136	1,090	136	1,226	819
Painting	12/24/2010	2,650	5	2,650	-	2,650	-	2,650	-
Metal doors for Elevator Vestib	12/17/2010	1,488	10	1,042	149	1,191	149	1,340	148
3 Automatic door openers & devic	6/20/2011	6,251	10	4,376	625	5,001	625	5,626	625
Add electrical for AC Rooftop	1/31/2011	1,195	20	419	60	479	60	539	657
Automatic grease trap system	5/18/2011	4,023	10	2,816	402	3,218	402	3,620	403
Electrical for Steam Table	3/20/2011	897	20	314	45	359	45	404	493
Vinyl wallboard/dividers/comers	5/5/2011	3,160	10	2,212	316	2,528	316	2,844	316
telephone system upgrades	6/29/2011	11,344	10	7,940	1,134	9,074	1,134	10,208	1,136
Acoustic Ceiling Tiles-resident	5/12/2012	13,887	8	9,815	1,636	11,451	1,636	13,087	(0)
Cabinets for 4 med. 2 nourishme	5/21/2012	18,878	15	7,552	1,259	8,811	1,259	10,070	8,808
Electrical outlets in patient rooms	9/12/2012	8,808	15	3,523	587	4,110	587	4,697	4,111
Wall Protection	7/25/2012	11,334	10	6,800	1,133	7,933	1,133	9,066	2,268
Wallpaper of Resident Rooms	12/17/2012	24,632	5	24,632	-	24,632	-	24,632	-
Vinyl flooring for rehab gym	12/31/2013	9,341	10	3,736	934	4,670	934	5,604	3,737
Carpet for admin/nursing	9/8/2014	3,026	5	2,420	605	3,025	-	3,025	0
Replace floor in shower stall on	2/16/2015	2,263	10	678	226	904	226	1,130	1,133
Resident Bathroom Floors	4/21/2015	41,131	10	12,339	4,113	16,452	4,113	20,565	20,566
VCT for resident floor repairs	4/21/2015	1,870	10	561	187	748	187	935	935
Painting resident room bathroom	5/27/2015	10,210	5	6,126	2,042	8,168	2,042	10,210	(0)
Shower rooms flooring replacement	9/15/2015	16,683	10	5,004	1,668	6,672	1,668	8,340	8,343
Walkcovering Bliss Library	6/9/2015	2,993	5	1,797	599	2,396	599	2,993	0
Condensing unit walk-in cooler	11/30/2015	5,965	15	796	398	1,194	398	1,592	4,373
Front Entrance doors/owerPati	12/10/2015	8,430	10	1,690	845	2,535	845	3,380	5,070
Prep on Bliss shower stalls	11/1/2015	2,956	10	592	296	888	296	1,184	1,772
Cabinet fronts & backsplashes in	12/30/2015	1,370	15	182	91	273	91	364	1,006
A/C System 12 Airhandling Units	4/1/2016	83,590	15	11,146	5,573	16,719	5,573	22,292	61,298
2 Exterior Doors - Front entrance	2/1/2016	380	10	76	38	114	38	152	228
4 pairs metal smoke doors	3/31/2018	6,146	20	-	307	307	307	614	5,532
Insulated Glass Replacement	3/31/2018	14,475	20	-	724	724	724	1,448	13,027
Replacement of 2- 325 gallon hot water tank	6/30/2018	34,775	20	-	1,739	1,739	1,739	3,478	31,297
New Electronic Mixing Valve	9/30/2018	11,125	20	-	556	556	556	1,112	10,013
building exterior cleaning & painting of window frames	9/30/2019	62,500	20	-	-	-	3,125	3,125	59,375
Total for (Building Improvements)		\$ 1,247,933		\$ 583,654	\$ 78,188	\$ 631,842	\$ 80,659	\$ 712,501	535,432

Fixed Equipment

WEST HARTFORD HEATH AND REHAB CENTER
DEPRECIATION SCHEDULES
 September 30, 2019

Description	Date of Acquisitions	Historical Cost	Useful Life (in years)	2017		2018		2019		2019	Net Book Value
				Acc. Dep	Depreciation	Acc. Dep	Depreciation	Acc. Dep	Depreciation		
300 KW Diesel Generator	12/28/2011	\$ 71,304	20	\$ 21,391	3,565	24,956	3,565	28,521		42,783	
Blinds	7/25/2012	23,045	5	23,045	-	23,045	-	23,045		-	
Vulcan gas range	5/25/2012	5,580	10	3,348	558	3,906	558	4,464		1,116	
Zone Valve Replacement Heat S	8/31/2013	13,735	15	4,579	916	5,495	916	6,411		7,324	
Zoning for 3 AC Units	3/7/2013	8,100	10	4,050	810	4,860	810	5,670		2,430	
Resident bathroom light fixtures	5/21/2014	4,562	10	1,825	456	2,281	456	2,737		1,826	
5 replacement toilets & tanks for new radiator coil	2/16/2015	1,119	20	168	56	224	56	280		839	
Res room window shades + 3 off	4/28/2016	3,670	5	1,468	734	2,202	734	2,936		734	
Replace RTU #6	11/30/2018	31,132	15	-	-	-	-	2,075		29,057	
	2/28/2019	24,865	15	-	-	-	-	1,658		23,207	
Total for (Fixed Equipment)		\$ 187,112		\$ 59,873	\$ 7,095	\$ 66,968	\$ 10,828	\$ 77,796		109,316	
Land Improvements											
Split Rail/Chain Link Fencing	4/30/2009	\$ 7,927	15	\$ 3,634	528	4,162	528	4,690		3,237	
Repair Patio and Sidewalk	6/18/2009	29,215	15	12,161	1,948	14,109	1,948	16,057		13,158	
Trenching for Exterior Lighting	6/26/2009	6,006	15	2,481	400	2,881	400	3,281		2,725	
Demo and Rebuild South Wall Driveway	6/30/2009	6,106	20	1,884	305	2,189	305	2,494		3,611	
Facility Sign	6/30/2009	54,060	8	41,714	6,758	48,472	5,588	54,060		(0)	
Facility Sign	11/7/2011	5,911	10	3,546	591	4,137	591	4,728		1,182	
Sidewalk Concrete Replacement	5/12/2012	6,137	15	2,455	409	2,864	409	3,273		2,864	
Patio Expansion Cautiking	10/31/2012	1,154	15	385	77	462	77	539		615	
Exterior Signs	6/9/2015	4,281	10	1,284	428	1,712	428	2,140		2,141	
Total for (Land Improvements)		\$ 120,797		\$ 69,545	\$ 11,444	\$ 80,989	\$ 10,274	\$ 91,263		29,534	
Moveable Equipment											
80 Beds	12/8/2008	\$ 101,641	12	\$ 67,691	8,470	76,161	8,470	84,631		17,010	
80 Beds	01/19/09	99,916	12	66,107	8,326	74,433	8,326	82,759		17,158	
160 Resident Room Chairs	2/26/2009	72,992	15	36,861	4,866	41,727	4,866	46,593		26,399	
160 Bedside Cabinets	3/24/2009	50,543	15	24,429	3,370	27,799	3,370	31,169		19,374	
Kitchen Equipment	7/31/2009	13,924	10	8,083	1,392	9,475	1,392	10,867		3,057	
2 100lb washers & 2 75 lb Dryers	6/30/2010	49,401	10	39,521	4,940	44,461	4,940	49,401		0	
Food Carts	12/31/2009	17,996	10	14,397	1,800	16,197	1,799	17,996		(0)	
5 tilt tables for tranquility	6/21/2011	2,935	15	1,370	196	1,566	196	1,762		1,173	
tee machines	6/1/2011	8,748	10	6,124	875	6,999	875	7,874		874	
stamm table	3/21/2011	2,330	10	1,631	233	1,864	233	2,097		233	
therapy mat table	3/29/2011	4,621	10	3,235	462	3,697	462	4,159		462	
therapy table w/tilt	12/7/2010	8,930	15	4,167	595	4,762	595	5,357		3,573	
weight rack	11/02/2011	1,093	15	510	73	583	73	656		437	
EMAR/ETAR Computer Equip	8/3/2011	28,744	5	28,744	-	28,744	-	28,744		-	
Computer Equipment EMAR/ETAR	10/1/2011	24,097	5	24,097	-	24,097	-	24,097		-	
Loange furniture for 3 resident	8/27/2012	9,183	15	3,673	612	4,285	612	4,897		4,286	
13 Elo touch screen computers	9/21/2012	16,328	5	16,328	-	16,328	-	16,328		-	
Install 13 ELO Touch Computers	10/31/2012	3,597	5	3,597	-	3,597	-	3,597		-	
24 Dining Room Chairs Harmony	8/29/2013	5,611	15	1,870	374	2,244	374	2,618		2,993	
New Plate Warming for Kitchen	2/20/2013	3,479	10	1,739	348	2,087	348	2,435		1,043	
Recumbent Stepper Machine	6/20/2013	4,694	10	2,347	469	2,816	469	3,285		1,409	
5 New timeclock & software	4/30/2014	19,262	10	7,705	1,926	9,631	1,926	11,557		7,705	
Convection Oven	9/8/2014	3,855	10	1,541	385	1,926	385	2,311		1,543	
10 Sleeper Sofa Chairs Bliss	12/22/2014	10,533	15	2,106	702	2,808	702	3,510		7,023	
2-75lb. Uninme gas dryers and 1	4/21/2015	27,979	10	8,394	2,798	11,192	2,798	13,990		13,989	
61 resident bathroom mirrors	2/16/2015	1,811	10	543	181	724	181	905		906	
Camera Rear Parking Lot	5/27/2015	4,035	5	2,421	807	3,228	807	4,035		(0)	
Recover 158 resident room chair	7/23/2015	14,581	10	4,374	1,458	5,832	1,458	7,290		7,291	
5 Pan Electric steamer Kitchen	3/1/2016	6,646	10	1,330	665	1,995	665	2,660		3,987	
2019 Disposals											
2 Elo touch screen computers	09/21/12	(2,512)		-	-	-	-	(2,512)		-	
Install 2 ELO Touch Computers	10/31/12	(553)		-	-	-	-	(553)		-	
Total for (Moveable Equipment)		\$ 616,439		\$ 384,932	\$ 46,323	\$ 431,255	\$ 46,322	\$ 474,512		141,927	
Total Related Party Assets		\$ 2,177,847		\$ 1,070,438	\$ 143,328	\$ 1,213,766	\$ 148,361	\$ 1,359,062		818,785	
Total Assets		\$ 5,119,277		\$ 4,423,708	\$ 285,078	\$ 3,419,385	\$ 285,073	\$ 3,564,802		1,554,475	
PV Variance Roll Forward - Mov. Equip		-		223	446	669	669	1,115		(223)	
PV Variance Roll Forward - Leasehold		-		1,602	1,602	3,204	4,806	8,010		(1,602)	
Cost Report Total		\$ 5,119,277		\$ 4,425,533	\$ 286,903	\$ 3,423,035	\$ 290,548	\$ 3,573,927		1,552,650	

Related Party Leasehold Improvements Depreciation (Disclosed on pg 4 of CR)
 Related Party Moveable Equipment Depreciation (Disclosed on pg 4 of CR)
 Related Party Non-Moveable Equipment Depreciation (Disclosed on pg 4 of CR)

Leasehold Improvements	\$ 2,013,503	\$ 1,947,866	\$ 65,274	\$ 2,090,238	\$ 69,699	\$ 1,511,734	\$ 501,769
Additions	41,834	968	4,689	5,657	4,001	9,658	32,176
Disposals	(73,136)	-	-	(558,203)	-	(73,136)	-
Related Party Leasehold Improvements	1,311,796	638,257	88,601	726,858	87,808	814,666	497,130
Related Party Additions	62,500	-	1,031	1,031	3,125	4,156	58,344
Historical Variance	(12,903)	-	-	-	-	-	-
Total	\$ 3,356,498	\$ 2,574,188	\$ 159,595	\$ 2,175,581	\$ 164,633	\$ 2,267,078	\$ 1,089,420
Moveable Equipment	\$ 905,522	\$ 1,321,418	\$ 58,253	\$ 1,379,671	\$ 52,373	\$ 720,500	\$ 185,021
Additions	47,121	9,847	8,826	18,673	5,931	24,604	22,517
Disposals	(63,455)	-	-	(713,838)	-	(63,455)	-
Related Party Moveable Equipment	619,504	384,933	44,028	428,961	46,322	475,283	144,221
Related Party Disposals	(3,065)	-	-	2,295	-	(3,065)	-
Total	\$ 1,505,626	\$ 1,716,197	\$ 111,107	\$ 1,115,761	\$ 104,626	\$ 1,153,867	\$ 351,759
Non-movable Equipment	\$ 70,041	\$ 74,997	\$ 4,708	\$ 79,705	\$ 4,708	\$ 67,053	\$ 2,988
Disposals	-	-	-	(17,360)	-	-	-
Related Party Non-movable Equipment	131,115	59,873	7,395	66,968	7,095	74,063	57,452
Related Party Additions	55,997	-	-	-	3,733	3,733	52,264
Total	\$ 257,153	\$ 134,870	\$ 11,803	\$ 129,313	\$ 15,536	\$ 144,849	\$ 112,304

Per Trial Balance	2,561,067				135,725	1,858,962	702,105
Per Cost Report Depreciation	5,119,277	4,425,256	282,505	3,420,655	284,795	3,565,794	1,553,483
Related Party	2,177,847	1,083,063	140,755	1,226,113	148,083	1,368,836	809,012
F/S vs C/R Variance	(380,363)		(282,305)	(2,194,542)	(149,070)	(337,996)	(42,366)
Rounding Variance							(1)

F/S vs C/R Depreciation / NBV Variance (149,070) (42,367)

F/S vs C/R NBV - Page 31, Line 9B (42,367)
 F/S vs C/R Dep. - Page 36, Line F2 (149,070)
 Reserve for Dep. - Page 35, Line A3 809,012

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

Name of Facility Brookview Corporation d/b/a West Ha	License No. 1057	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		160			
6. Square Footage					
7. Acquisition Cost					
a. Land					
b. Building					
Part B - Owner and Related Parties		1st Mortgage	2nd Mortgage	3rd Mortgage	4th 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		6,811,600			
f. Principal balance outstanding as of 9/30/19		6,030,171			
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
Brookview Corporation d/b/a West Ha		1057	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
Brookview Corporation d/b/a West		1057		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				\$	125	125	
13. Total All Interest Expense (12B7 + 12C3 + 12D)				\$	125	125	
14. Insurance							
a. Insurance on Property (buildings only)				\$	112,875	112,875	
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)				\$	112,875	112,875	
15. Total All Expenditures (A-13 thru C-14)				\$	15,128,509	15,128,509	

D. Adjustments to Statement of Expenditures

Name of Facility				License No.	Report for Year Ended	Page	of
Brookview Corporation d/b/a West Hartford Health & Rehabil				1057	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	\$ 291,402	291,402		
7.			Other - See attached Schedule	\$ 1,450	1,450		
Pages 15 & 16 - Administrative and General							
8.			Discriminatory Benefits	\$			
9.	15	1c	Bad Debts	\$ 249,179	249,179		
10.			Accounting	\$			
10a.			Legal	\$ 5,533	5,533		
11.			Telephone	\$			
12.	15	1h2	Cellular Telephone	\$ 328	328		
13.			Life insurance premiums on the life of Owners, Partners, Operators	\$			
14.	16	L3	Gifts, flowers and coffee shops	\$ 7,016	7,016		
15.			Education expenditures to colleges or universities for tuition and related costs for owners and employees	\$			
16.			Travel for purposes of attending conferences or seminars outside the continental U.S. Other out-of-state travel in excess of one representative	\$			
17.			Automobile Expense (e.g. personal use)	\$			
18.	16	m2/3	Unallowable Advertising *	\$ 59,513	59,513		
19.	15	1k1	Income Tax / Corporate Business Tax	\$ 20,750	20,750		
20.	16	m10	Fund Raising / Contributions	\$ 1,025	1,025		
21.			Unallowable Management Fees	\$			
22.			Barber and Beauty	\$			
23.			Other - See attached Schedule	\$ 186	186		
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)				\$ 636,382	636,382		

* 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)
13	8c	Respiratory Therapist	\$ 1,450		
Total Other Fees Adjustments			\$ 1,450	\$ -	\$ -

Schedule of Other A&G Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
16	m13	Late Fees & Fines	\$ 186		
Total Other A&G Adjustments			\$ 186	\$ -	\$ -

**West Hartford Health Care 2019 Cost Report
Disallowance Schedule for Cell Phones
9/30/2019**

	<u>Amount</u>
Total Cell Phone Exp acct #51300	1,768 TB Linked
Cell Phone Allowed Based on Bed Capacity	4
Monthly Allowable amount per Cell Phone	\$ 30
Months in Cost Report Year	<u>12</u>
Total Allowable Cost	\$ 1,440
Disallowed Cell Phone (Page 28, Line 12)	<u><u>\$ 328</u></u>

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

Name of Facility				License No.	Report for Year Ended	Page	of
Brookview Corporation d/b/a West Hartford Health & Rehab				1057	9/30/2019	29	37
Item No.	Page No.	Line No.	Item Description	Total Amount of Decrease	CCNH	RHNS	(Specify)
Subtotals Brought Forward				\$ 636,382	636,382		
Page 20 - Resident Care Supplies***							
27.	20	5a2	Prescription Drugs	\$ 269,569	269,569		
28.	20	5d	Ambulance/Limousine	\$ 9,084	9,084		
29.	20	5f	X-rays, etc	\$ 13,228	13,228		
30.	20	5h	Laboratory	\$ 34,721	34,721		
31.			Medical Supplies	\$			
32.	20	5e2	Oxygen (non emergency)	\$ 6,008	6,008		
33.			Occupational Therapy	\$			
34.			Other - See Attached Schedule	\$ 52,163	52,163		
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	\$ 14,961	14,961		
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)				\$ 1,036,116	1,036,116		

*** 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	5i	Cable Television Disallowance (See Attached)	\$ 199		
20	5l	IV Therapy Expense	25,555		
20	5l	Supplies Patient Personal	1,487		
20	5l	Nursing Equipment Med A	18,035		
20	5l	Equipment Rental Relating to Occupational Therapy (See Attached)	6,887		
Total Other Ancillary Costs			\$ 52,163	\$ -	\$ -

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	Reimbursements for Workers Comp Grant / Union	\$ 14,961		
Total Other Adjustments			\$ 14,961	\$ -	\$ -

Schedule of Unallowable Building Interest

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

West Hartford Health Care
 OT Therapy Equipment Rental Disallowance
 September 30, 2019

	<u># of Treatments Page 9</u>	<u>Percentage</u>
Physical Therapy	15,464	47.59%
Occupational Therapy	17,031	52.41% {a}
	<hr/> 32,495	<hr/> 100.00%

Therapy Equipment Rental Pg. 20 / Line 5j 13,140 {b}

OT Equipment Rental Disallowed Pg. 29 attachment **6,887** {a} x {b}

**West Hartford Health Care 2019 Cost Report
 Disallowance Schedule for Cable TV
 9/30/2019**

	<u>Amount</u>	
Total Cable TV Expense	3,799	TB Linked
Monthly Allowable amount	\$ 300	
Months in Cost Report Year	<u>12</u>	
Total Allowable Cost	\$ 3,600	
Partial Year Cost Report (365 out of 365 Days)	\$ 365	
Days in Cost Report Year	<u>365</u>	
Partial Year Allowable %	100.00%	
Revised Allowable Cost	3,600	
Disallowed Cable TV	<u><u>\$ 199</u></u>	

F. Statement of Revenue

Name of Facility	License No.	Report for Year Ended		Page	of
Brookview Corporation d/b/a West Hartfi 1057		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>)	\$ 17,563,290	17,563,290			
b. Medicaid Room and Board Contractual Allowance **	\$ (7,869,221)	(7,869,221)			
2. a. Medicaid (<i>All other states</i>)	\$				
b. Other States Room and Board Contractual Allowance **	\$				
3. a. Medicare Residents (<i>all inclusive</i>)	\$ 1,701,642	1,701,642			
b. Medicare Room and Board Contractual Allowance **	\$ 190,931	190,931			
4. a. Private-Pay Residents and Other	\$ 3,436,137	3,436,137			
b. Private-Pay Room and Board Contractual Allowance **	\$ (242,739)	(242,739)			
II. Other Resident Revenue					
1. a. Prescription Drugs - Medicare	\$ 166,430	166,430			
b. Prescription Drugs - Medicare Contractual Allowance **	\$ (165,640)	(165,640)			
c. Prescription Drugs - Non-Medicare	\$ 157,827	157,827			
d. Prescription Drugs - Non-Medicare Contractual Allowance **	\$ (157,827)	(157,827)			
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	\$ 222,884	222,884			
b. Physical Therapy - Medicare Contractual Allowance **	\$ (135,835)	(135,835)			
c. Physical Therapy - Non-Medicare	\$ 180,373	180,373			
d. Physical Therapy - Non-Medicare Contractual Allowance **	\$ (181,436)	(181,436)			
4. a. Speech Therapy - Medicare	\$ 155,514	155,514			
b. Speech Therapy - Medicare Contractual Allowance **	\$ (91,892)	(91,892)			
c. Speech Therapy - Non-Medicare	\$ 86,260	86,260			
d. Speech Therapy - Non-Medicare Contractual Allowance **	\$ (79,578)	(79,578)			
5. a. Occupational Therapy - Medicare	\$ 245,456	245,456			
b. Occupational Therapy - Medicare Contractual Allowance **	\$ (235,933)	(235,933)			
c. Occupational Therapy - Non-Medicare	\$ 212,380	212,380			
d. Occupational Therapy - Non-Medicare Contractual Allowance **	\$ (131,217)	(131,217)			
6. a. Other (<i>Specify</i>) - Medicare	\$ 17	17			
b. Other (<i>Specify</i>) - Non-Medicare	\$ (66,524)	(66,524)			
III. Total Resident Revenue (Section I. thru Section II.)	\$ 14,961,299	14,961,299			
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>)	\$ 15,561	15,561			
V. Total Other Revenue (I thru 8)	\$ 15,561	15,561			
VI. Total All Revenue (III + V)	\$ 14,976,860	14,976,860			

* 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	RIINS	(Specify)
		-		
30 II 6a	Lab Medicare A	\$ 20,940		
30 II 6a	Allow Lab MCR A	(20,940)		
30 II 6a	X-ray Medicare A	6,216		
30 II 6a	Allow X-ray MCR A	(6,216)		
30 II 6a	Allow Pharmacy MCR B	17		
Total Other Resident Revenue - Medicare		\$ 17	\$ -	\$ -

Schedule of Other Non-Medicare Resident Revenue

Related Exp

Page Ref	Description	CCNH	RIINS	(Specify)
		-		
30 II 6b	Lab Insurance Other	\$ 21,401		
30 II 6b	Allow Lab Insurance Other	(21,401)		
30 II 6b	X-ray Insurance Other	6,020		
30 II 6b	Allow X-ray Insurance Other	(6,020)		
30 II 6b	Retro Ancillaries	(66,524)		
Total Other Resident Revenue		\$ (66,524)	\$ -	\$ -

Interest Income

Account

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

Schedule of Other Revenue

Page Ref	Description	CCNH	RIINS	(Specify)
		-		
30 IV 8	Class Action Settlement Relating to PY	\$ 600		
30 IV 8	Reimbursements for Workers Comp Grant / Union (Disallowed on Pg 29a)	14,961		
Total Other Revenue		\$ 15,561	\$ -	\$ -

G. Balance Sheet

Name of Facility	License No.	Report for Year Ended	Page	of
Brookview Corporation d/b/a West Har	1057	9/30/2019	31	37
Account			Amount	
Assets				
A. Current Assets				
1. Cash (<i>on hand and in banks</i>)			\$	528,130
2. Resident Accounts Receivable (Less Allowance for Bad Debts)			\$	3,470,359
3. Other Accounts Receivable (Excluding Owners or Related Parties)			\$	
4. Inventories			\$	87,844
5. Prepaid Expenses			\$	65,821
a. Prepaid Insurance	51,405			
b. Prepaid Real/Property Taxes	2,251			
c. Prepaid Other	12,165			
d. See Schedule				
6. Interest Receivable			\$	
7. Medicare Final Settlement Receivable			\$	
8. Other Current Assets (<i>itemize</i>)			\$	2,828
Due from Brookview Realty	2,828			
See Schedule				
A-9. Total Current Assets (Lines A1 thru 8)			\$	4,154,982
B. Fixed Assets				
1. Land			\$	
2. Land Improvements	*Historical Cost _____		\$	
	Accum. Depreciation _____	Net		
3. Buildings	*Historical Cost _____		\$	
	Accum. Depreciation _____	Net		
4. Leasehold Improvements	*Historical Cost <u>3,356,497</u>		\$	1,089,419
	Accum. Depreciation <u>2,267,078</u>	Net		
5. Non-Movable Equipment	*Historical Cost <u>257,153</u>		\$	112,304
	Accum. Depreciation <u>144,849</u>	Net		
6. Movable Equipment	*Historical Cost <u>1,505,628</u>		\$	351,760
	Accum. Depreciation <u>1,153,868</u>	Net		
7. Motor Vehicles	*Historical Cost _____		\$	
	Accum. Depreciation _____	Net		
8. Minor Equipment-Not Depreciable			\$	
9. Other Fixed Assets (<i>itemize</i>)			\$	(42,366)
F/S vs C/R NBV	(42,367)			
See Schedule	1			
B-10. Total Fixed Assets (Lines B1 thru 9)			\$	1,511,117

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

(Carry Total forward to next page)

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	
31	B9	Rounding	\$ 1
Total Other Fixed Assets (Itemize)			\$ 1

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	
Total Other Current Liabilities (Itemize)			\$ -

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

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

G. Balance Sheet (cont'd)

Name of Facility Brookview Corporation d/b/a West Hart	License No. 1057	Report for Year Ended 9/30/2019	Page 32	of 37
Account			Amount	
Total Brought Forward:			\$	5,666,099
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>)			\$	
Name and Address		Amount	Loan Date	

7. Other Assets (<i>itemize</i>)			\$	

See Schedule				
D-8. Total Investments and Other Assets (Lines D1 thru 7)			\$	
D-9. Total All Assets (Lines A9 + B10 + C8 + D8)			\$	5,666,099

* 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 Brookview Corporation d/b/a West Hartford	License No. 1057	Report for Year Ended 9/30/2019	Page 34	of 37
Account			Amount	
Total Brought Forward:			1,877,048	
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>)				\$ 635,987
Name and Address of Lender	Amount	Loan Date		
Due to Avon Health Care	635,987			
4. Other Long-Term Liabilities (<i>itemize</i>)				\$

See Schedule				
B-5. Total Long-Term Liabilities (Lines B1 thru 4)				\$ 635,987
C. Total All Liabilities (Lines A-13 + B-5)				\$ 2,513,035

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

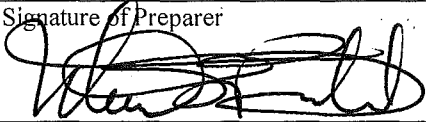
Name of Facility	License No.	Report for Year Ended	Page	of
Brookview Corporation d/b/a West Ha	1057	9/30/2019	35	37
Account			Amount	
A. Reserves				
1. Reserve for value of leased land			\$	
2. Reserve for depreciation value of leased buildings and appurtenances to be amortized			\$	
3. Reserve for depreciation value of leased personal property (<i>Equity</i>)			\$	809,012
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			\$	809,012
B. Net Worth				
1. Owner's Capital			\$	
2. Capital Stock			\$	391,000
3. Paid-in Surplus			\$	
4. Treasury Stock			\$	
5. Cumulated Earnings			\$	1,955,631
6. Gain or Loss for Period			\$	(2,579)
7. Total Net Worth			\$	2,344,052
C. Total Reserves and Net Worth			\$	3,153,064
D. Total Liabilities, Reserves, and Net Worth			\$	5,666,099

H. Changes in Total Net Worth

Name of Facility	License No.	Report for Year Ended	Page	of		
Brookview Corporation d/b/a West Hartf	1057	9/30/2019	36	37		
Account			Amount			
A. Balance at End of Prior Period as shown on Report of 09/30/2018			\$	2,346,631		
B. Total Revenue <i>(From Statement of Revenue Page 30)</i>			\$	14,976,860		
C. Total Expenditures <i>(From Statement of Expenditures Page 27)</i>			\$	14,979,439		
D. Net Income or Deficit			\$	(2,579)		
E. Balance			\$	2,344,052		
F. Additions						
1. Additional Capital Contributed <i>(itemize)</i>						
Total Expenses Per Page 27 \$15,128,509						
F/S vs C/R Depreciation (149,070)						
Total F/S Expenses \$14,979,439						
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			\$	2,344,052		

** PP Balance includes PP Adjustment of (\$60,904)

I. Preparer's/Reviewer's Certification

Name of Facility Brookview Corporation d/b/a West	License No. 1057	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 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 Brookview Corporation d/b/a West Hartford Health & Rehabilitation Center 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 West Hartford Health & Rehabilitation Center. 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 West Hartford Health & Rehabilitation Center 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 14, 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 Brookview Corporation d/b/a West Hartford Health & Rehabilitation Center

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: _____
