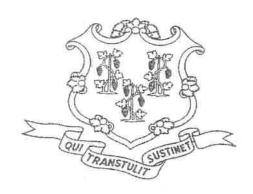
State of Connecticut



Annual Report of Long-Term Care Facility

Cost Year 2022

| Name of Facility (as licensed) | | | | | | | | |
|--|-----------------|---|----------------|----------|---------------|----|------------------------------|--|
| Avon Convalescent Home, Inc., d/ | b/a Avon Health | Center | | | | | | |
| Address (No. & Street, City, State | , Zip Code) | | | | | | | |
| 652 West Avon Road, Avon, CT 06001 | | | | | | | | |
| Type of Facility | | | | | | | | |
| Chronic and Convalescent Nursing Home only (CCNF | I) | Rest Home wit Supervision on (RHNS) | _ | | (Specify) | | | |
| Report for Year Beginning | | Report for Yea | r Ending | | | | | |
| 10/1/2021 | | 9/30/2022 | | | | | | |
| | | | | | | | | |
| License Numbers: | 938-C | RHNS | RHNS (Specify) | | | Me | Medicare Provider 07-5244 | |
| Air | | | | | | | | |
| Medicaid Provider Numbers: | | CNH | RHNS | | | IC | F-IID | |
| | 9381 | | | | | | | |
| For Department Use Only | | | | ı. | | | | |
| Sequence Number Signed and | Date | Sequence N | lumber | Signed a | nd Notariz | ed | Date Received | |
| Assigned Notarized | Received | Assigned Signed and Notarized Date Received | | | Date Received | | | |
| | | | | | | | | |
| | | | | | | | | |

I. Preparer's/Reviewer's Certification

| ST | | | | |
|--|---|--|---------------------------------------|----|
| Name of Facility | License No. | Report for Year Ended | Page | of |
| Avon Convalescent Home, Inc., d/b/a Avon | | 9/30/2022 | 37 | 37 |
| 7 | Check appropriate category | | | |
| ☐ Chronic and Convalescent Nursing Home only (CCNH) | Rest Home with Nursing Supervision only (RHNS) | □ (Specify) | | |
| | Preparer/Reviewer Certifica | ntion | | |
| have read the most recent Federal and personnel as to the possible inclusion regulations. All non-reimbursable experienced in the State rate computation are properly reported as such in this result. | report and am familiar with the applical d State issued field audit reports for the in this report of expenses which are not expenses of which I am aware (except the n system) as a result of reading reports, report on Pages 28 and 29 (adjustments to eement with the books and records, as present the system of | Facility and have inquired of approximate treimbursable under the applicable ose expenses known to be automatinquiry or other services performent of expenditures). Further statement of expenditures of expenditures. | ropriate le tically ed by me | |
| Signature of Preparer. | Title PRINCIPAL | Date Signed 1 / 19 / 23 | | |
| Printed Name of Preparer | | | | |
| Matthew S. Bavolack | | | | |
| Addres Address | | Phone Number | | |
| 555 Long Wharf Drive, New Haven, CT 065 | | 203-781-9600 | | |
| Contacted Person Regarding Additional Info | rmation Needed Regarding This Report | Phone Number | | |
| Russell Schwartz | | 860-673-2521 | | |
| Contact Email Address | | | | |
| | | | | |

russell.schwartz@sbcglobal.net

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State of Connecticut Department of Social Services

55 Farmington Avenue, Hartford, Connecticut 06105

| Data Required for Real Wage Adjus | Data Required for Real Wage Adjustment | | | | | | |
|---|--|------------|------|-----------|-----------|--|--|
| 1 | | | | 1A | 37 | | |
| Name of Facility | Period Cov | ered: | From | То | | | |
| Avon Convalescent Home, Inc., d/b/a Avon Health Center | | | | 10/1/2021 | 9/30/2022 | | |
| Address of Facility | | | | | | | |
| 652 West Avon Road, Avon, CT 06001 | | | | - | | | |
| Report Prepared By | | Phone Num | | Date | | | |
| Marcum LLP | | 203-781-96 | 00 | 1/18/2023 | | | |
| Item | | Total | CCNH | RHNS | (Specify) | | |
| Dietary wages paid | \$ | | | | | | |
| 2. Laundry wages paid | \$ | 4 | | | | | |
| 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) | \$ | N ==== | | | | | |

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

| | | one No. of Fac 0-673 - 3521 | ility | Report for Ye 9/30/2022 | ar Ended | Page 2 | | of 37 |
|---|-------|---------------------------------------|--------|-------------------------|------------|--------------|------|----------|
| Name of Facility (as shown on license) | - | | o. & S | Street, City, Sto | ite, Zip) | | | |
| Avon Convalescent Home, Inc., d/b/a Avon Health Cen | ter | 652 West A | von I | Road, Avon, C | Т 06001 | | | |
| CCNH | | RHNS | | (Specify) | | Medicare I | rovi | der No. |
| License Numbers: 938-C | 4 | | | | | 07-5244 | | |
| Type of Facility (Check appropriate box(es)) | | | | | | | | |
| Chronic and Convalescent Nursing Home only (CCNH) | | st Home with pervision only | | | (Specify |) | | |
| Type of Ownership (Check appropriate box) | | | | | | | | |
| O Proprietorship O LLC O Partnership | 0 | Profit Corp. | | Non-Profit Co | | Government | 0 | Trust |
| If this facility opened or closed during report year provi- | de: | | Date | e Opened | Date Clo | osed | | |
| Has there been any change in ownership | | | | | | | | |
| or operation during this report year? | 0 | Yes | • | No | If "Yes," | explain full | y | |
| | | | | | | | | |
| Administrator | | | | | | | | |
| Name of Administrator | | | | Nursing Ho | | | | |
| Russell Schwartz | | | | Administrat | | 000991 | | |
| | (6. | (Y | C 41 | License 1 | No.: | | | |
| Other Operators/Owners who are assistant administrator | s (fu | ll or part time | oi tr | License 1 | No. I | | | |
| Name N/A | | | | License 1 | NO | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

General Information and Questionnaire Partners/Members

| Name of Facility Avon Convalescent Home, Inc | | License No. | Report for Y 9/30/2022 | ear Ended | Page of 3 |
|---|-------------|------------------|------------------------|-----------|-------------------------|
| Legal Name of Part | | Business Address | | | or Town(s) in egistered |
| N/A | • | | | | |
| Name of Partners/Members | Business Ac | idress | | Γitle | % Owned |
| N/A | | | | | |
| | | | | | |
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General Information and Questionnaire Corporate Owners

| Name of Facility | License No. | ded | Page of | |
|---|--------------------------|---------------------|-------------------|----------------------------|
| Avon Convalescent Home, Inc., d/b/a Avon F | 938-C | 9/30/2022 | | 3A 37 |
| If this facility is owned or operated as a corpo | ration, provide the | following informati | on: | |
| Legal Name of Corporation | Busines | ss Address | State(s) in Whi | ch Incorporated |
| Avon Convalescent Home, Inc., | 652 West Avon R | oad, Avon, CT | CT | |
| d/b/a Avon Health Center | 06001 | | | |
| | | | | |
| Name of Directors, Officers | Busines | ss Address | Title | No. Shares Held by Each |
| Freda Schwartz | 652 West Avon R 06001 | oad, Avon, CT | older / Pres / Se | 100 |
| Russell Schwartz | 652 West Avon R 06001 | oad, Avon, CT | VP / Treasurer | |
| | | | | |
| | | | | |
| | | | | |
| Names of Stockholders Owning at Least 10% of Shares | | | | |
| Freda Schwartz | 652 West Avon R 06001 | oad, Avon, CT | Stockholder | 100 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

State of Connecticut

Annual Report of Long-Term Care Facility

CSP-3B Rev. 10/2005

General Information and Questionnaire Individual Proprietorship

| Name of Facility Avon Convalescent Home, Inc., d/b/a Avon Health | License No. 938-C | Report for Year Ended 9/30/2022 | Page of 3B 37 |
|---|----------------------|---------------------------------|---------------|
| If this facility is owned or operated as an individua | | | |
| Ow | ner(s) of Facility | | |
| | • | | |
| | | | |
| N/A | | | |
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General Information and Questionnaire Related Parties*

| Name of Facility | | License | | | Report for Year Ended | | Page | of |
|---|---|-------------|-----------|------------|---|----------------------|--------------|-----------------------|
| Avon Convalescent Hor | ne, Inc., d/b/a Avon Health Cer | | 938-C | | 9/30/2022 | | 4 | 37 |
| Are any individuals reas | eiving compensation from the fa | ما الحد الم | loted the | مام در مام | | 7CU77 H | NT / 1 T | 1 1 |
| | | • | | _ | | If "Yes," provide th | | |
| marriage, ability to cont | rol, ownership, family or busine | ess asso | ciation? | | Yes O No | complete the inform | nation on Pa | ige 11 of the report. |
| | | | | | | | | |
| Are any individuals or c | ompanies which provide goods | or serv | ices, | | | | | |
| including the rental of p | roperty or the loaning of funds | to this f | acility, | | | | | |
| related through family a | ssociation, common ownership | , control | l, or bus | iness | | | | |
| association to any of the | owners, operators, or officials | of this f | acility? | | | If "Yes," provide th | e following | information: |
| | | | | | | | | |
| | | Als | so Provi | des | | Indicate Where | | |
| | | Good | ls/Servi | ces to | | Costs are Included | | |
| Name of Related | Business | Non-F | Related I | Parties | Description of Goods/Services | in Annual Report | Cost | Actual Cost to the |
| Individual or Company | Address | Yes | No | %** | Provided | Page # / Line # | Reported | Related Party |
| West Hartford Health and | 130 Loomis Drive, West Hartford, | 0 | 0 | | | | | |
| Rehabilitation Center | CT 06107 | | • | | Clinical Liason (Shared employee allocated | Pg . 13 / Line B12 | 35,684 | 35,684 |
| Avon Realty, LLC | 652 West Avon Road, CT 06001 | 0 | • | | Depreciation (Movable Equipment) | Page 22 / Line 7d | 3,374 | 3,374 |
| Avon Realty, LLC | 652 West Avon Road, CT 06001 | 0 | • | | Depreciation (Leasehold Improvements) | Page 22 / Line 8c | 1,173 | 1,173 |
| Avon Realty, LLC | 652 West Avon Road, CT 06001 | 0 | • | | Rental of Real Property | Various See Attached | 551,935 | 551,935 |
| Brookview / Avon Realty | Various | 0 | • | | Related Party Due To / From | Page 32 / Line D6 | 620,758 | 620,758 |
| West Hartford Health and | 130 Loomis Drive, West Hartford, | 0 | 0 | | | | | |
| Rehabilitation Center | CT 06107 | | | | Property & Liability Insurance (Shared Poli | Page 27 / Line 14a | 108,172 | 108,172 |
| West Hartford Health and Rehabilitation Center | 130 Loomis Drive, West Hartford, CT 06107 | 0 | ⊙ | | Worker's Compensation Policy (Shared Poli | Page 15 / Line 1a1 | 117,389 | 117,389 |
| 200 maion Conto | 0.1 00107 | | | | TOTACL'S COMPENSATION FORCE (SHALED FOR | rage 137 Lille 141 | 117,309 | 117,309 |
| | | 0 | 0 | | | | | |
| | | 0 | 0 | | | | | |

^{*} Use additional sheets if necessary.

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

Avon Health Care Reconciliation of Related Party Rent September 30, 2022

| | Cost Reported | | Actual Cost to Provider | Page on Cost Report | Line on Page |
|--|---------------|------|----------------------------|---------------------------|-----------------|
| Portion Related to Taxes | 123,688 | {a} | 123,688 | 22 | 10b |
| Portion Related to Personal Property Taxes | 5,549 | {a} | 5,549 | 22 | 10c |
| Portion Related to Insurance | 90,694 | {a} | 90,694 | 27 | 14a |
| Portion Related to Mortgage Insurance | 17,807 | {a} | 17,807 | 22 | 9 |
| Sewage Use | - | {a} | = | 22 | 6f |
| Actual Rent per Cost Report | 314,197 | {a}_ | 314,197 | 22 | 9 |
| Total | 551,935 | | 551,935 | | |

Tickmarks {a}

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

General Information and Questionnaire Basis for Allocation of Costs

| Name of Facility | License No | | Report for Year Ended | Page o | of |
|--|---------------|--------------|---------------------------------------|----------------|---------|
| Avon Convalescent Home, Inc., d/b/a Avon Hea | 938-C | | 9/30/2022 | 5 3 | 37 |
| If the facility is licensed as CDH and/or RCH or p | rovides AI | DS 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 | | | square feet serviced | | |
| | | Number of | hours of routine care provided | by EACH | |
| Nursing | | | classification, i.e., Director (or C | - | |
| | | Registered | Nurses, Licensed Practical Nur | ses, Aides and | d |
| | | Attendants | | | |
| Direct Resident Care Consultants | | Number of | hours of resident care provided | by EACH | |
| | | | See listing page 13) | | |
| Maintenance and operation of plant | | Square feet | | | |
| Property costs (depreciation) | | Square feet | | | |
| Employee health and welfare | | Gross salar | | | |
| Management services | | | e cost center involved | | |
| All other General Administrative expenses | | | rect and Allocated Costs | | |
| The preparer of this report must answer the follow | ving question | ons applicat | ole to the cost information provi | ded. | |
| 1. In the preparation of this Report, were all | • Yes | O No | If "No," explain fully why such | ı allocation w | vas not |
| costs allocated as required? | O 1 C3 | 0 110 | made. | | |
| N/A | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 2. Explain the allocation of related company expe | enses and a | ttach copy o | of appropriate supporting data. | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 3. Did the Facility appropriately allocate and self- | -disallow d | irect and in | direct costs to non-nursing hom | e cost centers | s? |
| (e.g., Assisted Living, Home Health, Outpatier | nt Services, | Adult Day | Care Services, etc.) | | |
| | ⊙ Yes | O No | If "No," explain fully why such made. | allocation w | vas not |
| 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 Y | ear Ended | | Page of |
|--|----------|------------------|-----------------------------|--------------|-----------|-----------|---------|
| Avon Convalescent Home, Inc., d/b/a Avo | n Health | Center | 938-C | 9/30/2022 | | | 6 37 |
| | | ed * to ners, | | | | | |
| | Oper | ators, | | | | Annual | |
| | Off | icers | | Date of | Term of | Amount | Amount |
| Name and Address of Lessor | Yes | No | Description of Items Leased | Lease** | Lease | of Lease | Claimed |
| U,S, Bank Equipment Finance | 0 | • | 2 Copy Machines | 12/01/19 | 63 Months | 7,494 | 7,494 |
| Quadient Leasing | 0 | 0 | Postage Machines | 07/01/20 | 63 Months | 1,056 | 1,056 |
| | 0 | • | | | | | |
| | 0 | • | | | | | |
| | 0 | 0 | | | | | |
| | 0 | 0 | | | | | |
| | 0 | 0 | | | | | |
| | 0 | 0 | | | | | |
| | 0 | 0 | | | | | |
| | 0 | 0 | | | | | |
| Is a Mileage Log Book Maintained for All | Leased V | ehicles | ? O Yes | • | No | Total *** | 8,550 |

^{*} 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 License No. | Report for Year Ended | | Page OI |
|---|---|---------------------|-----------------------------|
| Avon Convalescent Home, Inc., d/t 938-C | 9/30/2022 | | 7 37 |
| The records of this facility for the period covered by this report | were maintained on the following basis: | | |
| Accrual O Cash O Modified Cash | | | |
| Is the accounting basis for this | | | |
| period the same as for the • Yes | If "No," explain. | | |
| previous period? O No | | | |
| N/A | | | |
| | | | |
| Independent Accounting Firm | | | |
| Name of Accounting Firm | Address (No. & Street, City, State, Zip Code) | 3.0.6000 | |
| 1 Cohn Reznick | 1780 Glastonbury Blvd., Glastonbury, CT | | |
| 2 LTC Consulting Services | 100 Boulevard of the Americas; Lakewoo | | |
| 3 Marcum | 555 Long Warf Drive; New Haven, CT 06 | 5511 | |
| 4 Services Provided by This Firm (describe fully) | | | |
| 1 General Accounting; Year End Work; Tax Returns | | \$ | 10,150 |
| 2 Monthly Accounting Services | | \$ | 6,775 |
| 3 Cost Reports; Rate Matters | | \$ | 23,717 |
| 4 | | \$ | |
| | | Charge for S | Services Provided |
| | | \$ | 40,642 |
| Are These Charges Reflected in the Expenditure Portion of This Report? If Yo | es, Specify Expense Classification and Line No. | | |
| ⊙ Yes O No Page 15, Line 1d | | | |
| Legal Services Information | | | |
| Name of Legal Firm or Independent Attorney | | Telephone N | |
| 1 Jackson, Lewis, Schnitzle | | 914-328-040 | |
| 2 Murtha Cullina | | 860-240-600 | |
| 3 SB2, Inc. | | 717-585-718 | |
| 4 Musillo Unkenholt LLC | | 513-381-84 | 72 |
| 5 | | | |
| Address (No. & Street, City, State, Zip Code) | | | |
| 1 1 North Broadway; White Planes, NY 10601 | | | |
| 185 Asylum Street; Hartford, CT 06013 1426 N. 3rd Street, Suite 200; PO Box 5400, Harrisburg, PA | A 17102 | | |
| | 1/102 | | |
| 4 302 West Third Street Suite 710 Cincinnati, OH 45202 | | | |
| Services Provided by This Firm (describe fully) | | | |
| 1 Labor Relations Advice Counsel | | \$ | 9,088 |
| 2 Regulatory Compliance & Collections (\$6,293 Collections Disallow Pag | e 28) | \$ | 16,913 |
| 3 Regulatory Advisory Services | | \$ | 20,980 |
| 4 Immigration | | \$ | 11,555 |
| 5 | | | |
| | | \$ | |
| | | \$ | Services Provided |
| | | \$ | Services Provided 58,536 |
| Are These Charges Reflected in the Expenditure Portion of This Report? If Yo | es, Specify Expense Classification and Line No. | \$ Charge for \$ | |
| Are These Charges Reflected in the Expenditure Portion of This Report? If Yo Page 15, Line 1e No | es, Specify Expense Classification and Line No. | \$ Charge for \$ | |

Schedule of Resident Statistics

| Name of Facility | | | License N | No. | | | Report fo | r Year Ende | ed | | Page | of |
|---|---------------------|------------------------|------------------------|--------------------|--------|------------|------------|-------------|-------|-----------|------------|-----------|
| Avon Convalescent Home, Inc., d/b/a Avon Health C | enter | | 93 | 38-C | | | 9/30/2022 | 2 | | | 8 | 37 |
| | | | | | H | Period 10/ | 1 Thru 6/. | 30 | | Period 7/ | 1 Thru 9/3 | .0 |
| | Total All Levels | Total CCNH Level | Total RHNS Level | Total (Specify) | Total | CCNH | RHNS | (Specify) | Total | CCNH | RHNS | (Specify) |
| Certified Bed Capacity A. On last day of PREVIOUS report period | 120 | 120 | | | 120 | 120 | | | | | | |
| B. On last day of THIS report period | 120 | 120 | | | | | | | 120 | 120 | | |
| Number of Residents A. As of midnight of PREVIOUS report period | 97 | 97 | | | 97 | 97 | | | | | | |
| B. As of midnight of THIS report period | 103 | 103 | | | | | | | 103 | 103 | | |
| 3. Total Number of Days Care Provided During Period | | | | | | | | | | | | |
| A. Medicare | 1,069 | 1,069 | | | 805 | 805 | | | 264 | 264 | | |
| B. Medicaid (Conn.) | 27,580 | 27,580 | | | 20,476 | 20,476 | | | 7,104 | 7,104 | | |
| C. Medicaid (other states) | | | | | | | | | | | | |
| D. Private Pay | 5,538 | 5,538 | | | 4,135 | 4,135 | | | 1,403 | 1,403 | | |
| E. State SSI for RCH | | | | | | | | | | | | |
| F. Other (Specify) Hospice, Mgd Medicare, Comr | 2,580 | 2,580 | | | 2,002 | 2,002 | | | 578 | 578 | | |
| G. Total Care Days During Period (3A thru F) | 36,767 | 36,767 | | | 27,418 | 27,418 | | | 9,349 | 9,349 | | |
| Total Number of Days Not Included in Figures in 4. 3G for Which Revenue Was Received for Reserved Beds A. Medicaid Bed Reserve Days | | | | | | | | | | | | |
| B. Other Bed Reserve Days | 7 | 7 | | | 6 | 6 | | | 1 | 1 | | |
| 5. Total Resident Days (3G + 4A + 4B) | 36,774 | 36,774 | | | 27,424 | 27,424 | | | 9,350 | 9,350 | | |

Schedule of Resident Statistics (Cont'd)

| Name of Facil | litv | | | License No. | | | | | | | Ended | | Page of | | |
|---------------|-----------|----------------|--------------------------|------------------------------|-----------|-----------|----------|--------|---------|------------|-------------|-------------------|-----------------------|-------------|--|
| l. | | ome Inc | c., d/b/a Avon H | | 38-C | 9/30/2022 | | | | | | | 9 | 37 | |
| Avon convaic | Joeth 11 | ome, m | J., d/ 6/ d/ 11 v Oli 11 | | 500 | | | | | | | | | | |
| 4. Were the | re anv c | hanges i | in the certified b | ed car | acity dur | ing th | іе героі | t year | ? | 0 | Yes | • | No | | |
| | | | lowing informat | | - | | • | | | | | | | | |
| II IES | | | Change | | Cl | ange | in Bed | e | | Ca | pacity Afte | er Change | | | |
| | | | | - | | lange | | | 1 | Ca | puony / ma | onungo . | | | |
| Date of | CCNH | RHNS | (Specify) | | Lost | | - ' | Gaine | 1 | 1 | | | | | |
| Change | (| (2) | (2) | (1) | (2) | (2) | (1) | (2) | (2) | CCNH | RHNS | (Specify) | Denson f | or Change | |
| | (1) | (2) | (3) | (1) | (2) | (3) | (1) | (2) | (3) | CCNII | KINS | (Specify) | Reason | of Change | |
| | | | | _ | | _ | | | | | | | | | |
| | | | | | | - | | | | | | | | | |
| | | | | _ | | | | - | _ | | | | | | |
| | | | | | | | | | | | | | | | |
| 5. If there v | vas any | change i | n certified bed | apaci | ty during | the re | port ye | ar (as | reporte | ed in item | 4 above) p | rovide the num | ber of | | |
| ı | | | 00 days followin | | | | | | | | | | | | |
| RESIDI | N (1 D) | 10101 | 0 44) 0 10110 1111 | B **** | | | | | | | | | | | |
| | | | Change in P | seider | t Dave | | | | | l cc | CNH | RHNS | (Spe | cify) | |
| 1st chang | 70 | | Change in K | Change in Resident Days CCNH | | | | | | | | 1411.5 | (-j- | | |
| 2nd char | | | | | | | | | | | | | | | |
| 3rd chan | | | | on September 30 of Cost Year | | | | | | | | | | | |
| 4th chan | | | | | | | | | | | | | | | |
| | | lents and | Rates on Septe | mber | 30 of Cos | st Yea | ır | | | | | | | | |
| o. reamour | 01 1(0010 | - | Medicare | | Medi | | | | | Se | elf-Pay | | Other Stat | te Assisted | |
| | | İ | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | Item | | CCNH | ا ا | CNH | RI | HNS | C | CNH | RE | INS | (Specify) | R.C.H. | ICF-MR | |
| No. of R | | | CCIVII | | 79 | | 1110 | l Č | 19 | | 11.0 | (4) | | | |
| Per Dien | | | O E A IOCHERIO | 100 | J. S. IIX | No. | B OF | | | ing in | CITIES IN | rigarini 4 Zila | Wester Co. | | |
| a. One b | | | Var | | 285,00 | | | | 518.00 | | | | | | |
| b. Two | | | Var | | 285,00 | | | | 448,00 | | | | | | |
| c, Three | | | | | | | | | | | | | | | |
| bed r | | ´ | | | | | | | | | | | | | |
| Jed 1 | 1115. | | | | | | | • | | | | | | | |
| | | | | | | | | | | | | | | | |
| 7 Total No | mber of | Physica | l Therapy Treat | ments | : | | | | | ТО | TAL | CCNH | RHNS | (Specify) | |
| | Medica | | | | | | | | | | 6,839 | 6,839 | | | |
| | | | usive of Part B) | | | | | | | | | | | | |
| | | | e Treatments | | | | | | | | 226 | 226 | | | |
| | | | Treatments | | | | | | | | | | | | |
| | Other | | | | | | | | | | 6,295 | 6,295 | | | |
| | | Physical | Therapy Treatn | nents | | | | | | | 13,360 | 13,360 | | | |
| 8. Total Nu | mber of | Speech | Therapy Treatn | nents | | | | | | | | | | | |
| A. | Medica | re - Part | В | | | | | | | | 1,319 | 1,319 | | | |
| В. | | | usive of Part B) | | | | | | | | | Marie Hay Million | | | |
| | | | e Treatments | | | | | | | | 35 | 35 | | | |
| | | torative | Treatments | | | | | | | | | | | | |
| | Other | | | | | | | | | | 829 | 829 | | | |
| | | | herapy Treatme | | | | | | | | 2,183 | 2,183 | | | |
| | | | tional Therapy | Treatr | nents | | | | | | | | MOTULE STEEL | | |
| | Medica | | | | | | | | | | 7,740 | 7,740 | | | |
| В. | | | usive of Part B) | | | | | | | | | | The State of the last | | |
| | | | e Treatments | | | | | _ | | | 181 | 181 | | | |
| | | torative | Treatments | | | | | | _ | | | 6.600 | | | |
| | Other | | 1.001 ~ | | | | | | | - | 6,583 | 6,583 | | | |
| D. | Total C | <i>ecupati</i> | onal Therapy T | reatm | ents | | | | | 1 | 14,504 | 14,504 | | | |

Report of Expenditures - Salaries & Wages

| Name of Facility Avon Convalescent Home, Inc., d/b/a Avon Health Center | License No. 938-C | | Report for Yea 9/30/2022 | r Ended | Page 10 | of 37 |
|---|----------------------|-------------|-----------------------------|------------------|----------------------|--------------------|
| Are time records maintained by all individuals receiving con | | • · | | 0 | No | 3, |
| are time records maintained by air murriduals receiving con- | препавноп: | | Total Cost a | | | |
| | | | Total Cost a | ina riours | | |
| | | | | | | |
| Item | CCNH | Hours | RHNS | Hours | (Specify) | Hours |
| A. Salaries and Wages* | | | | | | |
| 1. Operators/Owners (Complete also Sec. I | 1002 | | | A ROST EX | | |
| of Schedule A1) | THE RESERVED | | | | MUNICIPAL CONTRACTOR | IIIIEOS |
| 2. Administrator(s) (Complete also Sec. III | 100.017 | 1 000 | | SALES CONTRACTOR | VIII NAMED IN COLUMN | |
| of Schedule A1) 3. Assistant Administrator (Complete also Sec. IV | 182,217 | 1,892 | | | | Service Charles |
| | | | | | | - III |
| of Schedule A1) | | | 11-1-1-1 | 200271100 | | encara-sun |
| Other Administrative Salaries (telephone operator, clerks, receptionists, etc.) | 348,660 | 11,683 | | | | |
| 5. Dietary Service | 340,000 | 11,005 | 31/20/E | | SULETURES IN | S HORSE |
| a. Head Dietitian | | | | | | |
| b. Food Service Supervisor | | | | | | |
| c. Dietary Workers | 369,890 | 20,871 | | | | |
| 6. Housekeeping Service | | | | | | |
| a. Head Housekeeper | 49,899 | 8,317 | | | | |
| b. Other Housekeeping Workers | 306,641 | 15,787 | | | | |
| 7. Repairs & Maintenance Services | 70.000 | 0.000 | | | | |
| a. Engineer or Chief of Maintenance | 79,982 | 2,270 | | | | |
| b. Other Maintenance Workers | 58,350 | 2,183 | HERS 1 1975 - 2011 | | THE WATER | 18.70000 |
| Laundry Service a. Supervisor | | TO DOMEST | | | | 100 |
| b. Other Laundry Workers | 110,594 | 8,317 | | | | |
| Barber and Beautician Services | 110,557 | 0,517 | | | | |
| 10. Protective Services | | | | | | |
| 11. Accounting Services | | | Ball Marion | | | |
| a. Head Accountant | | | | | | |
| b. Other Accountants | | | | | | |
| 12. Professional Care of Residents | | men di | With a series | | THE PERSON NAMED IN | |
| a. Directors and Assistant Director of Nurses | 147,576 | 2,405 | | | | |
| b. RN | | TILKYI YE I | | | | THE REAL PROPERTY. |
| Direct Care | 1,083,116 | 25,549 | | | | |
| 2. Administrative** | 417,687 | 13,558 | | | | |
| c. LPN | 690 709 | 17.561 | | | | - |
| Direct Care Administrative** | 680,708 | 17,561 | | - | | |
| d. Aides and Attendants | 1,866,841 | 88,990 | | | | |
| e. Physical Therapists | 1,000,011 | 55,550 | | | | |
| f. Speech Therapists | | | | | | |
| g. Occupational Therapists | | | | | | |
| h. Recreation Workers | 162,777 | 6,970 | | | | |
| i. Physicians | | i etimesal | 1 1 1 1 1 1 1 1 1 | | Karl Him | |
| Medical Director | | | | | | |
| 2. Utilization Review | | | | | | |
| 3. Resident Care*** | No. | | Real Property lies | | | |
| 4. Other (Specify) | | | | | | |
| i. Dentists | | | | | | |
| k. Pharmacists | | | | | | |
| l. Podiatrists | | | | | | |
| m. Social Workers/Case Management | 218,118 | 6,170 | | | | |
| n. Marketing | | | | | | |
| o. Other (Specify) | | | | 5 // Smillion | | HILLSON, |
| See Attached Schedule | 1 | | | 1 | | |

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

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

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

Schedule of Other Salaries and Wages (Page 10)

| | | CC | NH | F | HNS | (Sp | ecify) |
|-------------------|---------------|-------|---------|------|-------|------|--------|
| Position | | \$ | Hours | \$ | Hours | \$ | Hours |
| | | | | | | | |
| | | | | | | | |
| | | T T | 7.6 | | | | |
| | 1 2 1 1 1 2 1 | - | | | | | |
| THE RELIED IN CO. | | | | | | | |
| BIBILIA II | | | | | | | |
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| XELV IIIVS | | 11113 | | | | | |
| | | | | | | | |
| | | | | | | | |
| Total | \$ | | | \$ - | 1 2 | \$ - | |

Schedule of Other Fees (Page 13)

| | CCN | Н | RH | NS | (Specify) | | |
|-------------------------|-----------|----------|------------|-------|-----------|-------|--|
| Service | S | Hours | \$ | Hours | \$ | Hours | |
| | | 191 - EU | | | | | |
| Nursing Dept Consultant | \$ 64,645 | 860 | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | M N en E l | | | | |
| | | | | | | | |
| | | | | | | | |
| #3 1 81 | | | | | | | |
| 31.11. | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | Φ. | | |
| Total | \$ 64,645 | 860 | \$ | - 35 | \$ | 2.5 | |

State of Connecticut

Annual Report of Long-Term Care Facility

CSP-11 Rev. 10/2005

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

| Name of Facility | | | | License No. | | Report for | Year Ended | | Page | of |
|--|------------|-------------|-----------|---|------------------------|----------------|--------------------------|-------------------------|----------------|--------------|
| Avon Convalescent Home, Inc., d/b | /a Avon He | alth Center | | 938-C | | 9/30/2022 | | | 11 | 37 |
| | | Salary Paid | d | Fringe Benefits and/or Other Payments | Full Description of | Total Hours | Line Where Claimed on | Name and Address of All | Total Hours | Compensation |
| Name | CCNH | RHNS | (Specify) | (describe fully) | Services Rendered | Worked | Page 10 | Other Employment** | Worked | Received |
| Section I - Operators/Owners | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Section II - Other related parties of Operators/Owners employed in and paid by facility (EXCEPT those who may be the Administrator or Assistant Administrators who are identified on Page 12). | | | | | | | | | | |
| Russell Schwartz | 81,047 | | | Non Discriminatory | Director of Operations | 1,272 | A4 | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

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

^{**} Include all employment worked during the cost year.

State of Connecticut Annual Report of Long-Term Care Facility CSP-12 Rev. 10/2005

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

| Name of Facility (as licensed) | | | | License No. | | Report for Y | ear Ended | | Page | of |
|--|------------|-------------|----------------|---|---|-----------------------|-------------------------------------|---|--------------------------|--------------------------|
| Avon Convalescent Home, Inc., d/b | o/a Avon H | ealth Cente | r | 938-C | | 9/30/2022 | | | 12 | 37 |
| Name | CCNH | Salary Pai | d (Specify) | 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 |
| Section III - Administrators*** | | | | | | | | | | |
| Russell Schwartz | 108,877 | | | Non Discriminatory | Administrator 10/1/2021-11/14/2021 & 5/13/2022- | 808 | A4 | | | |
| Carol Anne Salvietti | 73,340 | | | Non Discriminatory | Administrator 11/15/2021-5/12/2022 | 1,084 | A4 | | | |
| | | | | 1 | | | | | | |
| Section IV - Assistant Administrators | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

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

^{**} Include <u>all</u> 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 Avon Convalescent Home, Inc., d/b/a Avon Health (| License No. 938- | ·C | Report for Y 9/30/2022 | ear Ended | Page 13 | of 37 |
|---|---------------------|-------------|------------------------|--------------------|--|--------------|
| Avon Convaiescent Home, me., d/b/a Avon Health | 750 | | Total Cost | and Hours | | |
| | | | Total Cost | lind Trours | | |
| | | | | | | |
| Item | CCNH | Hours | RHNS | Hours | (Specify) | Hours |
| B. Direct care consultants paid on a fee | FIE N | | | | | |
| for service basis in lieu of salary | | | | | | |
| (For all such services complete Schedule B1) | | | | | | 1 A B |
| 1. Dietitian | 64,881 | 1,061 | | | | |
| 2. Dentist | 7,860 | 201 | | | | |
| 3. Pharmacist | 8,954 | 184 | | | | |
| 4. Podiatrist | | | | Mark Strike Strike | | - Var |
| 5. Physical Therapy | | | | | | |
| a. Resident Care | 223,098 | 3,903 | | | | |
| b. Other | | | | | | |
| 6. Social Worker | | | | | | |
| 7. Recreation Worker | | | | | | |
| 8. Physicians | the second | 10 10 6 | | TEST ST | | |
| a. Medical Director (entire facility) | 37,800 | 176 | | | | |
| b. Utilization Review | | | | | | ALT DHIS |
| (Title 18 and 19 only) monthly meeting | | | | | | |
| c. Resident Care** | | | GIERRAL STATE | | | 109:00:58 |
| d. Administrative Services facility Infection Control Committee | | | | | | |
| (Quarterly meetings) | | | | | | |
| 2. Pharmaceutical Committee | | | | | | |
| (Quarterly meetings) | | | | | | |
| Staff Development Committee | | | | | | |
| (Once annually) | ts sinaumina) | I THE DOMES | Marie Study | | Sept 100-7 | West College |
| e. Other (Specify) Associate Medical Director | 15,840 | 139 | The same | ER HONE | Palling Br N | |
| 9. Speech Therapist | 13,640 | 139 | Dr. Janetii Va | | Company of the contract of the | |
| a. Resident Care | 91,174 | 1,458 | | | | |
| b. Other | 91,174 | 1,430 | | | | |
| 10. Occupational Therapist | | | TOTAL SOUR | | 1 10 mm m | |
| a. Resident Care | 244,391 | 5,320 | | in ith the blue | | |
| b. Other | 211,371 | 5,520 | | | | |
| 11. Nurses and aides and attendants | | | Tened in the | | | 1100 |
| a. RN | | | | | | |
| 1. Direct Care | | | | | | |
| 2. Administrative*** | | | | | | |
| b. LPN | | | | | | |
| 1. Direct Care | 393,941 | 5,658 | | | | |
| 2. Administrative*** | | ., | | | | |
| c. Aides | 601,600 | 14,726 | | | | |
| d. Other | , | | | | | |
| 12. Other (Specify) | | | | | Europe III | |
| See Attached Schedule | 64,645 | 860 | | | | |
| B-13 Total Fees Paid in Lieu of Salaries | 1,754,184 | 33,686 | | | | |
| - 10 10 10 10 10 10 10 10 10 0 0 10 10 10 | -,, | ,000 | | | | |

^{*} 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 |
|--|-----------------------------|----------|----------------------------|-----------------------------|------|-----------|
| Avon Convalescent Home, Inc., d/b/a Avo | n Health Cent 938-C | To 1 140 | 9/30/2022 | | 14 | 37 |
| Name & Address of Individual | Full Explanation of Service | | * to Owners, ors, Officers | Explanation of Relationship | | ationship |
| | r | Yes | No | | | _ |
| Gerident Solutions PO Box 290539 | Dental Consultant | 0 | • | N/A | | |
| ValueRx Pharmacy Services 54 Tuttle Place | Pharmacy Consultant | 0 | • | N/A | | |
| Alliance Rehab 1520 Kensington Road | PT, OT, ST | 0 | • | N/A | | |
| Hartford Hospital Jeffrey Robbins, MD) | Medical Director | 0 | 0 | N/A | | |
| University Physicians PO Box 660 | Assistant Medical Director | 0 | 0 | N/A | | |
| The Nurse Network LLC PO Box 982 | Nursing Purchased Services | 0 | 0 | N/A | | |
| Fusion Medical Staffing, LLC PO Box 82674 | Nursing Purchased Services | 0 | 0 | N/A | | |
| Culinary Services Group, LLC 1135 Business Parkway South | Consult Dietician | 0 | 0 | N/A | | |
| Medical Solutions LLC PO Box 310737 | Nursing Purchased Services | 0 | 0 | N/A | | |
| Prime Time Healthcare LLC PO Box 3544 | Nursing Purchased Services | 0 | 0 | N/A | | |
| Mass Tex Imaging 3 Electronisw Ave; Suite 201 | Endoscopic Evaluations | 0 | 0 | N/A | | |
| Celtic Consulting 507 East Main Street | Clinical Consulting | 0 | 0 | N/A | | |
| Mary Alice Apratto | Clinical Liasion | 0 | 0 | N/A | | |
| ntelyCare, Inc. | Purchased Services CNAs | 0 | 0 | N/A | | |
| CareerStaff Unlimited | Purchased Services CNAs | 0 | • | N/A | | |
| Healthcare Services Group 3220 Tillman Drive; Suite 300; Bensalem, PA | Consult Dietician | 0 | • | N/A | | |
| Kathryn Epstein 34 Fox Den Road | Consult Dietician | 0 | • | N/A | | |
| Clipboard 340 S Lemon Ave | LPN | 0 | 0 | N/A | | |
| ConnectRN, Inc - Avidbank PO Box 208685 | LPN | 0 | • | N/A | | |
| Covered Staffing 2385 NW Executive Center Drive | LPN | 0 | 0 | N/A | | |
| Delta-T Group PO Box 884 | LPN | 0 | 0 | N/A | | |
| Norton & Associates, Inc 97 Elm StreetCohasset, N | LPN | 0 | 0 | N/A | | |

^{*} Use additional sheets if necessary.

^{**} Refer to Page 4 for definition of related.

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

| Name of Facility | | License No. | | | Year Ended | Page | of | |
|--|-------------|-------------------|----------|--------------|-----------------------------|------|----|--|
| Avon Convalescent Home, Inc., d/b/a Avon Her | alth Center | 938-C | | 9/30/2022 | | 14a | 37 | |
| | | 10- | Related* | to Owners, | | | | |
| Name & Address of Individual | Full Expla | nation of Service | Operato | rs, Officers | Explanation of Relationship | | | |
| | | | Yes | No | | | | |
| All American Healthcare Services, Inc.PO Box 82568 | | C,N,A | 0 | 0 | N/A | | | |
| MAS Staffing156 Harvey RoadLondonderry, NH 030 | | C.N.A | 0 | 0 | N/A | | | |
| Daeisha Sute51 Yorkshire LaneWindsor, CT 06095 | | C.N.A | 0 | 0 | N/A | | | |
| Nichole Bennett | | C.N.A | 0 | 0 | N/A | | | |
| | | | 0 | 0 | | | | |
| | | | 0 | 0 | | | | |
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| | | | 0 | 0 | | | | |
| | | | 0 | 0 | | | | |
| | | | 0 | 0 | | | | |

^{*} 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 Ye | ar Ended | Page | of |
|---|----|---------------------------------|-----------------|------|-----------|
| Avon Convalescent Home, Inc., d/b/a Avon Heal 938-C | | 9/30/2022 | | 15 | 37 |
| | | | | | |
| Item | | Total | CCNH | RHNS | (Specify) |
| Administrative and General | | TOTAL TOTAL | | | (Special) |
| a. Employee Health & Welfare Benefits | | 70 94 9 35 0 | | | |
| Workmen's Compensation | \$ | 117,389 | 117,389 | | |
| Disability Insurance | \$ | 117,500 | 117,007 | | |
| 3. Unemployment Insurance | \$ | 47,483 | 47,483 | | |
| 4. Social Security (F.I.C.A.) | \$ | 422,658 | 422,658 | | |
| 5. Health Insurance | \$ | 1,031,258 | 1,031,258 | | |
| 6. Life Insurance (employees only) | Ψ | 1,031,230 | 1,001,200 | | |
| (not-owners and not-operators) | \$ | Commence of the contraction of | 110 | | |
| 7. Pensions (Non-Discriminatory) | \$ | 114,132 | 114,132 | | |
| (not-owners and not-operators) | Ψ | | | | |
| 8. Uniform Allowance | \$ | Treman (III to resident limits) | | | |
| 9. Other (Specify) | \$ | 8,038 | 8,038 | | |
| See Attached Schedule | Ψ | 5,000 | | | |
| b. Personal Retirement Plans, Pensions, and | \$ | | | | |
| Profit Sharing Plans for Owners and | Ψ | | The of the last | | |
| Operators (Discriminatory)* | | | | | |
| Operators (Discriminatory) | | | | | |
| c. Bad Debts* | \$ | 80,000 | 80,000 | | |
| d. Accounting and Auditing | \$ | 40,642 | 40,642 | | |
| e. Legal (Services should be fully described on Page 7) | \$ | 58,536 | 58,536 | | |
| f. Insurance on Lives of Owners and | \$ | | | | |
| Operators (Specify)* | | | Was win | | |
| g. Office Supplies | \$ | 33,237 | 33,237 | | |
| h. Telephone and Cellular Phones | | | | | |
| 1. Telephone & Pagers | \$ | 8,996 | 8,996 | | |
| 2. Cellular Phones | \$ | 438 | 438 | | |
| i. Appraisal (Specify purpose and | \$ | | | | |
| attach copy)* | | | | | |
| | | | | | |
| j. Corporation Business Taxes (franchise tax) | \$ | | | | |
| k. Other Taxes (Not related to property - See Page 22) | | | | | |
| 1. Income* | \$ | | | | |
| 2. Other (Specify) | \$ | | | | |
| See Attached Schedule | | | | | |
| 3. Resident Day User Fee | \$ | 704,212 | 704,212 | | |
| Subtotal | \$ | 2,667,019 | 2,667,019 | | |

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

Attachment Page 15

Schedule of Other Employee Benefits

| Description | CCNH | RHNS | (Specify) |
|-------------------------------|----------|--------|-----------|
| | | | |
| New Hire Expense | \$ 7,125 | | |
| Employee Physicals/Medication | 913 | | |
| | | | |
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| | | I E | |
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| | | | |
| | | | |
| Total | \$ 8,038 | 3 \$ - | s - |

Schedule of Other Taxes

| Description | C | CNH | RI | HNS | (Spe | ecify) |
|-------------|----|------|----|-----|-----------|--------|
| | | - | | | w = 15=TI | |
| | | | | | | YVI I |
| | | 11_1 | | | | |
| | | | | 111 | | |
| Total | \$ | | \$ | ** | \$ | - 1 |

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

| Name of Facility License No. Avon Convalescent Home, Inc., d/b/a Avon Health Ce 938-C | | Report for Y 9/30/2022 | ear Ended | Page 16 | of 37 |
|--|-----|---------------------------|-----------|-------------|------------------|
| Avon Convalescent Home, Inc., d/b/a Avon Health Ce 938-C | | 7/30/2022 | | 10 | 37 |
| • | | T. 4.1 | CONIII | DIDIC | (Cif-) |
| Item C. Link B. C. E. | | Total | CCNH | RHNS | (Specify) |
| Subtotals Brought Forwa | rd: | 2,667,019 | 2,667,019 | 150 W W 150 | NUMBER OF STREET |
| l. Travel and Entertainment | • | | | No. | |
| Resident Travel and Entertainment | \$ | | | | |
| 2. Holiday Parties for Staff | \$ | | | | |
| 3. Gifts to Staff and Residents | \$ | | | | |
| 4. Employee Travel | \$ | 3,505 | 3,505 | | |
| 5. Education Expenses Related to Seminars and Conventions | \$ | 56,054 | 56,054 | | |
| 6. Automobile Expense (not purchase or depreciation) | \$ | | | | |
| 7. Other (Specify) | \$ | | | | turnormani me |
| See Attached Schedule | | | | | Oliver Design |
| m. Other Administrative and General Expenses | | | | 341 2000 | |
| 1. Advertising Help Wanted (all such expenses) | \$ | 37,110 | 37,110 | | |
| 2. Advertising Telephone Directory (all such expenses)*** | \$ | | | | |
| 3. Advertising Other (Specify)*** | \$ | 24,097 | 24,097 | | |
| 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 | \$ | 3,675 | 3,675 | | |
| * 8. Dues and Membership Fees to Professional | \$ | 9,006 | 9,006 | | |
| Associations (Specify) | | | | | |
| See Attached Schedule | | | | | UP S |
| 8a. Dues to Chamber of Commerce & Other Non-Allowable Org.*** | \$ | | | | |
| 9. Subscriptions | \$ | 5,711 | 5,711 | | |
| 10. Contributions*** | \$ | 675 | 675 | | |
| See Attached Schedule | | | | | STEED THE |
| 11. Services Provided by Contract Specify and Complete | \$ | 26,907 | 26,907 | | |
| Schedule C-2, Page 21 for each firm or individual) | - | | | 1000 | |
| 12. Administrative Management Services** | \$ | | | | |
| 13. Other (Specify) | \$ | 113,087 | 113,087 | | |
| See Attached Schedule | 7 | | | 1103 | |
| C-14 Total Administrative & General Expenditures | \$ | 2,946,846 | 2,946,846 | | |

^{*} 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 | CCN | H | RHN | VS | (Spe | ecify) |
|--------------------------------------|-----|----|-----|----|------|--------|
| | | 33 | | | | |
| | | | | _ | - | - |
| | | | | | | - |
| | | | | | | |
| | | | 801 | | | |
| Total Other Travel and Entertainment | s | | S | | s | |

Schedule of Other Advertising

| Description | CCNH | | RHNS | (Sp | ecify) |
|---------------------------------------|---------|------|------|-----|--------|
| | | | 2 3 | | |
| Business Promotion (Disallow Page 28) | \$ 24, | 197 | | | |
| Total Other Advertising | \$ 24,0 | 97 9 | 5 - | s | |

Schedule of Dues

| Description | CC | NH | RHNS | | (Spec | ify) |
|---|---------|-------|------|-----|-------|--------|
| | | - | | | | i Elli |
| ALTCFM (Association for Long Term Care Financial Managers) | S | 85 | | | | |
| CAHCF (Connecticut Assocociation of Health Care Facilities) | | 8,382 | | 100 | | |
| ACHCA (American College of Health Care Administrators) | | 310 | | | | |
| SHRM (Society for Human Rescources Management) | L I I K | 229 | | | | -7 |
| | | | | | | |
| | | | | Į, | | |
| Total Dues | S | 9,006 | S | | S | ٠. |

Schedule of Contributions

| Description | CCNI | HH | RI | INS | (Spe | cify) |
|-------------------------------------|------|------|----|-----|-------|-------|
| | | 74 T | | | 11 12 | |
| Conation Expense (Disallow Page 28) | S | 675 | | - | | |
| Total Contributions | S | 675 | S | | 2 | |

Schedule of Other Administrative and General

| Description | CCNH | e | RHN | (Spe | ecify) | |
|--|---------|-----|--------|------|--------|--------|
| | | - | | | | |
| Licenses | S 1, | 810 | | | | |
| Purchased Services Office | 17, | 152 | I SICI | | | |
| Computer Services | 67, | 794 | | | DE II | |
| Employee Gifts and Food (Disallow Page 28) | 24, | 972 | | | HEIL - | -11.11 |
| Holiday Party | 1, | 359 | | | | |
| | | | | | | |
| | | | | | | |
| Total Other Administrative and General | \$ 113, | 087 | S | | \$ | |

Schedule C-1 - Management Services*

| Name of Facility | License No. | Report for Year Ended | Page of |
|--|----------------------------------|--|--|
| Avon Convalescent Home, Inc., d/b/a Avon | | 9/30/2022 | 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 | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | 2 | | |
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^{*} 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)

| | | vote of | 1 Page 5) | | | |
|--|---------------|----------|---------------|--------------|-----------------------|---------------------------|
| Name of Facility | | License | | Report for Y | | Page of |
| Avon Convalescent Home, Inc., d/b/a Av | on Health Ce | er | 938-C | 9/30/2022 | | 18 37 |
| | | | | | | |
| Item | | | Total | CCNH | RHNS | (Specify) |
| 2. Dietary | | | | | | |
| a. In-House Preparation & Service | | | | The store | | |
| 1. Raw Food | | \$ | 320,874 | 320,874 | | |
| 2. Non-Food Supplies | | \$ | | 43,053 | | |
| 3. Other (Specify) | | _ \$ | | | | |
| b. Purchased Services (by contract | other | \$ | 225,568 | 225,568 | | |
| than through Management Servic (Complete Schedule C-2 att. Pag | | | | | | |
| c. Other (Specify) | | \$ | | | | Source III Suprementation |
| | | | | | | |
| 2D. Total Dietary Expenditures (2a+b |) + c + d) | \$ | 589,495 | 589,495 | | |
| 2E. Dietary Questionnaire | | | Total | CCNH | RHNS | (Specify) |
| F. Resident Meals: Total no. of meals | served per da | y:* | | | | |
| G. Is cost of employee meals included | in 2D? O | Yes | • | No | | |
| H. Did you receive revenue from emple | oyees? O | Yes | • | No | If yes, specify amt. | |
| I. Where is the revenue received repor | ted in the Co | st Repor | t? (Page/Line | Item) | | |
| Is cost of meals provided to persons J. than employees or residents (i.e., Bo Members, Guests) included in 2D? | | Yes | • | No | If yes, specify cost. | |
| K. Is any revenue collected from these | people? O | Yes | • | No | If yes, specify amt. | |
| L. Where is the revenue received repor | ted in the Co | st Repor | t? (Page/Line | Item) | | |
| Is cost of food (other than meals, e.g. snacks at monthly staff meetings, bo | g., pard | Yes | | No | If yes, specify | |
| meetings) provided to employees in in 2D? | eruaea | | | | cost. | |
| N. Is any revenue collected from emplo | oyees? O | Yes | • | No | If yes, specify amt. | |
| O. Where is the revenue received repor | ted in the Co | st Repor | t? (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)

| | ne of Facility | License | | Report for Y | | Page | of |
|-----------|---|---------|--------|--------------|--------------------------|-----------------|---------|
| Avo | n Convalescent Home, Inc., d/b/a Avon Health Cent | , | 938-C | 9/30/2022 | | 19 | 37 |
| | Item | | Total | CCNH | RHNS | (S _I | pecify) |
| 3. | Laundry a. In-House Processing* 1. Bed linens, cubicle curtains, draperies, | Lbs. | | | | | |
| | gowns and other resident care items washed, ironed, and/or processed.*** | Amt. \$ | 11,687 | 11,687 | | | |
| | Employee items including uniforms, gowns, etc. washed, ironed and/or | Lbs. | | | | | |
| | processed.*** | Amt. \$ | | | | | |
| | 3. Personal clothing of residents | Lbs. | | | | | |
| | washed, ironed, and/or processed.*** | Amt. \$ | | | | | |
| | 4. Repair and/or purchase of linens.*** | Lbs. | | | | | |
| | | Amt. \$ | | | | | |
| | b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21) | \$ | | | | | |
| | c. Other (Specify) Other Laundry Supplies | \$ | 9,654 | 9,654 | | | |
| 3D. | Total Laundry Expenditures (3a + b + c) | \$ | 21,341 | 21,341 | | | |
| 3E. F. | Laundry Questionnaire Is cost of employee laundry included in 3D? O | Yes | • | No | If yes, specify cost. | | |
| G. | | Yes | • | No | If yes, specify amt. | | |
| Н. | Where is the revenue received reported in the Cost | Report? | | (Page/Line | | | |
| I. | Is Cost of laundry provided to persons other than employees or residents included in 3D? | Yes | • | No | If yes, specify cost. | | |
| J., | Did you receive revenue from these people? O | Yes | • | 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)

| Nan | ne of Facility | License No. | Repo | ort for Year Er | nded | Page | of |
|-----|--|------------------|------|--------------------|--|------------------|--|
| Avo | n Convalescent Home, Inc., d/b/a Avon Hea | 938-C | | 9/30/2022 | | 20 | 37 |
| | | | | | | | |
| | | | | | | | |
| | Item | | | Total | CCNH | RHNS | (Specify) |
| 4. | Housekeeping | Sq. Ft. Serviced | | | | | |
| | a. In-House Care | by Personnel | | | | | |
| | 1. Supplies - Cleaning (Mops, | Amt. | \$ | 36,043 | 36,043 | | |
| | pails, brooms, etc.) | | | | | | |
| | b. Purchased Services (by contract other | Sq. Ft. Serviced | | | | | |
| | than through Management Services) | by Personnel | | | | | |
| | (Complete Schedule C-2 att. | Amt. | \$ | 1,549 | 1,549 | | |
| | Page 21) | | | | | | |
| | C. Other (Specify) | | \$ | | | | |
| | | | | | | | |
| 4D. | Total Housekeeping Expenditures (4a + | b+c) | \$ | 37,592 | 37,592 | | The second |
| 5. | Resident Care (Supplies)** | | | | | | |
| | a. Prescription Drugs*** | | | | | | 1000 |
| | 1. Own Pharmacy | | \$ | | | | |
| | Purchased from | | \$ | 124,812 | 124,812 | | |
| | ValueRx Pharmacy | | | | | H INSTANCE | INCOME DISTRIBUTE |
| | b. Medicine Cabinet Drugs | | \$ | 294,961 | 294,961 | | |
| | c. Medical and Therapeutic Supplies | | \$ | 1,242 | 1,242 | | |
| | d. Ambulance/Limousine*** | | \$ | 951 | 951 | | 100 May 100 May 1 |
| | e. Oxygen | | | | | | |
| | 1. For Emergency Use | | \$ | | | | |
| | 2. Other*** | | \$ | 19,287 | 19,287 | | |
| | f. X-rays and Related Radiological | | \$ | DISCOMPENSATION OF | AND CONTRACTOR | | HANK STREET, S |
| | Procedures*** | | | | | Carried States | STATE OF STREET |
| | g. Dental (Not dentists who should be incl | luded under | \$ | AND PRODUCTION OF | | | # TO THE REAL PROPERTY OF THE PROPERTY OF THE REAL PROPERTY OF THE REAL PROPERTY OF THE REAL |
| | salaries or fees) | | | White the second | CENTRAL STATE OF THE STATE OF T | | /ALEXANDER |
| | h. Laboratory*** | | \$ | 38,922 | 38,922 | | |
| | i. Recreation | | \$ | 20,884 | 20,884 | | |
| | j. Direct Management Services* | | \$ | | | | |
| | k. Indirect Management Services* | | \$ | | | | |
| | l. Other (Specify)**** | | \$ | 90,358 | 90,358 | u samelano may r | |
| | See Attached Schedule | | | | | | |
| 5M. | Total Resident Care Expenditures (5a - 5 | j) | \$ | 591,417 | 591,417 | | |

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

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

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

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

Schedule of Other Resident Care

| Description | CCNH | RHNS | (Specify) |
|--|--|-------------|-----------|
| | | 100 | |
| Therapy Equipment Rental | \$ 14,034 | | |
| Physical Therapy Supplies | 7,568 | ef the fine | |
| IV Therapy Expense (Disallow Page 29) | 6,035 | "III | |
| Supplies Patient Personal (Disallow Page 29) | 3,041 | | |
| Nursing Equipment Rental | 7,695 | | |
| Nursing Equipment Med A (Disallow Page 29) | 2,354 | | |
| Medical Software Subscriptions | 49,631 | | |
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| | The state of the s | | |
| | 2 18 18 18 | | |
| | | | |
| Total Other Resident Care | \$ 90,358 | \$ - | \$ - |

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

| Name of Facility | | | | License No. | Report for Year Ende | <u>d</u> | | | Page | of |
|--|--|-------------------------|--------|-----------------------------|---------------------------------------|-------------------|-------|--------------|-----------|----------|
| Avon Convalescent Home, Is | nc., d/b/a Avon Health | Center | | 938-C | 938-C 9/30/2022 21 | | | | | 37 |
| | | Related ** 1 Operators. | , | | | Total Cost/Page F | | /Page Ref.** | e Ref.*** | |
| Name of Individual or Company | Address | Yes | No | Explanation of Relationship | Full Explanation of Service Provided* | CCNH | RHNS | (Specify) | Pg | Line |
| Paylocity | Arlington Heights, IL | 0 | • | N/A | Payroll Processing | 23,494 | Tanto | (openiy) | | m11 |
| Paine's Rubbish Removal | PO Box 307, Simsbury, CT 06070 | 0 | 0 | N/A | Trash Removal / Recycling | 23,267 | | | 22 | 6f |
| Procaire | P.O. Box 801, Tolland, CT 06084 114 Woodland Street, | 0 | 0 | N/A | Oxygen | 20,071 | | | Var | Var |
| St. Francis Laboratory | Hartford, CT 06105 9201, Minneapolis, MN | 0 | • | N/A | Lab | 18,244 | | | 20 | 5h |
| Matrixcare | 55480-9201 Wallingford, CT 06492- | 0 | • | N/A | Clinical Software | 40,141 | | | 20 | 51 |
| TM Technology Systems | 1904 Springfield, MA 01101- | 0 | • | N/A | IT / Technology Support Cogeneration | 53,841 | | | 16 | m13 |
| Aegis Energ Services, Inc. | 2511 806 Hillstown Road, | 0 | 0 | N/A | Maintenance | 18,007 | | | Var | Var |
| Pete's Landscaping NIRO Companies, LLC | Manchester, CT 06040 PO Box 96, Berlin, CT 06037 | 0 | • • | N/A N/A | Groundskeeping Snow Removal | 14,642 | | | | 6f |
| Culinary Services Group LLC | South, Suite 10, Westminster, MD 21157 | 0 | 0 | N/A | Dietary Purchased Services | 13,294 15,845 | | | | 6f 2b |
| Healthcare Services Group | suite 300, Bensalem, PA 19020 | 0 | 0 | N/A | Dietary Purchase Serv. | 129,577 | | | | 2b |
| | | 0 | • | | | | | | | |
| | | 0 | 0 | | | | | | | \vdash |
| | | 0 | • | | | | | | | |

^{*} 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 Ye | ear Ended | | Page of |
|---|---------------|-----------|------|-----------|
| Avon Convalescent Home, Inc., d/b/a Avon H 938-C | 9/30/2022 | | ¥ | 22 37 |
| Item | Total | CCNH | RHNS | (Specify) |
| 6. Maintenance & Operation of Plant | | | | |
| a. Repairs & Maintenance | \$ 84,750 | 84,750 | | |
| b. Heat | \$ 93,407 | 93,407 | | |
| c. Light & Power | \$ 48,831 | 48,831 | | |
| d. Water | \$ 48,846 | 48,846 | | |
| e. Equipment Lease (Provide detail on page 6) | \$ 8,550 | 8,550 | | |
| f. Other (itemize) | \$ 110,914 | 110,914 | | |
| See Attached Schedule | | | | Sala Pe |
| 6g. Total Maint. & Operating Expense (6a - 6f) | \$ 395,298 | 395,298 | | |
| 7. Depreciation (complete schedule page 23*) | | | | |
| a. Land Improvements | \$ | | | |
| b. Building & Building Improvements | \$ 375 | 375_ | | |
| c. Non-Movable Equipment | \$ | | | |
| d. Movable Equipment | \$ 49,955 | 49,955 | | |
| *7e. Total Depreciation Costs (7a + b + c + d) | \$ 50,330 | 50,330 | | |
| 8. Amortization (Complete att. Schedule Page 24*) | | | | |
| a. Organization Expense | \$ | | | |
| b. Mortgage Expense | \$ | | | |
| c. Leasehold Improvements | \$ 214,591 | 214,591 | | |
| d. Other (Specify) | \$ | | | |
| *8e. Total Amortization Costs (8a + b + c + d) | \$ 214,591 | 214,591 | | |
| 9. Rental payments on leased real property less | | | | |
| real estate taxes included in item 10b | \$ 332,004 | 332,004 | | |
| 10. Property Taxes | | | | |
| a. Real estate taxes paid by owner | \$ | | | |
| b. Real estate taxes paid by lessor | \$ 123,688 | 123,688 | | |
| c. Personal property taxes | \$ 12,079 | 12,079 | | |
| 11. <i>Total Property Expenses</i> (7e + 8e + 9 + 10) | \$ 732,692 | 732,692 | | |

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

Schedule of Other Repairs and Maintenance

| Description | CCNH | RHNS | (Specify) |
|-------------------------------------|------------|--------------|-----------|
| | | | |
| Groundskeeping | \$ 14,876 | | |
| Rubbish Removal | 23,267 | Eliting thom | |
| Snow Removal | 13,294 | | |
| Purchased Maintanence Contracts | 59,477 | | |
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| | | | |
| | | | |
| Total Other Repairs and Maintenance | \$ 110,914 | \$ - | \$ - |

Depreciation Schedule

| an un | | | | | | nation Sc | iicuuic | In | | | | |
|---|-----------|----------------------------------|-----------|---------------------|---|--------------------------|---------------------------|--|--|----------------|-------------------------------|-----------|
| Name of Facility | r T - 1/1 | <u> </u> | | | License No. | 0 | | Report for Year En | nded | | Page | of |
| Avon Convalescent Home, Inc., d/b/a Avon Health Center | | | 938 | -C | | 9/30/2022 | | - | 23 | 37 | | |
| Property Item | | | | | Historical Cost Exclusive of Land | Less Salvage Value | Cost to Be Depreciated | Accumulated Depreciation to Beginning of Year's Operations | Method of Computing Depreciation | Useful Life | Depreciation for This Year | Totals |
| A Land Improvements | | | | | | | | | | | | 1 |
| Acquired prior to this report period | | | | | | | | | | | | |
| Disposals (attach schedule) | | | | | | | | | | | | |
| Acquired during this report period (attack) | h sched | iule) | | | | | | | | | | |
| A-4. Subtotal | | | | | | HIN THE | | | | | 100 00 000 | |
| B. Building and Building Improvements | | | | | | | | | | | | ALC: U.U. |
| Acquired prior to this report period | | | | | 7,495 | | 7,495 | 2,625 | S/L | 20 | 375 | |
| Disposals (attach schedule) | | | | | | | | | | | | |
| Acquired during this report period (attachment) | ch sched | dule) | | | | | | | | | | H= 1(000) |
| B-4. Subtotal | | | | | | | | | | | | 37: |
| C. Non-Movable Equipment | | | | | | | | | | | | |
| Acquired prior to this report period | | | | | | | | | | | | |
| 2 Disposals (attach schedule) | | | | | | | | | | | | |
| Acquired during this report period (attachment) | ch sched | dule) | | | | | | | | | | |
| C-4. Subtotal | | | | | | IN EARL WAS | | | | | north different | |
| | logi | nileage book tained? No | Date of A | Acquisition Year | Historical Cost Exclusive of Land | Less Salvage Value | Cost to Be | Accumulated Depreciation to Beginning of Year's Operations | Method of Computing Depreciation | Useful Life | Depreciation for This Year | Totals |
| D. Movable Equipment 1. Motor Vehicles (Specify name, model and year of each vehicle) a. b. c. d. | 103 | 140 | PROBLET | 1 631 | Land | Value | Depreciated | rears operations | Depreciation | Bite | TOT THIS TEEL | 1003 |
| Movable Equipment | (Joseph | I FORT | /0000 | | | | DECEMBER OF | | Contract Contract | To lamb | a Spoiler or | |
| a. Acquired prior to this report period | 5000 | ESE, | Var | Var | 907,649 | | 907,649 | 728,048 | S/L | Various | 45,455 | |
| b. Disposals (attach schedule) | THE R | 1530 | Var | Var | (52,384) | | (52,384) | | | Various | | |
| Acquired during this report period (attach schedule): | | | | | | | | | | | | |
| c. Administrative | TX III | Da B | Var | Var | 13,715 | | 13,715 | | S/L | Various | 2,742 | |
| d. Standard Resident | 11123 | | Var | Var | 8,371 | | 8,371 | | S/L | Various | 837 | |
| e. Specialized Resident | WILE. | | Var | Var | 4,605 | | 4,605 | | S/L | Various | 921 | |
| Total Acquired during this report period | 500 m | | | | 26,691 | | 26,691 | | | | 4,500 | |
| D-3 Subtotal | 1 | | | | | | Series III | | | | | 49,95 |
| E. Total Depreciation | 12.13 | 1 1/4 | HEX. | | 1 | | | | | | English public | 50,33 |

Schedule of Land Improvements Acquired during this report period

| Acquisition Date | Acquired during this report period Description of Item | Cost | Useful Life | Depreciation |
|---------------------------------|---|------|----------------|--------------|
| Additions: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total additions for Land Improv | ement | \$ - | | \$ - |
| Deletions: | | | | |
| | والمتحار المحارية والمتراج المتراج المتراج والمتراجع | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total deletions for Land Improv | ement | \$ - | | \$ - |

^{*}Ties to Page 23, Line A3

Schedule of Building Improvements Acquired during this report period

| orneast to be seen grown provides | ents Acquired during this report period | | Useful | | |
|-----------------------------------|---|------|-------------|----------|-------|
| Acquisition Date | Description of Item | Cost | Life | Deprecia | ation |
| Additions: | | | | | |
| | | | | | |
| | | | - 21 | | |
| | | | | | |
| | | | | | - |
| | | | | | |
| | | | | | |
| Total additions for Building Imp | provement | \$ - | | \$ | |
| Deletions: | | | | | |
| | | | | | |
| | | | | | J.E. |
| 11 | | | | | |
| | | | 11 12 15 15 | | |
| | | | | | |
| | | | | | |
| Total deletions for Building Imp | rovement | \$ - | | S | |

^{*}Ties to Page 23, Line B3

Schedule of Non-Movable Equipment Acquired during this report period

| | pment required during this report pers | | Useful | |
|---------------------------------|---|------|--------|--------------|
| Acquisition Date | Description of Item | Cost | Life | Depreciation |
| Additions: | | | | |
| | | | | |
| | والمرابع والمستروب المستحدث والأراب فيتبارك والمستحدد والمستروب | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total additions for Non-Movab | le Equipmen | \$ | | \$ - |
| Deletions: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total deletion for New Mountain | - Faulance | S - | | 9 |
| Total deletions for Non-Movabl | e Equipmen | 3 - | | " |

^{**}Ties to Page 23, Line A2

^{**}Ties to Page 23, Line B2

^{*}Ties to Page 23, Line C3
**Ties to Page 23, Line C2

Schedule of Movable Equipment Acquired during this report peric

| | | Fick One | 1 | Useful | |
|-----------------------|---|----------------------|-------------|--------|--------------|
| Acquisition Date | Description of Item | Movable Category | Cost | Life | Depreciation |
| Additions: | | | | | |
| 11/30/2021 | notebook & monitor for russell | Administrative | \$ 2,553 | 5 | \$ 510 |
| 11/30/2021 | labor to set up russells notebook and monitor | Administrative | 1,117 | 5 | 223 |
| 12/31/2021 | returned monitor for russell | Administrative | (346) | 5 | (69 |
| 12/31/2021 | notebook | Administrative | 2,037 | 5 | 407 |
| 5/31/2022 | acer tabler for kristin in admissions | Administrative | 1,743 | | 349 |
| 5/31/2022 | 2 bariatric beds | Specialized Resident | 4,605 | 5 | 921 |
| 6/30/2022 | Sundance cubicle curtains- privacy curtains for South (36) | Standard Resident | 4,087 | 10 | 409 |
| | hp probook 450 g8 15" for ruth figuerroa | Administrative | 1,658 | 5 | 332 |
| 8/31/2022 | hp all in one 23" (3) training machines | Administrative | 3,155 | 5 | 631 |
| 9/30/2022 | 38 rubbermaid slim jim front step garbage cans for resident rooms | Standard Resident | 4,284 | 10 | 428 |
| | Ethel Higgins Barros, director of social services, HP Probook 450 G9 15: 8G | Administrative | 1,797 | 5 | 359 |
| | Movable Equipmen | | \$ 26,691 | | \$ 4,500 |
| Deletions: | | | | | |
| 6/30/2005 | Thermostat | | \$ (759) | N 400 | |
| 2/18/2008 | Matrix Bed | | (1,405) | | 1.8 |
| 4/30/2008 | Patient Lifts | | (16,072) | | |
| 7/27/2011 | 2 Chair and table for Payroll Office | | (748) | | |
| 8/26/2011 | Dragon 20i Floor Burnisher | | (1,317) | | .c. 1 1 |
| 1/27/2012 | 2 Rosebud Oximeters | | (3,594) | | |
| 6/19/2013 | Office Furniture for Staff Development | | (1,177) | | |
| | Office Furniture for Staff Development | | (1,170) | | |
| | HP 15" LT and related accessories- Tina | | (1,808) | | |
| 3/31/2017 | hp probook 450- south wing- printer: laptop | | (1,143) | | |
| | hp for mds nurse | | (850) | | |
| | HP Probook- medical records | | (723) | | |
| | reliab- notebook; 3 nursing touchscreens | | (5,599) | | |
| | 2 hp notebooks- pam & sheila | | (1,813) | | |
| | Var | | (925) | | |
| | New Arjo Sara 3000 patient lift | | (2,745) | | |
| | Phone System Upgrades disposed on 11/30/20 | | (7,696) | | |
| | Phone system upgrade wiring | | (447) | | |
| | Carpet for rehab gym | V-1 - 1 3 | (2,394) | | |
| Total deletions for I | | | \$ (52,384) | | 5 - |

Schedule of Leasehold Improvements Acquired during this report perio

| Acquisition Date | Description of Item | Cost | Useful Life | Depreciation |
|---------------------|---|------------|----------------|--------------|
| Additions: | | | | |
| 12/31/2021 | replacement of actuator | \$ 3,363 | 15 | \$ 224 |
| 1/31/2022 | installation of optiguard | 11,699 | 15 | 780 |
| 2/28/2022 | prepped & painted all areas pointed out by management. Hallway doorjams, bathroom doorjams, close | 7,445 | 15 | 496 |
| 4/30/2022 | first installment for dish room air conditioner | 4,565 | 15 | 304 |
| 4/30/2022 | 75% deposit on Quote #512438 location #1: remove and replace block heater assembly restore flow thr | 1,132 | 15 | 75 |
| | second installment for dish room ac | 4,565 | 15 | 304 |
| 5/31/2022 | 119 gal hot water tank | 4,100 | 15 | 273 |
| 6/30/2022 | installation of the 119 gallon Hot Water Tank (Bradford White storage tank) | 2,547 | 15 | 170 |
| 6/30/2022 | new hairdresser (heidi) needs to keep her stuff seperate from hairdresser cosmetology services | 877 | 15 | 58 |
| 6/30/2022 | digging drains | 5,400 | 15 | 360 |
| 7/31/2022 | first installment for replacement of large hot water tank | 10,315 | 15 | 688 |
| | final installment for dish room ac | 1,010 | 15 | 67 |
| 1/1/2022 | Balance on pub, lobby, offices a/c units | 11,725 | 10 | 117: |
| 2/15/2022 | 50% deposit on N wing shower renovation | 9,184 | 15 | 612 |
| 4/25/2022 | balance on north wing shower project- ACI Flooring | 9,184 | 15 | 612 |
| 6/21/2022 | balance on north wing shower project- Design to Finish | 32,254 | 15 | 2,150 |
| Total additions for | Leaschold Improvemen | \$ 119,364 | | \$ 8,346 |
| Deletions: | | | | |
| 9/30/2006 | Work on phone system | \$ (2,011) | | |
| 10/31/2006 | Exhaust fan in dish room | (3,445) | | |
| 4/30/2007 | Replaced voicemail card on phone system | (1,887) | | |
| 4/30/2007 | Install new exhaust fan in kitchen | (3,058) | | I VI |
| 6/30/2007 | Repair and shingle roof over south wing. | (3,750) | 8 - 1 - 1 | |
| 9/30/2007 | Install new 'door stoppers' on the elevator doors. | (4,664) | | |
| 8/4/2009 | Elevator Flooring | (737) | | |

^{*}Ties to Page 23, Line D2c
**Ties to Page 23, Line D2b

| otal deletions for | Leasehold Improvemen | \$ (572,860) | \$ - |
|--------------------|--|--------------|------|
| Va | r Various | (4,770) | |
| 9/30/2002 | Description Not Available - Disposed 10/1/17 | (4,747) | |
| 9/30/2005 | Renovations- remove once fully depreciated | (10,926) | |
| 9/30/2001 | Description Not Available - Disposed 10/1/17 | (525,455) | |
| 11/13/2012 | Water Softener | (2,606) | |
| 4/9/2010 | Install Wallpaper | (1,908) | |
| 1/29/2010 | Exhaust Duct for Dishmachine | (1,245) | |
| 8/28/2009 | Wallpaper Hallway and Nurses Station | (1,651) | |

^{*}Ties to Page 24, Line C3
**Ties to Page 24, Line C2

AVON HEALTH CENTER BUILDINGS

| Vendor | Description | DATE OF | HISTORICAL COST | BASIS FOR | DEPR. | USEFUL LIFE | Depreciation | Accum. | Depreciation | Accum. | NE VAI | ET LUE |
|--------------------------------|--------------|-------------|--------------------|--------------|--------|----------------|--------------|----------|--------------|----------|-----------|-----------|
| | | ACQUISITION | | DEPRECIATION | METHOD | (YEARS) | | | , | | | |
| 2015 Additions: RC Restoration | Storage Shed | 9/14/2015 | 7,495 | 7,495 | S/L | 20 | 375 | 2,625 | 375 | 3,000 | 4 | 1,495 |
| | 2021 Balance | Totals | \$ 7,495 | \$ 7,495 | | | \$ 375 | \$ 2,625 | \$ 375 | \$ 3,000 | \$ 4 | 4,495 |

| Vendor | Description | DATE OF | HISTORICAL COST | BASIS FOR | DEPR. METHOD | USEFUL LIFE | MONTHLY | Depreciation EXPENSE | ACC'D EXPENSE | NET VALUE |
|-------------------------------|---|-------------|--------------------|--------------|-----------------|----------------|---------|-------------------------|------------------|---------------|
| | | ACQUISITION | | DEPRECIATION | | (IN YEARS) | | FY 2022 | as of 9/30/22 | |
| BALANCE FORWARD price | | | 2,599,083 | 2,603,503 | | | 10,441 | 84,077 | 2,529,344 | 74,160 |
| Titan Mechanical | Hot water holding tank | 27-Nov-07 | 4,770 | 4,770 | S/L | 10 | 40 | - | 4,770 | |
| Build N Serve | Wiring | 1-Nov-07 | 1,968 | 1,968 | S/L | 5 | 33 | 2 | 1,968 | 绘 |
| Titan Mechanical | Hot water tank Motor | 14-Dec-07 | 1,748 | 1,748 | S/L | 10 | 15 | - | 1,748 | 2. |
| Titan Mechanical | Insulation | 28-Feb-08 | 4,235 | 4,235 | S/L | 15 | 24 | 282 | 4,139 | 96 |
| Total Building Svcs. | Dish room floor | 23-May-08 | 1,095 | 1,095 | S/L | 10 | 9 | 110 | 879 | 216 |
| RC Restoration | Shed | 30-Jun-08 | 6,985 | 6,985 | S/L | 20 | 29 | 349 | 5,004 | 1,981 |
| W.B.Morrison | 7 wood doors | 31-Jul-08 | 3,073 | 3,073 | S/L | 15 | 17 | 205 | 2,920 | 153 |
| Titan Mechanical | Compressor HVAC unit | 31-Jul-08 | 5,014 | 5,014 | S/L | 12 | 35 | - | 5,014 | |
| The Barn Yard | Smoking Shed | 31-Jul-08 | 1,494 | 1,494 | S/L | 20 | 6 | 75 | 1,066 | 428 |
| Sexaur | Grab Bars | 31-Aug-08 | 6,067 | 6,067 | S/L | 15 | 34 | 404 | 5,727 | 340 |
| Sexaur | Smoke Detectors | 31-Aug-08 | 1,209 | 1,209 | S/L | 10 | 10 | - | 1,209 | 25 |
| Sexaur | Returned Grab Bars | 31-Aug-08 | (4,119) | (4,119) | S/L | 15 | (23) | (275) | (3,892) | (226) |
| | | | | | | | | | | |
| 2008 Ending | | TOTALS | 2,632,621 | 2,637,041 | | | 10,669 | 85,227 | 2,559,895 | 77,146 |
| CL 4 D | D - C. 7 ' 1 - ' | 15.0 . 00 | 42.455 | 42.455 | 0.7 | | 241 | 2.007 | 40.550 | 2.800 |
| CL&P | Retrofit Lighting | 15-Oct-08 | 43,457 | 43,457 | S/L | 15 | 241 | 2,897 | 40,559 | 2,898 |
| Best Welding | Wrought Iron Railings | 30-Oct-08 | 1,487 | 1,487 | S/L | 15 | 8 | 99 | 1,387 | 100 |
| WH Morrison Co | 3 Wooden Doors #14 & Dietary | 8-Dec-08 | 1,695 | 1,695 | S/L | 15 | 9 | 113 | 1,563 | 132 |
| Titan Mechanical | Second Compressor | 31-Dec-08 | 1,465 | 1,465 | S/L | 12 | 10 | | 1,465 | = |
| Jay LaChance | Ceiling Tiles | 28-Feb-09 | | 3,600 | | 8 | 38 | 520 | 3,600 | 14 |
| Riley Plumbing | 2 Utility Sinks | 28-Feb-09 | | 3,450 | | 20 | 14 | 173 | 2,361 | 1,089 |
| Fire Protection | Pennit & Sprinkler Heads over Dryers | 31-Mar-09 | | 1,236 | | 25 | 4 | 49 | 669 | 567 |
| Huntington Power | Generator Rental on Replacement (Generator on Realty Books) | 31-Mar-09 | , | 3,313 | | 20 | 14 | 166 | 2,252 | 1,061 |
| Perfectemp Heating | Replace Compressor Walk-in Freezer | 31-Mar-09 | 2,441 | 2,441 | S/L | 15 | 14 | 163 | 2,212 | 229 |
| INPro Corporation | Wall Covering | 17-Apr-09 | | 1,666 | | 5 | 28 | (2) | 1,666 | 12/ |
| Saucier Mechancial Svrs | Air Conditioning System for new Server Room | 2 l-Apr-09 | 3,740 | 3,740 | | 10 | 31 | 355 | 3,553 | 187 |
| Collier Electrical Corp | Prepare electrical feed for new Server Room | 30-Арг-09 | , | 2,955 | | 15 | 16 | 197 | 2,659 | 296 |
| Collier Electric/Saucier Mech | · · | 29-May-09 | | 19,149 | | 10 | 160 | - | 19,150 | - 20 |
| Ward Kipp | Computer wiring | 31-May-09 | | 900 | | 5 | 15 | - | 900 | 341 |
| Build N Serve | Server Wiring | !-Jun-09 | | 1,458 | | 5 | 24 | - | 1,458 | |
| Susaya Concrete | Concrete Walk at Rear Entrance/Driveway Repair/New Walkway | 16-Jun-09 | , | 8,425 | | 15 | 47 | 562 | 7,491 | 934 |
| SMD | Electromag Door Locks Back & Service Entrances | 19-Jun-09 | 7,440 | 7,440 | S/L | 10 | 62 | - | 7,440 | :•: |
| First American | Permits for Cogeneration System | 22-Jun-09 | 2,183 | 2,183 | S/L | 15 | 12 | 146 | 1,943 | 240 |
| Jay LaChance | Elevator Panels | 30-Jun-09 | , | 5,085 | | 10 | 42 | | 5,085 | |
| First American | Cogeneration System | 2-Jul-09 | 169,222 | 169,222 | S/L | 20 | 705 | 8,461 | 112,109 | 57,113 |
| Courtesy Carpet | Elevator Flooring | 4-Aug-09 | 737 | 737 | | 10 | 6 | 190 | 737 | 300 |
| Fournier Irrigation/Collier | Lawn Sprinkler System | 28-Aug-09 | 10,957 | 10,957 | S/L | 15 | 61 | 730 | 9,615 | 1,342 |
| Michael Gervais | Wallpaper Hallway and Nurses Station | 28-Aug-09 | 1,651 | 1,651 | S/L | 5 | 28 | | 1,651 | 120 |
| Collier Electric | Electrical upgrades | 31-Aug-09 | 2,694 | 2,694 | S/L | 15 | 15 | 180 | 2,367 | 327 |
| Jay LaChance | Fire Door Glass | 2-Sep-09 | 804 | 804 | S/L | 10 | 7 | 36 | 803 | |
| Ward Kipp | Server Wiring | 8-Sep-09 | 6,173 | 6,173 | S/L | 5 | 103 | 4: | 6,173 | (in) |
| Custom Exterior Landscape | Front Entrance Landscaping | 10-Sep-09 | 8,787 | 8,787 | S/L | 10 | 73 | 127 | 8,787 | - |
| Build 'N Serve | Network Upgrade Hardware & Labor | 10-Sep-09 | 6,189 | 6,189 | S/L | 5 | 103 | 1.50 | 6,189 | 750 |
| Build N Serve | Network Wiring | 15-Sep-09 | 3,751 | 3,751 | S/L | 5 | 63 | E | 3,751 | (*S |
| WH Morrison Co | Automatic Door Openers | 30-Sep-09 | | 9,986 | | 15 | 55 | 666 | 8,712 | 1,275 |
| Riley Signs | Front Sign | 30-Sep-09 | 755 | 755 | | 5 | 13 | | 755 | 199 |
| | Disposed Assets | | | (4,666 |) | | | | 9 | (4,666) |
| | 2000 P. L | TOTALE | 2.000.477 | 2.0/0.224 | = | | 12 (00 | 99,829 | 2,828,957 | 140,270 |
| | 2009 Balance | TOTALS | 2,969,471 | 2,969,224 | = €2 | | 12,690 | 99,829 | 2,020,95/ | 140,270 |

| Vendor | Description | DATE OF ACQUISITION | HISTORICAL COST | BASIS FOR DEPRECIATION | DEPR METHOD | USEFUL LIFE (IN YEARS) | MONTHLY DEPRECIATION | Depreciation EXPENSE FY 2022 | ACC'D EXPENSE as of 9/30/22 | NET VALUE |
|-----------------|---|---------------------------|--------------------|------------------------------|----------------|------------------------------|-------------------------|------------------------------------|-----------------------------------|--------------|
| | Front Sign Sales Tax | 10/1/2009 | 45 | 45 | S/L | 5 | ī | | 45 | |
| | Access Doors for Hot Water Coils | 10/29/2009 | 936 | 936 | S/L | 20 | 4 | 47 | 610 | 326 |
| | Door Locks | 10/29/2010 | 1,009 | 1,009 | S/L | 15 | 6 | 67 | 873 | 136 |
| | 5 More Registers from Air Handler to Wings | 11/30/2009 | 3,700 | 3,700 | S/L | 20 | 15 | 185 | 2,343 | 1,357 |
| | Exhaust for boiler room | 11/30/2009 | 1,525 | 1,525 | S/L | 20 | 6 | 76 | 964 | 561 |
| | Fix doors not hanging properly | 12/3/2009 | 1,914 | 1,914 | S/L | 15 | H | 128 | 1,576 | 338 |
| | All 3 Nurses Stations Counters Refaced | 12/14/2009 | 13,036 | 13,036 | S/L | 15 | 72 | 869 | 10,718 | 2,318 |
| | Fron Arch Walkway | 12/17/2009 | 14,814 | 14,814 | S/L | 15 | 82 | 988 | 12,183 | 2,631 |
| | Handrails | 1/15/2010 | 5,499 | 5,499 | S/L | 15 | 31 | 367 | 4,402 | 1,098 |
| | Exhaust Duct for Dishmachine | 1/29/2010 | 1,245 | 1,245 | S/L | 20 | 5 | 62 | 746 | 499 |
| | Formica | 2/19/2010 | 1,462 | 1,462 | S/L | 15 | 8 | 97 | 1,134 | 328 |
| | Exhaust fan in Oxygen room | 3/22/2010 | 1,095 | 1,095 | S/L | 20 | 5 | 55 | 622 | 473 |
| | Install Wallpaper | 4/9/2010 | | 1,908 | S/L | 5 | 32 | - | 1,908 | 5 |
| | Concrete Walk Rear Entrance | 4/15/2010 | 2,133 | 2,133 | S/L | 15 | 12 | 142 | 1,563 | 570 |
| | Cobblestone along Entranceway | 5/22/2010 | 2,438 | 2,438 | S/L | 5 | 41 | 341 | 2,438 | |
| | Outlet in Maintenance Workshop | 6/30/2010 | | 1,362 | S/L | 15 | 8 | 91 | 940 | 423 |
| | Resident Bathroom Door Protectors | _8/16/2010 | , | 8,890 | S/L | 15 | 49 | 593 | 5,731 | 3,159 |
| | - | | | | | | | | | -, |
| | 2010 Balance | TOTALS | 3,032,481 | 3,032,235 | 50 \$0 | | 13,078 | 103,596 | 2,877,753 | 154,487 |
| | Walkway to Gazebo | 10/22/2010 | 4,688 | 4,688 | S/L | 15 | 26 | 313 | 3,753 | 935 |
| | New outlets in Breakroom and Dietary Office | 10/28/2010 | 1,046 | 1,046 | S/L | 15 | 6 | 70 | 838 | 208 |
| | 2 Pressure Regulators A/B Wings | 11/10/2010 | 869 | 869 | S/L | 20 | 4 | 43 | 515 | 354 |
| | Lines for installation of Steamer | 12/29/2010 | 1,301 | 1,301 | S/L | 10 | 11 | - | 1,301 | = |
| | Water main Pressure Regulator N/S Wing | 1/31/2011 | 1,198 | 1,198 | S/L | 10 | 10 | | 1,198 | |
| | Electrical Installation of Steamer | 1/31/2011 | 1,544 | 1,544 | S/L | 10 | 13 | 38 | 1,544 | := |
| | Renovate "Pub" room | 2/28/2011 | 1,570 | 1,570 | S/L | 15 | 9 | 105 | 1,223 | 347 |
| | Main Reception Counters & Cabinets | 8/5/2011 | 3,998 | 3,998 | \$/L | 15 | 22 | 267 | 2,979 | 1,019 |
| | 2011 Balance | TOTALS | 3,048,697 | 3,048,450 | 3 | - | 13,178 | 104,394 | 2,891,104 | 157,350 |
| | Total District | TOTALD | 5,040,077 | 5,010,130 | 92 | | 15,176 | 104,004 | 2,071,104 | 137,530 |
| 2012 Additions: | | | | | | | | | | |
| | Attic Lighting | 3/23/2012 | 4,884 | 4,884 | S/L | 20 | 20 | 244 | 2,441 | 2,443 |
| | Cabinetry in Beauty Salon for Dentist | 5/25/2012 | 1,487 | 1,487 | S/L | 15 | 8 | 99 | 990 | 496 |
| | Emergency Water Main Hook up | 9/18/2012 | 2,340 | 2,340 | S/L | 25 | 8 | 94 | 938 | 1,401 |
| | Outlets for ELO Touch Screens | 9/27/2012 | 3,294 | 3,294 | S/L | 10 | 27 | 329 | 3,292 | 2 |
| | 2012 Balance | | 3,060,701 | 3,060,455 | | | 13,241 | 105,160 | 2.898,766 | 161,692 |
| | 2012 Billance | | 5,000,701 | 510001433 | | | 15,241 | 105,100 | 2,070,700 | 101,072 |
| 2013 Additions: | | | | | | | | | | |
| | Electrical Outlets for PT Office | 31-Oct-12 | 1,026 | 1,026 | S/L | 15 | 6 | 68 | 682 | 345 |
| | Water Main Repair | 18-Oct-12 | 890 | 890 | S/L | 10 | 7 | 89 | 890 | |
| | Water Softener | 13-Nov-12 | 2,606 | 2,606 | S/L | 10 | 22 | 258 | 2,605 | |
| | Wall Guards | 27-Dec-12 | 2,420 | 2,420 | S/L | 5 | 40 | - | 2,420 | (30) |
| | Blower Motor for RTU #7 | 2-Jan-13 | | 2,200 | | 20 | 9 | 110 | 1,100 | 1,100 |
| | Roof Mounted Exhaust Fan A Wing | 18-Feb-13 | 1,520 | 1,520 | S/L | 20 | 6 | 76 | 760 | 760 |
| | Dedicated Hot Water lines to Laundry | 12-Feb-13 | | 4,243 | S/L | 25 | 14 | 170 | 1,699 | 2,544 |
| | • | | ŕ | · | | | | | | |

| 2013 Ballinec | Vendor | Description | DATE OF ACQUISITION | HISTORICAL COST | BASIS FOR DEPRECIATION | DEPR METHOD | USEFUL LIFE (IN YEARS) | MONTHLY DEPRECIATION | Depreciation EXPENSE FY 2022 | ACC'D EXPENSE as of 9/30/22 | NET VALUE |
|--|---|--|---------------------------|--------------------|---------------------------------------|----------------|------------------------------|-------------------------|------------------------------------|-----------------------------------|--------------|
| Replace Pland in Boile Room 23-Oct-13 1,995 1,195 9, 115 9 106 955 | | 2013 Balance | | 3,075,606 | 3,075,359 | | | 13,346 | 105,931 | 2,908,921 | 166,441 |
| Replace Panel in Bolie Room 23-Oct-13 1,995 1,195 1,15 9 106 955 | 2014 Additions: | | | | | | | | | | |
| Onleas for De-cining Coheles S-Nov-13 1,638 1,638 SIL 15 9 109 922 1,776 | 201771111111111111111111111111111111111 | Replace Panel in Boiler Room | 23-Oct-13 | 1.595 | 1.595 | S/L | 15 | 9 | 106 | 955 | 640 |
| Coreclase Elevator, Dining Room & Lower Lobby 3-Jan-14 1,079 1,079 57L 5 18 - 1,080 | | · | | | , | | | | | | 656 |
| Wall Guards 31-Jan-14 2.029 2.029 \$7.1 5 34 - 2.028 \$7.2 5 34 4 5 5 5 5 5 5 5 5 | | | | | | | | | | | - |
| Compressor in South Wing | | Wall Guards | 31-Jan-14 | 2,029 | | S/L | 5 | 34 | - | 2,028 | - |
| Compressor #3 over Cooks Line 28-Augu-14 2,970 2,070 8/L 10 17 297 1,863 1,888 1 | | Kitchen Cook Exhaust Fan | 30-Jun-14 | | | S/L | 10 | 22 | 268 | | 268 |
| 2014 Balance 3,0 %,1 %,1 %,2 %,2 %,2 %,2 %,2 %,2 %,2 %,2 %,2 %,2 | | Compressor in South Wing | 31-Jul-14 | 6,522 | 6,522 | S/L | 10 | 54 | 652 | 5,869 | 654 |
| 2014 Balance 3,095,107 3,094,861 107,273 2,925,997 | | Compressor #3 over Cooks Line | 28-Aug-14 | 2,070 | 2,070 | S/L | 10 | 17 | 207 | 1,863 | 207 |
| Saucier Mechanical Svrs Saucier Mechanical Svrs Saucier Mechanical Svrs Saucier Mechanical Svrs Meter for Bolier #3 7-Jan-15 1,200 1,320 8/L 15 7 88 704 88 704 7-Jan-15 1,200 1,320 8/L 15 7 88 704 7-Jan-15 1,200 1,320 8/L 15 6 70 560 70 560 7-Jan-15 1,200 1,200 8/L 15 6 70 560 7-Jan-15 1,200 1,200 8/L 15 5 65 520 7-Jan-15 1,200 1,200 8/L 15 5 65 520 7-Jan-15 1,200 1,200 8/L 15 5 65 520 7-Jan-15 1,200 1,200 8/L 15 12 142 1,136 7-Jan-15 1,200 1,200 8/L 15 12 142 1,136 7-Jan-15 1,200 1,200 8/L 15 15 12 142 1,136 7-Jan-15 1,200 1,200 8/L 15 15 12 142 1,136 7-Jan-15 1,200 1,200 8/L 15 12 142 1,136 7-Jan-15 1,200 1,200 8/L 15 12 142 1,136 7-Jan-15 1,200 1,200 8/L 15 12 142 1,136 7-Jan-15 1,200 1, | | Vinyl Cove Base | 31-Aug-14 | 1,888 | 1,888 | S/L | 5 | 31 | 2 | 1,888 | - |
| Saucier Mechanical Svrs Exhaust Fans Bathrooms A Wing/B Lounge 11-Dec-14 1,745 | | 2014 Balance | | 3,095,107 | 3,094,861 | | | | 107,273 | 2,925,997 | 168,866 |
| Saucier Mechancial Svrs Motor for Boiler #3 7-4m-15 1.320 1.320 S/L 15 7 88 704 | 2015 Additions: | | | | - 0 /3 | | | | | | |
| Saucier Mechancial Svrs Motor for Boiler #3 7-3an-15 1,320 1,320 S/L 15 7 88 704 | | Exhaust Fans Bathrooms A Wing/B Lounge | 11-Dec-14 | 1.745 | 1.745 | S/L | 10 | 15 | 175 | 1.400 | 346 |
| Saucier Mechancial Svrs | Saucier Mechancial Syrs | 6 6 | | , , | , | | | | | , | 616 |
| Precision Electrical Outlets in Nurses Office 2-Mar-15 973 973 973 571 15 5 65 520 | Saucier Mechancial Svrs | | | , | , | | | 6 | | | 490 |
| Fire Protection 8 Sprinkler Heads 11-Aug-15 1,042 1,042 1,042 1,042 1,042 3/1 25 3 42 336 427 3,416 4268 4,268 5/L 10 36 427 3,416 4268 4,268 4,268 5/L 10 36 427 3,416 427 42 | Precision Electrical | Outlets in Nurses Office | 2-Mar-15 | , | | | | 5 | 65 | 520 | 453 |
| Proline | SMD | Electromagnetic Door Lock | 11-Aug-15 | 2,132 | 2,132 | S/L | 15 | 12 | 142 | 1,136 | 996 |
| Proline | Fire Protection | 8 Sprinkler Heads | 11-Aug-15 | 1,042 | 1,042 | S/L | 25 | 3 | 42 | 336 | 706 |
| 2016 Additions: 2 Mixing Valves 31-Oct-15 1,776 1,776 5/L 7 21 252 1,776 | Proline | Hatco Water Booster | - | | 4,268 | S/L | 10 | 36 | 427 | 3,416 | 852 |
| Joel Martin 2 Mixing Valves 31-Oct-15 1,776 1,778 1,778 1,778 1,776 1,778 | | 2015 Balance | | 3,107,637 | 3,107,391 | | | 10 | 108,282 | 2,934,068 | 173,325 |
| Magnum Insutries LLC North and South Shower Room Remodel and Repair 1-Sep-16 10,915 10,915 8/L 15 61 728 5,096 | 2016 Additions: | | | | | | | | | | |
| Magnum Insutries LLC North and South Shower Room Remodel and Repair 1-Sep-16 10,915 10,915 8/L 15 61 728 5,096 | Joel Martin | 2 Mixing Valves | 31-Oct-15 | 1 776 | 1 776 | S/L | 7 | 21 | 252 | 1 776 | |
| 2017 Additions: | | | | | | | | | | | 5,820 |
| 2017 Additions: | | 1016 P-1 | | 7 120 220 | 2 120 002 | | | | 100.262 | 2.040.020 | 150 145 |
| Magnum Insutries LLC 50% doposit on back wing 3 ea. Shower stalls, common area, 1 batl 30-Nov-16 3,656 3,656 S/L 15 20 244 1,464 Plimpton & Hills wade drains for back wing shower project 31-Dec-16 1,318 1,318 S/L 15 7 88 528 Accurate Commercial Door & Protection Testing new fire door on the elevator machine room 31-Jan-17 935 935 S/L 20 4 47 282 Fire Protection Testing replaced 9 dry sidewall sprinklers above rear double doors & 2 drg 31-Jan-17 1,820 1,820 S/L 25 6 73 438 Martin, Joel shower renovation phase ii, removed and replaced 4 shower staine 14-Feb-17 1,787 S/L 15 10 119 714 Magnum Insutries LLC balance due on the back wing 13-Mar-17 3,656 3,656 S/L 15 20 244 1,464 Saucier Mechanical first installment for replacement of indoor fan 31-Jul-17 1,695 1,695 S/L 5 28 | | 2016 Balance | | 3,120,328 | 3,120,082 | | | | 109,262 | 2,940,939 | 179,145 |
| Magnum Insutries LLC 50% dposit on back wing 3 ea. Shower stalls, common area, 1 bat! 30-Nov-16 3,656 3,656 S/L 15 20 244 1,464 Plimpton & Hills wade drains for back wing shower project 31-Dec-16 1,318 1,318 S/L 15 7 88 528 Accurate Commercial Door & new fire door on the elevator machine room 31-Jan-17 935 935 S/L 20 4 47 282 Fire Protection Testing replaced 9 dry sidewall sprinklers above rear double doors & 2 dry 31-Jan-17 1,820 1,820 S/L 25 6 73 438 Martin, Joel shower renovation phase ii, removed and replaced 4 shower staine 14-Feb-17 1,787 S/L 15 10 119 714 Magnum Insutries LLC balance due on the back wing 13-Mar-17 3,656 3,656 S/L 15 20 244 1,464 Saucier Mechanical first installment for replacement of indoor fan 31-Jul-17 1,695 1,695 S/L 5 28 - 1,695 <td>2017 Additions:</td> <td></td> | 2017 Additions: | | | | | | | | | | |
| Plimpton & Hills wade drains for back wing shower project 31-Dec-16 1,318 1,318 S/L 15 7 88 528 Accurate Commercial Door & new fire door on the elevator machine room 31-Jan-17 935 935 S/L 20 4 47 282 Fire Protection Testing replaced 9 dry sidewall sprinklers above rear double doors & 2 dry 31-Jan-17 1,820 1,820 S/L 25 6 73 438 Martin, Joel shower renovation phase ii, removed and replaced 4 shower stains 14-Feb-17 1,787 1,787 S/L 15 10 119 714 Magnum Insutries LLC balance due on the back wing 13-Mar-17 3,656 3,656 S/L 15 20 244 1,464 Saucier Mechanical first installment for replacement of indoor fan 31-Jul-17 1,695 1,695 S/L 5 28 - 1,695 Saucier Mechanical final installment for replacement of indoor fan motor 30-Sep-17 1,728 1,728 3/L 10 14 173 1,038 Saucier Mechanical final installment for replacement of indoor fan motor 30-Sep-17 1,594 1,594 S/L 5 27 - 1,594 2018 Additions: 2018 Additions 2018 Additional 201 | /. = | 50% droot on back wing 3 ea. Shower stalls, common area. I had | 30 Nov. 16 | 3 656 | 3 656 | 6.41 | 15 | 20 | 244 | 1.464 | 2,192 |
| Accurate Commercial Door & new fire door on the elevator machine room 31-Jan-17 935 935 S/L 20 4 47 282 Fire Protection Testing replaced 9 dry sidewall sprinklers above rear double doors & 2 dry 31-Jan-17 1,820 1,820 S/L 25 6 73 438 Martin, Joel shower renovation phase ii, removed and replaced 4 shower stains 14-Feb-17 1,787 S/L 15 10 119 714 Magnum Insutries LLC balance due on the back wing 13-Mar-17 3,656 3,656 S/L 15 20 244 1,464 Saucier Mechanical first installment for replacement of indoor fan 31-Jul-17 1,695 1,695 S/L 5 28 - 1,695 Accurate Security additional secure care system 30-Sep-17 1,728 1,728 S/L 10 14 173 1,038 Saucier Mechanical final installment for replacement of indoor fan motor 30-Sep-17 1,594 1,594 S/L 5 27 - 1,594 2017 Balance 3,138,517 3,138,271 110,250 2,950,156 | _ | | | , | , | | | | | | 790 |
| Fire Protection Testing replaced 9 dry sidewall sprinklers above rear double doors & 2 dry 31-Jan-17 1,820 1,820 S/L 25 6 73 438 Martin, Joel shower renovation phase ii, removed and replaced 4 shower staine 14-Feb-17 1,787 1,787 S/L 15 10 119 714 Magnum Insutries LLC balance due on the back wing 13-Mar-17 3,656 3,656 S/L 15 20 244 1,464 Saucier Mechanical first installment for replacement of indoor fan 31-Jul-17 1,695 1,695 S/L 5 28 - 1,695 Accurate Security additional secure care system 30-Sep-17 1,728 1,728 S/L 10 14 173 1,038 Saucier Mechanical final installment for replacement of indoor fan motor 30-Sep-17 1,594 1,594 S/L 5 27 - 1,594 2017 Balance 3,138,517 3,138,271 110,250 2,950,156 | | 0 1 3 | | , | , | | | | | | 653 |
| Martin, Joel shower renovation phase ii, removed and replaced 4 shower staine 14-Feb-17 1,787 1,787 S/L 15 10 119 714 Magnum Insutries LLC balance due on the back wing 13-Mar-17 3,656 3,656 S/L 15 20 244 1,464 Saucier Mechanical first installment for replacement of indoor fan 31-Jul-17 1,695 1,695 S/L 5 28 - 1,695 Accurate Security additional secure care system 30-Sep-17 1,728 1,728 S/L 10 14 173 1,038 Saucier Mechanical final installment for replacement of indoor fan motor 30-Sep-17 1,594 1,594 S/L 5 27 - 1,594 2017 Balance 3,138,517 3,138,271 110,250 2,950,156 | | | | | | | | | | | 1,382 |
| Magnum Insutries LLC balance due on the back wing 13-Mar-17 3,656 3,656 8/L 15 20 244 1,464 Saucier Mechanical first installment for replacement of indoor fan 31-Jul-17 1,695 1,695 8/L 5 28 - 1,695 Accurate Security additional secure care system 30-Sep-17 1,728 1,728 S/L 10 14 173 1,038 Saucier Mechanical final installment for replacement of indoor fan motor 30-Sep-17 1,594 1,594 S/L 5 27 - 1,594 2017 Balance 3,138,517 3,138,271 3,138,271 110,250 2,950,156 | 0 | | | | | | | 10 | | | 1,073 |
| Saucier Mechanical first installment for replacement of indoor fan 31-Jul-17 1,695 1,695 S/L 5 28 - 1,695 Accurate Security additional secure care system 30-Sep-17 1,728 1,728 S/L 10 14 173 1,038 Saucier Mechanical final installment for replacement of indoor fan motor 30-Sep-17 1,594 1,594 S/L 5 27 - 1,594 2017 Balance 3,138,517 3,138,271 110,250 2,950,156 | · | | | | , | | | | | | 2,192 |
| Accurate Security additional secure care system 30-Sep-17 1,728 1,728 S/L 10 14 173 1,038 Saucier Mechanical final installment for replacement of indoor fan motor 30-Sep-17 1,594 1,594 S/L 5 27 - 1,594 2017 Balance 3,138,517 3,138,271 110,250 2,950,156 | _ | | | , | , | | | | | , | |
| Saucier Mechanical final installment for replacement of indoor fan motor 30-Sep-17 1,594 1,594 S/L 5 27 - 1,594 2017 Balance 3,138,517 3,138,271 110,250 2,950,156 2018 Additions: | Accurate Security | • | | | 1,728 | S/L | 10 | 14 | 173 | 1,038 | 690 |
| 2018 Additions: | Saucier Mechanical | | | | 1,594 | S/L | 5 | 27 | | 1,594 | |
| | 41 | 2017 Balance | | 3,138,517 | 3,138,271 | | | | 110,250 | 2,950,156 | 188,117 |
| | 2018 Additions: | | | | | <u> </u> | | | | | |
| | Chem Aqua | water softener with pvc piping option | 28-Feb-18 | 3 13,559 | 13,559 | S/L | 10 | 113 | 1,356 | 6,780 | 6,779 |
| Saucier Mechanical new taco pump 28-Feb-18 1,181 1,181 S/L 5 20 236 1,180 | | , , , , , , , | | | , | | | | | , | ,,,,,, |
| Saucier Mechanical replacement of base board heat in 8 rooms 31-Mar-18 11,135 11,135 S/L 10 93 1,114 5,570 | | | | | · · · · · · · · · · · · · · · · · · · | | | | | , | 5,565 |

{6316c223-7b62-45f3-af73-3945ac2f94f0}

| Vendor | Description | DATE OF | HISTORICAL COST | BASIS FOR | DEPR. METHOD | USEFUL LIFE | MONTHLY | Depreciation EXPENSE | ACC'D EXPENSE | NET VALUE |
|---|---|---|---|---|--|--|--|--|--|---|
| | | ACQUISITION | | DEPRECIATION | | (IN YEARS) | DEPRECIATION | FY 2022 | as of 9/30/22 | |
| Saucier Mechanical | replacement of base board heat in room 12A | 31-Mar-18 | 1,315 | 1,315 | S/L | 10 | 11 | 132 | 660 | 655 |
| Saucier Mechanical | installation of water softener | 31-Mar-18 | 7,900 | 7,900 | S/L | 10 | 66 | 790 | 3,950 | 3,950 |
| Saucier Mechanical | first installation for the shot feeder (for the boiler system) | 31-Mar-18 | 1,150 | 1,150 | S/L | 15 | 6 | 77 | 385 | 765 |
| Saucier Mechanical | final installation of the water softener | 30-Apr-18 | 875 | 875 | S/L | 10 | 7 | 88 | 440 | 435 |
| Sexauer | replaced wali water faucet | 31-May-18 | 649 | 649 | S/L | 15 | 4 | 43 | 215 | 434 |
| CL&P Loan | lighting project | 31-May-18 | 86,231 | 86,231 | S/L | 20 | 359 | 4,312 | 21,560 | 64,671 |
| Dunning Stone | materials needed for stone box built around ahe sign | 30-Jun-18 | 728 | 728 | S/L | 15 | 4 | 49 | 245 | 483 |
| Peters Landscaping | labor to build new stone wall around ahe sign | 30-Jun-18 | 2,291 | 2,291 | S/L | 15 | 13 | 153 | 765 | 1,526 |
| Saucier Mechanical | first installment for replacement of compressor and filter drier for | | 920 | 920 | S/L | 15 | 5 | 61 | 305 | 615 |
| Saucier Mechanical | final installment for replacement of compressor and filter drier fo | | 920 | 920 | S/L | 15 | 5 | 61 | 305 | 615 |
| Saucier Mechanical | part of installation of water softener | 31-Jul-18 | 660 | 660 | S/L | 10 | 6 | 66 | 330 | 330 |
| Plimpton & Hills | work done to existing water line | 31-Jul-18 | 1,614 | 1,614 | S/L | 15 | 9 | 108 | 540 | 1,074 |
| Saucier Mechanical | north & south wing, replace all heating registers | 30-Sep-18 | 845 | 845 | S/L | 15 | 5 | 56 | 280 | 565 |
| | | | | | | | | | | |
| 2018 Disposals: | | | | | | | | | | - |
| Various | Disposal of Assets Prior to 2008 | Various | (685,095) | (685,095) | S/L | Var | 2 | 3,504 | (685,095) | 74 |
| | | | , , , | , , , | | | | | , , , | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | 2018 Balance | | 2,585,395 | 2,585,149 | | | | 122,456 | 2,308,571 | 276,580 |
| 2019 Additions: | 2018 Balance | | 2,585,395 | 2,585,149 | | | | 122,456 | 2,308,571 | 276,580 |
| | | 31-Oct-18 | | | \$/I | 15 | 7 | | | |
| Saucier Mechanical | north & south wing, replace all heating registers | 31-Oct-18 | 1,340 | 1,340 | S/L S/I | 15 | 7 25 | 89 | 356 | 984 |
| Saucier Mechanical Door & Security Solutions, L. | north & south wing, replace all heating registers 1 3 doors & associated hardware | 31-Dec-18 | 1,340 4,493 | 1,340 4,493 | S/L | 15 | 25 | 89 300 | 356 1,200 | 984 3,293 |
| Saucier Mechanical Door & Security Solutions, L. Encore Fire Protectino | north & south wing, replace all heating registers L 3 doors & associated hardware new backflow preventers- sprinklers | 31-Dec-18 31-Dec-18 | 1,340 4,493 5,161 | 1,340 4,493 5,161 | S/L S/L | 15 15 | 25 29 | 89 300 344 | 356 1,200 1,376 | 984 3,293 3,785 |
| Saucier Mechanical Door & Security Solutions, Li Encore Fire Protectino Door & Security Solutions, Li | north & south wing, replace all heating registers 1. 3 doors & associated hardware new backflow preventers- sprinklers 1. loading dock door | 31-Dec-18 31-Dec-18 28-Feb-19 | 1,340 4,493 5,161 2,309 | 1,340 4,493 5,161 2,309 | S/L S/L S/L | 15 15 15 | 25 29 13 | 89 300 344 154 | 356 1,200 1,376 616 | 984 3,293 3,785 1,693 |
| Saucier Mechanical Door & Security Solutions, Li Encore Fire Protectino Door & Security Solutions, Li Reed Mechanical | north & south wing, replace all heating registers 1. 3 doors & associated hardware new backflow preventers- sprinklers 1. loading dock door Install new air scoop, install new high capacity vent | 31-Dec-18 31-Dec-18 28-Feb-19 31-May-19 | 1,340 4,493 5,161 2,309 5,143 | 1,340 4,493 5,161 2,309 5,143 | S/L S/L S/L S/L | 15 15 15 | 25 29 13 29 | 89 300 344 154 343 | 356 1,200 1,376 616 1,372 | 984 3,293 3,785 1,693 3,771 |
| Saucier Mechanical Door & Security Solutions, Li Encore Fire Protectino Door & Security Solutions, Li Reed Mechanical Artfx | north & south wing, replace all heating registers 1. 3 doors & associated hardware new backflow preventers- sprinklers 1. loading dock door Install new air scoop, install new high capacity vent visitor entrance & additional parking signs | 31-Dec-18 31-Dec-18 28-Feb-19 31-May-19 30-Jun-19 | 1,340 4,493 5,161 2,309 5,143 2,287 | 1,340 4,493 5,161 2,309 5,143 2,287 | S/L S/L S/L S/L S/L | 15 15 15 15 | 25 29 13 29 | 89 300 344 154 343 152 | 356 1,200 1,376 616 1,372 608 | 984 3,293 3,785 1,693 3,771 1,679 |
| Saucier Mechanical Door & Security Solutions, Li Encore Fire Protectino Door & Security Solutions, Li Reed Mechanical Artfx Dunning Stone | north & south wing, replace all heating registers L 3 doors & associated hardware new backflow preventers- sprinklers L loading dock door Install new air scoop, install new high capacity vent visitor entrance & additional parking signs estate wall & patiop courtyard | 31-Dec-18 31-Dec-18 28-Feb-19 31-May-19 30-Jun-19 31-Jul-19 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 | 1,340 4,493 5,161 2,309 5,113 2,287 6,669 | S/L S/L S/L S/L S/L S/L | 15 15 15 15 15 | 25 29 13 29 13 37 | 89 300 344 154 343 152 445 | 356 1,200 1,376 616 1,372 608 1,780 | 984 3,293 3,785 1,693 3,771 1,679 4,889 |
| Saucier Mechanical Door & Security Solutions, Li Encore Fire Protectino Door & Security Solutions, Li Reed Mechanical Artfx Dunning Stone Peters Landscaping | north & south wing, replace all heating registers 1. 3 doors & associated hardware new backflow preventers- sprinklers 1. loading dock door Install new air scoop, install new high capacity vent visitor entrance & additional parking signs estate wall & patiop courtyard install patio in courtyard | 31-Dec-18 31-Dec-18 28-Feb-19 31-May-19 30-Jun-19 31-Jul-19 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 | S/L S/L S/L S/L S/L S/L S/L | 15 15 15 15 15 15 | 25 29 13 29 13 37 61 | 89 300 344 154 343 152 445 726 | 356 1,200 1,376 616 1,372 608 1,780 2,904 | 984 3,293 3,785 1,693 3,771 1,679 4,889 7,986 |
| Saucier Mechanical Door & Security Solutions, Li Encore Fire Protectino Door & Security Solutions, Li Reed Mechanical Artfx Dunning Stone Peters Landscaping New Britain Fence | north & south wing, replace all heating registers 1 3 doors & associated hardware new backflow preventers- sprinklers 1 loading dock door Install new air scoop, install new high capacity vent visitor entrance & additional parking signs estate wall & patiop courtyard install patio in courtyard installed 79" of 5' high vinyl fencing | 31-Dec-18 31-Dec-18 28-Feb-19 31-May-19 30-Jun-19 31-Jul-19 31-Jul-19 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 | S/L S/L S/L S/L S/L S/L S/L S/L | 15 15 15 15 15 15 15 15 | 25 29 13 29 13 37 61 22 | 89 300 344 154 343 152 445 726 262 | 356 1,200 1,376 616 1,372 608 1,780 2,904 1,048 | 984 3,293 3,785 1,693 3,771 1,679 4,889 7,986 2,887 |
| Saucier Mechanical Door & Security Solutions, Li Encore Fire Protectino Door & Security Solutions, Li Reed Mechanical Artfx Dunning Stone Peters Landscaping New Britain Fence Saucier Electrical | north & south wing, replace all heating registers 1 3 doors & associated hardware new backflow preventers- sprinklers 1 loading dock door Install new air scoop, install new high capacity vent visitor entrance & additional parking signs estate wall & patiop courtyard install patio in courtyard installed 79" of 5' high vinyl fencing replacement of compressor, filter drier | 31-Dec-18 31-Dec-18 28-Feb-19 31-May-19 30-Jun-19 31-Jul-19 31-Jul-19 31-Jul-19 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 | S/L S/L S/L S/L S/L S/L S/L S/L S/L | 15 15 15 15 15 15 15 15 15 | 25 29 13 29 13 37 61 22 | 89 300 344 154 343 152 445 726 262 238 | 356 1,200 1,376 616 1,372 608 1,780 2,904 1,048 | 984 3,293 3,785 1,693 3,771 1,679 4,889 7,986 2,887 2,618 |
| Saucier Mechanical Door & Security Solutions, L. Encore Fire Protectino Door & Security Solutions, L. Reed Mechanical Artfx Dunning Stone Peters Landscaping New Britain Fence Saucier Electrical Precision Electrical | north & south wing, replace all heating registers 1 3 doors & associated hardware new backflow preventers- sprinklers 1 loading dock door Install new air scoop, install new high capacity vent visitor entrance & additional parking signs estate wall & patiop courtyard install patio in courtyard installed 79" of 5' high vinyl fencing replacement of compressor, filter drier fenced in patio area delayed egress lock alternate | 31-Dec-18 31-Dec-18 28-Feb-19 31-May-19 30-Jun-19 31-Jul-19 31-Jul-19 31-Aug-19 30-Sep-19 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 3,690 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 3,690 | S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L | 15 15 15 15 15 15 15 15 15 15 | 25 29 13 29 13 37 61 22 20 21 | 89 300 344 154 343 152 445 726 262 238 246 | 356 1,200 1,376 616 1,372 608 1,780 2,904 1,048 952 984 | 984 3,293 3,785 1,693 3,771 1,679 4,889 7,986 2,887 2,618 2,706 |
| Saucier Mechanical Door & Security Solutions, Li Encore Fire Protectino Door & Security Solutions, Li Reed Mechanical Artfx Dunning Stone Peters Landscaping New Britain Fence Saucier Electrical | north & south wing, replace all heating registers 1 3 doors & associated hardware new backflow preventers- sprinklers 1 loading dock door Install new air scoop, install new high capacity vent visitor entrance & additional parking signs estate wall & patiop courtyard install patio in courtyard installed 79" of 5' high vinyl fencing replacement of compressor, filter drier | 31-Dec-18 31-Dec-18 28-Feb-19 31-May-19 30-Jun-19 31-Jul-19 31-Jul-19 31-Jul-19 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 | S/L S/L S/L S/L S/L S/L S/L S/L S/L | 15 15 15 15 15 15 15 15 15 | 25 29 13 29 13 37 61 22 | 89 300 344 154 343 152 445 726 262 238 | 356 1,200 1,376 616 1,372 608 1,780 2,904 1,048 | 984 3,293 3,785 1,693 3,771 1,679 4,889 7,986 2,887 2,618 |
| Saucier Mechanical Door & Security Solutions, L. Encore Fire Protectino Door & Security Solutions, L. Reed Mechanical Artfx Dunning Stone Peters Landscaping New Britain Fence Saucier Electrical Precision Electrical | north & south wing, replace all heating registers 1 3 doors & associated hardware new backflow preventers- sprinklers 1 loading dock door Install new air scoop, install new high capacity vent visitor entrance & additional parking signs estate wall & patiop courtyard install patio in courtyard installed 79" of 5' high vinyl fencing replacement of compressor, filter drier fenced in patio area delayed egress lock alternate | 31-Dec-18 31-Dec-18 28-Feb-19 31-May-19 30-Jun-19 31-Jul-19 31-Jul-19 31-Aug-19 30-Sep-19 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 3,690 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 3,690 | S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L | 15 15 15 15 15 15 15 15 15 15 | 25 29 13 29 13 37 61 22 20 21 | 89 300 344 154 343 152 445 726 262 238 246 | 356 1,200 1,376 616 1,372 608 1,780 2,904 1,048 952 984 | 984 3,293 3,785 1,693 3,771 1,679 4,889 7,986 2,887 2,618 2,706 |
| Saucier Mechanical Door & Security Solutions, Li Encore Fire Protectino Door & Security Solutions, Li Reed Mechanical Artfx Dunning Stone Peters Landscaping New Britain Fence Saucier Electrical Precision Electrical Precision Electrical | north & south wing, replace all heating registers 3 doors & associated hardware new backflow preventers- sprinklers loading dock door Install new air scoop, install new high capacity vent visitor entrance & additional parking signs estate wall & patiop courtyard install patio in courtyard installed 79" of 5' high vinyl fencing replacement of compressor, filter drier fenced in patio area delayed egress lock alternate otdoor patio wiring | 31-Dec-18 31-Dec-18 28-Feb-19 31-May-19 30-Jun-19 31-Jul-19 31-Jul-19 31-Aug-19 30-Sep-19 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 3,690 1,546 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 3,690 1,546 | S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L | 15 15 15 15 15 15 15 15 15 15 | 25 29 13 29 13 37 61 22 20 21 | 89 300 344 154 343 152 445 726 262 238 246 | 356 1,200 1,376 616 1,372 608 1,780 2,904 1,048 952 984 412 | 984 3,293 3,785 1,693 3,771 1,679 4,889 7,986 2,887 2,618 2,706 |
| Saucier Mechanical Door & Security Solutions, Li Encore Fire Protectino Door & Security Solutions, Li Reed Mechanical Artfx Dunning Stone Peters Landscaping New Britain Fence Saucier Electrical Precision Electrical Precision Electrical | north & south wing, replace all heating registers 1 3 doors & associated hardware new backflow preventers- sprinklers 1 loading dock door Install new air scoop, install new high capacity vent visitor entrance & additional parking signs estate wall & patiop courtyard install patio in courtyard installed 79" of 5' high vinyl fencing replacement of compressor, filter drier fenced in patio area delayed egress lock alternate | 31-Dec-18 31-Dec-18 28-Feb-19 31-May-19 30-Jun-19 31-Jul-19 31-Jul-19 31-Aug-19 30-Sep-19 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 3,690 | 1,340 4,493 5,161 2,309 5,143 2,287 6,669 10,890 3,935 3,570 3,690 | S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L | 15 15 15 15 15 15 15 15 15 15 | 25 29 13 29 13 37 61 22 20 21 | 89 300 344 154 343 152 445 726 262 238 246 | 356 1,200 1,376 616 1,372 608 1,780 2,904 1,048 952 984 | 984 3,293 3,785 1,693 3,771 1,679 4,889 7,986 2,887 2,618 2,706 |

| Vendor | Description | DATE OF | HISTORICAL COST | BASIS FOR | DEPR. METHOD | | MONTHLY | Depreciation EXPENSE | ACC'D EXPENSE | NET VALUE |
|--------------------------|--|-------------|--------------------|--------------|-----------------|------------|--------------|-------------------------|------------------|----------------|
| | | ACQUISITION | | DEPRECIATION | | (IN YEARS) | DEPRECIATION | FY 2022 | as of 9/30/22 | |
| Hartford Provision (HPC) | Dish machine upgrade | 8/31/2006 | (873) | (873) | | | - | 140 | (873) | 5 4 |
| Direct Supply | Commercial disposal | 8/31/2006 | (1,403) | (1,403) | | | - | | (1,403) | - |
| Otis Elevator | Install heaters in elevator cabs | 11/30/2006 | (1,000) | (1,000) | | | 2. | 150 | (1,000) | 標 |
| Otis Elevator | Install heaters in elevator cabs | 11/30/2006 | (3,079) | (3,079) | | | 5 | 38 | (3,079) | 2 5 |
| Casle | Facility upgrades: paint, wallpaper, carpet, electrical | 3/31/2007 | (45,625) | (45,625) | | | * | 36 | (45,625) | .= |
| Sherwin Williams | Wallpaper | 3/31/2007 | (954) | (954) | | | - | (a) | (954) | 14 |
| Titan Mechanical | Hot water tank Motor | 12/14/2007 | (1,748) | (1,748) | | | - 5 | 250 | (1,748) | 38 |
| The Barn Yard | Smoking Shed | 7/31/2008 | (1,494) | (1,494) | | | 5 | 655 | (1,494) | 37 |
| Perfectemp Heating | Replace Compressor Walk-in Freezer | 3/31/2009 | (2,441) | (2,441) | | | 3 | 300 | (2,441) | G. |
| Build 'N Serve | Network Upgrade Hardware & Labor | 9/10/2009 | (6,189) | (6,189) | | | 2 | 200 | (6,189) | 34 |
| Riley Signs | Front Sign | 9/30/2009 | (755) | (755) | | | | (*) | (755) | - |
| Riley Signs | Front Sign Sales Tax | 10/1/2009 | (45) | (45) | | | | 9.53 | (45) | (a) |
| CL&P | Retrofit Lighting | 10/15/2008 | (43,457) | (43,457) | | | ≋ | <u>;</u> ≇2 | (43,457) | 90 |
| ÷ | 2019 Balance | | 2,365,974 | 2,365,727 | | | | 125,858 | 2,051,725 | 314,005 |
| 2020 4 4 5 5 | TOTAL DAMINEE | | Ziecejs | 2,000,121 | | | | 220,000 | 210031720 | |
| 2020 Additions: | - , | | | | 0.15 | | | | 7.10 | |
| Tim Wheeler | install ramp on new patio | 10/31/2019 | , | 2,743 | S/L | 15 | 15 | 183 | 549 | 2,194 |
| The Home Depot | 6 solid core bifold doors | 12/31/2019 | 5,167 | 5,167 | S/L | 15 | 29 | 344 | 1,032 | 4,135 |
| Consider It | new doors for resident rooms | 12/31/2019 | , | 5,000 | S/L | 15 | 28 | 333 | 999 | 4,001 |
| Consider It | new doors for resident rooms | 1/31/2020 | 3,411 | 3,411 | S/L | 15 | 19 | 227 | 681 | 2,730 |
| Michael Gervais | wallpaper s-19 s-20 s-23 s-24 s-26 s-28 n-8 n-9 | 1/31/2020 | 4,935 | 4,935 | S/L | 15 | 27 | 329 | 987 | 3,948 |
| The Home Depot | 7 doors for n/s wings | 1/31/2020 | | 2,108 | S/L | 15 | 12 | 141 | 423 | 1,685 |
| Michael Gervais | installation of wallcovering 9 resident rooms | 1/31/2020 | , | 5,551 | S/L | 15 | 31 | 370 | 1,110 | 4,441 |
| ACI Flooring | Johnsonite vinyl cover base, vinyl wall base | 1/31/2020 | , | 2,164 | S/L | 15 | 12 | 144 | 432 | 1,732 |
| Michael Gervais | installation of wallcovering | 2/29/2020 | | 5,551 | S/L | 15 | 31 | 370 | 1,110 | 4,441 |
| Consider It | door conversion- sliders to bifolds | 2/29/2020 | | 1,980 | S/L | 15 | 11 | 132 | 396 | 1,584 |
| Michael Gervais | installation of wallcovering | 2/29/2020 | 4,935 | 4,935 | S/L | 15 | 27 | 329 | 987 | 3,948 |
| Cardmember Services | bestfloor distributors | 2/29/2020 | 1,850 | 1,850 | S/L | 15 | 10 | 123 | 369 | 1,481 |
| Stanley Access | door opener for patio | 2/29/2020 | 2,339 | 2,339 | S/L | 15 | 13 | 156 | 468 | 1,871 |
| Michael Gervais | wallpaper | 3/31/2020 | 5,551 | 5,551 | S/L | 15 | 31 | 370 | 1,110 | 4,441 |
| Precision Electrical | dish room exhaust fan wiring | 3/31/2020 | 1,430 | 1,430 | S/L | 15 | 8 | 95 | 285 | 1,145 |
| saucier mechanical | final installment of new diish duct | 3/31/2020 | 3,145 | 3,145 | S/L | 15 | 17 | 210 | 630 | 2,515 |
| sınd | surveilance video camera | 3/31/2020 | 2,386 | 2,386 | S/L | 15 | 13 | 159 | 477 | 1,909 |
| saucier mechanical | new dish duct | 3/31/2020 | 3,145 | 3,145 | S/L | 15 | 17 | 210 | 630 | 2,515 |
| | | | | | | | | | | |
| | 2020 Balance | | 2,429,367 | 2,429,121 | | | | 130,083 | 2,064,400 | 364,721 |
| 2021 Additions: | _ | | | | | | | | | |
| Saucier Mechanical | air scrubber- installment 1 | 10/31/2020 | 4,740 | 4,740 | S/L | 5 | 79 | 948 | 1,896 | 2,844 |
| Maichael Gervais | Install Wallpaper rooms a3, a7, a17 | 12/31/2020 | , | 1,850 | | 5 | 31 | 370 | 740 | 1,110 |
| Saucier Mechanical | air scrubber- installment 2 | 1/31/2021 | 5,795 | 5,795 | | 5 | 97 | 1,159 | 2,318 | 3,477 |
| Saucier Mechanical | replace 5 registers with aluminum | 3/31/2021 | | 898 | S/L | 15 | 5 | 60 | 120 | 778 |
| Hartford Provisions | booster heater | 3/31/2021 | | 4,427 | S/L | 10 | 37 | 443 | 886 | 3,541 |
| saucier mechanical | labor & materials for replacement of 5 steel registers to aluminur | | , | 1,795 | | 15 | 10 | 120 | 240 | 1,555 |
| sind | replaced broken pro x pax on front door exit and basement door | | | 1,611 | | 10 | 13 | 161 | 322 | 1,289 |
| Saucier mechanical | replacement of 3 hp blower on split unit for south wing | 5/31/2021 | | 1,830 | - | 10 | 15 | 183 | 366 | 1,464 |
| Savvy & Sons | grout | 6/30/2021 | , | 4,518 | | 10 | 38 | 452 | 904 | 3,614 |
| 52.13 60 00113 | Biran | 0, 50, 2021 | 1,518 | 1,510 | OLD | . • | 50 | 132 | ,,,, | -,- / / |

| Vendor | Description | DATE OF ACQUISITION | HISTORICAL COST | BASIS FOR DEPRECIATION | DEPR. METHOD | USEFUL LIFE (IN YEARS) | MONTHLY DEPRECIATION | Depreciation EXPENSE FY 2022 | ACC'D EXPENSE as of 9/30/22 | NET VALUE |
|-------------------------|---|---------------------------|--------------------|------------------------------|-----------------|------------------------------|-------------------------|------------------------------------|-----------------------------------|--------------|
| Michael Gervais | wallcoverings b4,6,10,16,14,26,28,30 | 8/31/2021 | 4,935 | 4,935 | S/L | (IN 1 EARS) | 27 | 329 | 658 | 4,277 |
| Michael Gervais | installation of wallcovering completed b20,b24,b16, | 8/31/2021 | 1,850 | 1,850 | S/L | 15 | 10 | 123 | 246 | 1,604 |
| Michael Gervais | installation of wallcovering completed a5, a9, b12, b22 | 9/30/2021 | 2,467 | 2,467 | S/L | 15 | 14 | 164 | 328 | 2,139 |
| | 2021 Balance | | 2,466,083 | 2,465,837 | | | | 134,595 | 2,073,424 | 392,413 |
| 2022 Disposals: | - : | | | | | | 0 | | | |
| Total Communications | Work on phone system | 9/30/2006 | (2,011) | (2,011) | S/L | 20 | (8) | 9 | (2,011) | ٥ |
| Air Temp Mechanical | Exhaust fan in dish room | 10/31/2006 | (3,445) | (3,445) | S/L | 10 | (29) | | (3,445) | - |
| Total Communications | Replaced voicemail card on phone system. | 4/30/2007 | (1,887) | (1,887) | S/L | 10 | (16) | 25 | (1,887) | - |
| Titan Mechanical | Install new exhaust fan in kitchen | 4/30/2007 | (3,058) | (3,058) | S/L | 10 | (25) | * | (3,058) | * |
| Eagle Rivet Roofing | Repair and shingle roof over south wing. | 6/30/2007 | (3,750) | (3,750) | S/L | 10 | (31) | ř | (3,750) | 9 |
| Otis Elevator | Install new 'door stoppers' on the elevator doors. | 9/30/2007 | . , , | (4,664) | S/L | 10 | (39) | <u> </u> | (4,664) | - |
| Courtesy Carpet | Elevator Flooring | 8/4/2009 | () | (737) | S/L | 10 | (6) | 85 | (737) | - |
| Michael Gervais | Wallpaper Hallway and Nurses Station | 8/28/2009 | . , , | (1,651) | S/L | 5 | (28) | * | (1,651) | * |
| Saucier Mechancial Svrs | Exhaust Duct for Dishmachine | 1/29/2010 | (/ / / | (1,245) | | 20 | (5) | € | (1,245) | - |
| Michael Gervais | Install Wallpaper | 4/9/2010 | (1,908) | (1,908) | S/L | 5 | (32) | ř. | (1,908) | 8 |
| GW Inc Water Cond | Water Softener | 11/13/2012 | | (2,606) | S/L | 10 | (22) | 13 | (2,606) | 35 |
| ACQUISITIONS | Description Not Available - Disposed 10/1/17 | 9/30/2001 | (525,455) | (525,455) | S/L | 20 | (2,189) | 26 | (525,455) | = |
| Sammons & Preston | Renovations- remove once fully depreciated | 9/30/2005 | | (10,926) | S/L | 15 | (61) | | (10,926) | 28 |
| ACQUISITIONS | Description Not Available - Disposed 10/1/17 | 9/30/2002 | (4,747) | (4,747) | S/L | 20 | (20) | - | (4,747) | 2 |
| Various | Various | Var | (4,770) | (4,770) | S/L | 10 | (40) | = | (4,770) | 7 |
| 2022 Additions: | = . | | | | | | | | | |
| aegis | replacement of actuator | 12/31/2021 | 3,363 | 3,363 | S/L | 15 | 19 | 224 | 224 | 3,139 |
| otis elevator | installation of optiguard | 1/31/2022 | , | 11,699 | S/L | 15 | 65 | 780 | 780 | 10,919 |
| new look painting | prepped & painted all areas pointed out by management, Hallway | 2/28/2022 | 7,445 | 7,445 | S/L | 15 | 41 | 496 | 496 | 6,949 |
| saucier mechanical | first installment for dish room air conditioner | 4/30/2022 | 4,565 | 4,565 | S/L | 15 | 25 | 304 | 304 | 4,261 |
| Huntington Power | 75% deposit on Quote #512438 location #1; remove and replace b | 4/30/2022 | 1,132 | 1,132 | S/L | 15 | 6 | 75 | 75 | 1,057 |
| saucier mechanical | second installment for dish room ac | 5/31/2022 | 4,565 | 4,565 | S/L | 15 | 25 | 304 | 304 | 4,261 |
| Joel Martin | 119 gal hot water tank | 5/31/2022 | 4,100 | 4,100 | S/L | 15 | 23 | 273 | 273 | 3,827 |
| Joel Martin | installation of the 119 gallon Hot Water Tank (Bradford White stc | 6/30/2022 | 2,547 | 2,547 | S/L | 15 | 14 | 170 | 170 | 2,377 |
| Collier Electric | new hairdresser (heidi) needs to keep her stuff seperate from haird | 6/30/2022 | 877 | 877 | S/L | 15 | 5 | 58 | 58 | 819 |
| Olmedo Construction | digging drains | 6/30/2022 | 5,400 | 5,400 | S/L | 15 | 30 | 360 | 360 | 5,040 |
| saucier mechanical | first installment for replacement of large hot water tank | 7/31/2022 | 10,315 | 10,315 | S/L | 15 | 57 | 688 | 688 | 9,627 |
| saucier mechanical | final installment for dish room ac | 8/31/2022 | 1,010 | 1,010 | S/L | 15 | 6 | 67 | 67 | 943 |
| | 2022 Balance | | 1,950,241 | 1,949,995 | | | | 138,394 | 1,504,363 | 445,632 |
| | Per TB | | | 1,960,965 | | | | 103,833 | 1,447,506 | 513,459 |
| | Difference | | | (10,970) | - | | | 34,561 | 56,857 | (67,827) |

NET HISTORICAL BASIS DEPR. USEFUL Depreciation ACC'D DATE METHOD LIFE EXPENSE **EXPENSE** VALUE COST FOR MONTHLY Vendor Description OF ACQUISITION DEPRECIATION (IN YEARS) DEPRECIATION FY 2022 as of 9/30/22

RELATED PARTY ASSETS

| Asset | | Date | | | | | Depreciation | Accum Depr | NIPNI |
|-------------------|--|------------|----------------|---------|------------|------|---------------|------------|-------|
| No. | Asset Description | Acquired | Cost | | Method | Life | 9/30/2022 | 9/30/2022 | NBV |
| Building Improvem | ents | | | | | | | | |
| 20 | Ceiling Tile Replacement | 02/28/09 | 24,216 | 24,216 | S/L | 8 | • | 24,216 | 520 |
| 21 | Laundry Room Upgrades | 02/28/09 | 6,430 | 6,430 | S/L | 20 | 321 | 4,383 | 2,04 |
| 22 | 3 Washers & 4 Dryers | 02/28/09 | 75,711 | 75,711 | S/L | 10 | • | 75,711 | |
| 13 | Shower Renovation Project | 05/31/09 | 28,282 | 28,282 | S/L | 20 | 1,414 | 18,855 | 9,42 |
| 14 | New Windows | 06/30/09 | 49,820 | 49,820 | S/L | 20 | 2,491 | 33,113 | 16,70 |
| 15 | Levered Door Hardware | 06/30/09 | 4,198 | 4,198 | S/L | 15 | 280 | 3,709 | 48 |
| 19 | Generator | 06/30/09 | 147,807 | 147,807 | S/L | 20 | 7,390 | 98,240 | 49,56 |
| 23 | Wood Laminate Flooring | 06/30/09 | 70,580 | 70,580 | S/L | 10 | 23 | 70,580 | |
| 24 | Doors | 06/30/09 | 79,073 | 79,073 | S/L | 15 | 5,272 | 70,078 | 8,99 |
| 18 | Boiler | 07/31/09 | 86,425 | 86,425 | S/L | 20 | 4,321 | 57,045 | 29,38 |
| | Repair Patio Ceiling | 11/6/2008 | 8,500 | 8,500 | S/L | 12 | *: | 8,500 | 5 |
| | Exterior Painting | 11/7/2008 | 16,000 | 16,000 | S/L | 5 | *: | 16,000 | +3 |
| | Automated Doors | 11/24/2008 | 17,850 | 17,850 | S/L | 10 | € | 17,850 | 2 |
| | Electric Upgrades | 5/31/2008 | 28,631 | 28,631 | S/L | 15 | 1,909 | 24,334 | 4,29 |
| | Roof Repairs | 6/23/2010 | 9,910 | 9,910 | S/L | 10 | * | 9,910 | |
| | Electrical Panel Upgrades | 5/26/2010 | 3,800 | 3,800 | S/L | 15 | 253 | 3,227 | 5 |
| | 2 5 Ton A/C Roof Top Units | 7/31/2010 | 32,965 | 32,965 | S/L | 10 | ≨ | 32,132 | 8 |
| | Wander Control System | 10/29/2010 | 7,086 | 7,086 | S/L | 10 | 2 | 7,086 | |
| | Repl Roof Top Exhaust | 12/30/2010 | 1,595 | 1,595 | S/L | 10 | | 1,595 | |
| | Baseboard | 12/14/2010 | 1,568 | 1,568 | S/L | 10 | - | 1,567 | |
| | Volumed Dampers Dining & Rehab | 11/30/2010 | 997 | 997 | S/L | 10 | 5 | 997 | 3 |
| | Economizer Motors & Controls | 11/1/2010 | 2,820 | 2,820 | S/L | 10 | - | 2,820 | 2 |
| | Lobby/Office Renovations | 5/31/2011 | 24,011 | 24,011 | S/L | 15 | 1,601 | 18,220 | 5,7 |
| | Phone System Upgrades | 6/30/2011 | 7,696 | 7,696 | S/L | 10 | 1,001 | 7,695 | 2,, |
| | Carpet of Lobby/Offices | 5/31/2011 | 15,492 | 15,492 | S/L | 5 | 3 | 15,492 | |
| | | 5/16/2011 | 3,900 | 3,900 | S/L | 5 | į. | 3,900 | |
| | Painting lobby/offices Wallpaper lobby & offices | 5/18/2011 | 3,053 | 3,053 | S/L | 5 | | 3,053 | |
| | | 7/6/2011 | 447 | 447 | S/L | 10 | 3 | 446 | |
| | Phone system upgrade wiring | 5/10/2011 | | 1,155 | S/L S/L | 20 | 58 | 660 | 4 |
| | Wiring for phone system upgrade | | 1,155 4,140 | 4,140 | S/L S/L | 15 | 276 | 3,118 | 1,0 |
| | Lower Level Emp Entrance | 6/28/2011 | | , | | 5 | 270 | 2,473 | 1,0 |
| | Wiring for Security Cameras | 2/20/2011 | 2,473 | 2,473 | S/L | 10 | | 4,850 | 3 |
| | Deliver Entrance Doors | 9/16/2011 | 4,850 | 4,850 | S/L | | | 12,789 | 12,7 |
| | Windows for N & S Wings | 3/20/2012 | 25,577 | 25,577 | S/L | 20 | 1,279 | | 12,7 |
| | Install pull-down stairs by N & S | 6/7/2012 | 2,400 | 2,400 | S/L | 10 | 240 | 2,400 | |
| | New fire alarm panel & annunciat | 7/11/2012 | 3,403 | 3,403 | S/L | 10 | 340 | 3,401 | |
| | Parking Lot Repairs | 10/29/2011 | 14,384 | 14,384 | S/L | 8 | | 14,384 | |
| | Oil Tank Removal | 3/5/2012 | 2,800 | 2,800 | S/L | 20 | 140 | 1,400 | 1,4 |
| | 7.5 Ton AC Rooftop Unit #5 | 6/18/2013 | 13,695 | 13,695 | S/L | 10 | 14 | 12,328 | 1,3 |
| | Elevator Upgrades | 11/30/2012 | 95,544 | 95,544 | S/L | 20 | 4,777 | 47,771 | 47, |
| | Stainless Steel Door Buck Wraps | 5/29/2013 | 2,355 | 2,355 | S/L | 15 | 157 | 1,570 | |
| | Carpet for Rehab Gym | 4/23/2013 | 2,394 | 2,394 | S/L | 5 | 3 | 2,394 | 3 |
| | Rehab Gym Renovation | 4/5/2013 | 1,850 | 1,850 | S/L | 15 | 123 | 1,231 | 6 |
| | Electrical Panel-Connector Hall | 9/24/2013 | 2,840 | 2,840 | S/L | 10 | 284 | 2,840 | 12 |

| ACQUISITION DEPRECIATION (IN YEARS) DEPRECIATION FY 2022 as of 9/3 Front Column Repairs 7/23/2013 1,025 1,025 S/L 10 = 2.5 ton AC Unit for Lobby 10/15/2013 10,665 10,665 S/L 10 1,067 Rooftop kitchen air unit 3/31/2014 22,110 S/L 15 1,474 North Wing AC Condesnor 8/5/2014 15,225 15,225 S/L 15 1,015 Wallpaper Northington/Dining/Ele 12/17/2013 24,929 24,929 S/L 5 | 925 100 9,602 1,064 3,266 8,844 9,135 6,090 4,930 + 9,293 + 1,1029 - 7,272 1,814 4,392 3,598 2,808 2,463 |
|---|---|
| 2.5 ton AC Unit for Lobby 10/15/2013 10,665 10,665 8/L 10 1,067 Rooftop kitchen air unit 3/31/2014 22,110 22,110 8/L 15 1,474 North Wing AC Condesnor 8/5/2014 15,225 15,225 8/L 15 1,015 | 9,602 1,064 3,266 8,844 9,135 6,090 4,930 - 9,293 - 1,1029 - 1,7,272 1,814 4,392 3,598 2,808 2,463 |
| Rooftop kitchen air unit 3/31/2014 22,110 22,110 S/L 15 1,474 North Wing AC Condesnor 8/5/2014 15,225 15,225 S/L 15 1,015 | 3,266 8,844 9,135 6,090 4,930 |
| North Wing AC Condesnor 8/5/2014 15,225 15,225 S/L 15 1,015 | 9,135 6,090 4,930 |
| | 4,930 9,293 1,029 7,272 1,814 4,392 3,598 2,808 2,463 |
| | 9,293 = 1,029 = 7,272 1,814 4,392 3,598 2,463 |
| Corridors & Lounges Wallpaper 9/12/2014 59,293 59,293 S/L 5 | 1,029 - 7,272 1,814 4,392 3,598 2,808 2,463 |
| Repair to rear parking lot 7/18/2014 11,029 11,029 S/L 8 (2) | 7,272 1,814 4,392 3,598 2,808 2,463 |
| New ductless split A/C unit for kit 8/20/2015 9,085 9,085 S/L 10 909 | 4,392 3,598 2,808 2,463 |
| Dining Room 10ton AC rooftop 6/30/2015 17,990 17,990 S/L 10 1,799 | 2,808 2,463 |
| New cabinets/workstattions/counters 3/10/2015 5,271 5,271 S/L 15 351 | |
| Modify HVAC ductwork nurse su 3/6/2015 980 980 S/L 20 49 | 392 588 |
| Relocate 2 Sprinklers Nurse Spr 2/23/2015 700 700 S/L 25 28 | 224 476 |
| Wall /poclet door Nurse Super 2/10/2015 3,420 3,420 S/L 15 228 | 1,824 1,596 |
| New Carpeting Social Service 2/10/2015 3,415 3,415 S/L 5 | 3,415 |
| Reseal/Insulate windows&wrap 8/29/2015 12,299 12,299 S/L 5 | 2,299 |
| New handrails for North & South 9/28/2015 8,454 8,454 S/L 20 423 | 3,384 5,070 |
| Exterior doors in lower hall way 9/28/2015 26,651 26,651 S/L 20 1,333 | 0,664 15,987 |
| l set Exterior doors in rehab 12/10/2015 4,887 4,887 S/L 10 489 | 3,423 1,464 |
| Two Doors Exterier 1/1/2016 9,774 9,774 S/L 10 977 | 6,839 2,934 |
| Sign & Post Front of Building 5/1/2016 3,026 3,026 S/L 10 303 | 2,121 905 |
| New Shingled Roof 9/30/2016 78,870 78,870 S/L 30 2,629 | 8,403 60,467 |
| Parking lot repairs; drainage insta 12/2/2015 9,200 9,200 S/L 8 1,150 | 8,050 1,150 |
| HVAC rooftop unit- B wing 10/25/2016 18,335 18,335 \$/L 15 1,222 | 7,332 11,003 |
| 9 Metal Smoke & Fire Doors 3/31/2018 8,678 8,678 S/L 20 434 | 2,170 6,508 |
| Dish Machine 2/28/2018 23,000 23,000 S/L 10 2,300 | 1,500 11,500 |
| Modcon Boiler 2/28/2018 16,630 16,630 S/L 20 832 | 4,160 12,470 |
| Electrical Work for New Dish Machine 3/31/2018 2,203 2,203 S/L 20 110 | 550 1,653 |
| Removal & Installation of new Smoke & Fire Doors 8/31/2018 875 875 S/L 20 44 | 220 655 |
| Replace RU #6 & heat exchange 10/31/2018 14,945 14,945 S/L 20 747 | 2,988 11,957 |
| Flooring in pub, elevators, rehab gym, & front entry 5/31/2019 19,029 19,029 S/L 15 1,269 | 5,076 13,953 |
| Resident room wallpaper 7/31/2019 48,969 48,969 S/L 15 3,265 | 3,060 35,909 |
| Painting of building exterior 8/31/2019 17,000 17,000 S/L 15 1,133 | 4,532 12,468 |
| Reimburse AHC for new telephone system 12/29/2020 28,993 28,993 S/L 10 2,899 | 5,798 23,195 |
| Deposit on new AC units (pub & lobby) 8/16/2021 9,600 9,600 S/L 10 960 | 1,920 7,680 |
| Replace rtu condenser coil & filter dryer on roof 8/25/2021 6,200 6,200 S/L 10 620 | 1,240 4,960 |
| Deborah Cross Interiors- reclass from 2014 3/31/2014 875 875 S/L 15 58 | 116 759 |
| Deposit for North Wing shower room renovation 3/3/2020 4,714 4,714 S/L 15 314 | 628 4,086 |
| Repave front parking lot 11/9/2020 66,362 66,362 S/L 8 8,295 | 6,590 49,772 |
| Phone system upgrade wiring 7/6/2011 (447) (447) S/L 10 | (447) |
| Carpet for Rehab Gym 4/23/2013 (2,394) (2,394) S/L 5 | (2,394) |
| Balance on pub, lobby, offices a/c units 1/1/2022 11,725 11,725 S/L 10 1,173 | 1,173 10,552 |
| 50% deposit on N wing shower renovation 2/15/2022 9,184 9,184 S/L 15 612 | 612 8,572 |
| balance on north wing shower project- ACI Flooring 4/25/2022 9,184 9,184 S/L 15 612 | 612 8,572 |
| balance on north wing shower project- Design to Finish 6/21/2022 32,254 32,254 S/L 15 2,150 | 2,150 30,104 |
| 1,622,930 1,622,930 76,197 1,6 | 7,638 575,292 |

| Vendor | Description | DATE OF ACQUISITION | HISTORICAL COST | BASIS FOR DEPRECIATION | DEPR. METHOD | USEFUL LIFE (IN YEARS) | MONTHLY DEPRECIATION | Depreciation EXPENSE FY 2022 | ACC'D EXPENSE as of 9/30/22 | NET VALUE |
|------------------------|--------------------------------------|---------------------------|--------------------|------------------------------|-----------------|------------------------------|-------------------------|------------------------------------|-----------------------------------|--------------|
| LHI Combined Totals fo | r Cost Report | Acquartion | 3,573,171 | 3,572,925 | | (IN TEARS) | DEFRECIATION | 214,591 | 2,552,001 | 1,020,924 |
| | | | | | | | | | | |
| | Leasehold Improvements | | | 2,465,837 | | | | 134,595 | 2,073,424 | 392,413 |
| | Additions | | | 57,018 | | | | 3,799 | 3,799 | 53,219 |
| | Disposals | | | (572,860) | 1 | | | | (572,860) | |
| | Related Party Leasehold improvements | | | 1,560,584 | | | | 71,650 | 1,043,091 | 517,493 |
| | Related Party Additions | | | 62,346 | | | | 4,547 | 4,547 | 57,799 |
| | Related Party Disposals | | | - | | | | 9 | - F | (€) |
| | V | Total | | 3,572,925 | | | | 214.591 | 2,552,001 | 1.020.924 |

| Vendor Balance Forward prior 2008 | Description | DATE OF ACQUISITION | HISTORICAL COST | BASIS FOR DEPRECIATION 1,079,551 | DEPR METHOD | USEFUL LIFE (YEARS) | Depreciation 30-Sep-22 | Accum. 30-Sep-22 1,030,575 | NET VALUE 48,975 |
|---|---------------------------------|---------------------------|--------------------|---|----------------|---------------------------|---------------------------|----------------------------------|------------------------|
| Build 'N Serve | 2 Laptops | 11-Oct-07 | 1,078,923 | 4,799 | S/L | 5 | 2,042 | 4,799 | 40,973 |
| Harbor Sales | Northington Room Curtains | 22-Oct-07 | 823 | 823 | S/L S/L | 5 | - | 823 | - |
| SMD | Pin Hole Camera | | | | S/L S/L | 5 | | | |
| | 27 LCD TV | 5-Oct-07 | 1,021 | 1,021 | | 5 | : #3 | 1,020 | 2060 |
| Digital Meida | | 29-Nov-07 | 8,589 | 8,589 | S/L | | 340 | 8,589 | (() |
| Build 'N Serve | HP Laser Printer | 31-Jan-08 | 1,001 | 1,001 | S/L | 5 | 3.00 | 1,001 | 06) |
| Boston Showcase | Rotary Toaster | 10-Jan-08 | 1,032 | 1,032 | S/L | 10 | | 1,032 | 0.0 |
| Gulf South Medical Supply | Matrix Bed | 2-Jan-08 | 2,348 | 2,348 | S/L | 12 | 380 | 2,348 | * |
| Puritan Furniture | Bookcase & console | 31-Jan-08 | 1,107 | 1,107 | S/L | 20 | 55 | 759 | 348 |
| Direct Supply | Vital Signs Monitor | 28-Mar-08 | 1,607 | 1,607 | S/L | 8 | | 1,607 | |
| Gulf South Medical Supply | Matrix Bed | 18-Feb-08 | 1,405 | 1,405 | S/L | 12 | | 1,405 | * |
| Health Care Logistics | Emergency cart | 19-Mar-08 | 849 | 849 | S/L | 10 | | 849 | ** |
| Digital Meida | 2 LCD TV | 6-Feb-08 | 3,173 | 3,173 | S/L | 5 | | 3,173 | |
| Direct Supply | Mobile Hydrocollator | 11-Apr-08 | 1,178 | 1,178 | S/L | 10 | | 1,178 | F5 |
| Gulf South Medical Supply | Matrix Bed | 16-Арт-08 | 1,499 | 1,499 | S/L | 12 | | 1,499 | - |
| HPC Foodservice | Smart Them Base Dinex | 16-Арт-08 | 1,719 | 1,719 | S/L | 5 | | 1,719 | ** |
| Medline | Vital Signs Monitor | 22-May-08 | 1,386 | 1,386 | S/L | 8 | | 1,386 | * |
| Suburban Stationers | Shredder | 18-Арг-08 | 1,324 | 1,324 | S/L | 5 | 3.60 | 1,324 | €0 |
| Arjo | Patient Lifts | 30-Apr-08 | 16,072 | 16,072 | S/L | 10 | 200 | 16,072 | 2 5 |
| Build 'N Serve | 2 Computers | I-Jun-08 | 1,571 | 1,571 | S/L | 5 | | 1,571 | *: |
| Total Communication | Digital Card System | 19-Jun-08 | 1,655 | 1,655 | S/L | 5 | 5.45 | 1,655 | # |
| Titan Mechanical | Replace Economizer | 10-Jun-08 | 1,166 | 1,166 | S/L | 12 | | 1,166 | € |
| Build 'N Serve | 2 computers | 1-Jul-08 | 2,490 | 2,490 | S/L | 5 | (e) | 2,490 | ÷: |
| Industrial Time | Time Clock Software | 31-Aug-08 | 981 | 981 | S/L | 5 | (4) | 981 | 8 |
| Direct Supply | 7 QT Stainless Steel Bowl | 31-Aug-08 | 834 | 834 | S/L | 5 | 16 | 834 | 8 |
| Hartford Provision | Smart Them Base Dinex | 31-Aug-08 | 3,392 | 3,392 | S/L | 5 | 790 | 3,392 | • |
| Prior Year Adjustment | | | | | | | 125-65/00 | | |
| 2008 Ending | | | 1,141,944 | 1,142,571 | | | 2,097 | 1,093,247 | 49,323 |
| | | | | | | | | | |
| Amano | Time Clock - Leased | 1-Oct-08 | 7,974 | 7,974 | S/L | 10 | | 7,974 | * |
| JCPenney | Windsor Benches | I-Oct-08 | 522 | 522 | S/L | 15 | 35 | 488 | 33 |
| Build 'N Serve | Desktop & Monitor - Karen's | 1-Nov-08 | 1,541 | 1,541 | S/L | 5 | >€ | 1,541 | * |
| Sears | Refrigerator | 22-Oct-08 | 613 | 613 | S/L | 10 | 341 | 613 | - |
| Joerns Healthcare | Queen Anne Chair | 10-Nov-08 | 884 | 884 | S/L | 15 | 59 | 820 | 63 |
| Music Score | Piano | 31-Dec-08 | 3,175 | 3,175 | S/L | 20 | 159 | 2,198 | 977 |
| Chef's Equipment Emp | 1 Gallon Blender | 31-Dec-08 | 1,145 | 1,145 | S/L | 10 | | 1,125 | 20 |
| Lintech | Software & Installation | I-Jan-09 | 61,787 | 61,787 | S/L | 15 | 4,119 | 56,637 | 5,150 |
| Build 'N Serve | New Server | 1-Jan-09 | 7,155 | 7,155 | S/L | 5 | | 7,155 | - |
| Joerns Healthcare | 8 Overbed Tables | 25-Feb-09 | 856 | 856 | S/L | 5 | ** | 856 | Ξ. |
| Harbor Linen | North Wing Day Room Valances | 9-Mar-09 | 676 | 676 | S/L | 5 | | 676 | - |
| Encompass | 3 Chairs Admissions Office | 5-May-09 | 1,045 | 1,045 | S/L | 15 | 70 | 937 | 103 |
| Joerns Healthcare | 6 Overbed Tables | 12-May-09 | 647 | 647 | S/L | 5 | - | 647 | = |
| HD Supply Facilities | 4 Linen Carts | 20-May-09 | 1,063 | 1,063 | S/L | 10 | € | 1,062 | 7 |
| Best Buy (AMEX) | 47" LCD TV for Rehab | 31-May-09 | 1,124 | 1,124 | S/L | 5 | * | 1,124 | |
| Build 'N Serve | Server Rack | 31-May-09 | 1,632 | 1,632 | S/L | 5 | * | 1,632 | 3 |
| Build 'N Serve | Administrator Computer | 30-Jun-09 | 1,166 | 1,166 | S/L | 5 | * | 1,166 | * |
| Office Depot | 3 Refrigerators for Rehab | 15-Jul-09 | 676 | 676 | S/L | 10 | €: | 676 | 8 |
| Build 'N Serve | Dell Laptop for MDS Coordinator | 31-Jul-09 | 1,007 | 1,007 | S/L | 5 | * | 1,007 | 3: |
| Amex - Ace Hardware | 5 Leaf Benches | 15-Jul-09 | 583 | 583 | S/L | 15 | 39 | 516 | 67 |
| | Disposals | | (18,705) | (18,705) | | | • | +9 | (18,705) |
| ======================================= | 2009 Balance | | 1,218,506 | 1,219,134 | | | 6,578 | 1,182,096 | 37,036 |

| Amex BestBuy 6 Overbed Tables 30-Oct-09 668 668 S/L | 5 5 10 5 5 5 5 5 5 5 7 7 8 | 140 | 668 848 686 1,326 732 923 2,210 665 665 | 20 20 20 20 20 20 20 20 20 20 20 20 20 2 |
|---|---|--------------------------------------|---|---|
| Amex BestBuy 42" LCD HDTV 11-Dec-09 848 848 S/L Dell for Nursing Secretary I-Jan-10 686 686 S/L 6 Lounge chairs 1,326 1,326 S/L 2 HP 2035n Printers 732 732 S/L 7 Dining Table Tops 923 923 S/L 36 insulated bases 2,210 2,210 S/L 6 Overbed Tables 665 665 S/L 6 Overbed Tables 658 658 S/L 6 Overbed Tables 658 658 S/L 5 Overbed Tables 658 658 S/L 6 Overbed Tables 658 658 S/L 5 Patio Dining Sets w/Umbrellas 1,391 1,391 S/L 5 Software Training 44,291 44,291 5/L | 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | (2) (2) (3) (4) (4) | 848 686 1,326 732 923 2,210 665 665 | € |
| Dell for Nursing Secretary 1-Jan-10 686 686 S/L 6 Lounge chairs 1,326 1,326 S/L 2 HP 2035n Printers 732 732 732 S/L 7 Dining Table Tops 923 923 S/L 36 insulated bases 2,210 2,210 S/L 6 Overbed Tables 665 665 S/L 6 Overbed Tables 665 665 S/L 6 Overbed Tables 658 658 S/L 2 Patio Dining Sets w/Umbrellas 1,391 1,391 S/L Software Training 44,291 44,291 44,291 S/L | 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | (2) (2) (3) (4) (4) | 686 1,326 732 923 2,210 665 665 | € |
| 6 Lounge chairs 1,326 1,326 S/L 2 HP 2035n Printers 732 732 S/L 7 Dining Table Tops 923 923 S/L 36 insulated bases 2,210 2,210 S/L 6 Overbed Tables 665 665 S/L 6 Overbed Tables 665 665 S/L 6 Overbed Tables 658 658 S/L 2 Patio Dining Sets w/Umbrellas 1,391 1,391 S/L Software Training 44,291 44,291 5/L | 10 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | 1923 1921 1921 1921 1921 | 1,326 732 923 2,210 665 665 | 2 2 2 2 2 |
| 2 HP 2035n Printers 732 732 S/L 7 Dining Table Tops 923 923 S/L 36 insulated bases 2.210 2,210 S/L 6 Overbed Tables 665 665 S/L 6 Overbed Tables 665 665 S/L 6 Overbed Tables 658 658 S/L 2 Patio Dining Sets w/Umbrellas 1,391 1,391 S/L Software Training 44,291 44,291 S/L | 5 5 5 5 5 5 10 3 | 1921 1921 1921 1921 1921 | 732 923 2,210 665 665 | 26 26 26 |
| 7 Dining Table Tops 923 923 S/L 36 insulated bases 2,210 2,210 S/L 6 Overbed Tables 665 665 S/L 6 Overbed Tables 665 665 S/L 6 Overbed Tables 658 658 S/L 2 Patio Dining Sets w/Umbrellas 1,391 1,391 S/L Software Training 44,291 44,291 S/L | 5 5 5 5 5 10 3 5 | 241 241 241 | 923 2,210 665 665 | ₩ ₩ 9 |
| 6 Overbed Tables 665 665 8/L 6 Overbed Tables 665 665 8/L 6 Overbed Tables 658 658 5/L 2 Patio Dining Sets w/Umbrellas 1,391 1,391 1,391 S/L Software Training 44,291 44,291 5/L | 5 5 5 10 3 5 | 3.83 3.83 1.83 | 665 665 | ¥ |
| 6 Overbed Tables 665 665 S/L 6 Overbed Tables 658 658 S/L 2 Patio Dining Sets w/Umbrellas 1,391 1,391 S/L Software Training 44,291 44,291 S/L | 5 5 10 3 5 | 8.20 198 | 665 | |
| 6 Overbed Tables 658 658 S/L 2 Patio Dining Sets w/Umbrellas 1,391 1,391 S/L Software Training 44,291 44,291 S/L | 5 10 3 5 | 7.63 | | • |
| 2 Patio Dining Sets w/Umbrellas 1,391 1,391 S/L Software Training 44,291 44,291 5/L | 10 3 5 | | 658 | 2 |
| Software Training 44,291 44,291 S/L | 3 5 | 140 | | 25 |
| | 5 | | 1,391 | 20 |
| Resident Rooms A&R Wings Blinds 2509 2509 27 | | - | 44,291 | € |
| 2,396 | | - | 2,598 | 2 |
| Enamel Shampoo Bowl 653 653 S/L | 20 | 33 | 307 | 346 |
| Adj. 1,276,819 1,277,447 | | 6,751 | 1,240,063 | 37,383 |
| Alberta Alberta | | | 1121011 | 0.114 |
| TM Technology 3 HP Mini Notebooks - SS 10-Oct-10 1,701 1,701 S/L | 3 | 150 | 1,701 | 2 |
| SMD Inc. Keypad outside of Front Doors 28-Oct-10 1,708 1,708 S/L | 5 | 43 | 1,708 | 2 |
| Direct Supply Bladderscanner 12-Nov-10 13,640 13,640 S/L | 5 | 4.5 | 13,640 | 2 |
| Direct Supply Vital Signs Monitor (South Wing) 9-Nov-10 1,604 1,604 S/L | 8 | 23 | 1,604 | 2 |
| TM Technology 2 Mini HP Desktops 17-Nov-10 1,813 1,813 S/L | 5 | ¥3 | 1,813 | 2 |
| TM Technology Notebook & Printer 16-Jan-11 J,177 J,177 S/L | 5 | € | 1,177 | 2 |
| TM Technology Samsung Laser Printer Admissions 18-Feb-11 665 665 S/L | 5 | 24 | 665 | ₽ |
| Lintech Care Plan Library 28-Feb-11 1,734 1,734 S/L | 3 | 21 | 1,734 | 2 |
| Alfax Furniture 7 Square Tables 1-Mar-11 1,387 1,387 S/L | 15 | 92 | 991 | 396 |
| TM Technology Recpt Color Laserjet & other items 31-Mar-11 2,928 2,928 S/L | 5 | 23 | 2,928 | 4 |
| TM Technology Wireless Router & Printer 30-Apr-11 900 900 S/L | 5 | 20 | 900 | - |
| Home Depot 18 Blinds N/S Wing Resident Rms 11-Apr-11 2,061 2,061 S/L | 5 | 20 | 2,061 | 2 |
| Best Buy (AMEX) 47" TV for PUB 12-Apr-11 954 954 S/L | 5 | 2 | 954 | |
| InPro Corp Bed Protectors 16-May-11 2,980 2,980 S/L | 5 | 20 | 2,980 | ⊕ |
| WB Mason Lateral Filing Cabinet for Payroll 3-Jun-11 1,007 1,007 S/L | 15 | 67 | 670 | 337 |
| TM Technology Admissions/Recpt Computers & Monitor 20-Jul-11 1,286 1,286 S/L | 5 | - | 1,286 | 9 |
| Perkins Rack Tray Dispenser 25-Jul-11 1,520 1,520 S/L | 5 | - | 1,520 | 2 |
| American Healthcare Supply 2 Chair and table for Payroll Office 27-Jul-11 748 748 S/L | 15 | 50 | 487 | 261 |
| Carstens Medical Records Cart 17-Aug-11 1,468 1,468 S/L | 10 | !47 | 1,396 | 72 |
| Direct Supply Dragon 20i Floor Burnisher 26-Aug-11 1,317 1,317 S/L | 5 | - | 1,317 | 2 |
| Sigma Care/Lintech eMar/eTar Software & Implementation 30-Sep-11 11,993 11,993 S/L | 3 | (3,998) | 7,995 | 3,998 |
| Disposals (19,396) (19,396) | | 2 | (12,935) | (6,461) |
| 2011 Balance 1,312,012 1,312,639 | | 3,109 | 1,276,654 | 35,986 |
| 2012 Additions: | | | | |
| Perkins China 40,840 1,000 1,000 S/L | 7 | 2 | 1,000 | ≅ |
| TM Technology Mini Computer & Printer 31-Oct-11 1,024 1,024 S/L | 3 | - | 1,024 | * |
| WB Mason Office Furniture for Dietician Office 1-Jan-12 1,224 1,224 S/L | 15 | 82 | 859 | 365 |
| BSD Care 8 Dining Room Chairs 3-Jan-12 1,953 1,953 S/L | 15 | 130 | 1,366 | 587 |
| Farmington Valley Equipment Ariens Professional Snow Thrower 20-Jan-12 2,126 2,126 S/L | 5 | - | 2,126 | ă. |
| Life Systems 2 Rosebud Oximeters 27-Jan-12 3,594 3,594 S/L | 10 | 182 | 3,594 | · · |
| TM Technology HP 4530 Laptop for Dietician 31-Jan-12 1,059 1,059 S/L | 3 | - | 1,059 | |
| Amex - Best Buy 2 32" TV with mounts A/B Day Rooms 23-Feb-12 723 723 S/L | 5 | - | 723 | |
| McKesson Medical Ultrasonic Cleaner 19-Mar-12 1,061 1,061 S/L | 10 | 89 | 1,061 | |
| TM Technology Desktop for Medical Records 31-Mar-12 1,579 1,579 S/L | 5 | 2 | 1,579 | |

| Vendor | Description | DATE OF | HISTORICAL COST | BASIS FOR | DEPR | USEFUL LIFE | Depreciation | Accum | NET VALUE | |
|----------------------------------|---|----------------|--------------------|--------------|------------|----------------|--------------|-----------|--------------|--------|
| vendor | Description | ACOUISITION | COST | DEPRECIATION | METHOD | | 30-Sep-22 | 30-Sep-22 | VALUE | |
| WB Mason | Office Furniture for Dietary Office | 12-Api | -12 1,005 | | S/L | 15 | 67 | 670 | | 335 |
| TM Technology | Desktop - Administrator | 16-May | , | 7.5 | S/L | 5 | 76 | 798 | | - |
| TM Technology | Laptob - Dietician | 16-May | | | S/L | 3 | 72 | 835 | | 2 |
| TM Technology | Epson GTS80 Scanner - Med Record | 16-May | | | S/L | 5 | Ves | 956 | | |
| Fire Equipment Headquarters | Gas Meter to test air | 23-May | | | S/L | 8 | 100 | 850 | | ŝ |
| TM Technology | Desktop for A Wing #524 | 30-Jur | | | S/L | 5 | 1.63 | 803 | | - |
| TM Technology | Desktop for Payroll #526 | 30-Jur | | | S/L S/L | 5 | 161 | 936 | | ŝ |
| WB Mason | 5 Task Chairs for Nursing | | | | | 15 | 45 | 428 | | 248 |
| TM Technology | | 10-Ји | | | S/L | | | | | |
| 1 M Technology | 4 Minis-Therapy 2 NB and Labler Disposals | 12-Aug | | | S/L | 3 | 10.00 | 3,751 | | 2 |
| | Disposais | | (3,819) | (3,819) | | | | (3,819) |) | - |
| * | 2012 Balance | TOTALS | 1,334,144 | 1,334,771 | | | 3,704 | 1,297,252 | | 37,521 |
| | | | | | | | | | | |
| 2013 Additions: | COmbat Title | | 10 | | 6.7 | | | | | |
| HD Supply Facilities | 6 Overbed Tables | I-Oc | | | S/L | 5 | - | 626 | | - |
| TM Technology | HP Laptop MDS Nurse | 21-Oc | | | S/L | 3 | - | 729 | | - |
| SigmaCare | eMar/eTar Software & Implemenation | 31-Oc | | | S/L | 3 | - | 12,335 | | - |
| TM Technology | Printer North & ADNS | 15-Nov | , | | S/L | 5 | - | 1,013 | | - |
| Fire Equipment Headquarters | Tripod, Winch & Harness | 14-Dec | , | | S/L | 20 | 110 | 1,100 | | 1,101 |
| Perkins | 1 Gallon Blender | 31-Dec | -, | | S/L | 10 | 122 | 1,222 | | 3 |
| Bemes Inc | Spirodoc & Oxi (combo Resp Eq) | 25-Jar | | , | S/L | 5 | - | 1,717 | | 3 |
| TM Technology | Fax | 10-Ma | -13 532 | 532 | S/L | 3 | 21 | 532 | | 3 |
| TM Technology | Dietary Desktop Computer | 10-Ma | -13 1,664 | 1,664 | S/L | 5 | ¥: | 1,664 | | 3 |
| Perkins | Hot Water Dispenser 5 gal | 21-Ma | -13 888 | 888 | S/L | 10 | 88 | 888 | | 2 |
| Dumouchel Paper | Walk Behind Auto Scrubber | 4-Ap | -13 4,842 | 4,842 | S/L | 5 | - | 4,842 | | |
| Direct Supply | Blood Pressure Unit & Oximeter | 5-Ap | -13 1,371 | 1,371 | S/L | 6 | | 1,371 | | 2 |
| Surface Solutions | Kaivac Omni Dispense & Vac | 7-May | | | S/L | 8 | _ | 862 | | 2 |
| WB Mason | Office Furniture for Staff Development | 19-Jui | | | S/L | 15 | 78 | 782 | | 395 |
| WB Mason | Office Furniture for Staff Development | 11-Ju | , | , | S/L | 15 | 78 | 780 | | 390 |
| TM Technology | TM Desktop Machines #563 and 564 | 13-Ju | | | S/L | 3 | - | 1,284 | | - |
| TM Technology | Inwin Mini Desktop | 13-Ju | | | S/L | 3 | | 1,957 | | |
| WB Mason | 4 Grey Task Chairs - South Unit | 19-Ju | | | S/L | 10 | 58 | 523 | | 60 |
| Perkins | Advolution 20 xp Floor Burnisher | 19-Ju 22-Ju | | | | 5 | 36 | 1,272 | | 00 |
| | | | | | S/L | | - | | | - |
| TM Technology | Printer Nursing Super & Staff Dev | 31-Ju | | | S/L | 5 | - | 956 | | - |
| TM Technology | Computer Nursing Supervisor | 31-Au | | | S/L | 5 | - | 1,637 | | - |
| WB Mason | Office Furniture DNS Office | 4-Se | | , | S/L | 15 | 134 | 1,338 | | 664 |
| | Disposals | | (316,187 |) (316,187) | | | * | (316,187 |) | - 3 |
| | 2013 Balance | Totals | 1,059,999 | 1,060,627 | | | 4,372 | 1,020,494 | | 40,134 |
| | | | | | | | | | | |
| 2014 Additions: TM Technology | Laptop for B Wing | 10/31/2 | 013 850 | 850 | S/L | 3 | | 850 | | 2 |
| | | | | | | | | | | |
| Arjo | Sit to Stand Sara Lift | [2/3]/2 | | | S/L | 10 | 291 | 2,619 | | 292 |
| McKesson Medical | 2 Blood Pressure Monitors | 1/21/2 | | | S/L | 6 | | 1,830 | | - |
| TM Technology | HP ProBook and Replicator | 2/28/2 | , | | S/L | 3 | € | 1,070 | | - |
| TM Technology | HP ProBook Spare ! | 3/3 1/2 | | | S/L | 3 | = | 914 | | - |
| TM Technology | AP Bookkeeper PC | 4/30/2 | , | | S/L | 5 | 2 | 1,073 | | - |
| TM Technology | QuickBooks Server | 4/30/2 | -, | | S/L | 5 | 9 | 1,282 | | - |
| SMD | Paging Transmitter | 5/20/2 | , | | S/L | 20 | 79 | 712 | | 877 |
| Graham-Field | Bariatric Bed | 5/30/2 | .014 1,793 | 1,793 | S/L | 12 | 149 | 1,342 | | 450 |
| Space Tables | 3 Oak Tables Northington Dining Room | 5/3 1/2 | .014 1,950 | 1,950 | S/L | 15 | 130 | 1,170 | | 780 |
| TM Technology | Computer Medical Records | 5/3 1/2 | | | S/L | 5 | € | 851 | | - 22 |
| TM Technology | Sigmacare Server Hard Drive | 5/3 1/2 | | | S/L | 5 | 2 | 690 |) | 12 |
| TM Technology | 2 Color Printers and Windows 8-1 | 6/30/2 | | | S/L | 5 | ⊋ | 1,216 | | 82 |
| 01 | | 0/30/2 | .,210 | .,210 | | - | | -,210 | | |

| | | | DATE | HISTORICAL | BASIS | | USEFUL | | | NET |
|-------------------------------|---------------------------------------|-------------|---|---|--------------|------------|---------|---|------------|--------|
| Vendor | | Description | OF | COST | FOR | DEPR. | LIFE | Depreciation | Accum | VALUE |
| | | | ACQUISITION | | DEPRECIATION | METHOD | (YEARS) | 30-Sep-22 | 30-Sep-22 | |
| TM Technology | Microsoft Office 2013 | | 7/31/2014 | 3,191 | 3,191 | S/L | 5 | - | 3,191 | |
| TM Technology Space Tables | Russell's Laptop | | 8/31/2014 | 994 | 994 | S/L | 3 | 220 | 994 | |
| TM Technology | A Wing Lounge Tables DNS Laptop | | 8/31/2014 | 680 | 680 | S/L | 15 | 45 | 406 | |
| TM Technology | Dietary Desktop Computer | | 8/31/2014 | 744 | 744 | S/L | 3 5 | 0.20 | 744 | |
| TM Technology | Admissions Desktop Computer | | 8/31/2014 | 1,010 | 1,010 | S/L | 5 | · · | 1,010 | |
| TM Technology | North Wing Printer & Windows 7 | | 8/3 I/2014 9/30/2014 | 1,206 804 | 1,206 804 | S/L S/L | 5 | | 1,206 | |
| Arjo | North Wing Finter & Windows / | | 8/31/2001 | (3,583) | (3,583) | S/L S/L | 7 | () 2 1 | (3.593 | |
| 10,0 | | | 0/31/2001 | (201,03) | (2,363) | SIL | , | - | (3,583 | , - |
| | 2014 Balance | | Totals | 1,083,064 | 1,083,691 | | | 5,066 | 1,040,885 | 42,807 |
| 2015 Additions: | | | | | | | | | | |
| WB Mason | Furniture for Infection Control Nurse | | 10/24/2014 | 763 | 761 | S/L | 15 | 61 | 406 | 155 |
| TM Technology | 2 HP LaserJet Pro Printers | | 12/31/2014 | 763 596 | 763 596 | S/L S/L | 5 | 51 | 408 595 | |
| TM Technology | Cisco Router with 3 Yr Ent License | | 12/31/2014 | 2,953 | 2,953 | S/L | 3 | | 2,953 | |
| TM Technology | 3 Desktops, Printer and Dual Monitors | | 12/31/2014 | 1,956 | 1,956 | S/L | 5 | 12 | 1,950 | |
| TM Technology | Cisco 52 port | | 4/30/2015 | 1,442 | 1,442 | S/L | 5 | TE. | 1 441 | |
| WB Mason | 2 Desks for Social Services | | 4/30/2015 | 1,926 | 1,926 | S/L | 20 | 96 | 768 | |
| TM Technology | Notebook and Printer | | 4/30/2015 | 860 | 860 | S/L | 3 | 12 | 860 | |
| McKesson Medical | Defibulator | | 4/8/2015 | 1,539 | 1,539 | S/L | 5 | 1/46 | 1,539 | |
| Sure Response | Portable Radio w/6 earpieces | | 8/20/2015 | 1,564 | 1,564 | S/L | 5 | 1/21 | 1.564 | |
| TM Technology | New Server | | 9/30/2015 | 10,651 | 10,651 | S/L | 5 | 161 | 10.651 | |
| - | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , | 0,2 | | 1 15 | W | · |
| 2015 Disposals: | | | | | | | | 1.5 | 4 | € |
| ACQUISITIONS | | | 9/30/1990 | (2,813) | (2,813) | S/L | 5 | \#: | (2,813 | n ş |
| ACQUISITIONS | | | 9/30/1990 | (497) | (497) | S/L | 10 | 142 | (497 | |
| ACQUISITIONS | | | 9/30/1990 | (3,013) | (3,013) | | 15 | 123 | (3,013 | |
| ACQUISITIONS | | | 9/30/199! | (3,510) | (3,510) | | 3 | | (3,510 | , |
| ACQUISITIONS | | | 9/30/1991 | (31,379) | (31,379) | | 5 | ¥. | (31,379 | |
| ACQUISITIONS | | | 9/30/1991 | (14,993) | (14,993) | S/L | 10 | Ŧ. | (14,993 | |
| ACQUISITIONS | | | 9/30/1991 | (1,331) | (1,331) | | 15 | ¥. | (1,33 | |
| Build 'N Serve | | | 1/1/2009 | | (7,155) | S/L | 5 | <u> </u> | (7,155 | |
| | 2015 Balance | | Totals | 1,042,621 | 1.043,249 | | | 5,213 | 998,930 | 44,320 |
| | | | | | | | | | | |
| 2016 Additions: | | | | | | | | | | |
| TM Technology | HP Pro Book / HP Retail Desktop | | 11/30/2015 | , | 1,121 | S/L | 3 | £2 | 1,12 | |
| W.B. Mason | Office Furiture Admin Office | | 3/31/2016 | | 1,819 | S/L | 15 | 121 | 847 | 7 971 |
| W.B. Mason | Office Furiture Admin Office | | 3/31/2016 | , | 1,808 | S/L | 3 | - | 1,808 | |
| W.B. Mason | new file for admission office | | 3/31/2016 | | 465 | S/L | 15 | 31 | 217 | |
| Direct Supply | 5 Classic 4 foot benches | | 7/31/2016 | , | 3,180 | S/L | 15 | 212 | 1,484 | |
| TM Technology | 17" Touch Computer | | 7/31/2016 | . , | 3,607 | S/L | 5 | 2 | 3,607 | |
| TM Technology | 2 HP ProBooks Spares | | 7/31/2016 | · · | 1,117 | S/L | 3 | - | 1,113 | |
| Space Tables | 6 Tables | | 9/30/2016 | 2,003 | 2,003 | S/L | 15 | 134 | 938 | 1,065 |
| 2016 Disposals: | | | | | | | | 9 | V21 | |
| ACQUISITIONS | | | 9/30/1991 | (829) | (829) | S/L | 18 | | (829 | o) = |
| ACQUISITIONS | | | 9/30/1991 | (2,076) | (2,076) | | 20 | 26 | (2,070 | |
| ACQUISITIONS | | | 9/30/1992 | | (4,955) | | 5 | #1 | (4,95 | |
| ACQUISITIONS | | | 9/30/1992 | | (6,706) | | 10 | ¥3 | (6,700 | |
| ACQUISITIONS | | | 9/30/1992 | | (4,330) | | 3 | 27 | (4,330 | |
| ACQUISITIONS | | | 9/30/1992 | | (23,328) | S/L | 15 | 2 | (23,325 | |
| ACQUISITIONS | | | 9/30/1993 | | (4,020) | | 5 | ž. | (4,020 | |
| ACQUISITIONS | | | 9/30/1993 | (6,714) | (6,714) | S/L | 10 | 20 | (6,714 | 4) |
| | | | | | | | | | | |

| Vendor | Description | DATE OF ACQUISITION | HISTORICAL COST | BASIS FOR DEPRECIATION | DEPR METHOD | USEFUL LIFE (YEARS) | Depreciation 30-Sep-22 | | ET ALUE |
|--|--|---|---|--|--|--|--|--|--|
| ACQUISITIONS | | 9/30/1993 | (4,280) | (4,280) | S/L | 15 | t d | (4,280) | 5 |
| | 2016 Balance | Totals | 1,000,502 | 1,001,130 | | | 5,711 | 952,831 | 48,300 |
| | | | | | | | | | |
| 2017 Additions: | CT Has Blas Ton | 10/91/9016 | Ø 122 | | C II | 1/20 | | 40 | 70 |
| Space Tables | 6 Tables Sales Tax | | \$ 127 | | S/L | 15 | 8 | 48 | 79 |
| TM Technology | hp laserjet pro | 11/30/2016 | 2,095 | 2,095 | S/L | 3 | *2 | 2,095 | 75 |
| TM Technology | new computer for reception, new computer for hr | 12/31/2016 | 1,813 | 1,813 | S/L | 5 | • | 1,813 770 | 17. |
| EZProducts | digital pop up press label maker | 1/31/2017 | 770 | 770 | S/L | 1.5 | 69 | 414 | 616 |
| LPA Medical | glider chair between a&b wing | 1/31/2017 | 1,030 | 1,030 | S/L S/L | | | | |
| TM Technology | hp probook 450 | 3/31/2017 | 1,143 | 1,143 | | 3 | €, | 1,143 | |
| American Express- Microsof | | 4/30/2017 | 1,201 | 1,201 | S/L | | - (8 | 1,201 | |
| TM Technology | hp for mds nurse | 5/31/2017 | 850 | 850 | S/L | 3 | - | 850 | 100 |
| McKesson Medical | wheelchair scale | 6/30/2017 | 2,909 | 2,909 | S/L | 10 | 291 | 1,746 | 1,163 |
| Arjo | new scale | 7/3 1/2017 | 1,016 | 1,016 | S/L | 10 | 102 | 612 | 404 |
| Life Systems, Inc | 3 rosebud vital sign caarts | 7/31/2017 | 4,038 | 4,038 | S/L | 10 | 404 | 2,424 | 1,614 |
| Dept of Revenue | use tax on Life systems purchase (above) | 7/31/2017 | 256 | 256 | S/L | 10 | 26 | 156 | 100 |
| Cisco wireless access point (| | 8/31/2017 | 12,906 | 12,906 | S/L | .5 | 1 | 12,906 | 8 |
| Arjo | replacement of the scale portion | 8/31/2017 | 1,532 | 1,532 | S/L | 10 | 153 | 918 | 614 |
| Raintech | jeron pro alert 640 system | 9/30/2017 | 4,075 | 4,075 | S/L | 10 | 408 | 2,448 | 1,627 |
| TM Technology | HP Probook | 9/30/2017 | 723 | 723 | S/L | 3 | 5 | 723 | 3 |
| | 2017 Balance | Totals | 1,036,986 | 1,037,614 | | | 7,174 | 983,098 | 54,517 |
| 2018 Additions: | | | | | | | | | |
| TM Technology | rehab- notebook; 3 nursing touchscreens | 10/31/2017 | 5,599 | 5,599 | S/L | 3 | <u>.</u> | 5,599 | |
| TM Technology | 2 hp notebooks- pam & sheila | 11/30/2017 | 1,813 | 1,813 | S/L | 3 | ~ | 1,813 | |
| Medline Industries | Trainer, sit to stand, Neurogym | 12/31/2017 | 5,371 | 5,371 | S/L | 5 | 1,074 | 5,370 | 1 |
| Perkins | Epoxy Coated Steel Hose Reel | 12/31/2017 | 967 | 967 | S/L | 7 | 138 | 690 | 277 |
| Sysco Connecticut | spectrum electric conveyor toaster | 2/28/2018 | 572 | 572 | S/L | 10 | 57 | 285 | 287 |
| WB Mason | new furniture for HR | 3/31/2018 | 1,429 | 1,429 | S/L | 10 | 143 | 715 | 714 |
| Lowes | new freezer | 7/31/2018 | 625 | 625 | S/L | 5 | 125 | 625 | 2 |
| | | | | | | | | | |
| 2/LIR Dinnandar | | | | | | | | | |
| 2018 Disposals: Disposal of Assets From Price | or 1 Various | Various | \$ (555,666) | \$ (555,666) | S/L | Var | | (555,666) | 3 |
| | | | | | S/L | Var | | | |
| | or 1 Various 2018 Balance | Various Totals | \$ (555,666) 497,696 | \$ (555,666) 498,324 | S/L | Var | 8,711 | (555,666) 442,529 | 55,796 |
| | 2018 Balance | Totals | 497,696 | 498,324 | | 27- | 8,711 | 442,529 | 55,796 |
| Disposal of Assets From Price | 2013 Balance special bed | Totals | 497,696 3,627 | 498 .324 3,627 | S/L | 12 | 8,711 | 44Z,529 | 55,796 2,419 |
| Disposal of Assets From Price | special bed intel nuc 715BNK mini pe for nursing supervisor's office | Totals 10/31/2018 10/31/2018 | 497,696 3,627 904 | 498,324 3,627 904 | S/L S/L | 12 5 | 8,711 302 181 | 442,529 1,208 724 | 55,796 2,419 180 |
| Disposal of Assets From Price | special bed intel nue 715BNK mini pe for nursing supervisor's office user refurbished nue mini pe for south wing nursing station | Totals 10/31/2018 10/31/2018 10/31/2018 | 497,696 3,627 904 978 | 498,324 3,627 904 978 | S/L S/L S/L | 12 5 5 | 302 181 196 | 44 2,529 1,208 724 784 | 55,796 2,419 180 194 |
| Disposal of Assets From Price | special bed intel nuc 715BNK mini pc for nursing supervisor's office user refurbished nuc mini pc for south wing nursing station maxi 500 2H SP Bar & Scale | Totals 10/3 1/2018 10/3 1/2018 10/3 1/2018 12/3 1/2018 | 497,696 3,627 904 978 3,097 | 498,324 3,627 904 978 3,097 | S/L S/L S/L S/L | 12 5 5 5 | 302 181 196 619 | 1,208 724 784 2,476 | 2,419 180 194 621 |
| Disposal of Assets From Price | special bed intel nuc 7ISBNK mini pc for nursing supervisor's office user refurbished nuc mini pc for south wing nursing station maxi 500 2H SP Bar & Scale hardware, software, setup, & installation | Totals 10/3 1/2018 10/3 1/2018 10/3 1/2018 12/3 1/2018 12/3 1/2018 | 497,696 3,627 904 978 3,097 2,556 | 3,627 904 978 3,097 2,556 | S/L S/L S/L S/L S/L | 12 5 5 5 5 | 302 181 196 619 511 | 1,208 724 784 2,476 2,044 | 2,419 180 194 621 512 |
| Disposal of Assets From Price | special bed intel nuc 715BNK mini pc for nursing supervisor's office user refurbished nuc mini pc for south wing nursing station maxi 500 2H SP Bar & Scale hardware, software, setup, & installation hardware, software, setup, & installation | Totals 10/3 1/2018 10/3 1/2018 10/3 1/2018 12/3 1/2018 12/3 1/2018 12/3 1/2018 | 497,696 3,627 904 978 3,097 2,556 2,815 | 3,627 904 978 3,097 2,556 2,815 | S/L S/L S/L S/L S/L S/L | 12 5 5 5 5 | 8,711 302 181 196 619 511 563 | 1,208 724 784 2,476 2,044 2,252 | 2,419 180 194 621 512 563 |
| Disposal of Assets From Price | special bed intel nuc 715BNK mini pe for nursing supervisor's office user refurbished nuc mini pe for south wing nursing station maxi 500 2H SP Bar & Scale hardware, software, setup, & installation hardware, software, setup, & installation ELO 17" all in one touch (backup touchscreens for cnas) | Totals 10/31/2018 10/31/2018 10/31/2018 12/31/2018 12/31/2018 12/31/2018 2/28/2019 | 3,627 904 978 3,997 2,556 2,815 3,171 | 3,627 904 978 3,097 2,556 2,815 3,171 | S/L S/L S/L S/L S/L S/L S/L | 12 5 5 5 5 5 5 | 8,711 302 181 196 619 511 563 634 | 1,208 724 784 2,476 2,044 2,252 2,536 | 2,419 180 194 621 513 635 |
| Disposal of Assets From Price | special bed intel nuc 715BNK mini pc for nursing supervisor's office user refurbished nuc mini pc for south wing nursing station maxi 500 2H SP Bar & Scale hardware, software, setup, & installation hardware, software, setup, & installation ELO 17" all in one touch (backup touchscreens for cnas) air curtain refrigerator, dinex model #DXIRAC12LS | Totals 10/3 1/2018 10/3 1/2018 10/3 1/2018 12/3 1/2018 12/3 1/2018 12/3 1/2018 2/28/2019 3/3 1/2019 | 3,627 904 978 3,097 2,556 2,815 3,171 4,707 | 3,627 904 978 3,097 2,556 2,815 3,171 4,707 | S/L S/L S/L S/L S/L S/L S/L S/L | 12 5 5 5 5 5 5 5 | 302 181 196 619 511 563 634 471 | 1,208 724 784 2,476 2,044 2,252 2,536 1,884 | 2,419 180 194 621 512 503 635 2,823 |
| Disposal of Assets From Price | special bed intel nue 7I5BNK mini pe for nursing supervisor's office user refurbished nue mini pe for south wing nursing station maxi 500 2H SP Bar & Scale hardware, software, setup, & installation hardware, software, setup, & installation ELO 17" all in one touch (backup touchscreens for cnas) air curtain refrigerator, dinex model #DXIRAC12LS 10 chairs, 4 tables for professional development (Marla) | Totals 10/3 1/2018 10/3 1/2018 10/3 1/2018 12/3 1/2018 12/3 1/2018 12/3 1/2018 2/28/2019 3/3 1/2019 4/30/2019 | 497,696 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 | 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 | S/L S/L S/L S/L S/L S/L S/L S/L S/L | 12 5 5 5 5 5 5 5 5 | 8,711 302 181 196 619 511 563 634 471 337 | 1,208 724 784 2,476 2,044 2,252 2,536 1,884 1,348 | 2,419 180 194 621 512 563 635 2,823 2,024 |
| Disposal of Assets From Price | special bed intel nuc 715BNK mini pc for nursing supervisor's office user refurbished nuc mini pc for south wing nursing station maxi 500 2H SP Bar & Scale hardware, software, setup, & installation hardware, software, setup, & installation ELO 17" all in one touch (backup touchscreens for cnas) air curtain refrigerator, dinex model #DXIRAC12LS 10 chairs, 4 tables for professional development (Marla) NUC computers #741, 742 admissons/A/P | Totals 10/3 1/2018 10/3 1/2018 10/3 1/2018 12/3 1/2018 12/3 1/2018 12/3 1/2018 2/28/2019 3/3 1/2019 4/30/2019 7/3 1/2019 | 497,696 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 | 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 | S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L | 12 5 5 5 5 5 5 5 10 10 5 | 8,711 302 181 196 619 511 563 634 471 337 424 | 1,208 724 784 2,476 2,044 2,252 2,536 1,884 1,348 1,696 | 2,419 180 194 621 512 563 2,823 2,024 426 |
| Disposal of Assets From Price | special bed intel nuc 715BNK mini pe for nursing supervisor's office user refurbished nuc mini pe for south wing nursing station maxi 500 2H SP Bar & Scale hardware, software, setup, & installation hardware, software, setup, & installation ELO 17" all in one touch (backup touchscreens for cnas) air curtain refrigerator, dinex model #DXIRAC12LS 10 chairs, 4 tables for professional development (Marla) NUC computers #741, 742 admissons/A/P dinex air curtain refrigerators | Totals 10/3 1/2018 10/3 1/2018 10/3 1/2018 12/3 1/2018 12/3 1/2018 12/3 1/2018 2/28/2019 3/3 1/2019 4/30/2019 4/30/2019 9/30/2019 | 497,696 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 | 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 3,767 | S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L | 12 5 5 5 5 5 5 5 5 10 10 | 8,711 302 181 196 619 511 563 634 471 337 424 377 | 1,208 724 784 2,476 2,044 2,252 2,536 1,884 1,369 1,508 | 2,419 180 194 621 512 563 635 2,823 2,024 420 2,255 |
| Disposal of Assets From Price | special bed intel nuc 715BNK mini pc for nursing supervisor's office user refurbished nuc mini pc for south wing nursing station maxi 500 2H SP Bar & Scale hardware, software, setup, & installation hardware, software, setup, & installation ELO 17" all in one touch (backup touchscreens for cnas) air curtain refrigerator, dinex model #DXIRAC12LS 10 chairs, 4 tables for professional development (Marla) NUC computers #741, 742 admissons/A/P | Totals 10/3 1/2018 10/3 1/2018 10/3 1/2018 12/3 1/2018 12/3 1/2018 12/3 1/2018 2/28/2019 3/3 1/2019 4/30/2019 7/3 1/2019 | 497,696 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 | 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 | S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L | 12 5 5 5 5 5 5 5 10 10 5 | 8,711 302 181 196 619 511 563 634 471 337 424 | 1,208 724 784 2,476 2,044 2,252 2,536 1,884 1,348 1,696 | 2,419 180 194 621 512 563 635 2,823 2,024 420 2,255 |
| Disposal of Assets From Price | special bed intel nuc 7I5BNK mini pc for nursing supervisor's office user refurbished nuc mini pc for south wing nursing station maxi 500 2H SP Bar & Scale hardware, software, setup, & installation hardware, software, setup, & installation ELO 17" all in one touch (backup touchscreens for cnas) air curtain refrigerator, dinex model #DXIRAC12LS 10 chairs, 4 tables for professional development (Marla) NUC computers #741, 742 admissons/A/P dinex air curtain refrigerators TM nuc 3748-Liz social services, TM nuc #749- south wing | Totals 10/3 1/2018 10/3 1/2018 10/3 1/2018 12/3 1/2018 12/3 1/2018 12/3 1/2018 2/28/2019 3/3 1/2019 4/30/2019 4/30/2019 9/30/2019 | 497,696 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 | 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 3,767 | S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L | 12 5 5 5 5 5 5 5 5 10 10 | 8,711 302 181 196 619 511 563 634 471 337 424 377 | 1,208 724 784 2,476 2,044 2,252 2,536 1,884 1,348 1,696 1,508 2,672 | 2,419 180 194 621 512 563 635 2,823 2,024 426 2,259 |
| Disposal of Assets From Price | special bed intel nuc 715BNK mini pc for nursing supervisor's office user refurbished nuc mini pc for south wing nursing station maxi 500 2H SP Bar & Scale hardware, software, setup, & installation hardware, software, setup, & installation ELO 17" all in one touch (backup touchscreens for cnas) air curtain refrigerator, dinex model #DXIRAC12LS 10 chairs, 4 tables for professional development (Marla) NUC computers #741, 742 admissons/A/P dinex air curtain refrigerators TM nuc 3748-Liz social services, TM nuc #749- south wing Vacuum | 10/31/2018 10/31/2018 10/31/2018 10/31/2018 12/31/2018 12/31/2018 12/31/2018 2/28/2019 3/31/2019 4/30/2019 7/31/2019 9/30/2019 9/30/2019 | 497,696 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 3,767 3,339 | 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 3,767 3,339 | S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L | 12 5 5 5 5 5 5 5 5 10 10 | 8,711 302 181 196 619 511 563 634 471 337 424 377 | 1,208 724 784 2,476 2,044 2,252 2,536 1,884 1,348 1,696 1,508 2,672 | 2,419 180 194 621 512 563 635 2,823 2,024 426 2,259 667 |
| Disposal of Assets From Price | special bed intel nuc 7I5BNK mini pc for nursing supervisor's office user refurbished nuc mini pc for south wing nursing station maxi 500 2H SP Bar & Scale hardware, software, setup, & installation hardware, software, setup, & installation ELO 17" all in one touch (backup touchscreens for cnas) air curtain refrigerator, dinex model #DXIRAC12LS 10 chairs, 4 tables for professional development (Marla) NUC computers #741, 742 admissons/A/P dinex air curtain refrigerators TM nuc 3748-Liz social services, TM nuc #749- south wing | Totals 10/3 1/2018 10/3 1/2018 10/3 1/2018 12/3 1/2018 12/3 1/2018 12/3 1/2018 2/28/2019 3/3 1/2019 4/30/2019 7/3 1/2019 9/30/2019 9/30/2019 | 497,696 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 3,767 3,339 | 3,627 904 978 3,097 2,556 2,815 3,171 4,707 3,372 2,122 3,767 3,339 | S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L | 12 5 5 5 5 5 5 5 5 10 10 | 8,711 302 181 196 619 511 563 634 471 337 424 377 | 1,208 724 784 2,476 2,044 2,252 2,536 1,884 1,348 1,696 1,508 2,672 | 2,419 180 194 621 512 503 635 2,823 2,024 426 2,259 667 |

| | | DATE | HISTORICAL | BASIS | | USEFUL | | | NET | |
|-----------------|--|-------------|------------|---------|--------|---------|--------------|-----------|-------|----------------|
| Vendor | Description | OF | COST | FOR | DEPR | LIFE | Depreciation | Accum | VALUE | |
| | | ACQUISITION | | | METHOD | (YEARS) | 30-Sep-22 | 30-Sep-22 | | |
| | Food Warmer | 4/30/2005 | (4,056) | (4,056) | | | | (4,056 |) | - |
| | Area Rug | 6/30/2005 | (1,973) | (1,973) | | | ** | (1,973 |) | × |
| | Chart Racks | 11/30/2005 | (3,168) | (3,168) | | | | (3,168 |) | 100 |
| | Rehab equipment | 19/31/2006 | (3,129) | (3,129) | | | ** | (3,129 | | Sec. 1 |
| | Termal Base to Plate/Tray for patient meals | 11/30/2006 | (1,475) | (1,475) | | | | (1,475 | | ~ |
| | Secretary/base; server (furniture for lobby) | 1/3 1/2007 | (912) | (912) | | | * | (912 | | - |
| | 3 Round tables | 6/30/2007 | (1,103) | (1,103) | | | | (1,103 | | - |
| | 12 Arm chairs | 6/30/2007 | (2,424) | (2,424) | | | 2 | (2,424 | | - |
| | 27 LCD TV | 11/29/2007 | (8,589) | (8,589) | | | 2 | (8,589 | | |
| | Rolary Toaster | 1/10/2008 | (1,032) | (1,032) | | | | (1,032 | | 2 |
| | Bookcase & console | 1/31/2008 | (1,107) | (1,107) | | | (513) | (1,107 | | - |
| | 2 LCD TV | 2/6/2008 | (3,173) | (3,173) | | | (0.0) | (3,173 | | |
| | Smart Them Base Dinex | 4/16/2008 | (1,719) | (1,719) | | | | (1,719 | | |
| | Smart Them Base Dinex | 8/31/2008 | (3,392) | (3,392) | | | | (3,392 | | - |
| | 8 Overbed Tables | 2/25/2009 | (856) | (856) | | | - | (856 | | |
| | 6 Overbed Tables | 5/12/2009 | (647) | (647) | | | - C | (647 | | |
| | 3 Refrigerators for Rehab | 7/15/2009 | (676) | (676) | | | | (676 | | |
| | 6 Overbed Tables | 10/30/2009 | (667) | (667) | | | 2 | (667 | | |
| | 42" LCD HDTV | | | , , | | | | , | • | |
| | 2 HP 2035n Printers | 12/11/2009 | (848) | (848) | | | | (848 | | - |
| | 6 Overbed Tables | 3/14/2010 | (732) | (732) | | | | (732 | | |
| | | 4/9/2010 | (665) | (665) | | | _ | (665 | • | - |
| | 6 Overbed Tables | 5/14/2010 | (665) | (665) | | | - | (665 | | |
| | 6 Overbed Tables | 6/17/2010 | (658) | (658) | | | ~ | (658 | | - |
| | Vital Signs Monitor (South Wing) | 11/9/2010 | (1,604) | (1,604) | | | | (1,604 | | - |
| | 47" TV for PUB | 4/12/2011 | (954) | (954) | | | - | (954 | | - |
| | HP 4530 Laptop for Dietician | 1/31/2012 | (1,059) | (1,059) | | | - | (1,059 | | (# |
| | Desktop for Medical Records | 3/31/2012 | (1,579) | (1,579) | | | * | (1,579 | | 34 |
| | Desktop - Administrator | 5/16/2012 | (798) | (798) | | | - | (798 | | (# |
| | Epson GTS80 Scanner - Med Records | 5/16/2012 | (956) | (956) | | | | (956 | | 54 |
| | Desktop for A Wing #524 | 6/30/2012 | (803) | (803) | | | * | (803 | , | : - |
| | 6 Overbed Tables | 10/1/2012 | (626) | (626) | | | * | (626 | , | - SE |
| | Blood Pressure Unit & Oximeter | 4/5/2013 | (1,371) | (1,371) | | | * | (1,371 |) | · · · |
| | TM Desktop Machines #563 and 564 | 7/13/2013 | (1,284) | (1,284) | | | 8 | (1,284 |) | 59 |
| | Inwin Mini Desktop | 7/13/2013 | (1,957) | (1,957) | | | * | (1,957 |) | <u>;</u> = |
| | 4 Grey Task Chairs - South Unit | 7/19/2013 | (583) | (583) | | | (234) | (583 |) | 56 |
| | Computer Nursing Supervisor | 8/31/2013 | (1,637) | (1,637) | | | * | (1,637 |) | |
| | Microsoft Office 2013 | 7/3 1/2014 | (3,191) | (3,191) | | | * | (3,191 |) | 34 |
| | DNS Laptop | 8/31/2014 | (744) | (744) | | | * | (744 |) | |
| | 2010 D 1 | | | | | | | | - | |
| | 2019 Balance | Totals | 466,248 | 466,876 | | | 13,247 | 397,758 | | 69,119 |
| 2020 Additions: | _ | | | | | | | | | |
| | panacea wall defender | 10/31/2019 | 5,305 | 5,305 | S/L | 7 | 758 | 2,274 | | 3,031 |
| | new furninture for adns | 10/31/2019 | 1,226 | 1,226 | S/L | 10 | 123 | 369 | | 857 |
| | new furniture for adns | 10/31/2019 | 1,006 | 1,006 | S/L | 10 | 101 | 303 | | 703 |
| | intel nuc- lisa barie recreation | 10/31/2019 | 2,138 | 2,138 | S/L | 5 | 428 | 1,284 | | 854 |
| | elo touch- replacement for cnas in hallway | 10/31/2019 | 1,649 | 1,649 | S/L | 5 | 330 | 990 | | 659 |
| | new hp probook 450 g6 15 gb (carole roberge mds coordinator) | 12/31/2019 | 1,514 | 1,514 | S/L | 5 | 303 | 909 | | 605 |
| | intel nuc for k wood in linance | 1/31/2020 | 1,923 | 1,923 | S/L | 5 | 385 | 1,155 | | 768 |
| | computer NUC #776 HR dept for Lauire Caine | 7/31/2020 | 2,587 | 2,587 | S/L | 5 | 517 | 1,551 | | 1,036 |
| | network upgrade | 9/30/2020 | 6,817 | 6,817 | S/L | 10 | 682 | 2,046 | | 4,771 |
| | | 21.201.202V | 5,017 | 5,017 | 5.2 | | := | 2,010 | | 200 |
| | Electric Lift | 11/30/2004 | (3,286) | (3,286) | | | * | (3,286 | i) | |
| | Motor | 12/31/2004 | (1,207) | (1,207) | | | | (1,207 | ') | |
| | Windows | 11/30/2005 | (970) | (970) | | | ± | (970 | | |
| | Exhaust fan dish machine | 1/3 1/2006 | (2,724) | (2,724) | | | | (2,724 |) | • |
| | | | | | | | | | | |

| Pla | Description asters for lifts ate heater for kitchen calc/lift | OF ACQUISITION 6/30/2006 | COST (730) | FOR DEPRECIATION | DEPR, METHOD | LIFE (YEARS) | Depreciation 30-Sep-22 | Accum 30-Sep-22 | VALUE |
|-----------------|--|--------------------------------|------------|------------------|-----------------|-----------------|---------------------------|--------------------|--|
| Pla | ate heater for kitchen calc/lift | 6/30/2006 | | DEPRECIATION | METHOD | (YEARS) | 30-Sen-22 | | |
| Pla | ate heater for kitchen calc/lift | | | | | (121110) | 30-369-22 | | |
| | calc/lift | | | (730) | | | - | (730) | |
| Sca | | 9/30/2006 | (3,409) | (3,409) | | | ¥: | (3,409) | |
| i. | | 1/31/2007 | (4,872) | (4,872) | | | * | (4,872) | |
| | orthington Room Curtains | 10/22/2007 | (823) | (823) | | | - | (823) | |
| | igital Card System | 6/19/2008 | (1,655) | (1,655) | | | ** | (1,655) | |
| | Gallon Blender | 12/3 1/2008 | (1,145) | (1,145) | | | * | (1,145) | |
| | erver Wiring | 6/1/2009 | (1,458) | (1,458) | | | * | (1,458) | |
| | etwork Wiring | 9/15/2009 | (3,751) | (3,751) | | | \$ | (3,751) | |
| | 5 Insulated Bases | 3/2/2010 | (2,210) | (2,210) | | | - | (2,210) | |
| | ed Protectors | 5/16/2011 | (2,980) | (2,980) | | | * | (2,980) | |
| | aptop - Dietician | 5/16/2012 | (835) | (835) | | | * | (835) | |
| Fax | | 3/10/2013 | (532) | (532) | | | - | (532) | |
| | ietary Desktop Computer | 3/10/2013 | (1,664) | (1,664) | | | 2 | (1,664) | |
| | rinter Nursing Super & Staff Dev | 7/31/2013 | (956) | (956) | | | 2 | (956) | |
| | aptop for B Wing | 10/31/2013 | (850) | (850) | | | | (850) | |
| | P ProBook and Replicator- maintenance | 2/28/2014 | (1,070) | (1,070) | | | | (1,070) | |
| HP | P ProBook Spare 1- spare | 3/31/2014 | (914) | (914) | | | - | (914) | |
| | P Bookkeeper PC- carol byus | 4/30/2014 | (1,073) | (1,073) | | | | (1,073) | |
| Qu | uickBooks Server | 4/30/2014 | (1,282) | (1,282) | | | - | (1,282) | |
| Co | omputer Medical Records | 5/31/2014 | (851) | (851) | | | - | (851) |) ==================================== |
| 2 0 | Color Printers and Windows 8 I | 6/30/2014 | (1,216) | (1,216) | | | - | (1,216 |) ==== |
| Die | ietary Desktop Computer | 8/31/2014 | (1,010) | (1,010) | | | 2 | (1,010 | 9 |
| Ad | dmissions Desktop Computer | 8/31/2014 | (1,206) | (1,206) | | | 9 | (1,206 |) =2 |
| No | orth Wing Printer & Windows 7 | 9/30/2014 | (804) | (804) | | | 9 | (804) |) 24 |
| 2 H | HP LaserJet Pro Printers | 12/31/2014 | (596) | (596) | | | 2 | (596) |) == |
| Cis | isco Router with 3 Yr Ent License | 12/31/2014 | (2,953) | (2,953) | | | 2 | (2,953) |) |
| * | | 4/30/2015 | (1,442) | (1,442) | | | 3 | (1,442 |) |
| No | otebook and Printer- nursing office | 4/30/2015 | (860) | (860) | | | 9 | (860 |) |
| | P Pro Book / HP Retail Desktop - laptop- joy, desktop- rec videos | 11/30/2015 | (1,121) | (1,121) | | | 9 | (1,121 |) [4] |
| | 7" Touch Computer | 7/31/2016 | (3,607) | (3,607) | | | 2 | (3,607 |) |
| | | | | | | | | | |
| _20 | 020 Balance | Totals | 434,354 | 434,982 | | | 16,874 | 352,579 | 82,41 |
| 2021 Additions: | | | | | | | | | |
| | isco 3 year licenses | 10/31/2020 | 5,254 | 5,254 | S/L | 3 | 1,751 | 3,502 | 1,75 |
| | eritor test system- helps reduce false positive results | 12/31/2020 | 1,902 | 1,902 | S/L | 3 | 634 | 1,268 | |
| | critor test system- helps reduce false positive results | 12/31/2020 | 1,902 | 1,902 | S/L | 3 | 634 | 1,268 | |
| | ousekeeping computer+ lan=bor to install meraki mr30h access points | 12/31/2020 | 4,642 | 4,642 | S/L | 3 | 1,547 | 3,094 | |
| | isco 3 year license + meraki access point | 12/31/2020 | 5,267 | 5,267 | S/L | 3 | 1,756 | 3,512 | |
| | 020 Arines ST28DLE snowblower | 1/31/2021 | 2,445 | 2,445 | S/L | 5 | 489 | 978 | |
| 0 | bariatric beds | 1/31/2021 | 3,535 | 3,535 | S/L | -5 | 707 | 1.414 | |
| | 00 medeaster | 5/31/201 | 1,787 | 1,787 | S/L | 5 | 357 | 714 | |
| | hp probooks for grace blasiak, aida guzman, iwona chute. Hardware & installation | 6/30/2021 | 4,259 | 4,259 | S/L | 5 | 852 | 1,704 | |
| | esktop face recognitiontemperature scanning klosks and printers (1 for upstairs, 1 downstairs) | 9/30/2021 | 2,661 | 2.661 | S/L | 5 | 532 | 1,064 | , |
| | each in refrigerator | 4/30/2007 | (1,418) | (1,418) | S/L | | 332 | (1,418 | |
| | Desktops, Printer and Dual Monitors- desktops- training, printer- soc. Services | 12/31/2014 | (1,956) | (1,956) | S/L | | 55.1 | (1,956 | |
| Q3 | | | (10,651) | (10,651) | S/L | | - | (10,651 | , |
| - 27 | New Server | 9/30/2015 | | (1,117) | S/L S/L | | - | (10,631 | |
| | HP ProBooks Spares | 7/31/2016 | (1,117) | | S/L S/L | | 100 | (1,813 | * |
| | ew computer for reception, new computer for hr | 12/31/2016 | (1,813) | (1,813) | S/L S/L | | 757 | (978 | |
| 0,2 | ser refurbished nuc mini pc for south wing nursing station | 10/31/2018 | (978) | (978) | S/L | | 14.1 | (1,492 | , |
| Vz | Tarious Tarious | 1/1/2020 | (1,492) | (1,492) | 3/L | | | (1,492 | , |
| 20 | 021 Balance | Totals | 448,584 | 449,212 | | | 26,133 | 351,672 | 97,5 |

2022 Disposals:

| | | DATE | HISTORICAL | BASIS | | USEFUL | | | NET | |
|----------------------------|---|-------------|------------|--------------|--------|---------|--------------|-----------|-------|----------|
| Vendor | Description | OF | COST | FOR | DEPR | LIFE | Depreciation | Accum | VALUE | |
| | | ACQUISITION | | DEPRECIATION | METHOD | (YEARS) | 30-Sep-22 | 30-Sep-22 | | |
| Titan Mechanical | Thermostat | 6/30/2005 | (759) | (759) | S/L | 5 | (· | (75) | 9) | |
| Gulf South Medical Supply | Matrix Bed | 2/18/2008 | (1,405) | (1,405) | S/L | 12 | 4 | (1,40) | 5) | |
| Arjo | Patient Lifts | 4/30/2008 | (16,072) | (16,072) | S/L | 10 | | (16,07) | 2) | 8 |
| American Healthcare Supply | 2 Chair and table for Payroll Office | 7/27/2011 | (748) | (748) | S/L | 15 | ÷: | (74) | 3) | * |
| Direct Supply | Dragon 20i Floor Burnisher | 8/26/2011 | (1,317) | (1,317) | S/L | 5 | 4: | (1,31 | 7) | 100 |
| Life Systems | 2 Rosebud Oximeters | 1/27/2012 | (3,594) | (3,594) | S/L | 10 | 2.5 | (3,59- | 4) | 2 |
| WB Mason | Office Furniture for Staff Development | 6/19/2013 | (1,177) | (1,177) | S/L | 1.5 | E-5 | (1,17 | 7) | 100 |
| WB Mason | Office Furniture for Staff Development | 7/11/2013 | (1,170) | (1,170) | S/L | 15 | <u>1</u> 3 | (1,17 | 0) | 100 |
| TM Technology | HP 15" LT and related accessories- Tina | 3/31/2016 | (1,808) | (1,808) | S/L | 3 | 20 | (1,80 | 8) | 343 |
| TM Technology | hp probook 450- south wing- printer: laptop | 3/31/2017 | (1,143) | (1,143) | S/L | 3 | ÷3 | (1,14 | 3) | 100 |
| TM Technology | hp for mds nurse | 5/31/2017 | (850) | (850) | S/L | 3 | 25 | (85 | 0) | - |
| TM Technology | HP Probook- medical records | 9/30/2017 | (723) | (723) | S/L | 3 | 27 | (72 | 3) | \simeq |
| TM Technology | rehab- notebook; 3 nursing touchscreens | 10/31/2017 | (5,599) | (5,599) | S/L | 3 | ** | (5,59 | 9) | 141 |
| TM Technology | 2 hp notebooks- pam & sheila | 11/30/2017 | (1,813) | (1,813) | S/L | 3 | 95 | (1,81) | 3) | - |

| Vendor | Description | DATE OF ACQUISITION | HISTORICAL COST | BASIS FOR DEPRECIATION | DEPR. | USEFUL LIFE (YEARS) | Depreciation 30-Sep-22 | Accum, VALU 30-Sep-22 | E |
|----------------------|---|---------------------------|--------------------|------------------------------|-------|---------------------------|---------------------------|--------------------------|-----------|
| Var | Var | Var | (925) | (925) | S/L | 5 | - | (925) | 2 |
| 2022 Additions: | | | | | | | | | |
| TM Technology | notebook & monitor for russell | 11/30/2021 | 2,552 | 2,552 | S/L | 5 | 510 | 510 | 2,042 |
| TM Technology | labor to set up russells notebook and monitor | 11/30/2021 | 1,117 | 1,117 | S/L | 5 | 223 | 223 | 894 |
| TM Technology | returned monitor for russell | 12/31/2021 | (346) | (346) | S/L | 5 | (69) | (69) | (277) |
| TM Technology | notebook | 12/31/2021 | 2,037 | 2,037 | S/L | 5 | 407 | 407 | 1,630 |
| TM Technology | acer tabler for kristin in admissions | 5/31/2022 | 1,743 | 1,743 | S/L | 5 | 349 | 349 | 1,394 |
| Graham Field | 2 bariatric beds | 5/31/2022 | 4,605 | 4,605 | S/L | 5 | 921 | 921 | 3,684 |
| Al American | Sundance cubicle curtains- privacy curtains for South (36) | 6/30/2022 | 4,087 | 4,087 | S/L | 10 | 409 | 409 | 3,678 |
| TM Technology | hp probook 450 g8 15" for ruth figuerroa | 8/31/2022 | 1,658 | 1,658 | S/L | 5 | 332 | 332 | 1,326 |
| TM Technology | hp all in one 23" (3) training machines | 8/31/2022 | 3,155 | 3,155 | S/L | 5 | 631 | 63 [| 2,524 |
| Direct Supply | 38 rubbermaid slim jim front step garbage cans for resident rooms | 9/30/2022 | 4,284 | 4,284 | S/L | 10 | 428 | 428 | 3,856 |
| TM Technology | Ethel Higgins Barros, director of social services, HP Probook 450 G9 15: 8G 256; Targus NB Dock U | | 1,797 | 1,797 | S/L | 5 | 359 | 359 | 1,438 |
| | 2022 Balance | Totals | 436,171 | 436,799 | | | 30,633 | 317,069 | 119,729 |
| | | Per TB | 12 | 490,286 | | | 244,691 | 244,691 | 245,595 |
| | | Difference | | S (53,487) | | | \$ (214,058)- \$ | 72,378 \$ | (125,866) |
| Related Party Assets | | | | | | | | | |

Related Party Assets

Related Party Assets

| | Actived a lifty 723acts | | | | | | | | |
|-------------------|--|-------------|-----------|-----------|--------|------|--------|---------|-----------|
| Asset | | Date | | | | | | \ | _ |
| No. | A A D 4 | Acquired | Cost | | | | | NE | |
| NO. | Asset Description | | | | Method | Life | | VA | LUE |
| Movable Equipment | | | | | | | | | |
| 25 | 56 Electric Beds | 9-Feb-09 | \$ 73,141 | \$ 73,141 | S/L | 12 | 2 | 73,141 | % |
| 17 | 56 Electric Beds | 9-Mar-09 | 70,348 | 70,348 | S/L | 12 | 2 | 70,348 | £ |
| 16 | 120 Chairs, Cabinets & Dressers | 12-May-09 | | 166,979 | S/L | 15 | 11,132 | 149,219 | 17,760 |
| | 21 Arm Chairs | 3-Jun-10 | 6,247 | 6,247 | S/L | 15 | 416 | 5,549 | 698 |
| | 7 Round Table | 4-Apr-10 | 2,041 | 2,041 | S/L | 15 | 136 | 1,836 | 205 |
| | 2 Ice Makers | 14-Jul-10 | 5,583 | 5,583 | S/L | 10 | | 5,583 | - |
| | Steam Cooker | 14-Dec-10 | 5,607 | 5,607 | S/L | 10 | 2 | 5,607 | ₩ |
| | 2 Watt Sconces For Lobby | 27-Jun-11 | 204 | 204 | S/L | 10 | 2 | 204 | 32 |
| | 8 Doz Warming Trays | 24-Jun-1 i | 1,583 | 1,583 | S/L | 10 | ⊕ | 1,584 | 19 |
| | Plate Warming System | 4-May-11 | 12,934 | 12,934 | S/L | 01 | ÷ | 12,935 | 12 |
| | Lobby Chandelairs | 20-Apr-11 | 937 | 937 | S/L | 10 | ⊕ | 937 | 12 |
| | Security Camera | 28-Mar-11 | 9,467 | 9,467 | S/L | 5 | | 9,467 | 4 |
| | Lobby & Admin Office Furniture | 8-Jul-11 | 13,616 | 13,616 | S/L | 15 | 908 | 10,205 | 3,411 |
| | 4 Tilt Tables for Pub | i I-May-I I | 2,444 | 2,444 | S/L | 15 | 163 | 1,859 | 585 |
| | Computer Equipment for EMar | 3-Aug-11 | 22,251 | 22,251 | S/L | 5 | ≅ | 22,251 | |
| | 10 Elo touch screen computers | 12-Sep-12 | 12,560 | 12,560 | S/L | 5 | 2 | 12,560 | 74 |
| | Computer Equipment EMAR/ETAR | 1-Oct-11 | 23,835 | 23,835 | S/L | 5 | 2 | 23,835 | 12 |
| | 13 Dining Room Tables for lower | 5-Apr-12 | 7,256 | 7,256 | S/L | 15 | 484 | 5,079 | 2,177 |
| | 22 Blinds/61 Valances | 23-Aug-13 | 14,615 | 14,615 | S/L | 5 | 2 | 14,615 | |
| | Recumbent Stepper Machine | 20-Jun-13 | 4,694 | 4,694 | S/L | 10 | 469 | 4,692 | 2 |
| | Wood Blinds for dining room windows | 14-Jul-14 | 772 | 772 | S/L | 10 | 77 | 623 | 150 |
| | 4 time clocks & time & time & attendance | 2-Apr-14 | 17,022 | 17,022 | S/L | 10 | 1,702 | 13,758 | 3,264 |
| | New Arjo Sara 3000 patient fit | 19-Mar-14 | 2,745 | 2,745 | S/L | 10 | 274 | 2,216 | 529 |
| | Wood blinds for A & B Wing Lounge | 8-Dec-14 | 459 | 459 | S/L | 10 | 46 | 368 | 91 |
| | Light Fixtures for dining room & lo | 24-Nov-14 | 940 | 940 | S/L | 15 | 63 | 504 | 436 |
| | 3 door reach-in refrigerator to re | 14-Apr-15 | 5,621 | 5,621 | S/L | 10 | 562 | 4,496 | 1,125 |
| | Reupholster 24 dining room chair | 31-Mar-15 | 16,793 | 16,793 | S/L | 10 | 1,679 | 13,432 | 3,361 |
| | | | | | | | | | |

| | | DATE | HISTORICAL | BASIS | | USEFUL | | | NET | |
|-----------------|---|-------------|------------|--------------|--------|---------|--------------|-----------|-------|---------|
| Vendor | Description | OF | COST | FOR | DEPR | LIFE | Depreciation | Accum | VALUE | |
| : | | ACQUISITION | | DÉPRECIATION | METHOD | (YEARS) | 30-Sep-22 | 30-Sep-22 | | |
| | Loveseat for connector hall/sofa | 10-Mar-15 | 2,392 | 2,392 | S/L | 12 | 199 | 1,593 | 2 | 800 |
| | Samsung Security Camera RearL | 27-Feb-15 | 2,918 | 2,918 | S/L | 5 | 2 | 2,91 | 3 | 6¥ |
| | New artwork resident corridors | 27-Feb-15 | 8,418 | 8,418 | S/L | 10 | 842 | 6,73 | 5 | 1,682 |
| | Pleated Valence North Day Rm | 5-Jan-15 | 1,075 | 1,075 | S/L | 10 | 108 | 86- | 4 | 212 |
| | Square Scrup floor finish machine | 30-Jun-15 | 3,717 | 3,717 | S/L | 5 | € | 3,71 | 7 | 6≥ |
| | 3 Pictures | 1-Jun-15 | 615 | 615 | S/L | 10 | 62 | 49 | 5 | 120 |
| | Disposal of 3 Elo Touch Screen Computers | 12-Sep-12 | (3,768) | (3,768) | | | | (3,76 | 3) | ≈ |
| | 7 Elo touch screen computers - DISPOSAL | 12-Sep-12 | (8,792) | (8,792) | | | 2 | (8,79) | 2) | |
| | Computer Equipment for Emar - DISPOSAL | 3-Aug-11 | (22,251) | (22,251) | | | 2 | (22,25 | 1) | 52 |
| | Computer Equipment for EMAR/ETAR - DISPOSAL | 1-Oct-11 | (23,835) | (23,835) | | | | (23,83 | 5) | 32 |
| | New Arjo Sara 3000 patient fit | 19-Mar-14 | (2,745) | (2,745) | | | 2 | (2,74 | 5) | 32 |
| | New Arjo Sara 3000 patient lift | 19-Маг-14 | (2,745) | (2,745) | | | | (2,74 | 5) | 54 |
| | Phone System Upgrades disposed on 11/30/20 | 30-Jun-11 | (7,696) | (7,696) | | | | (7,69 | 5) | 82 |
| | Phone system upgrade wiring | 6-Jul-11 | (447) | (447) | | | | (44 | 7) | 34 |
| | Carpet for rehab gym | 23-Apr-13 | (2,394) | (2,394) | | | | (2,39 | 4) | 12 |
| | | = | 445,156 | 445,156 | | | 19,322 | 408,55 |) | 36,608 |
| COMBINED TOTALS | | | 55 55 | 881,955 | e P | 2 | 49,955 | 725,61 | 9 | 156,337 |

| | | | DATE | HISTORICAL | BASIS | USEFUL | | | NET |
|--------|--|------------|-------------|-----------------------|--------------------------|----------------|--------------|-----------|---|
| Vendor | D | escription | OF | COST | FOR | DEPR LIFE | Depreciation | Accum | VALUE |
| | | | ACQUISITION | | DEPRECIATION | METHOD (YEARS) | 30-Sep-22 | 30-Sep-22 | |
| | | | | | | | | | Variance |
| | Buildings | | | | 7,495 | | 375 | 3,000 | 4,495 |
| | Additions | | | | ₩ | | 166 | | · · |
| | Dispusals | | | | | | S € 2 | 590 | * |
| | | | Total | | 7,495 | = | 375 | 3,000 | 4,495 |
| | | | | | | - | | | |
| | Movable Equipment | | | | 449,212 | | 26,133 | 351,672 | 97,540 |
| | Additions | | | | 26,690 | | 4,500 | 4,500 | 22,190 |
| | Disposals | | | | (39,103) | | 1/2/ | (39,103) | - |
| | Related Party Movable Equipment | | | | 458,437 | | 19,322 | 421,831 | 36,606 |
| | Related Party Additions | | | | 34 | | 167 | 7.2E | - € |
| | Related Party Disposals | | | | (13,282) | | - I - I | (13,282) | ¥ |
| | | | Total | | 881,955 | - | 49,955 | 725,619 | 156,336 |
| | | | | | | - | | | |
| | Leasehold Improvements | | | | 2,465,837 | | 134,595 | 2,073,424 | 392,413 |
| | Additions | | | | 57,018 | | 3,799 | 3,799 | 53,219 |
| | Disposals | | | | (572,860) | | 4 | (572,860) | € |
| | Related Party Leasehold improvements | | | | 1,560,584 | | 71,650 | 1,043,091 | 517,494 |
| | Related Party Additions | | | | 62,346 | | 4,547 | 4,547 | 57,799 |
| | Related Party Disposals | | | | | | | | |
| | | | Total | | 3,572,925 | • | 214,591 | 2,552,001 | 1,020,925 |
| | | | | | | | | | 100000000000000000000000000000000000000 |
| | | | | | | | | | |
| | Per Trial Balance | | | | 2,458,746 | | 140,393 | 1,829,150 | 629,596 |
| | Per Cost Report Depreciation | | | | 4,462,375 | | 264,921 | 3,280,619 | 1,181,755 |
| | Related Party | | | | 2,081,368 | | 95,519 | 1,469,469 | 611,899 |
| | F/S vs C/R Variance | | | | 77,739 | | (124,528) | 17,999 | 59,740 |
| | Rounding | | | | 77,137 | | (12 1,550) | 11,,,,, | 55,740 |
| | | | | | | | | | - 5 |
| | | | | | 77,739 | | (124,528) | 17,999 | 59,740 |
| | F/S vs C/R NBV - Page 31, Line 9B | | 59,740 | | | | | | |
| | F/S vs C/R Dep Page 36, Line F1 | | (124,528 | | | | | | |
| | Reserve for Dep Page 35, Line A3 | | | | of \$1 due to rounding | | | | |
| | Accept to the popt - 1 age 33, Line A3 | | 011,099 | THIRD COLUMN VALUE OF | s or a 1 mme to tonuming | | | | |

Annual Report of Long-Term Care Facility

CSP-24 Rev. 10/2006

Amortization Schedule*

| Nam | e of Facility | | | License No. | , | Report for Year Ended | | | Page | of |
|------|---|---------------|--------|--------------|------------|------------------------------------|----------------|-------|---------------|---------|
| 1 | Avon Convalescent Home, Inc., d/b/a Avon Health Center | | | | | 9/30/2022 | | | 24 | 37 |
| | | Date Acqui | | | | Accumulated Amort. to Beginning of | Basis for | | | |
| | | | | Length of | Cost to Be | Year's | Computing | Rate | Amortization | |
| | Item | Month | Year | Amortization | Amortized | Operations | Amortization** | % | for This Year | Totals |
| A. | Organization Expense 1. | | | | | | | | | |
| | 2. | | | | | | | | | |
| | 3.4 | | | | | | | | | |
| A-4. | Subtotal | | E misu | | | Physical Property | | | | |
| B. | Mortgage Expense 1. | | | | | | | | | |
| | 2, | | | | | | | | | |
| | 3. | | | | | | | | | |
| B-4. | Subtotal | | | | | | | | | |
| C. | Leasehold Improvements and Other | | | | | | | | | |
| | 1. Acquired prior to this report period | Var | Var | Various | 4,026,421 | 2,910,269 | S/L | Vario | 206,245 | |
| | 2. Disposals (attach schedule) | Var | Var | Various | (572,860) | (572,860) | S/L | Vario | | |
| | 3. Acquired during this report period (attach schedule) | Var | Var | Various | 119,364 | | S/L | Vario | 8,346 | |
| C-4. | Subtotal | | | | | | | | | 214,591 |
| D. | Total Amortization | | | | | | | | | 214,591 |

^{*} Straight-line method must be 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.

^{**} Specify which of the following bases were used:

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

| Name of Facility Avon Convalescent Home, Inc., d/b/a | License No. 938-C | Report for Year En | ded | | Page of 25 37 |
|--|---|---|--|---------------|--|
| | 730 C | 773072022 | | | |
| 11. Property Questionnaire Part A | | | | | |
| Is the property either owned by the or leased from a Related Party?* | • | Yes | _ | No | If "Yes," complete Part B. If "No," complete Part C. |
| *If any owner or operator of this fa business association to any person related party transaction. | cility is related by family, n or organization from whom | narriage, ownership, abili buildings are leased, the | ty to control or n it is considered a | | |
| Description | | Total | | | |
| Date Land Purchased | | | · 場所知識。 | | |
| Date Structure Completed If NOT Original Owner, Dat | a of Durohasa | | | | |
| 4. Date of Initial Licensure | e of Furchase | | | | |
| 5. Total Licensed Bed Capacity | | 120 | | | |
| 6. Square Footage | | | | | |
| 7. Acquisition Cost | | | | | |
| a. Land | | | | | |
| b. Building | | | | | |
| Part B - Owner and Related Pa | rties | 1st Mortgage | 2nd Mortgage | 3rd Mortgage | 4th Mortgage |
| 1. Financing | Sved verichle) | Fixed | | | |
| a. Type of Financing (e.g., fb. Date Mortgage Obtained | ixed, variable) | 08/26/13 | | | |
| c. Interest Rate for the Cost | Year | 3.78% | | | |
| d. Term of Mortgage (numb | | 30 | | | |
| e. Amount of Principal Born | rowed | 3,903,200 | | | |
| f. Principal balance outstan | ding as of 09/30/2022 | 3,184,958 | | | |
| Complete if Mortgage was | | | | | |
| During Current Cost Ye | | RESIDENCE OF THE SECOND | | | |
| g. Type of Financing (e.g., 1 | fixed, variable) | | | | |
| h. Date of Refinancing i. New Interest Rate | | | | | |
| j. Term of Mortgage (numb | per of years) | | - X | | |
| k. Amount of Principal Born | | | | | |
| l. Principal Outstanding on | | | | | |
| Part C - Arms-Length Leas | | | | | |
| Name and Address of Lesso | or Pro | perty Leased | Date of Lease | Term of Lease | Annual Amount of Lease |
| | | | | | |
| 10 × 10 × 10 × 10 × 10 × 10 × 10 × 10 × | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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 Ye | ar Ended | | Page of |
|--|------|---|---------------|----------------|-----------|
| Avon Convalescent Home, Inc., d/b/a 938-C | | 9/30/2022 | | | 26 37 |
| Item | | Total | CCNH | RHNS | (Specify) |
| Interest A. Building, Land Improvement & Non-Movable Equipment 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) | \$ | | | | |
| 6 | | | v Subtotals 1 | formuned to re | aut naga) |

(Carry Subtotals forward to next page)

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

| Name of Facility License | | | Report for Ye | ear Ended | | Page | of |
|---|--------------|----------------|---------------|------------|-------------|-------|-------------------|
| Avon Convalescent Home, Inc., d/b | 938-C | | 9/30/2022 | | | 27 | 37 |
| 14 | | | Total | CCNH | RHNS | (Spec | if _v) |
| Item | uhtotala Pro | ught Forward: | | CCIVII | KIIINS | (брес | ily) |
| 12. C. Movable Equipment | uototais Dio | ugiit Porward. | | | | | |
| 1. Automotive Equipment | | \$ | | | | | |
| A. Item | Rate | Amount | TEP STORES | | 10 5, 6 | | |
| 71. 10111 | 7 (30) | | | | | | |
| Lender | | ,,, | | | | | |
| Address of Lender | | | | | | | |
| 2. Other (<i>Specify</i>) | | \$ | | | IIII WALLEY | | |
| A. Item | Rate | Amount | | | | | |
| Lender | 1 | | | | | | |
| Address of Lender | | | | | | | |
| B. Item | Rate | Amount | | | | | |
| Lender | | | | | | | |
| Address of Lender | | | | | | | |
| 12. C. 3. Total Movable Equipment Into Expense (C1 + 2) | erest | \$ | | : c | | | |
| 12. D. Other Interest Expense (Specify) | | \$ | | | | | |
| 12. D. Other Interest Expense (specify) | | * | | | | | |
| 13. Total All Interest Expense (12B7 + 1 | 2C3 + 12D | \$ | | | | | |
| 14. Insurance | | | | | | | |
| a. Insurance on Property (buildings | only) | \$ | | 108,172 | | | |
| b. Insurance on Automobiles | | \$ | | | | | |
| c. Insurance other than Property (as | specified ab | | | | | | |
| 1. Umbrella (Blanket Coverage) | | \$ | | | | | |
| 2. Fire and Extended Coverage | | \$ | | | | | |
| 3. Other (Specify) | | \$ | | | | | |
| | | | 100.170 | 100 170 | | | |
| 14d. Total Insurance Expenditures (14a + | | \$ | | 108,172 | | - | |
| 15. Total All Expenditures (A-13 thru C- | 14) | \$ | 13,260,093 | 13,260,093 | l . | | |

D. Adjustments to Statement of Expenditures

| | e of Fa | | ent Home, Inc., d/b/a Avon Health Center | Li | cense No. 938-C | Report for Yea 9/30/2022 | r Ended | Page of 28 37 |
|--------|-------------|--------|--|----------|--------------------|--------------------------|----------------|--|
| AVOI | I Conv | alesce | ent Home, mc., d/b/a Avon Health Center | | Total | J/30/2022 | | 20 37 |
| Thomas | Daga | T in a | | | Amount of | | | |
| | Page No. | | Item Description | | Decrease | CCNH | RHNS | (Specify) |
| | | | | | Decrease | CCIVIT | NITING | (Specify) |
| _ | 10-5 | atarie | es and Wages Outpatient Service Costs | \$ | | | | Contract of the last of the la |
| 2. | | | Salaries not related to Resident Care | \$ | | | | |
| 3. | | | | \$ | | | | |
| 4. | | | Occupational Therapy Other - See attached Schedule | \$ | | | | |
| | 4 | | | Φ | THE REPORT OF THE | Secil-uldengerule | E 1 = 6 % | |
| | | | sional Fees | \$ | | | | AND SHOULD BE SHOULD BE |
| 5. | | | Resident Care Physicians ** | \$ | | 244,391 | | ÷ |
| 6. | | | Occupational Therapy | \$ | | 244,391 | | <u> </u> |
| 7, | | | Other - See attached Schedule | Ф | SULL CONTROL OF | | | |
| | S 15 & | 16 - | Administrative and General | Ф. | | | | |
| 8. | | | Discriminatory Benefits | \$ \$ | | 90,000 | | |
| 9. | 15 | 1c | Bad Debts | \$ | | 80,000 | | |
| 10. | | | Accounting | \$ | | 6 202 | | |
| 10a. | 7 | 1 | Legal | \$ | | 6,293 | | |
| 11, | | | Telephone | \$ | | | | |
| 12. | | | Cellular Telephone | 2 | | | | Salar Sa |
| 13. | | | Life insurance premiums on the life | rh. | | | | DE STATE OF STREET |
| | | | of Owners, Partners, Operators | \$ | | | | |
| 14. | | | Gifts, flowers and coffee shops | \$ | | | CHARLEST SHEET | D-15-A-A-36-335-3014 |
| 15. | | | Education expenditures to colleges or | | | | | |
| | | | universities for tuition and related costs | | | | | |
| | | | for owners and employees | \$ | | | | |
| 16. | 16 | L4 | Travel for purposes of attending | | | | | |
| | | | conferences or seminars outside the | | | | | |
| | | | continental U.S. Other out-of-state | | I E CONTRACTOR | | | |
| | | | travel in excess of one representative | \$ | | 3,505 | | |
| 17: | | | Automobile Expense (e.g. personal use) | \$ | | | | |
| 18. | 16 | m2/3 | Unallowable Advertising * | \$ | | 24,097 | | |
| 19. | | | Income Tax / Corporate Business Tax | \$ | | | | |
| 20. | 16 | m10 | Fund Raising / Contributions | \$ | | 675 | | |
| 21. | | | Unallowable Management Fees | \$ | | | | |
| 22. | | | Barber and Beauty | \$ | | | | |
| 23. | | | Other - See attached Schedule | \$ | 24,972 | 24,972 | | |
| Page | 18 - I |)ietar | y Expenditures | | | | | and the Time of |
| 24. | | | Meals to employees, guests and others | | | | THE LOCAL | |
| | | | who are not residents | \$ | | | | |
| Page | 19 - I | | ry Expenditures | | | | | 8 26 1 26 3 |
| 25. | | | Laundry services to employees, guests | | | | | |
| | | | and others who are not residents | \$ | | | | |
| Page | 20 - H | louse. | keeping Expenditures | | | | SIL TITLES TOR | |
| 26. | | | Housekeeping services to employees, guests | | HIS ENGLISHED | | | |
| | | | and others who are not residents | \$ | | | | |
| | 27/ | | Subtotal (Items 1 - 26 |) \$ | 383,933 | 383,933 | | |

^{*} 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

| age Ref | Line Ref Description | | CCNH | RHNS | (Specify) |
|----------|-----------------------|---------------------------|------|------|-----------|
| | | | | | |
| | | والمتناء فبالنظر والقباطي | | | |
| | | | | | |
| | | | | | 10-11- |
| | | | | | |
| | | | | | |
| | | | | | |
| tal Othe | r Salaries Adjustment | | \$ - | \$ - | \$ - |

Schedule of Fees Adjustments

| Page Ref | Line Ref | Description | CCNH | RHNS | (Specify) |
|-------------|------------|-------------|------------------|------|-----------|
| | | | In the Brook and | | |
| II V | | | | | |
| | | | | | |
| | | | | | |
| 8 = 1 | | | - 11:11 | | |
| | | | | | |
| | | | | | |
| Total Othe | w Food Adi | estmonts. | \$ - | 8 - | \$ - |
| Total Other | r rees Auj | istinents | J . | Ψ | Ψ . |

Schedule of Other A&G Adjustments

| Page Ref | Line Ref | Description | CCNH | RHNS | (Specify) |
|-------------|-----------|--|-----------|---------------|---------------------------------------|
| 16 | m.13 | Employee Gifts and Food | \$ 24,972 | | |
| | - 1 1'11 | | | | |
| | 1.8 11111 | The state of the s | | | |
| | Z1 11 | | | Ŋ"' = = " = | i i i i i i i i i i i i i i i i i i i |
| | | | | | |
| | | | | | |
| Total Other | A&G Ad | ljustments | \$ 24,972 | \$ - | \$ - |

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

| | | | D. Adjustments to Statement | nt | oi Expend | | | | |
|------|---------|---------|--|-----|------------------------------|---------------|-----------|-----------------|-----------|
| Name | e of Fa | acility | | Lic | cense No. | Report for Y | ear Ended | Page | of |
| Avon | Conv | alesce | ent Home, Inc., d/b/a Avon Health Center | | 938-C | 9/30/2022 | | 29 | 37 |
| | | | | | Total | | | | |
| Item | Page | Line | | | Amount of | | | | |
| No. | | No. | Item Description | | Decrease | CCNH | RHNS | (S ₁ | ecify) |
| | | | Subtotals Brought Forward | \$ | 383,933 | 383,933 | | | |
| Page | 20 - 1 | Reside | ent Care Supplies*** | | | W. Carrier | | | is to the |
| 27. | | | Prescription Drugs | \$ | 124,812 | 124,812 | | | |
| 28. | 20 | 5d | Ambulance/Limousine | \$ | 951 | 951 | | | |
| 29. | | | X-rays, etc | \$ | | | | | |
| 30. | 20 | 5h | Laboratory | \$ | 27,680 | 27,680 | | | |
| 31. | | | Medical Supplies | \$ | | | | | |
| 32. | 20 | 5e2 | Oxygen (non emergency) | \$ | 19,287 | 19,287 | | | |
| 33. | | | Occupational Therapy | \$ | | | | | |
| 34. | | | Other - See Attached Schedule | \$ | 20,974 | 20,974 | | | |
| Page | 22 - 1 | Mainte | enance and Property | | | W. 220 | | | |
| 35. | | | Excess Movable Equipment Depreciation | | | | | | |
| | | | See Attached Schedule | \$ | | | | | |
| 36. | | | Depreciation on Unallowable | | the state of the contract of | Contract of | | | |
| | | | Motor Vehicles | \$ | | | | | |
| 37. | | | Unallowable Property and Real | | | | | | |
| | | | Estate Taxes | \$ | | | | | |
| 38. | | | Rental of Building Space or Rooms | \$ | | | | | |
| 39. | | | Other - See Attached Schedule | \$ | | | | | |
| | 27 - 1 | nsura | unce | | | | | 11 - 12 - 23 (| |
| 40. | | | Mortgage Insurance | \$ | | | | | |
| 41. | | | Property Insurance | \$ | | | | | |
| | r - Mi. | scella | neous | | | | | of Sale | |
| 42. | | | Other - Indirect | \$ | | | | | |
| 43. | | | Interest Income on Account Rec. | \$ | | | | | |
| 44. | | | Other - Miscellaneous Administrative | \$ | | | | | |
| 45. | | | Management Fees Direct | \$ | | | | | |
| 46. | | | Management Fees Indirect | \$ | | | | | |
| 47. | | | Other - Direct | \$ | 6,380 | 6,380 | | | |
| | For Pr | ofit P | Providers Only | - | | Herall All St | | 55 | |
| 48. | 0.17 | 5,1.1 | Building/Non Movable Eq. Depreciation | | Saladina 8 | | | 1 2 . 9 | E Roll |
| 10. | | | Unallowable Building Interest - | | | | | | |
| | | | See Attached Schedule | \$ | | - | | | |
| 40 | Total | Amo | unt of Decrease (Items 1 - 48) | \$ | 584,017 | 584,017 | | | |

^{***} 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 | (8 | Specify) |
|------------|-------------|---|----|--------|------|----|----------|
| 20 | 51 | Therapy Equipment Rental (See Attached) | S | 7,305 | | | |
| 20 | 5i | Cable TV Disallowance (See Attached) | \$ | 2,079 | | | |
| 20 | 51 | Bed Rental | \$ | 160 | | | |
| 20 | 51 | IV Therapy Expense | \$ | 6,035 | | | |
| 20 | 51 | Supplies Patient Personal | \$ | 3,041 | | | |
| 20 | 51 | Nursing Equipment Med A | \$ | 2,354 | | | |
| | | | | | | | |
| | | | | | | | |
| Total Othe | r Ancillary | Costs | S | 20,974 | \$ - | \$ | |

Schedule of Excess Movable Equipment Depreciation

| Page Ref | Line Ref | Description | CCNH | RHNS | (Specify) |
|-------------|-----------|------------------------|------|------------------|-----------|
| | 147 NO | | | | New York |
| | يرشيانها | | | | |
| | | | | | 1000 |
| | | | | , ni == 1, 2010m | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total Exces | s Movable | Equipment Depreciation | \$ | \$ - | \$ - |

Schedule of Other Property Adjustments

| Page Ref | Line Ref | Description | CCN | H | RH | VS | (Spec | ify) |
|------------|------------|--------------------------------|---------|-------|-------|-----|---------|------|
| | | In Tourist In equilibries — E- | | , f | | | | |
| | | | | | | | | 4 |
| | | | | - | | | | Ē., |
| | | | | T EX | | | | |
| | | | | | | 316 | | |
| | | | | | ш- "- | | HISTORY | |
| | | | J-1 + . | | | | PER | |
| | | | | | | | | |
| Total Othe | r Property | Adjustments | \$ | . (2) | \$ | | \$ | - |

| Page Ref | Line Ref | Description | CCN | H | RHN | S | (Specify) |
|------------|------------|-------------|-------|------|-----|-----|-----------|
| | | | | | | _ | 0 |
| | | | | - | | | |
| | | | | | | | |
| | | | - | _ | | | |
| | | | 7 0 | =11 | | | |
| | | | | | | | |
| | | | | | | | |
| Total Othe | r Adjustme | nts | \$ | //2/ | \$ | 1 . | \$ - |

Schedule of Other - Miscellaneous Administrative Adjustments

| Page Ref | Line Ref | Description | | CCNH | RHNS | (Specify) |
|-------------------|------------|-------------|----------------------|------|---------------|-----------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | 14.50 ± V.30 ± W.100 | | | |
| | | | | | - | |
| | | | - 1 n 34'Not-4 | | | |
| | | | | | EINE STORESTE | |
| | | | | | EIDRIE BLOOK | |
| | | | | | | |
| Fotal Othe | r Adjustme | nts | | \$ - | \$ - | \$ - |

Schedule of Other - Direct Adjustments

| Page Ref | Line Ref | Description | CCNH | RHNS | (Specify) |
|------------|------------|-----------------|----------|------|-----------|
| | 1V8 | Interest Income | \$ 6.380 | | |
| | | | | | |
| | V dia | | | | |
| | | | | | |
| | 1X = | | | | |
| -TI- 2 | | 1 3 | | | |
| | | | | | |
| | | | | | 193 |
| | | | | | II MILE |
| | | | | | 1 1 2 2 2 |
| Total Othe | r Adjustmo | ents | \$ 6,380 | - | \$ - |

Schedule of Unallowable Building Interest

| Page Ref | Line Ref | Description | C | CNH | RHNS | 5 | (Specify) |
|------------|------------|----------------|--|----------|--------------|------|-----------|
| F) | | | فالقانون وكالمدام والمستوال والمستوال | | | | |
| | | | | | i Nies | | |
| ر انسو | هير الأراآ | | | | Meni = : | | |
| | | | | n Pala | | | 46 |
| | | | | | | | |
| | | | | A III | | | |
| | | | | = 1 1111 | municipal s | | |
| 0.1 | SHE II SH | | | | | | |
| | | | The second secon | | | | |
| | | | | | (a. 1 km., s | | |
| Fotal Unal | lowable Bu | lding Interest | \$ | 28 E | \$ | - \$ | |

Avon Health Care OT Therapy Equipment Rental Disallowance September 30, 2022

| | # of Treatments Page 9 | Percentage | |
|--------------------------------|------------------------|------------|-----------|
| Physical Therapy | 13,360 | 47.95% | |
| Occupational Therapy | 14,504 | 52.05% | {a} |
| | 27,864 | 100.00% | |
| Therapy Equipment Rental | Pg. 20 / Line 5j | 14,034 | {b} |
| OT Equipment Rental Disallowed | Pg. 29 attachment | 7,305 | {a} x {b} |

Avon Health Care 2022 Cost Report Disallowance Schedule for Cable TV September 30, 2022

| | <u>Amount</u> | | | | | |
|--|---------------|-----------------|--|--|--|--|
| Total Cable TV Expense acct #65450 | \$ | 5,679 TB Linked | | | | |
| 1 | | | | | | |
| Monthly Allowable amount | \$ | 300 | | | | |
| Months in Year | | 12 | | | | |
| % of Actual Days in Cost Year (365 Days) | | 100% | | | | |
| Total Allowable Cost | \$ | 3,600 | | | | |
| Disallowed Cable TV | \$ | 2,079 | | | | |
| | | | | | | |

F. Statement of Revenue

| Name of Facility License No. | VEII | Report for Y | ear Ended | | Page of |
|---|------|--------------|-------------|--------------|--------------|
| Avon Convalescent Home, Inc., d/b/a Av(938-C | | 9/30/2022 | | 30 37 | |
| | | | | | |
| Item | | Total | CCNH | RHNS | (Specify) |
| I. Resident Room, Board & Routine Care Revenue | | | | W. 1. 19:101 | n indiko hal |
| 1. a. Medicaid Residents (CT only) | \$ | 12,626,147 | 12,626,147 | | |
| b. Medicaid Room and Board Contractual Allowance ** | \$ | (4,836,246) | (4,836,246) | | |
| 2. a. Medicaid (All other states) | \$ | | | | |
| b. Other States Room and Board Contractual Allowance ** | \$ | | | | |
| 3. a. Medicare Residents (all inclusive) | \$ | | 1,572,406 | | |
| b. Medicare Room and Board Contractual Allowance ** | \$ | | 112,774 | | |
| 4. a. Private-Pay Residents and Other | \$ | 2,919,481 | 2,919,481 | | |
| b. Private-Pay Room and Board Contractual Allowance ** | \$ | | | | |
| II. Other Resident Revenue | | | | | |
| a. Prescription Drugs - Medicare | \$ | 139,669 | 139,669 | | |
| b. Prescription Drugs - Medicare Contractual Allowance ** | \$ | (139,669) | (139,669) | | |
| c. Prescription Drugs - Non-Medicare | \$ | 17,567 | 17,567 | | |
| d. Prescription Drugs - Non-Medicare Contractual Allowance ** | \$ | (17,567) | (17,567) | | |
| 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 | \$ | 320,714 | 320,714 | | |
| b. Physical Therapy - Medicare Contractual Allowance ** | \$ | (169,565) | (169,565) | | |
| c. Physical Therapy - Non-Medicare | \$ | 24,762 | 24,762 | | |
| d. Physical Therapy - Non-Medicare Contractual Allowance ** | \$ | (32,205) | (32,205) | | |
| 4. a. Speech Therapy - Medicare | \$ | 201,425 | 201,425 | | |
| b. Speech Therapy - Medicare Contractual Allowance ** | \$ | (132,424) | (132,424) | | |
| c. Speech Therapy - Non-Medicare | \$ | 7,205 | 7,205 | | |
| d. Speech Therapy - Non-Medicare Contractual Allowance ** | \$ | (7,205) | (7,205) | | |
| 5. a. Occupational Therapy - Medicare | \$ | 544,192 | 544,192 | | |
| b. Occupational Therapy - Medicare Contractual Allowance ** | \$ | (372,073) | (372,073) | | |
| c. Occupational Therapy - Non-Medicare | \$ | 26,070 | 26,070 | | |
| d. Occupational Therapy - Non-Medicare Contractual Allowance ** | \$ | (25,702) | (25,702) | | |
| 6. a. Other (Specify) - Medicare | \$ | 84,328 | 84,328 | | |
| b. Other (Specify) - Non-Medicare | \$ | 709 | 709 | | |
| III. Total Resident Revenue (Section I. thru Section II.) | \$ | 12,864,793 | 12,864,793 | | |
| IV. Other Revenue* | | | | | |
| 1. Meals sold to guests, employees & others | \$ | | | | |
| 2. Rental of rooms to non-residents | \$ | | | | |
| 3. Telephone | \$ | | | | |
| Rental of Television and Cable Services | \$ | | | | |
| 5. Interest Income (Specify) | \$ | | | | |
| 6. Private Duty Nurses' Fees | \$ | | | | |
| 7. Barber, Coffee, Beauty and Gift shops | \$ | | | | |
| 8. Other (Specify) | \$ | 371,933 | 371,933 | | |
| V. Total Other Revenue (1 thru 8) | \$ | 371,933 | 371,933 | | |
| VI. Total All Revenue (III+V) | \$ | | | | |
| 11. A DIM THE MENERINE (TITE , A) | Ψ | 13,236,726 | 13,236,726 | | |

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

^{**} Facility should report all contractual allowances and or payer discounts.

Schedule of Other Resident Revenue - Medicare

Related Exp

| Page Ref | Description | CCNH | RHNS | (Spec | ify) |
|------------|-------------------------------------|----------|--------|-------|------|
| | | | | | |
| 30 II 6a | Medicare Discounts | \$ (5,44 | 8) | | |
| 30 Il 6a | Pharmacy MCR B | 5,40 | 1 | | |
| 30 II 6a | Optum ISNP Part B | 84,37 | 5 | | |
| | | | | | |
| Total Othe | L er Resident Revenue - Medicare | \$ 84,32 | 8 \$ - | \$ | 5.E. |

Schedule of Other Non-Medicare Resident Revenue

Related Exp

| Page Ref | Description | CCNH | RHNS | (Specify) |
|-------------|--|--------|------|-----------|
| | والأعلام المتابي والشووا والمواف المواف والمواف | | | |
| 30 II 6b | X-ray other | \$ 709 | | |
| 5,0 | والمراقب المراوات الم | | | |
| | | | | |
| | | | | |
| | | | | |
| Total Other | er Resident Revenue | \$ 709 | \$ - | \$ |

Interest Income

Account

| Page Ref Account | Balance | CC | NH | RI | INS | (Spe | ecify) |
|-----------------------|---------|----|----|----|-----|------|--------|
| | | | * | | | | ELL |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Total Interest Income | | \$ | | \$ | - | \$ | 1, 1/4 |

Schedule of Other Revenue

| Page Ref | Description | CCNH | RHNS | (Specify) |
|------------|---|------------|--------------|-----------|
| | | | | |
| 30 IV 8 | Insurance Other Dividends (No Expense Offset Necessary) | \$ 15,890 | | |
| 30 IV 8 | Bad Debt Recovery | 841 | | |
| 30 IV 8 | CMA Settlement | (6,379) | The state of | |
| 30 IV 8 | HHS Income | 199,811 | | |
| 30 IV 8 | Misc. HHS Income | 113,162 | | |
| 30 IV 8 | DSS ALJ Settelment | (1,253) | | |
| 30 IV 8 | State Refund | 43,481 | | |
| 30 IV 8 | Interest Income (Disallowed Page 29) | 6,380 | | |
| Total Othe | r Revenue | \$ 371,933 | s - | \$ - |

G. Balance Sheet

| Name of Facility | License No. | | port for Year | Ended | | age of 37 |
|---|------------------------|----------|---------------|-------|----------|-----------|
| Avon Convalescent Home, Inc., d/ | | 9/3 | 0/2022 | | 3 | |
| A | Account | | | | - | Amount |
| Assets A. Current Assets | | | | | | |
| A. Current Assets1. Cash (on hand and in bar | ake) | | | | \$ | 2,380,374 |
| 2. Resident Accounts Recei | | for Bac | d Debts) | | \$ | 683,535 |
| 3. Other Accounts Receivab | | | | | \$ | |
| 4 Inventories | The (Exerualing Owners | or rectu | ica i artics) | | \$ | 58,247 |
| 5. Prepaid Expenses | | | | | \$ | 73,341 |
| a. Prepaid Insurance | | | 49,713 | | | |
| b. Prepaid Other | | | 23,628 | | 1882 | |
| с. | | | | | | |
| d. See Schedule | | | | | STATE OF | |
| 6. Interest Receivable | | | | | \$ | 35.7 |
| 7. Medicare Final Settlemer | nt Receivable | | | | \$ | |
| 8. Other Current Assets (iter | nize) | | | | \$ | |
| | | | | B) | | |
| 4 | | | | | | |
| See Schedule | | | | | 1 | |
| A-9. Total Current Assets (Lines | A1 thru 8) | | | | \$ | 3,195,497 |
| B. Fixed Assets | | | | | | |
| 1. Land | | | | | \$ | |
| 2. Land Improvements | *Historical Cost | | | = | \$ | |
| | Accum. Deprecia | tion | | Net | | |
| 3. Buildings | *Historical Cost | | 7,495 | 2 | \$ | 4,495 |
| | Accum. Deprecia | tion | 3,000 | Net | | |
| Leasehold Improvements | | | 1,949,995 | | \$ | 445,632 |
| | Accum. Deprecia | ition | 1,504,363 | Net | | |
| 5. Non-Movable Equipment | | | | ٠ | \$ | |
| 10 | Accum. Deprecia | tion | 12 (722 | Net | Φ. | 110.720 |
| 6. Movable Equipment | *Historical Cost | . = | 436,799 | | \$ | 119,730 |
| | Accum. Deprecia | tion | 317,069 | Net | Φ. | -3(0) |
| 7. Motor Vehicles | *Historical Cost | | | | \$ | |
| | Accum. Deprecia | tion | | Net | | |
| 8. Minor Equipment-Not De | epreciable | | | | \$ | |
| 9. Other Fixed Assets (items | ze) | | | | \$ | 59,740 |
| F/S vs C/R NBV | , | | 59,740 | | | |
| See Schedule | | | | | | |
| B-10. Total Fixed Assets (Line | s B1 thru 9) | | | | \$ | 629,597 |

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

| Page Ref Line Ref Description | |
|---|----|
| | |
| | |
| | |
| | |
| | |
| Total Prepaid Expenses | S |
| | |
| | |
| | |
| 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 (Hemize) Page 31 Line B9 | |
| Page Ref Line Ref Description | |
| | |
| | |
| | |
| | |
| Total Other Other Fixed Assots (Hemize) | \$ |
| Tital Other Other Filed Assets (Heilinge) | |
| 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 | |
| The Rel Line Rel assertation | |
| | |
| | |
| | |
| | |
| Total Other Current Liabilities (Itemize) | 2 |
| | |
| Schedule of Other Long-Term Liabilities (Itemize) Page 34 Line B- | |
| Page Ref Line Ref Description | |
| | |
| | |
| | |
| | |
| | |

G. Balance Sheet (cont'd)

| | ne of Facility | License No. | Report for Year | Ended | Page | | of |
|------|------------------------------------|--------------------------------------|------------------------|-----------------|------|----------------|--------------|
| Avoi | n Convalescent Home, Inc., d/b/a | | 9/30/2022 | - I | 32 | | 37 |
| | D-11- | Account | Total Danua | ht Eamrands © | | Amount 3,825,0 | 004 |
| | T - 1 - 1 1 - 1 11 | ded for Davity Draws | | tht Forward: \$ | | 3,023,0 | J94 |
| C. | Leasehold or like property recor | ded for Equity Purpos | es. | \$ | , | | |
| | 1. Land | *Historical Cost | | Φ | | | |
| | 2. Land Improvements | | | - Net \$ | , | | |
| | 2 Dellations | Accum. Depreciation *Historical Cost | | Net 5 | | | |
| | 3. Buildings | | 1,622,930 1,047,638 | - Net \$ | | 575,2 | າດາ |
| | A New Massala Empirement | Accum. Depreciation *Historical Cost | 1,047,038 | Net 5 | 1 | 373,2 | 272 |
| | 4. Non-Movable Equipment | | | - Net \$ | , | | |
| - | C M 11 D ' | Accum. Depreciation | | Net \$ | | -(i | |
| | 5. Movable Equipment | *Historical Cost | 445,156 | - NI-4 0 | , | 26.4 | <u> ۲</u> ۵۲ |
| | C No. 17.1.1 | Accum. Depreciation | on 408,550 | Net \$ | | 36,6 | 300 |
| | 6. Motor Vehicles | *Historical Cost | | - NI-4 | | | |
| | | Accum. Depreciation | on | Net \$ | | | |
| | 7. Minor Equipment-Not Depr | | | \$ | | (11.6 | 000 |
| C-8 | Total Leasehold or Like Proper | ties (C1 thru 7) | | \$ | | 611,8 | 898 |
| D. | Investment and Other Assets | | | | | | |
| | Deferred Deposits | | | \$ | | | _ |
| | 2. Escrow Deposits | | | \$ | | | |
| | 3. Organization Expense | *Historical Cost | | | | | |
| | | Accum. Depreciation | on | Net \$ | | | |
| | 4. Goodwill (Purchased Only) | | | \$ | | | |
| | 5. Investments Related to Resident | dent Care (temize) | | \$ | | | |
| | | | | | | | |
| | 6. Loans to Owners or Related | Parties (itemize) | | \$ | | 620,7 | 758 |
| | Name and Address | Amount | Loan D | | | | - 100 |
| | Traine and Trainess | | | | | | |
| | | | | | | | |
| | Due from West Hartford | | | | | | |
| | Rehab | 620,758 | Various | | | | |
| | 7. Other Assets (itemize) | | | \$ | - | | |
| | | | | 2 | 4. 7 | | 1 |
| | | | | | | | |
| | See Schedule | | | | | | |
| D-8 | Total Investments and Other A | ssets (Lines D1 thru 7 |) | \$ | | 620,7 | 758 |
| | Total All Assets (Lines A9 + B) | | / | \$ | | 5,057,7 | |

^{*} 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 Fac | cility | | License No. | Report for Year Er | nded | Page | of |
|-------------|--------|-------------------------------|---------------------|-------------------------|----------|----------------|-----------|
| Avon Conva | alesce | nt Home, Inc., d/b/a Avon H | 938-C | 9/30/2022 | 33 | 37 | |
| | | | Account | | | A ₁ | nount |
| Liabilities | | | | | | | |
| A. | Cu | rrent Liabilities | | | | | |
| | 1. | Trade Accounts Payable | | | | \$ | 247,187 |
| | 2. | Notes Payable (itemize) | | | | \$ | |
| | | 0 | | | | | |
| | | | | | | | |
| | | , | | | | | |
| | | See Schedule | | /I: 1 \ | | Unamir George | |
| | 3. | Loans Payable for Equipm | | | | \$ | |
| | | Name of Lender | Purpose | Amount | Date Due | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | 4. | Accrued Payroll (Exclusive | of Owners and/or St | ockholders only) | | \$ | 260,973 |
| | 5. | Accrued Payroll (Owners of | | | | \$ | |
| | 6. | Accrued Payroll Taxes Pay | | | | \$ | 7,044 |
| | 7. | Medicare Final Settlement | | | | \$ | |
| | 8. | Medicare Current Financin | | | | \$ | |
| | 9. | Mortgage Payable (Curren | | | | \$ | |
| | 10. | Interest Payable (Exclusive | | ated Parties) | | \$ | |
| | | Accrued Income Taxes* | | | | \$ | |
| | | Other Current Liabilities (i | temize) | | | \$ | 585,702 |
| | | Credit Balance Liabilities | | Accrued User Fee | 181,276 | | |
| | | Due to Cash Resident Funds | 51,08 | Accrued Property Taxes | 2,329 | | |
| | | Accrued Pension | 120,78 | Accrued Insurance Finar | 26,252 | | |
| | | Accrued Accounting | 16,80 | See Schedule | | | |
| A-13 | 3. To | tal Current Liabilities (Line | es A1 thru 12) | | | \$ | 1,100,906 |

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

G. Balance Sheet (cont'd)

| Name of Facility | License No. | Report for Year | Ended | Page | of |
|---|------------------------|-----------------|----------|--|----------------|
| Avon Convalescent Home, Inc., d/b/a Avon | 938-C | 9/30/2022 | | 34 | 37 |
| | Account | | | Amo | |
| Total Brought Forward: | | | | | 1,100,906 |
| Liabilities (cont'd) | | | | | |
| B. Long-Term Liabilities | 6 | | | | |
| Loans Payable-Equipment (| | A 0.224 | Date Due | Participant of the Control of the Co | ON THE RESERVE |
| Name of Lender | Purpose | Amount | Date Due | | |
| | | | 6 | | |
| | | | (2) | | |
| | | | 18 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | 10 | | |
| | | | 1 | | |
| Mortgages Payable | \$ | | | | |
| Loans from Owners or Rela | nted Parties (itemize) | | \$ | | |
| Name and Address of Lender | Amount | Loan D | ate | | |
| | | 200 | | | |
| | | | | | |
| | | | | | |
| | | | 011 | | |
| | | | 5 | | |
| | | | T. | | |
| | | | | | |
| | | | | | |
| | | | 100 | | |
| | | | | | |
| 4. Other Long-Term Liabilitie | s (itemize) | | \$ | | 185,784 |
| Misc. HHS Income 185,784 | | | 100 | | |
| Table III o | | | | | |
| | | | | | |
| See Schedule | | | 72 | | |
| B-5. Total Long-Term Liabilities (I | Lines B1 thru 4) | | \$ | | 185,784 |
| C. Total All Liabilities (Lines A-13 + B-5) | | | \$ | | 1,286,690 |

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

| | License No. | Report for Yo | ear Ended | Page | of |
|--|---------------------|-------------------|-----------|------|-----------|
| Avon Convalescent Home, Inc., d/b/a A | 938-C Account | 9/30/2022 | <u> </u> | 35 | Amount 37 |
| A. Reserves | Account | | | | Amount |
| Reserve for value of leased lar. | nd | | | \$ | |
| Reserve for depreciation value to be amortized | of leased building | s and appurtena | ances | \$ | 611,899 |
| 3. Reserve for depreciation value | of leased personal | property (Equ | ity) | \$ | |
| 4. Reserve for leasehold real prop | perties on which fa | ir rental value i | s based | \$ | |
| 5. Reserve for funds set aside as | donor restricted | | | \$ | |
| 6. Total Reserves | -0 | | | \$ | 611,899 |
| B. Net Worth | | | | \$ | |
| 1. Owner's Capital | | | | Φ | |
| 2. Capital Stock | | | | \$ | 156,000 |
| 3. Paid-in Surplus | | | ., | \$ | |
| 4. Treasury Stock | | | A | \$ | · |
| 5. Cumulated Earnings | | | | \$ | 2,902,000 |
| 6. Gain or Loss for Period | 10/1/202 | l thru | 9/30/2022 | \$ | 101,161 |
| 7. Total Net Worth | | | | \$ | 3,159,161 |
| C. Total Reserves and Net Worth | | | | \$ | 3,771,060 |
| D. Total Liabilities, Reserves, and N | et Worth | | | \$ | 5,057,750 |

H. Changes in Total Net Worth

| Name of Facility License No. | Report for Year | Ended | Page | of |
|---|-----------------|--------|-----------|-------------|
| Avon Convalescent Home, Inc., d/b/a Av 938-C | 9/30/2022 | | 36 | 37 |
| Account | | | | mount |
| A. Balance at End of Prior Period as shown on Report | | | \$ | 3,254,952 |
| B. Total Revenue (From Statement of Revenue Page 30 | | | \$ | 13,236,726 |
| C. Total Expenditures (From Statement of Expenditure. | s Page 27) | | \$ | 13,135,565 |
| D. Net Income or Deficit | | | \$ | 101,161 |
| E. Balance | | | \$ | 3,356,113 |
| F. Additions | | | | |
| 1. Additional Capital Contributed (temize) | | | | West Holder |
| Total Expenses per Page 27 \$13,260,093 | 3 | | | |
| F/S vs C/R \$(124,528) | | | | |
| Total Expenses \$13,135,565 | | | | |
| | | - 1 | | |
| | | | | |
| 2. Other (itemize) | | | | |
| Reconcilation of YE Retained Earnings | (196,952) |) | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| F-3. Total Additions | | | \$ | (196,952) |
| G. Deductions | | | | |
| 1. Drawings of Owners/Operators/Partners (Specify | | | \$ | |
| Name and Address (No., City, State, Zip) | Title | Amount | | |
| | | | | |
| | | 1 1 | | |
| | | | | |
| 2. Other Withdrawings (Specify) | | | \$ | |
| Purpose | Amo | unt | 80 ESS 16 | |
| T ut pose | 7 11110 | | | |
| | | | | |
| | | | | |
| | | l l | | |
| 2. T. (1D. fortions | | | t | |
| 3. Total Deductions | 30/22 | | \$ \$ | 3,159,161 |
| H. Balance at End of Period 09/3 | UIZZ | | D | _ 3,139,101 |

I. Preparer's/Reviewer's Certification

| 000.0 | 0.44 | | | | | | |
|---|--------------|----|--|--|--|--|--|
| Avon Convalescent Home, Inc., d/b/a Avon 938-C 9/30/2022 | 37 | 37 | | | | | |
| Check appropriate category | | | | | | | |
| Chronic and Convalescent Nursing Home only (CCNH) Rest Home with Nursing Supervision only (RHNS) | | | | | | | |
| Preparer/Reviewer Certification | | | | | | | |
| I have prepared and reviewed this report and am familiar with the applicable regulations governing its preparation. 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. | | | | | | | |
| Signature of Preparer Title Date Signed | Date Signed | | | | | | |
| | | | | | | | |
| Printed Name of Preparer | | | | | | | |
| Matthew S. Bavolack | | | | | | | |
| Addres Address Phone Number | Phone Number | | | | | | |
| 555 Long Wharf Drive, New Haven, CT 06511 203-781-9600 | 203-781-9600 | | | | | | |
| Contacted Person Regarding Additional Information Needed Regarding This Report Phone Number | Phone Number | | | | | | |
| Russell Schwartz 860-673-2521 | 860-673-2521 | | | | | | |
| Contact Email Address | | | | | | | |
| | | | | | | | |
| russell.schwartz@sbcglobal.net | | | | | | | |