State of Connecticut



Annual Report of Long-Term Care Facility Cost Year 2021

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 (CCNH)		Rest Home with Nursing Supervision only (RHNS)	□ (Specify)					
Report for Year Beginning 10/1/2020		Report for Year Ending 9/30/2021						

	License Numbers:	CCNH 938-C	RHNS	(Specify)	Medicare Provider 07-5244
--	------------------	---------------	------	-----------	------------------------------

Medicaid Provider Numbers:	CCNH	RHNS	ICF-IID
	9381		

For Department Use Only

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

Name of Facility (as licensed)		License No	b. Report for Ye	ar Ended	Page	of
Avon Convalescent Home, Inc	., d/b/a Avon Healt	h Ce 938-C	9/30/2021		1	37
	Admini	istrator's/Ow	ner's Certification			
			ANY INFORMATION CONTA AND/OR IMPRISIONMENT U			
Cost Report and sup Center [facility nam 2021, and that to th	pporting schedules ne], for the cost rep e best of my knowl	prepared for Ave ort period beginn edge and belief,	nent and that I have examined the on Convalescent Home, Inc., d/h ning October 1, 2020 and ending it is a true, correct, and complet in accordance with applicable i	o/a Avon H g Septembe e statemer	Health er 30, nt	
Schedule of Resident	Statistics, Statemen Facility in accordan	ts of Reported Exp	ttached General Information and Q penditures, Statements of Revenue ting Requirements of the State of Q	s and the r	elated	
my knowledge under presented in this Re residents were incu	er the penalty of pe port as a basis for s rred to provide resi	rjury. I also cert securing reimbur dent care in this	mation provided is true and corn ify that all salary and non-salary sement for Title XIX and/or oth Facility. All supporting records t law and will be made available	er State as for the ex	sisted	
{a} Subject to Desk	Audit Review					
Signed (Administrator)		Date	Signed (Owner)	Ι	Date	
Printed Name (Administrator) Russell Schwartz			Printed Name (Owner) Russell Schwartz			
Subscribed and Sworn to before me:	State of	Date	Signed (Notary Public)	(Comm. Ex	pires
to before me:					/	/

(Notary Seal)

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State of Connecticut Department of Social Services

55 Farmington Avenue, Hartford, Connecticut 06105

Data Required for Real Wage Adjus	stm	ent		Page	of			
	1A	37						
Name of Facility		Period Cov	ered:	From	То			
Avon Convalescent Home, Inc., d/b/a Avon Health Center				10/1/2020 9/30/2				
Address of Facility 652 West Avon Road, Avon, CT 06001								
Report Prepared By		Phone Nun	ıber	Date				
Marcum LLP		203-781-96	00	2/7/2022				
Item		Total	CCNH	RHNS	(Specify)			
1. Dietary wages paid	\$							
2. Laundry wages paid	\$							
3. Housekeeping wages paid	\$							
4. Nursing wages paid	\$							
5. All other wages paid	\$							
6. Total Wages Paid	\$							
7. Total salaries paid	\$							
8. <i>Total Wages and Salaries Paid</i> (As per page 10 of Report)	\$							

Wages - Compensation computed on an hourly wage rate.

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

DO NOT include Fringe Benefit Costs.

General Information and Questionnaire Type of Facility - Organization Structure

	Pho	one No. of Fac	cility	Report for Yea	r Ended	Page		of
	860	-673-3521		9/30/2021		2		37
Name of Facility (as shown on license)		Address (No). & S	Street, City, Stat	e, Zip)			
Avon Convalescent Home, Inc., d/b/a Avon Health Cent	er		von I	Road, Avon, CT	06001			
CCNH		RHNS		(Specify)		Medicare I	Provid	er No.
License Numbers: 938-C						07-5244		
Type of Facility (Check appropriate box(es))								
Chronic and Convalescent Nursing Home only (CCNH)		t Home with pervision only			Specify)		
Type of Ownership (Check appropriate box)								
O Proprietorship O LLC O Partnership	0	Profit Corp.	0	Non-Profit Corp	o. O	Government	0	Trust
If this facility opened or closed during report year provid	le:		Date	Opened I	Date Clo	osed		
Has there been any change in ownership								
or operation during this report year?	0	Yes	\odot	No I	f "Yes,"	explain full	y.	
Administrator				_				
Name of Administrator				Nursing Hor				
Russell Schwartz				Administrato		000991		
	(0.1	•	0.1	License N	0.:			
Other Operators/Owners who are assistant administrator Name	s (ful	l or part time)) of th	License N				
N/A				License N	0.:			

General Information and Questionnaire Partners/Members

Name of Facility Avon Convalescent Home, Inc., d/l		License No. 938-C	Report for 9/30/2021	Year Ended	Page of 3 37		
Legal Name of Partnership/LLC		State(s) an			nd/or Town(s) in n Registered		
Name of Partners/Members	Business Ac	ldress		Title	% Owned		
N/A							

General Information and Questionnaire Corporate Owners

Name of Facility	License No.	Report for Year I	Ended	Page of
Avon Convalescent Home, Inc., d/b/a Avon H				
If this facility is owned or operated as a corpo	ration, provide the	e following information	ation:	
Legal Name of Corporation	Busine	ss Address	State(s) in White	ch Incorporated
Avon Convalescent Home, Inc.,	652 West Avon F	Road, Avon, CT	CT	
d/b/a Avon Health Center	06001			
Name of Directors, Officers	Busine	ss Address	Title	No. Shares Held by Each
Freda Schwartz	652 West Avon F 06001	Road, Avon, CT	older / Pres / Se	100
Russell Schwartz	652 West Avon F 06001	Road, Avon, CT	VP / Treasurer	
Names of Stockholders Owning at Least 10%				
of Shares				
Freda Schwartz	652 West Avon F 06001	Road, Avon, CT	Stockholder	100

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General Information and Questionnaire Individual Proprietorship

Name of Facility	License No.	Report for Year Ended	Page of
Avon Convalescent Home, Inc., d/b/a Avon Health		9/30/2021	3B 37
If this facility is owned or operated as an individua		provide the following informat	ion:
Ow	ner(s) of Facility		
N/A			

General Information and Questionnaire Related Parties*

Name of Facility		License	e No.		Report for Year Ended		Page	of
Avon Convalescent Hor	ne, Inc., d/b/a Avon Health Cer		938-C		9/30/2021		4	37
	eiving compensation from the fa	•		U		If "Yes," provide th		
marriage, ability to cont	rol, ownership, family or busine	ess asso	ciation?	\odot	Yes O No	complete the inform	nation on Pa	ge 11 of the report.
2	ompanies which provide goods		,					
. .	roperty or the loaning of funds							
0,00	ssociation, common ownership,		·	iness	• Yes • No			
association to any of the	owners, operators, or officials	of this f	acility?			If "Yes," provide th	e following	information:
	1							
			so Provi			Indicate Where		
			ls/Servi			Costs are Included		
Name of Related Individual or Company	Business Address		Related I	Parties %**	Description of Goods/Services	in Annual Report	Cost	Actual Cost to the Related Party
West Hartford Health and	130 Loomis Drive, West Hartford,	Yes	No	%0 ⁴⁴⁴	Provided	Page # / Line #	Reported	Related Party
Rehabilitation Center	CT 06107	0	\odot		Clinical Liason (Shared employee allocated	Pg . 13 / Line B12	36,797	36,797
Avon Realty, LLC	652 West Avon Road, CT 06001	0	۲		Depreciation (Movable Equipment)	Page 22 / Line 7d	22,225	22,225
Avon Realty, LLC	652 West Avon Road, CT 06001	0	۲		Depreciation (Leasehold Improvements)	Page 22 / Line 8c	73,156	73,156
Avon Realty, LLC	652 West Avon Road, CT 06001	0	۲		Rental of Real Property	Various See Attached	526,790	526,790
Brookview / Avon Realty	Various	0	⊙		Related Party Due To / From	Page 32 / Line D6	845,220	845,220
West Hartford Health and Rehabilitation Center	130 Loomis Drive, West Hartford, CT 06107	0	۲		Property & Liability Insurance (Shared Polic	Page 27 / Line 14a	79,627	79,627
West Hartford Health and Rehabilitation Center	130 Loomis Drive, West Hartford, CT 06107	0	۲		Worker's Compensation Policy (Shared Poli	Page 15 / Line 1a1	121,467	121,467
		0	۲					
		0	\odot					

* Use additional sheets if necessary.

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

	Cost Reported		Actual Cost to Provider	Page on Cost Report	Line on Page
Portion Related to Taxes	90,134	{a}	90,134	22	10b
Portion Related to Personal Property Taxes	5,785	{a}	5,785	22	10c
Portion Related to Insurance	63,295	{a}	63,295	27	14a
Portion Related to Mortgage Insurance	13,676	{a}	13,676	22	9
Sewage Use	-	{a}	-	22	6f
Actual Rent per Cost Report	353,900	{a}	353,900	22	9
Total	526,790		526,790		

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		of									
Avon Convalescent Home, Inc., d/b/a Avon Hea		•	9/30/2021	5		37									
If the facility is licensed as CDH and/or RCH or		DS or TBL		-											
must be allocated to CCNH and RHNS as follow	1		services with special medicate	14103, 00	515										
Item			Method of Allocation	als served to residents inds processed are feet serviced urs of routine care provided by EACH dification, i.e., Director (or Charge Nurse), reses, Licensed Practical Nurses, Aides and urs of resident care provided by EACH <i>listing page 13</i>) st center involved and Allocated Costs											
Dietary		Number of	meals served to residents												
Laundry		Number of	pounds processed												
Housekeeping		Number of	mber of square feet serviced												
		Number of	hours of routine care provided	by EAC	H										
Nursing		employee c	classification, i.e., Director (or C	Charge N	lurse	e),									
				-		-									
		Attendants													
Direct Resident Care Consultants		Number of	hours of resident care provided	by EAC	Л										
		specialist ((See listing page 13)	-											
Maintenance and operation of plant		Square feet	t c												
Property costs (depreciation)		Square feet	t												
Employee health and welfare		Gross salar	ries												
Management services		Appropriat	e cost center involved												
All other General Administrative expenses		Total of Di	rect and Allocated Costs												
The preparer of this report must answer the follo	wing question	ons applicat	ole to the cost information provi	ided.											
1. In the preparation of this Report, were all	O V		If "No," explain fully why such	h allocati	ion v	vas not									
costs allocated as required?	• Yes	O No	made.												
N/A															
2. Explain the allocation of related company exp															
Russell Schwartz, Director of Operations, salary				Center a	nd A	von									
Health Center. The split is 57% and 43% respect	ively, based	upon beds.													
3. Did the Facility appropriately allocate and sel			e	e cost ce	enter	s?									
(e.g., Assisted Living, Home Health, Outpatie	ent Services,	Adult Day	Care Services, etc.)												
	• Yes	O No	If "No," explain fully why such made.	n allocati	ion v	vas not									
N/A															

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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 Avon	Health (Center	938-C	9/30/2021			6	37
	Relate	ed * to						
	Ow	ners,					1	
	-	ators,				Annual	1	
	Offi	cers		Date of	Term of	Amount	Am	ount
Name and Address of Lessor	Yes	No	Description of Items Leased	Lease**	Lease	of Lease	Clai	med
U.S. Bank Equipment Finance	0	\odot	2 Copy Machines (Open Item for Lease Agreement)	12/01/19	63 Months	7,494	7,494	
Mail Finance / Quadient Leasing	0	۲	Postage Machines	12/01/15	63 Months	782	782	
	0	۲					1	
	0	۲						
	0	۲						
	0	۲						
	0	۲						
	0	۲						
	0	٥						
	0	۲						
Is a Mileage Log Book Maintained for All L	eased V	ehicles	? O Yes	۲	No	Total ***	8,276	

* 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	of
Avon Convalescent Home, Inc., d/b 938-C	9/30/2021	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			
Televeral and Association D'rea			
Independent Accounting Firm Name of Accounting Firm	Address (No. & Street, City, State, Zip Code)		
1 Cohn Reznick	1780 Glastonbury Blvd., Glastonbury, C		
2 Marcum	555 Long Warf Drive; New Haven, CT 0		
3 Marcum	555 Long wart Drive, New Haven, CT 0	0311	
4			
Services Provided by This Firm (<i>describe fully</i>)			
1 General Accounting; Year End Work; Tax Returns		\$ 21,150)
2 Monthly Accounting Services		\$ 23,40	
3 Cost Reports; Rate Matters		\$ 13,184	
4		\$ 15,18-	Ť
4		*	D 11
		Charge for Services	
		\$ 57,735)
Are These Charges Reflected in the Expenditure Portion of This Report? If Y Yes O No Page 15, Line 1d	es, Specify Expense Classification and Line No.		
Legal Services Information			
Name of Legal Firm or Independent Attorney		Telephone Number	
1 Jackson, Lewis, Schnitzle		914-328-0404	
2 Murtha Cullina		860-240-6000	
3 SB2, Inc.		717-585-7186	
4		11, 000, 100	
5			
Address (No. & Street, City, State, Zip Code)		1	
1 1 North Broadway; White Planes, NY 10601			
2 185 Asylum Street; Hartford, CT 06013			
3 1426 N. 3rd Street, Suite 200; PO Box 5400, Harrisburg, P	A 17102		
4			
5			
Services Provided by This Firm (describe fully)			
1 Labor Relations Advice Counsel		\$ 785	5
2 Regulatory Compliance & Collections (Disallow Page 28)		\$ 17,593	3
3 Regulatory Advisory Services		\$ 42,785	5
4 Collections Related (Disallow Page 28)		\$ 4,224	1
5		\$	
		Charge for Services	Provided
		\$ 65,383	
Are These Charges Reflected in the Expenditure Portion of This Report? If Y	es, Specify Expense Classification and Line No.		
• Yes O No Page 15, Line 1e			

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			9/30/202	1			8	37	
						Period 10/	'1 Thru 6/	30		Period 7/2	eriod 7/1 Thru 9/30		
	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 	98	98			98	98							
B. As of midnight of THIS report period	97							97	97				
3. Total Number of Days Care Provided During Period													
A. Medicare	1,936	1,936			1,576	1,576			360	360			
B. Medicaid (Conn.)	22,950	22,950			16,563	16,563			6,387	6,387			
C. Medicaid (other states)													
D. Private Pay	3,997	3,997			2,521	2,521			1,476	1,476			
E. State SSI for RCH													
F. Other (Specify) Hospice, Mgd Medicare, Comm	3,283	3,283			2,655	2,655			628	628			
G. Total Care Days During Period (3A thru F)	32,166	32,166			23,315	23,315			8,851	8,851			
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	43	43			36	36			7	7			
5. Total Resident Days (3G + 4A + 4B)	32,209	32,209			23,351	23,351			8,858	8,858			

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			Scl	hed	ule of	Re	sider	nt S	tatis	stics ((Cont'd)		
Name of Facil	lity			Licer	nse No.				Report	t for Year	Ended		Page	of
Avon Convale	escent H	lome, In	c., d/b/a Avon H	9	38-C				-	9/30/202	1		9	37
		-	in the certified b llowing informat	-	pacity dur	ring th	ne repoi	t yeai	c?	0	Yes	٥	No	
	<u> </u>		f Change		Cł	iange	in Bed	5		Ca	pacity Afte	er Change		
Date of		RHNS	-		Lost	lunge		, Gaine	d	Cu	pueny mit	er chunge		
	COM	KIINS	(speeny)		LOSI			Jame		_				
Change	(1)	(2)	(3)	(1)	(2)	(3)	(1)	(2)	(3)	CCNH	RHNS	(Specify)	Reason f	or Change
	(1)	(=)	(0)	(1)	(=)	(0)	(1)	(-)	(5)	e er in	Tunits	(5,000)	1100000111	or enunge
									<u> </u>					
	-	-	in certified bed c 90 days followin	-	-	the re	eport ye	ar (as	reporte	ed in item	4 above) p	provide the num	ber of	
			Change in R	nidar	t Dava					CC	NH	RHNS	(Sne	ecify)
1st chang	Je		Change III K	sider	n Days						/1 \11	N111N3	(Spe	~11y)
2nd chan														
3rd chan	<u> </u>													
4th chan														
6. Number	of Resid	lents an	d Rates on Septe	mber			r	1		~	10.5			
			Medicare		Medi	caid				Se	elf-Pay		Other Sta	te Assisted
	Item		CCNH	C	CNH	DI	HNS	C	CNH	DL	INS	(Specify)	R.C.H.	ICF-MR
No. of R			3		72	K	IINS		22		1113	(specify)	K.C.II.	ICI-WIK
Per Dien					/2									
a. One b			Various		284.86				513.00					
b. Two l	bed rms.	•	Various		246.22				443.00					
c. Three	or more	e												
bed r	ms.													
		-	al Therapy Treat	ments						ТО	TAL	CCNH	RHNS	(Specify)
		tre - Par									4,853	4,853		
В.			lusive of Part B) e Treatments								102	102		
			Treatments								102	102		
C.	Other										9,719	9,719		
			Therapy Treatm								14,674	14,674		
			Therapy Treatm	ents										
		are - Par									1,209	1,209		
В.			lusive of Part B) e Treatments								10	10		
			Treatments								10	10		
C.	Other	iorative	Treatments								1,401	1,401		
		Speech T	Therapy Treatme	ents						1	2,620	2,620		
			ational Therapy		nents									
		are - Par									8,094	8,094		
B.			lusive of Part B)											
			e Treatments								101	101		
C	2. Rest Other	iorative	Treatments								0.001	0.001		
		Occunat	ional Therapy T	reatm	ents						9,891 18,086	9,891 18,086		
D.	. Juni L	. conput	Incrupy I	Caim	~~~~					1	10,000	10,000	1	1

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Report of Expenditures - Salaries & Wages

Name of Facility	License No.	Suluite	Report for Yea		Page	of
Avon Convalescent Home, Inc., d/b/a Avon Health Center	938-C		9/30/2021		10	37
Are time records maintained by all individuals receiving cor	nnensation?	٥	Yes	0	No	
The time records manualize by an individuals receiving con	npensation.	0	Total Cost a		110	
			Total Cost a			
Item	CCNH	Hours	RHNS	Hours	(Specify)	Hours
A. Salaries and Wages*						
1. Operators/Owners (Complete also Sec. I						
of Schedule A1) 2. Administrator(s) (Complete also Sec. III						
of Schedule A1)	103,109	1,835				
3. Assistant Administrator (Complete also Sec. IV	105,105	1,055				
of Schedule A1)						
4. Other Administrative Salaries (telephone						
operator, clerks, receptionists, etc.)	374,481	12,072				
5. Dietary Service						
a. Head Dietitian b. Food Service Supervisor						
c. Dietary Workers	416,260	22,310				
6. Housekeeping Service		· · ·				
a. Head Housekeeper	52,879	2,135				
b. Other Housekeeping Workers	316,427	21,624				
 Repairs & Maintenance Services Engineer or Chief of Maintenance 	66,282	1,932				
b. Other Maintenance Workers	53,830	2,122				
8. Laundry Service						
a. Supervisor						
b. Other Laundry Workers	105,026	4,544				
9. Barber and Beautician Services 10. Protective Services						
11. Accounting Services						
a. Head Accountant						
b. Other Accountants						
12. Professional Care of Residents						
a. Directors and Assistant Director of Nurses	216,209	4,200				
b. RN	1.041.296	22.151				
1. Direct Care 2. Administrative**	1,041,286 411,641	22,151 14,786				
c. LPN	411,041	14,700				
1. Direct Care	848,252	25,761				
2. Administrative**						
d. Aides and Attendants	1,781,711	89,950				
e. Physical Therapists f. Speech Therapists						
g. Occupational Therapists						
h. Recreation Workers	166,332	6,889				
i. Physicians						
1. Medical Director						
2. Utilization Review 3. Resident Care***						
4. Other (Specify)						
··· - ···· (2p****)						
j. Dentists						
k. Pharmacists	┨─────┤					
1. Podiatrists m Social Workers/Case Management	229.050	6 277				
m. Social Workers/Case Management n. Marketing	228,950	6,377				
o. Other (Specify)						
See Attached Schedule						
A-13. Total Salary Expenditures	6,182,675	238,688				

 * 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				cify)
Position	\$	Hours	\$	Hours	\$	Hours
	-					
					-	
Tetel	\$ -		¢		¢	
Total	\$ -	-	\$-	-	\$ -	-

Schedule of Other Fees (Page 13)

	CCNH			CCNH			RF	INS	(Specify)		
Service		\$	Hours	\$	Hours	\$	Hours				
		-									
Consult Psychiatrist	\$	1,100	10								
Clinical Liasion	\$	36,797	757								
Medical Records Compliance Audits Education	\$	28,815	144								
Total	\$	66,712	911	\$ -	-	\$ -	-				

Attachment Page 10/13

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		9/30/2021			11	37
		Salary Pai	d	Fringe Benefits and/or Other		Total	Line Where	N 1411 641	Total	
Name	CCNH	RHNS	(Specify)	Payments (describe fully)	Full Description of Services Rendered	Hours Worked	Claimed on Page 10	Name and Address of All Other Employment**	Hours Worked	Compensation 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	119,692			Non Discriminatory	Director of Operations	894				

* 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*

P		1	100101011	t / tummou c	nors and Other	Related	1 arties			
Name of Facility (as licensed)				License No.		Report for Y	ear Ended		Page	of
Avon Convalescent Home, Inc., d/	b/a Avon H	ealth Cente	r	938-С		9/30/2021			12	37
		Salary Pai	d							
Name	CCNH	RHNS	(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	6,181			Non Discriminatory	Administrator 9/9/2021-9/30/2021	110				
Tina Richardson	96,928			Non Discriminatory	Administrator 10/1/2020-9/8/2021	1,725	A4			
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.

State of Connecticut Annual Report of Long-Term Care Facility CSP-13 Rev. 9/2002

12. Other (Specify)

See Attached Schedule

B-13 Total Fees Paid in Lieu of Salaries

License No. Report for Year Ended Name of Facility Page of Avon Convalescent Home, Inc., d/b/a Avon Health 938-C 9/30/2021 13 37 Total Cost and Hours CCNH RHNS Item Hours Hours (Specify) Hours *B. Direct care consultants paid on a fee for service basis in lieu of salary (For all such services complete Schedule B1) 1. Dietitian 55.505 1.089 2. Dentist 7,860 49 3. Pharmacist 9,303 159 4. Podiatrist 5. Physical Therapy a. Resident Care 249,373 4,374 b. Other 6. Social Worker 7. Recreation Worker 8. Physicians a. Medical Director (entire facility) 37.800 198 b. Utilization Review (Title 18 and 19 only) monthly meeting c. Resident Care** d. Administrative Services facility 1. Infection Control Committee (Quarterly meetings) 2. Pharmaceutical Committee (Quarterly meetings) 3. Staff Development Committee (Once annually) e. Other (Specify) Asst. Medical Director 16,380 340 9. Speech Therapist a. Resident Care 1,574 111,193 b. Other 10. Occupational Therapist a. Resident Care 304.809 6,323 b. Other 11. Nurses and aides and attendants a. RN 1. Direct Care 2. Administrative*** b. LPN 1. Direct Care 82,805 1,386 2. Administrative*** c. Aides 491,319 10,704 d. Other

B. Report of Expenditures - Professional Fees

* 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.

66,712

1,433,059

911

27,107

** 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 Av			9/30/2021		14	37
Name & Address of Individual	Full Explanation of Service		* to Owners, ors, Officers No		nation of Ro	elationship
Gerident Solutions PO Box 290539	Dental Consultant	0	۲	N/A		
ValueRx Pharmacy Services 54 Tuttle Place	Pharmacy Consultant	0	۲	N/A		
Alliance Rehab 1520 Kensington Road	PT, OT, ST	0	۲	N/A		
Hartford Hospital (Jeffrey Robbins, MD)	Medical Director	0	۲	N/A		
University Physicians PO Box 660	Assistant Medical Director	0	۲	N/A		
The Nurse Network LLC PO Box 982	Nursing Purchased Services	0	۲	N/A		
Fusion Medical Staffing, LLC PO Box 82674	Nursing Purchased Services	0	۲	N/A		
Maxim Healthare Services 12558 Collections Center Dr.	Nursing Purchased Services	0	۲	N/A		
Medical Solutions LLC PO Box 310737	Nursing Purchased Services	0	۲	N/A		
Prime Time Healthcare LLC PO Box 3544	Nursing Purchased Services	0	۲	N/A		
Mass Tex Imaging 3 Electronisw Ave; Suite 201	Endoscopic Evaluations	0	۲	N/A		
Celtic Consulting 507 East Main Street	Clinical Consulting	0	۲	N/A		
Mary Alice Apratto	Clinical Liasion	0	۲	N/A		
IntelyCare, Inc.	Purchased Services CNAs	0	۲	N/A		
CareerStaff Unlimited	Purchased Services CNAs	0	۲	N/A		
		0	۲			
		0	۲			
		0	۲			
		0	۲			
		0	۲			
		0	۲			
		0	۲			

* 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 Y	ear Ended	Page	of
Avon Convalescent Home, Inc., d/b/a Avon Heal 938-C		9/30/2021		15	37
Item		Total	CCNH	RHNS	(Specify)
1. Administrative and General					
a. Employee Health & Welfare Benefits					
1. Workmen's Compensation	\$	121,467	121,467		
2. Disability Insurance	\$				
3. Unemployment Insurance	\$	48,139	48,139		
4. Social Security (F.I.C.A.)	\$	418,737	418,737		
5. Health Insurance	\$	757,014	757,014		
6. Life Insurance (employees only)					
(not-owners and not-operators)	\$				
7. Pensions (Non-Discriminatory)	\$	113,398	113,398		
(not-owners and not-operators)					
8. Uniform Allowance	\$				
9. Other (<i>Specify</i>)	\$	11,002	11,002		
See Attached Schedule					
b. Personal Retirement Plans, Pensions, and	\$				
Profit Sharing Plans for Owners and					
Operators (Discriminatory)*					
c. Bad Debts*	\$	95,000	95,000		
d. Accounting and Auditing	\$	57,735	57,735		
e. Legal (Services should be fully described on Page 7)	\$	65,387	65,387		
f. Insurance on Lives of Owners and	\$				
Operators (<i>Specify</i>)*					
g. Office Supplies	\$	32,499	32,499		
h. Telephone and Cellular Phones					
1. Telephone & Pagers	\$	8,697	8,697		
2. Cellular Phones	\$	554	554		
i. Appraisal (Specify purpose and	\$				
attach copy)*					
j. Corporation Business Taxes (<i>franchise tax</i>)	\$				
k. Other Taxes (<i>Not related to property - See Page 22</i>)					
1. Income*	\$	4,954	4,954		
2. Other (<i>Specify</i>)	\$.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
See Attached Schedule	Ť				
3. Resident Day User Fee	\$	567,246	567,246		
Subtotal	\$	2,301,829	2,301,829		

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

(Carry Subtotals forward to next page)

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

Attachment Page 15

Schedule of Other Employee Benefits

Description	CCNH		CCNH RHNS		(Specify)
		-			
Tuition Expense (Disallow Page 28)	\$	5,795			
New Hire Expense	\$	3,616			
Employee Physicals / Medications	\$	1,591			
Total	\$	11,002	\$-	\$ -	

Schedule of Other Taxes

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

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

Name of Facility License No.	Report for	Year Ended	Page	of
Avon Convalescent Home, Inc., d/b/a Avon Health Ce 938-C	9/30/2021		16	37
Item	Total	CCNH	RHNS	(Specify)
Subtotals Brought Forward	: 2,301,829	2,301,829		
1. Travel and Entertainment				
1. Resident Travel and Entertainment	\$			
2. Holiday Parties for Staff	\$			
3. Gifts to Staff and Residents	\$ 707	707		
4. Employee Travel	\$ 2,483	2,483		
5. Education Expenses Related to Seminars and Conventions	\$ 13,397	13,397		
6. Automobile Expense (not purchase or depreciation)	\$			
7. Other (<i>Specify</i>)	\$			
See Attached Schedule				
m. Other Administrative and General Expenses				
1. Advertising Help Wanted (all such expenses)	\$ 2,232	2,232		
2. Advertising Telephone Directory (all such expenses)***	\$			
3. Advertising Other (Specify)***	\$ 17,847	17,847		
See Attached Schedule				
4. Fund-Raising***	\$			
	\$			
6. Barber and Beauty Supplies (if this service is supplied	\$			
directly and not by contract or fee for service)***				
7. Postage	\$ 5,487	5,487		
* 8. Dues and Membership Fees to Professional	\$ 9,653	9,653		
Associations (Specify)				
See Attached Schedule				
8a. Dues to Chamber of Commerce & Other Non-Allowable Org.***	\$ 140	140		
9. Subscriptions	\$ 2,341	2,341		
10. Contributions***	\$ 1,475	1,475		
See Attached Schedule				
11. Services Provided by Contract Specify and Complete	\$ 26,195	26,195		
Schedule C-2, Page 21 for each firm or individual)				
	\$			
13. Other (Specify)	\$ 107,745	107,745		
See Attached Schedule				
C-14 Total Administrative & General Expenditures	\$ 2,491,531	2,491,531		

* 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.

Attachment Page 16

Schedule of Other Travel and Entertainment

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

Schedule of Other Advertising

Description	С	CNH	RF	INS	(Speci	fy)
		-				
Promotional Advertising (Disallow Page 28)	\$	17,847				
Total Other Advertising	\$	17,847	\$	-	\$	-

Schedule of Dues

Description	CCNH	RHNS	(Specify)
	-		
ACHA	\$ 1,820		
ALTCFM	\$ 85		
SHRM	\$ 219		
CAHCF	\$ 7,529		
Total Dues	\$ 9,653	\$ -	\$ -

Schedule of Contributions

Description	CCNH		RHNS		6 (Speci	
		-				
Contributions (Disallow Page 28)	\$	1,475				
Total Contributions	\$	1,475	\$	-	\$	-

Schedule of Other Administrative and General

Description	0	CCNH	RH	NS	(Specif	fy)
		-				
Licenses	\$	3,323				
Office Purchased Services	\$	5,616				
Holiday Party	\$	1,109				
Computer Services	\$	73,303				
Employee Gifts and Food (Disallow Page 28)	\$	24,394				
Total Other Administrative and General	\$	107,745	\$	-	\$	-

Name of Facility	License No.	Report for Year Ended	Page of
Avon Convalescent Home, Inc., d/b/a Avo	938-C	9/30/2021	17 37
	Cost of		Indicate Where Costs
Name & Address of Individual or	Management	Full Description of Mgmt. Service	are Included in Annual
Company Supplying Service	Service	Provided	Report Page #/Line #
N/A			

Schedule C-1 - Management Services*

* 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)

		Note of	n Page 5)			
Nan	Page of					
Avc	n Convalescent Home, Inc., d/b/a Avon Health C	er	938-C	9/30/2021		18 37
	Item		Total	CCNH	RHNS	(Specify)
2.	Dietary					
	a. In-House Preparation & Service					
	1. Raw Food	\$	220,441	220,441		
	2. Non-Food Supplies	\$		50,671		
	3. Other (<i>Specify</i>)	\$				
	b. Purchased Services (by contract other		199,170	199,170		
	than through Management Services) (Complete Schedule C-2 att. Page 21)					
	c. Other (<i>Specify</i>)	\$	3			
2D.	<i>Total Dietary Expenditures</i> (2a + b + c + d)	\$	470,282	470,282		
2E.	Dietary Questionnaire		Total	CCNH	RHNS	(Specify)
F.	Resident Meals: Total no. of meals served per d	ay:*				
G.) Yes	•	No		-
H.	Did you receive revenue from employees? C) Yes	\odot	No	If yes, specify amt.	
I.	Where is the revenue received reported in the C	ost Repor	t? (Page/Line	Item)		
J.	Is cost of meals provided to persons other than employees or residents (i.e., Board Members, Guests) included in 2D?) Yes	۲	No	If yes, specify cost.	
K.	Is any revenue collected from these people? C) Yes	۲	No	If yes, specify amt.	
L.	Where is the revenue received reported in the C	ost Repor	t? (Page/Line	Item)		
M.	Is cost of food (other than meals, e.g., snacks at monthly staff meetings, board meetings) provided to employees included in 2D?) Yes	0	No	If yes, specify cost.	
N.	Is any revenue collected from employees? C) Yes	۲	No	If yes, specify amt.	
О.	Where is the revenue received reported in the C	ost 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)

Name of Facility	License	No.	Report for Y	ear Ended	Page of
Avon Convalescent Home, Inc., d/b/a Avon Health Cent	t 9	938-C	9/30/2021		19 37
Item		Total	CCNH	RHNS	(Specify)
 Laundry In-House Processing* Bed linens, cubicle curtains, draperies, 	Lbs.				
gowns and other resident care items washed, ironed, and/or processed.***	Amt. \$	6,858	6,858		
2. 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.				
b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21)	Amt. \$				
c. Other (<i>Specify</i>) Other Laundry Supplies 3D. <i>Total Laundry Expenditures</i> (3a + b + c)	\$	6,811	6,811 13,669		
3D. Total Launary Expenditures (3a + 6 + C) 3E. Laundry Questionnaire	\$	13,009	13,009		
	Yes	۲	No	If yes, specify cost.	
G. Did you receive revenue from employees? O	Yes	\odot	No	If yes, specify amt.	
H. Where is the revenue received reported in the Cost	Report?		(Page/Line	Item)	
Is Cost of laundry provided to persons other	Yes	۲	No	If yes, specify cost.	
J. Did you receive revenue from these people? O	Yes	۲	No	If yes, specify amt.	
K. Where is the revenue received reported in the Cost	Report?		(Page/Line	Item)	

* Do not include salaries from page 10 as part of dollar values recorded in 1, 2, 3, and 4. All allocations should add to total recorded in 3D.

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

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

Name of Facility		Repo	ort for Year E	nded	Page	of
Avon Convalescent Home, Inc., d/b/a Avon He 938-C			9/30/2021		20	37
Item			Total	CCNH	RHNS	(Specify)
4. Housekeeping	Sq. Ft. Serviced					
a. In-House Care	by Personnel					
1. Supplies - Cleaning (Mops,	Amt.	\$	40,442	40,442		
pails, brooms, etc.)						
b. Purchased Services (by contract other	Sq. Ft. Serviced					
than through Management Services)	by Personnel					
(Complete Schedule C-2 att.	Amt.	\$				
Page 21)						
C. Other (<i>Specify</i>)		\$				
4D. Total Housekeeping Expenditures (4a +	b + c)	\$	40,442	40,442		
5. Resident Care (Supplies)**						
a. Prescription Drugs***						
1. Own Pharmacy		\$				
2. Purchased from		\$	248,521	248,521		
Value Rx						
b. Medicine Cabinet Drugs		\$	306,937	306,937		
c. Medical and Therapeutic Supplies		\$	2,251	2,251		
d. Ambulance/Limousine***		\$	820	820		
e. Oxygen						
1. For Emergency Use		\$				
2. Other***		\$	14,488	14,488		
f. X-rays and Related Radiological		\$	4,976	4,976		
Procedures***						
g. Dental (Not dentists who should be incl	luded under	\$				
salaries or fees)						
h. Laboratory***		\$	33,454	33,454		
i. Recreation		\$	13,116	13,116		
j. Direct Management Services*		\$				
k. Indirect Management Services*		\$				
1. Other (Specify)****		\$	86,222	86,222		
See Attached Schedule						
5M. Total Resident Care Expenditures (5a - 5	j)	\$	710,785	710,785		

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

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

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

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

Schedule of Other Resident Care

Description	CCNH	RHNS	(Specify)
	-		
Therapy Equipment Rental	\$ 13,2	98	
Physical Therapy Supplies	\$ 6,3	16	
IV Therapy Supplies (Disallowed)	\$ 10,1	40	
Supplies - Patient Personal (Disallowed)	\$ 7	37	
Nursing Equipment Rental (Disallowed)	\$ 2,8	71	
Nursing Equipment Med A (Disallowed)	\$ 5,8	87	
Supplies - Patient Personal (Disallowed) Nursing Equipment Rental (Disallowed)	\$ 46,9	73	
Total Other Resident Care	\$ 86,2	22 \$ -	\$ -

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

Name of Facility		License No.	Report for Year Ended				Page of			
Avon Convalescent Home, I	nc., d/b/a Avon Health	Center		938-C	9/30/2021				21	37
		Related ** Operators	,	-			Total Cost	/Page Ref.**	*	1
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 60004	0	Θ	N/A	Payroll Processing	23,162				m11
Paine's Rubbish Removal	PO Box 307, Simsbury, CT 06070 P.O. Box 801, Tolland,	0	۲	N/A	Trash Removal / Recycling	21,299			22	6f
Procaire	CT 06084 114 Woodland Street,	0	٥	N/A	Oxygen	21,841			Var	Var
St. Francis Laboratory	Hartford, CT 06105 9201, Minneapolis, MN	0	•	N/A	Lab	28,656				5h
Matrixcare	55480-9201 Wallingford, CT 06492-	0	•	N/A	Clinical Software	39,849				51
TM Technology Systems Aegis Energ Services, Inc.	1904 Springfield, MA 01101- 2511	0 0	0 0	N/A N/A	IT / Technology Support Cogeneration Maintenance	58,614 17,677			Var	Var
Pete's Landscaping	806 Hillstown Road, Manchester, CT 06040	0	۲	N/A	Groundskeeping	15,462			22	6f
NIRO Companies, LLC	PO Box 96, Berlin, CT 06037 PO Box 310629,	0	٥	N/A	Snow Removal	13,294			22	6f
Imagine IT Consulting, Inc.	Newington, CT 06131 South, Suite 10,	0	۲	N/A	Website Management Dietary Purchased	12,000			16	m13
Culinary Services Group LLC	Westminster, MD 21157	0	•	N/A	Services	199,170			18	2b
		0	• •							
		0	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	9/30/2021			22 37
Item	Total	CCNH	RHNS	(Specify)
6. Maintenance & Operation of Plant				
a. Repairs & Maintenance	\$ 70,365	70,365		
b. Heat	\$ 69,880	69,880		
c. Light & Power	\$ 36,452	36,452		
d. Water	\$ 41,940	41,940		
e. Equipment Lease (Provide detail on page 6)	\$ 8,276	8,276		
f. Other (<i>itemize</i>)	\$ 101,120	101,120		
See Attached Schedule				
6g. Total Maint. & Operating Expense (6a - 6f)	\$ 328,033	328,033		
7. Depreciation (<i>complete schedule page 23*</i>)				
a. Land Improvements	\$			
b. Building & Building Improvements	\$ 375	375		
c. Non-Movable Equipment	\$			
d. Movable Equipment	\$ 9,007	9,007		
*7e. <i>Total Depreciation Costs</i> (7a + b + c + d)	\$ 9,382	9,382		
8. Amortization (Complete att. Schedule Page 24*)				
a. Organization Expense	\$			
b. Mortgage Expense	\$			
c. Leasehold Improvements	\$ 131,866	131,866		
d. Other (<i>Specify</i>)	\$			
*8e. <i>Total Amortization Costs</i> (8a + b + c + d)	\$ 131,866	131,866		
9. Rental payments on leased real property less				
real estate taxes included in item 10b	\$ 367,576	367,576		
10. Property Taxes				
a. Real estate taxes paid by owner	\$			
b. Real estate taxes paid by lessor	\$ 90,134	90,134		
c. Personal property taxes	\$ 12,529	12,529		
11. <i>Total Property Expenses</i> (7e + 8e + 9 + 10)	\$ 611,487	611,487		

* 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	\$ 20,183		
Rubbish Removal	\$ 21,299		
Snow Removal	\$ 13,294		
Purchased Maintenance Contracts various (Under \$10k)	\$ 46,344		
Total Other Repairs and Maintenance	\$ 101,120	\$ -	\$ -

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	Deprec	iation Sc	chedule					
Name of Facility	License No.			Report for Year E	nded		Page	of
Avon Convalescent Home, Inc., d/b/a Avon Health Center	938-	·C		9/30/2021			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	1	1			
1. Acquired prior to this report period								
2. Disposals (attach schedule)								
3. Acquired during this report period (attach schedule)								
A-4. Subtotal								
B. Building and Building Improvements								
1. Acquired prior to this report period	7,495		7,495	2,250	S/L	20	375	
2. Disposals (attach schedule)								
3. Acquired during this report period (attach schedule)								
B-4. Subtotal								375
C. Non-Movable Equipment								
1. Acquired prior to this report period								
2. Disposals (attach schedule)								
3. Acquired during this report period (attach schedule)								
C-4. Subtotal								
Is a mileage logbook maintained? Date of Acquisition Yes No Month Year	m 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
D. Movable Equipment 1. Motor Vehicles (Specify name, model and year of each vehicle) a. b.								
C.			1					
d.	+							
2. Movable Equipment								
a. Acquired prior to this report period Var Var	896,164		896,164	696,816	S/L	Various	19,173	
b. Disposals (attach schedule)	(19,425)				S/L	Various	(19,425)	
c. Acquired during this report period								
(attach schedule) Var Var	33,655				S/L	Various	9,259	
D-3. Subtotal								9,007
E. Total Depreciation								9,382

Schedule of Land Improvements Acquired during this report period

			Useful	
Acquisition Date	Description of Item	Cost	Life	Depreciation
Additions:				
otal additions for Land Improv	amont	\$ -		\$ -
· · ·	emen	\$ -		\$ -
eletions:				
Total deletions for Land Improv	ement	\$ -		\$ -
*Ties to Page 23, Line A3				

**Ties to Page 23, Line A2

Schedule of Building Improvements Acquired during this report period

	• •		Useful	
Acquisition Date	Description of Item	Cost	Life	Depreciation
Additions:				
			1	
			1	_
		-		
Fotal additions for Building I	mprovemen	\$ -		\$ -
Deletions:				
			1	
				
Fotal deletions for Building I	mprovement	\$ -		\$ -

**Ties to Page 23, Line B2

Schedule of Non-Movable Equipment Acquired during this report perio

			Useful	
Acquisition Date	Description of Item	Cost	Life	Depreciation
Additions:				
Fotal additions for Non-Movab	e Equipmen	\$ -		\$ -
Deletions:				
		ф.		¢
Fotal deletions for Non-Movabl	e Equipmen	\$ -		\$ -

**Ties to Page 23, Line C3

....

Schedule of Movable Equipment Acquired during this report perio

•			Life	Dep	preciation
	\$	33,655	Var	\$	9,259
				<u> </u>	
ole Equipmen	\$	33,655		\$	9,259
	\$	(19,425)	Var	\$	(19,425)
				—	
le Equipmen	\$	(19,425)		\$	(19,425)
	e Equipmen	e Equipmen \$	\$ (19,425) • Equipmen \$ (19,425)	\$ (19,425) Var	\$ (19,425) Var \$

*Ties to Page 23, Line D2c

Schedule of Leasehold Improvements Acquired during this report peri-

Acquisition Date	Description of Item	Cost	Useful Life	Depi	reciation
Additions:	Var Var				
Var	Var	\$ 36,715	Var	\$	4,512
Total additions fo	or Leasehold Improvemen	\$ 36,715		\$	4,512
Deletions:					
Total deletions fo	r Leasehold Improvemen	\$ -		\$	-

*Ties to Page 24, Line C3 **Ties to Page 24, Line C2

AVON HEALTH CENTER BUILDINGS

		DATE	HISTORICAL	BASIS		USEFUL						NET
Vendor	Description	OF	COST	FOR	DEPR.	LIFE	Accum.	Depreciatior	Accum.	Depreciation	Accum.	VALUE
		ACQUISITION		DEPRECIATION	METHOD	(YEARS)	30-Sep-19	30-Sep-19	30-Sep-19	30-Sep-21	30-Sep-21	
2015 Additions:												
RC Restoration	Storage Shed	9/14/2015	7,495	7,495	S/L	20	1,875	375	2,250	375	2,625	4,870
	2021 Balance	Totals	\$ 7,495	\$ 7,495			\$ 1,875	\$ 375	\$ 2,250	\$ 375	\$ 2,625	\$ 4,870

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (IN YEARS)	MONTHLY DEPRECIATION	Depreciation EXPENSE FY 2021	ACC'D EXPENSE as of 9/30/21	NET VALUE
BALANCE FORWARD prio	or 2008		2,599,083	2,603,503		(IIIIIIIII)	\$ 10,441	84,077	2,445,266	158,237
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	-	1,968	-
Titan Mechanical	Hot water tank Motor	14-Dec-07	1,748	1,748	S/L	10	15	-	1,748	-
Titan Mechanical	Insulation	28-Feb-08	4,235	4,235	S/L	15	24	282	3,857	378
Total Building Svcs.	Dish room floor	23-May-08	1,095	1,095	S/L	10	9	110	769	326
RC Restoration	Shed	30-Jun-08	6,985	6,985	S/L	20	29	349	4,655	2,330
W.B.Morrison	7 wood doors	31-Jul-08	3,073	3,073	S/L	15	17	205	2,715	358
Titan Mechanical	Compressor HVAC unit	31-Jul-08	5.014	5,014	S/L S/L	12	35	-	5.014	-
The Barn Yard	Smoking Shed	31-Jul-08	1,494	1,494	S/L	20	6	75	991	503
Sexaur	Grab Bars	31-Aug-08	6,067	6,067	S/L S/L	15	34	404	5,323	744
Sexaur	Smoke Detectors	31-Aug-08	1,209	1,209	S/L	10	10		1,209	-
Sexaur	Returned Grab Bars	31-Aug-08	(4,119)	(4,119)	S/L	15	(23)	(275)	(3,617)	(501)
Белиц	Returned Glab Bars	51-74ug-00	(4,117)	(4,11))	5/12	15	(25)	(275)	(5,017)	(501)
2008 Ending			2,632,621	2,637,041			\$ 10,669	85,227	2,474,667	162,374
CL&P	Retrofit Lighting	15-Oct-08	43,457	43,457	S/L	15	\$ 241	2,897	37,662	5,795
Best Welding	Wrought Iron Railings	30-Oct-08	1,487	1,487	S/L S/L	15	\$ 211	2,057	1,288	199
WH Morrison Co	3 Wooden Doors #14 & Dietary	8-Dec-08	1,695	1,695	S/L S/L	15	9	113	1,450	245
Titan Mechanical	Second Compressor	31-Dec-08	1,465	1,465	S/L S/L	12	10	21	1,450	245
Jay LaChance	Ceiling Tiles	28-Feb-09	3,600	3,600	S/L S/L	8	38	-	3,600	-
Riley Plumbing	2 Utility Sinks	28-Feb-09	3,450	3,450	S/L	20	14	173	2,188	1,262
Fire Protection	Permit & Sprinkler Heads over Dryers	31-Mar-09	1,236	1,236	S/L S/L	20	4	49	620	616
Huntington Power	Generator Rental on Replacement (Generator on Realty Books)	31-Mar-09	3,313	3,313	S/L S/L	20	4	166	2,086	1,227
Perfectemp Heating	Replace Compressor Walk-in Freezer	31-Mar-09	2,441	2,441	S/L S/L	15	14	163	2,080	392
INPro Corporation	Wall Covering	17-Apr-09	1,666	2,441	S/L S/L	5	28	-	1,666	- 392
Saucier Mechancial Svrs	Air Conditioning System for new Server Room	21-Apr-09	3,740	3,740	S/L S/L	10	28	-	3,553	- 187
	Prepare electrical feed for new Server Room	•	2,955	2,955	S/L S/L	10	16	- 197	2,462	493
Collier Electrical Corp Collier Electric/Saucier Mech		30-Apr-09 29-May-09	2,935	19,149	S/L S/L	10	160	-	19,150	495
	•	•	900	900	S/L S/L	5	15	-	900	-
Ward Kipp	Computer wiring	31-May-09			S/L S/L	5	13 24			-
Build N Serve	Server Wiring	1-Jun-09	1,458	1,458	S/L S/L	5 15	24 47	-	1,458	-
Susaya Concrete SMD	Concrete Walk at Rear Entrance/Driveway Repair/New Walkway	16-Jun-09	8,425 7,440	8,425 7,440			47 62	562	6,929	1,496
	Electromag Door Locks Back & Service Entrances	19-Jun-09	,	· · · · · · · · · · · · · · · · · · ·	S/L	10			7,440	-
First American	Permits for Cogeneration System	22-Jun-09	2,183 5,085	2,183	S/L	15	12 42	146	1,797	386
Jay LaChance	Elevator Panels	30-Jun-09		5,085	S/L S/L	10	42 705		5,085	
First American	Cogeneration System	2-Jul-09	169,222	169,222		20		8,461	103,648	65,574
Courtesy Carpet	Elevator Flooring	4-Aug-09	737	737	S/L	10	6	-	737	-
Fournier Irrigation/Collier	Lawn Sprinkler System	28-Aug-09	10,957	10,957	S/L	15	61	730	8,885	2,072
Michael Gervais	Wallpaper Hallway and Nurses Station	28-Aug-09	1,651	1,651	S/L	5	28	-	1,651	-
Collier Electric	Electrical upgrades	31-Aug-09	2,694	2,694	S/L	15	15	180	2,187	507
Jay LaChance	Fire Door Glass	2-Sep-09	804	804	S/L	10	7	-	803	-
Ward Kipp	Server Wiring	8-Sep-09	6,173	6,173	S/L	5	103	-	6,173	-
Custom Exterior Landscape	Front Entrance Landscaping	10-Sep-09	8,787	8,787	S/L	10	73	-	8,787	-
Build 'N Serve	Network Upgrade Hardware & Labor	10-Sep-09	6,189	6,189	S/L	5	103	-	6,189	-
Build N Serve	Network Wiring	15-Sep-09	3,751	3,751	S/L	5	63	-	3,751	-
WH Morrison Co	Automatic Door Openers	30-Sep-09	9,986	9,986	S/L	15	55	666	8,046	1,941
Riley Signs	Front Sign	30-Sep-09	755	755	S/L	5	13	-	755	-
	Disposed Assets		-	- (4,666)				-	-	(4,666)
	2009 Balance	TOTALS	2,969,471	2,969,224			\$ 12,690	99,850	2,729,128	240,099

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (IN YEARS)	MONTHLY DEPRECIATION	Depreciation EXPENSE FY 2021	ACC'D EXPENSE as of 9/30/21	NET VALUE
	Front Sign Sales Tax	10/1/2009	45	45	S/L	5	\$ 1	-	45	-
	Access Doors for Hot Water Coils	10/29/2009	936	936	S/L	20	4	47	563	373
	Door Locks	10/29/2010	1,009	1,009	S/L	15	6	67	806	203
	5 More Registers from Air Handler to Wings	11/30/2009	3,700	3,700	S/L	20	15	185	2,158	1,542
	Exhaust for boiler room	11/30/2009	1,525	1,525	S/L	20	6	76	888	637
	Fix doors not hanging properly	12/3/2009	,	1,914	S/L	15	11	128	1,448	466
	All 3 Nurses Stations Counters Refaced	12/14/2009	13,036	13,036	S/L	15	72	869	9,849	3,187
	Fron Arch Walkway	12/17/2009	14,814	14,814	S/L	15	82	988	11,195	3,619
	Handrails	1/15/2010	· · · · · · · · · · · · · · · · · · ·	5,499	S/L	15	31 5	367	4,035	1,465
	Exhaust Duct for Dishmachine Formica	1/29/2010	,	1,245	S/L	20	5	62 97	684	561
		2/19/2010 3/22/2010		1,462 1,095	S/L S/L	15 20	8 5	55	1,037 567	425 528
	Exhaust fan in Oxygen room Install Wallpaper	4/9/2010		1,093	S/L S/L	20 5	32	-	1,908	528
	Concrete Walk Rear Entrance	4/15/2010	,	2,133	S/L S/L	15	12	142	1,421	712
	Cobblestone along Entranceway	5/22/2010	,	2,438	S/L	5	41	-	2,438	-
	Outlet in Maintenance Workshop	6/30/2010		1,362	S/L	15	8	91	849	514
	Resident Bathroom Door Protectors	8/16/2010		8,890	S/L	15	49	593	5,138	3,752
	2010 Balance	TOTALS	3,032,481	3,032,235	_		\$ 13,078	103,617	2,774,156	258,083
	2010 Datance	TOTALS	3,032,401	5,052,255	=		\$ 15,070	105,017	2,774,130	256,005
	Walkway to Gazebo	10/22/2010	4,688	4,688	S/L	15	\$ 26	313	3,440	1,248
	New outlets in Breakroom and Dietary Office	10/28/2010	1,046	1,046	S/L	15	6	70	768	278
	2 Pressure Regulators A/B Wings	11/10/2010	869	869	S/L	20	4	43	472	397
	Lines for installation of Steamer	12/29/2010		1,301	S/L	10	11	22	1,301	-
	Water main Pressure Regulator N/S Wing	1/31/2011	1,198	1,198	S/L	10	10	29	1,198	-
	Electrical Installation of Steamer	1/31/2011	1,544	1,544	S/L	10	13	40	1,544	-
	Renovate "Pub" room	2/28/2011	1,570	1,570	S/L	15	9	105	1,118	452
	Main Reception Counters & Cabinets	8/5/2011	3,998	3,998	S/L	15	22	267	2,712	1,286
	2011 Balance	TOTALS	3,048,697	3,048,450	-		\$ 13,178	104,506	2,786,710	261,744
2012 Additions:										
	Attic Lighting	3/23/2012	4,884	4,884	S/L	20	\$ 20	244	2,197	2,687
	Cabinetry in Beauty Salon for Dentist	5/25/2012	1,487	1,487	S/L	15	8	99	891	595
	Emergency Water Main Hook up	9/18/2012	2,340	2,340	S/L	25	8	94	844	1,495
	Outlets for ELO Touch Screens	9/27/2012	3,294	3,294	S/L	10	27	329	2,963	331
	2012 Balance		3,060,701	3,060,455			\$ 13,241	105,272	2,793,605	266,852
2013 Additions:	Electrical Outlets for DT Office	21 0 - 12	1.026	1.007	с/I	15	¢ (7 0	C1	412
	Electrical Outlets for PT Office Water Main Repair	31-Oct-12 18-Oct-12	· · · · · · · · · · · · · · · · · · ·	1,026 890	S/L S/L	15 10	\$ 6 7	68 89	614 801	413 89
	Water Softener	13-Nov-12		2,606	S/L S/L	10	22	89 261	2,347	258
	Wall Guards	27-Dec-12		2,000	S/L S/L	5	40	-	2,347	238
	Blower Motor for RTU #7	27-Dec-12 2-Jan-13	· · · · · · · · · · · · · · · · · · ·	2,420	S/L S/L	20	40	- 110	2,420	1,210
	Roof Mounted Exhaust Fan A Wing	18-Feb-13	· · · · · ·	1,520	S/L	20	6	76	684	836
	Dedicated Hot Water lines to Laundry	12-Feb-13	· · · · · · · · · · · · · · · · · · ·	4,243	S/L	20	14	170	1,529	2,714
			.,= 10	.,210				2.0	-,-=>	,,

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (IN YEARS)		IONTHLY PRECIATION	Depreciation EXPENSE FY 2021	ACC'D EXPENSE as of 9/30/21	NET VALUE
	2013 Balance		3,075,606	3,075,359			\$	13,346	106,046	2,802,990	272,372
2014 4110											
2014 Additions:	Replace Panel in Boiler Room	23-Oct-13	1,595	1,595	S/L	15	\$	9	106	849	746
	Outlets for De-icing Cables	8-Nov-13	1,595	1,638	S/L S/L	15	ф	9	100	849	740
	Covebase Elevator, Dining Room & Lower Lobby	3-Jan-14	1,038	1,079	S/L	5		18	-	1,080	-
	Wall Guards	31-Jan-14	2,029	2,029	S/L	5		34	_	2,028	_
	Kitchen Cook Exhaust Fan	30-Jun-14	2,680	2,680	S/L	10		22	268	2,028	536
	Compressor in South Wing	31-Jul-14	6,522	6,522	S/L	10		54	652	5,217	1,306
	Compressor #3 over Cooks Line	28-Aug-14	2,070	2,070	S/L	10		17	207	1,656	414
	Vinyl Cove Base	31-Aug-14	1,888	1,888	S/L	5		31	-	1,888	-
	-	5	-								
	2014 Balance		3,095,107	3,094,861					107,388	2,818,724	276,139
2015 Additions:											
Saucier Mechancial Svrs	Exhaust Fans Bathrooms A Wing/B Lounge	11-Dec-14	1,745	1,745	S/L	10	\$	15	175	1,225	521
Saucier Mechancial Svrs	Motor for Boiler #3	7-Jan-15	1,320	1,320	S/L	15		7	88	616	704
Saucier Mechancial Svrs	Motor for Boiler #2	12-Feb-15	1,050	1,050	S/L	15		6	70	490	560
Precision Electrical	Outlets in Nurses Office	2-Mar-15	973	973	S/L	15		5	65	455	518
SMD	Electromagnetic Door Lock	11-Aug-15	2,132	2,132	S/L	15		12	142	994	1,138
Fire Protection	8 Sprinkler Heads	11-Aug-15	1,042	1,042	S/L	25		3	42	294	748
Proline	Hatco Water Booster	31-Aug-15	4,268	4,268	S/L	10		36	427	2,989	1,279
	2015 Balance		3,107,637	3,107,391					108,397	2,825,785	281,607
			5,107,057	5,107,571					100,077	2,025,705	201,007
2016 Additions:											
Joel Martin	2 Mixing Valves	31-Oct-15	1,776	1,776	S/L	7	\$	21.14	254	1,524	252
Magnum Insutries LLC	North and South Shower Room Remodel and Repair	1-Sep-16	10,915	10,915	S/L	15		60.64	728	4,368	6,548
	2016 Balance		3,120,328	3,120,082					109,379	2,831,677	288,407
			, ,	, ,					,		,
2017 Additions:											
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	\$	20.31	244	1,220	2,436
Plimpton & Hills	wade drains for back wing shower project	31-Dec-16	1,318	1,318	S/L	15		7.32	88	440	878
-	new fire door on the elevator machine room	31-Jan-17	935	935	S/L	20		3.90	47	235	700
Fire Protection Testing	replaced 9 dry sidewall sprinklers above rear double doors & 2 dry	31-Jan-17	1,820	1,820	S/L	25		6.07	73	365	1,455
Martin, Joel	shower renovation phase ii, removed and replaced 4 shower stained	14-Feb-17	1,787	1,787	S/L	15		9.93	119	595	1,192
Magnum Insutries LLC	balance due on the back wing	13-Mar-17	3,656	3,656	S/L	15		20.31	244	1,220	2,436
Saucier Mechanical	first installment for replacement of indoor fan	31-Jul-17	1,695	1,695	S/L	5		28.25	339	1,695	-
Accurate Security	additional secure care system	30-Sep-17	1,728	1,728	S/L	10		14.40	173	865	863
Saucier Mechanical	final installment for replacement of indoor fan motor	30-Sep-17	1,594	1,594	S/L	5		26.57	319	1,595	(1)
	2017 Balance		3,138,517	3,138,271					111,025	2,839,907	298,366
2010 414:4											
2018 Additions: Chem Aqua	water softener with nye nining option	28-Feb-18	13,559	13,559	S/L	10		112.99	1,356	5,424	8,135
Saucier Mechanical	water softener with pvc piping option	28-Feb-18 28-Feb-18	13,559	13,559	S/L S/L	5		112.99	236	5,424 944	8,135
Saucier Mechanical	new taco pump replacement of base board heat in 8 rooms	28-Feb-18 31-Mar-18	1,181	1,181	S/L S/L	5 10		19.68 92.79	236 1,114	944 4,456	6,679
Suddier micenallical	representent of base board near III 0 100IIIS	51-iviai-10	11,155	11,133	5/12	10		94.19	1,114	т,т.50	0,079

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Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (IN YEARS)	MONTHLY DEPRECIATION	Depreciation EXPENSE FY 2021	ACC'D EXPENSE as of 9/30/21	NET VALUE
Saucier Mechanical	replacement of base board heat in room 12A	31-Mar-18	1,315	1,315	S/L	10	10.96	132	528	787
Saucier Mechanical	installation of water softener	31-Mar-18	7,900	7,900	S/L	10	65.83	790	3,160	4,740
Saucier Mechanical	first installation for the shot feeder (for the boiler system)	31-Mar-18	1,150	1,150	S/L	15	6.39	77	308	842
Saucier Mechanical	final installation of the water softener	30-Apr-18	875	875	S/L	10	7.29	88	352	523
Sexauer	replaced wall water faucet	31-May-18	649	649	S/L	15	3.61	43	172	477
CL&P Loan	lighting project	31-May-18	86,231	86,231	S/L	20	359.30	4,312	17,248	68,983
Dunning Stone	materials needed for stone box built around ahc sign	30-Jun-18	728	728	S/L	15	4.04	49	196	532
Peters Landscaping	labor to build new stone wall around ahc sign	30-Jun-18	2,291	2,291	S/L	15	12.73	153	612	1,679
Saucier Mechanical	first installment for replacement of compressor and filter drier for	30-Jun-18	920	920	S/L	15	5.11	61	244	676
Saucier Mechanical	final installment for replacement of compressor and filter drier fo	3-Jul-18	920	920	S/L	15	5.11	61	244	676
Saucier Mechanical	part of installation of water softener	31-Jul-18	660	660	S/L	10	5.50	66	264	396
Plimpton & Hills	work done to existing water line	31-Jul-18	1,614	1,614	S/L	15	8.97	108	432	1,182
Saucier Mechanical	north & south wing, replace all heating registers	30-Sep-18	845	845	S/L	15	4.69	56	224	621
								-	-	-
2018 Disposals:								-	-	-
Various	Disposal of Assets Prior to 2008	Various	(685,095)	(685,095)	S/L	Var	-	-	(688,599)	3,504
	2018 Balance		2,585,395	2,585,149				119,727	2,186,116	399,035
2019 Additions:	2018 Balance		2,585,395	2,585,149				119,727	2,186,116	399,035
		31-Oct-18	,,		S/L	15	7.44			
Saucier Mechanical	north & south wing, replace all heating registers	31-Oct-18 31-Dec-18	1,340	1,340	S/L S/L	15 15	7.44 24.96	89	267	1,073
Saucier Mechanical Door & Security Solutions, L	north & south wing, replace all heating registers I 3 doors & associated hardware	31-Dec-18	1,340 4,493	1,340 4,493	S/L	15	24.96	89 300	267 900	1,073 3,593
Saucier Mechanical Door & Security Solutions, L Encore Fire Protectino	north & south wing, replace all heating registers I 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		15 15	24.96 28.67	89	267 900 1,032	1,073 3,593 4,129
Saucier Mechanical Door & Security Solutions, L' Encore Fire Protectino Door & Security Solutions, L'	north & south wing, replace all heating registers I 3 doors & associated hardware new backflow preventers- sprinklers I 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	24.96 28.67 12.83	89 300 344 154	267 900 1,032 462	1,073 3,593 4,129 1,847
Saucier Mechanical Door & Security Solutions, L Encore Fire Protectino	north & south wing, replace all heating registers I 3 doors & associated hardware new backflow preventers- sprinklers I loading dock door Install new air scoop, install new high capacity vent	31-Dec-18 31-Dec-18	1,340 4,493 5,161	1,340 4,493 5,161	S/L S/L	15 15	24.96 28.67	89 300 344	267 900 1,032	1,073 3,593 4,129
Saucier Mechanical Door & Security Solutions, L Encore Fire Protectino Door & Security Solutions, L Reed Mechanical	north & south wing, replace all heating registers I 3 doors & associated hardware new backflow preventers- sprinklers I loading dock door	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 15	24.96 28.67 12.83 28.57	89 300 344 154 343	267 900 1,032 462 1,029	1,073 3,593 4,129 1,847 4,114
Saucier Mechanical Door & Security Solutions, L Encore Fire Protectino Door & Security Solutions, L Reed Mechanical Artfx Dunning Stone	north & south wing, replace all heating registers I 3 doors & associated hardware new backflow preventers- sprinklers I 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	1,340 4,493 5,161 2,309 5,143 2,287	1,340 4,493 5,161 2,309 5,143 2,287 6,669	S/L S/L S/L S/L S/L	15 15 15 15 15 15	24.96 28.67 12.83 28.57 12.70	89 300 344 154 343 152	267 900 1,032 462 1,029 456 1,335	1,073 3,593 4,129 1,847 4,114 1,831
Saucier Mechanical Door & Security Solutions, L Encore Fire Protectino Door & Security Solutions, L Reed Mechanical Artfx	north & south wing, replace all heating registers I 3 doors & associated hardware new backflow preventers- sprinklers I 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	1,340 4,493 5,161 2,309 5,143 2,287	S/L S/L S/L S/L S/L S/L	15 15 15 15 15	24.96 28.67 12.83 28.57 12.70 37.05	89 300 344 154 343 152 445	267 900 1,032 462 1,029 456	1,073 3,593 4,129 1,847 4,114 1,831 5,334
Saucier Mechanical Door & Security Solutions, L' Encore Fire Protectino Door & Security Solutions, L' Reed Mechanical Artfx Dunning Stone Peters Landscaping	north & south wing, replace all heating registers I 3 doors & associated hardware new backflow preventers- sprinklers I 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 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	S/L S/L S/L S/L S/L S/L	15 15 15 15 15 15 15 15	24.96 28.67 12.83 28.57 12.70 37.05 60.50	89 300 344 154 343 152 445 726	267 900 1,032 462 1,029 456 1,335 2,178	1,073 3,593 4,129 1,847 4,114 1,831 5,334 8,712 3,149
Saucier Mechanical Door & Security Solutions, L' Encore Fire Protectino Door & Security Solutions, L' Reed Mechanical Artfx Dunning Stone Peters Landscaping New Britain Fence	north & south wing, replace all heating registers I 3 doors & associated hardware new backflow preventers- sprinklers I 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 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 3,935	S/L S/L S/L S/L S/L S/L S/L	15 15 15 15 15 15	24.96 28.67 12.83 28.57 12.70 37.05 60.50 21.86	89 300 344 154 343 152 445 726 262	267 900 1,032 462 1,029 456 1,335 2,178 786	1,073 3,593 4,129 1,847 4,114 1,831 5,334 8,712
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	north & south wing, replace all heating registers I 3 doors & associated hardware new backflow preventers- sprinklers I 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 31-Aug-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	24.96 28.67 12.83 28.57 12.70 37.05 60.50 21.86 19.83	89 300 344 154 343 152 445 726 262 238	267 900 1,032 462 1,029 456 1,335 2,178 786 714	1,073 3,593 4,129 1,847 4,114 1,831 5,334 8,712 3,149 2,856
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 Precision Electrical	north & south wing, replace all heating registers I 3 doors & associated hardware new backflow preventers- sprinklers I 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-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 15	24.96 28.67 12.83 28.57 12.70 37.05 60.05 21.86 19.83 20.50	89 300 344 154 343 152 445 726 262 238 246	267 900 1,032 462 1,029 456 1,335 2,178 786 714 738	1,073 3,593 4,129 1,847 4,114 1,831 5,334 8,712 3,149 2,856 2,952
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 Precision Electrical 2019 Disposals:	north & south wing, replace all heating registers I 3 doors & associated hardware new backflow preventers- sprinklers I 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 15	24.96 28.67 12.83 28.57 12.70 37.05 60.05 21.86 19.83 20.50	89 300 344 154 343 152 445 726 262 238 246 103	267 900 1,032 462 1,029 456 1,335 2,178 786 714 738 309	1,073 3,593 4,129 1,847 4,114 1,831 5,334 8,712 3,149 2,856 2,952 1,237
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 Precision Electrical	north & south wing, replace all heating registers I 3 doors & associated hardware new backflow preventers- sprinklers I 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-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 15	24.96 28.67 12.83 28.57 12.70 37.05 60.05 21.86 19.83 20.50	89 300 344 154 343 152 445 726 262 238 246 103	267 900 1,032 462 1,029 456 1,335 2,178 786 714 738 309	1,073 3,593 4,129 1,847 4,114 1,831 5,334 8,712 3,149 2,856 2,952 1,237

Vendor	Description	DATE OF	HISTORICAL COST	BASIS FOR	DEPR. METHOD		MONTHLY	Depreciation EXPENSE	ACC'D EXPENSE	NET VALUE
Hartford Provision (HPC)	Dish machine upgrade	ACQUISITION 8/31/2006	(873)	DEPRECIATION (873)		(IN TEAKS)	DEPRECIATION	FY 2021	as of 9/30/21 (873)	
Direct Supply	Commercial disposal	8/31/2006	(1,403)	(1,403)			-	-	(1,403)	-
Otis Elevator	Install heaters in elevator cabs	11/30/2006	(1,000)	(1,405) (1,000)					(1,403)	
Otis Elevator	Install heaters in elevator cabs	11/30/2006	(3,079)	(3,079)			-	_	(3,079)	_
Casle	Facility upgrades: paint, wallpaper, carpet, electrical	3/31/2007	(45,625)	(45,625)			_	_	(45,625)	_
Sherwin Williams	Wallpaper	3/31/2007	(954)	(45,625)			-	_	(954)	_
Titan Mechanical	Hot water tank Motor	12/14/2007	(1,748)	(1,748)			-	-	(1,748)	-
The Barn Yard	Smoking Shed	7/31/2008	(1,494)	(1,494)			-	-	(1,494)	_
Perfectemp Heating	Replace Compressor Walk-in Freezer	3/31/2009	(2,441)	(2,441)			-	_	(2,441)	_
Build 'N Serve	Network Upgrade Hardware & Labor	9/10/2009	(6,189)	(6,189)			-	-	(6,189)	-
Riley Signs	Front Sign	9/30/2009	(755)	(755)			-	-	(755)	_
Riley Signs	Front Sign Sales Tax	10/1/2009	(45)	(45)			-	-	(45)	-
CL&P	Retrofit Lighting	10/15/2008	(43,457)	(43,457)			-	-	(43,457)	-
0.2001	Tearon 2.5.mg	10,10,2000	(10,107)	(10,107)					(10,107)	
	2019 Balance		2,365,974	2,365,727				123,129	1,925,867	439,862
2020 Additions:	_									
Tim Wheeler	install ramp on new patio	10/31/2019	2,743	2,743	S/L	15	15.24	183	366	2,377
The Home Depot	6 solid core bifold doors	12/31/2019	5,167	5,167	S/L	15	28.71	344	688	4,479
Consider It	new doors for resident rooms	12/31/2019	5,000	5,000	S/L	15	27.78	333	666	4,334
Consider It	new doors for resident rooms	1/31/2020	3,411	3,411	S/L	15	18.95	227	454	2,957
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	27.41	329	658	4,277
The Home Depot	7 doors for n/s wings	1/31/2020	2,108	2,108	S/L	15	11.71	141	282	1,826
Michael Gervais	installation of wallcovering 9 resident rooms	1/31/2020	5,551	5,551	S/L	15	30.84	370	740	4,811
ACI Flooring	Johnsonite vinyl cover base, vinyl wall base	1/31/2020	2,164	2,164	S/L	15	12.02	144	288	1,876
Michael Gervais	installation of wallcovering	2/29/2020	5,551	5,551	S/L	15	30.84	370	740	4,811
Consider It	door conversion- sliders to bifolds	2/29/2020	1,980	1,980	S/L	15	11.00	132	264	1,716
Michael Gervais	installation of wallcovering	2/29/2020	4,935	4,935	S/L	15	27.41	329	658	4,277
Cardmember Services	bestfloor distributors	2/29/2020	1,850	1,850	S/L	15	10.28	123	246	1,604
Stanley Access	door opener for patio	2/29/2020	2,339	2,339	S/L	15	12.99	156	312	2,027
Michael Gervais	wallpaper	3/31/2020	5,551	5,551	S/L	15	30.84	370	740	4,811
Precision Electrical	dish room exhaust fan wiring	3/31/2020	1,430	1,430	S/L	15	7.95	95	190	1,240
saucier mechanical	final installment of new diish duct	3/31/2020	3,145	3,145	S/L	15	17.47	210	420	2,725
smd	surveilance video camera	3/31/2020	2,386	2,386	S/L	15	13.26	159	318	2,068
saucier mechanical	new dish duct	3/31/2020	3,145	3,145	S/L	15	17.47	210	420	2,725
	2020 Balance		2,429,367	2,429,121				127,354	1,934,317	494,803
2021 Additions:			, , , , , ,	, ,				<i>)</i>	y - y-	
	_									
Saucier Mechanical	air scrubber- installment 1	10/31/2020	4,740	4,740	S/L	5	79	948	948	3,792
Maichael Gervais	Install Wallpaper rooms a3, a7, a17	12/31/2020	1,850	1,850	S/L	5	31	370	370	1,480
Saucier Mechanical	air scrubber- installment 2	1/31/2021	5,795	5,795	S/L	5	97	1,159	1,159	4,636
Saucier Mechanical	replace 5 registers with aluminum	3/31/2021	898	898	S/L	15	5	60	60	838
Hartford Provisions	booster heater	3/31/2021	4,427	4,427	S/L	10	37	443	443	3,984
saucier mechanical	labor & materials for replacement of 5 steel registers to aluminun		1,795	1,795	S/L	15	10	120	120	1,675
smd	replaced broken pro x pax on front door exit and basement door e		1,611	1,611	S/L	10	13	161	161	1,450
Saucier mechanical	replacement of 3 hp blower on split unit for south wing	5/31/2021	1,830	1,830	S/L	10	15	183	183	1,647

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (IN YEARS)	MONTHLY DEPRECIATION	Depreciation EXPENSE FY 2021	ACC'D EXPENSE as of 9/30/21	NET VALUE
Savvy & Sons	grout	6/30/2021	4,518	4,518	S/L	10	38	452	452	4,066
Michael Gervais	wallcoverings b4,6,10,16,14,26,28,30	8/31/2021	4,935	4,935	S/L	15	27	329	329	4,606
Michael Gervais	installation of wallcovering completed b20,b24,b16,	8/31/2021	1,850	1,850	S/L	15	10	123	123	1,727
Michael Gervais	installation of wallcovering completed a5, a9, b12, b22	9/30/2021	2,467	2,467	S/L	15	14	164	164	2,303
	2021 Balance		2,466,083	2,465,837				131,866	1,938,829	527,007
	Per T	В		2,476,807	_			110,011	1,916,532	560,275
	Differen	ce		(10,970)				21,855	22,297	(33,268)

		DATE	HISTORICAL	BASIS	DEPR.	USEFUL		Depreciation	ACC'D	NET
Vendor	Description	OF	COST	FOR	METHOD	LIFE	MONTHLY	EXPENSE	EXPENSE	VALUE
		ACQUISITION		DEPRECIATION		(IN YEARS)	DEPRECIATION	FY 2021	as of 9/30/21	

RELATED PARTY ASSETS

Asset No.	Asset Description	Date Acquired	Cost		Method	Life	Depreciation 9/30/2021	Accum Depr 9/30/2021	NBV
110.	Asset Description	nequireu	cost		Methou	Line	7/06/2021	710012021	T(D)
Building Improven	nents								
20	Ceiling Tile Replacement	02/28/09	24,216	24,216	S/L	8	-	24,216	-
21	Laundry Room Upgrades	02/28/09	6,430	6,430	S/L	20	321	4,062	2,368
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	17,441	10,841
14	New Windows	06/30/09	49,820	49,820	S/L	20	2,491	30,622	19,198
15	Levered Door Hardware	06/30/09	4,198	4,198	S/L	15	280	3,429	768
19	Generator	06/30/09	147,807	147,807	S/L	20	7,390	90,850	56,958
23	Wood Laminate Flooring	06/30/09	70,580	70,580	S/L	10	-	70,580	-
24	Doors	06/30/09	79,073	79,073	S/L	15	5,272	64,806	14,266
18	Boiler	07/31/09	86,425	86,425	S/L	20	4,321	52,724	33,701
	Repair Patio Ceiling	11/6/2008	8,500	8,500	S/L	12	180	8,500	_
	Exterior Painting	11/7/2008	16,000	16,000	S/L	5	-	16,000	-
	Automated Doors	11/24/2008	17,850	17,850	S/L	10	-	17,850	-
	Electric Upgrades	5/31/2008	28,631	28,631	S/L	15	1,909	22,425	6,206
	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	2,974	826
	2 5 Ton A/C Roof Top Units	7/31/2010	32,965	32,965	S/L	10	-	32,132	832
	Wander Control System	10/29/2010	7,086	7,086	S/L	10	177	7,086	-
	Repl Roof Top Exhaust	12/30/2010	1,595	1,595	S/L	10	38	1,595	-
	Baseboard	12/14/2010	1,568	1,568	S/L	10	38	1,567	-
	Volumed Dampers Dining & Rehab	11/30/2010	997	997	S/L	10	24	997	-
	Economizer Motors & Controls	11/1/2010	2,820	2,820	S/L	10	-	2,820	-
	Lobby/Office Renovations	5/31/2011	24,011	24,011	S/L	15	1,601	16,619	7,392
	Phone System Upgrades	6/30/2011	7,696	7,696	S/L	10	542	7,695	-
	Carpet of Lobby/Offices	5/31/2011	15,492	15,492	S/L	5	-	15,492	-
	Painting lobby/offices	5/16/2011	3,900	3,900	S/L	5	-	3,900	-
	Wallpaper lobby & offices	5/18/2011	3,053	3,053	S/L	5	_	3,053	_
	Phone system upgrade wiring	7/6/2011	447	447	S/L	10	32	446	_
	Wiring for phone system upgrade	5/10/2011	1,155	1,155	S/L	20	58	602	553
	Lower Level Emp Entrance	6/28/2011	4,140	4,140	S/L	15	276	2,842	1,298
	Wiring for Security Cameras	2/20/2011	2,473	2,473	S/L	5	-	2,473	-
	Deliver Entrance Doors	9/16/2011	4,850	4,850	S/L	10	462	4,850	_
	Windows for N & S Wings	3/20/2012	25,577	25,577	S/L S/L	20	1,279	11,510	14,067
	Install pull-down stairs by N & S	6/7/2012	2,400	2,400	S/L S/L	10	240	2,160	240
	New fire alarm panel & annunciat	7/11/2012	3,403	3,403	S/L S/L	10	340	3,061	342
	Parking Lot Repairs	10/29/2011	14,384	14,384	S/L S/L	8	-	14,384	542
	Oil Tank Removal	3/5/2012	2,800	2,800	S/L S/L	20	- 140	14,384	1,540
	7.5 Ton AC Rooftop Unit #5	6/18/2013	13,695	13,695	S/L S/L	10	140	12,328	1,340
	Elevator Upgrades	0/18/2013	95,544	13,695 95,544	S/L S/L	20	4,777	42,994	52,550
	Stainless Steel Door Buck Wraps	5/29/2013	2,355	95,544 2,355	S/L S/L	20 15	4,777	42,994	52,550 942
	1		,	· · · · ·				· · · · · ·	
	Carpet for Rehab Gym	4/23/2013	2,394	2,394	S/L	5	-	2,394	-

Rahab Cyn Raesvarian +152015 1.159 1.15 123 1.108 72 Hickricial Part. Comment Hall 9/4/2013 1.025 1.10 101 236 2 Front Colum Repairs 723/2013 1.025 1.025 1.0 101 108 9.25 1.2 Rootop Lichen air unit 331/2014 2.2.10 2.2.11 5.2 5.1 15 1.474 11.792 10.3 North Wing AC Constant 85/2014 5.225 5.12 5.5 1.5	Vendor	Description	DATE OF	HISTORICAL COST	BASIS FOR	DEPR. METHOD	USEFUL LIFE	MONTHLY	Depreciation EXPENSE	ACC'D EXPENSE	NET VALUE
Electrical funct-Connector Hult 9/24/2013 1,025 1,025 1,01 108 9,25 1 2.5 tan AC Linf for Lakiy 10/15/2013 10,665 81. 10 1,667 8,835 2.1 2.5 tan AC Linf for Lakiy 10/15/2013 10,665 81. 10 1,674 8,335 2.1 North Wing AC Condessor 85/2014 15,225 SL 15 1,015 8,120 7.1 Willsprev MortingtonDiming/File 12/17/2014 24,292 92,923 93.0 5. 5 - 92,933 7.0 Corridors & Longes Willsprev 9/12/2014 10,292 91.029 8.1 5 - 92,933 7.0 New dates split AC unit for kit 8/20/015 1.799 17.090 8.1 10 1090 6,636 2.7 New dates split AC unit for kit 8/20/015 1.799 17.090 8.1 10 199.0 5.1 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5			ACQUISITION	1.050	DEPRECIATION	0.7	(IN YEARS)	DEPRECIATION	FY 2021	as of 9/30/21	540
Front Column Repairs 7,23/2013 1,025 NL 10 103 9.25 1.2 Boolbop kicken air uni 3/1/2014 22,110 SiL 15 1,1474 11,792 10.3 North Wing AC condessor 8/5/2014 15,225 SiL 5 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 24,929 - 34,929 - 36,923 5,1 0 9,903 8,1 10 1,997 11,931 - 24,929 - 36,923 5,1 0 36,923 5,1 0 36,923 5,1 0 36,923 5,2 0 36,923 2,4 10,923 2,2,4 1,93 32,3 35,3 1,33 33,4 35,4		5			,					· · ·	742
2.5 ton AC Unif. for Loby: 10/15/2013 10.665 NI. 10 1.067 8.535 2.13 North Wing AC Condessor 8.52014 22.110 32.122 SIL 15 1.015 8.120 7.1 Wallpaper Northington Drining/Ele 1217/2013 24.292 8.1. 5 - 24.290 6.7 Corridos: & Longes Wallspert 91/2014 10.29 10.29 SIL 5 - 24.929 5.1 5 - 24.929 5.1 5 - 24.929 5.1 5 - 24.929 5.1 5 - 24.929 5.1 5 - 29.923 5.1 7 7.201 1.031 - 7 7.900 5.1 0 7.909 5.1 0 7.90 5.1 0 7.90 5.1 0 7.90 5.1 0 7.90 5.1 0 7.90 5.1 0 7.90 5.1 0 0 9.9 9.3 3.6 0 0 0.9 9.0 0 0 0 0 0 0 0 <td></td> <td></td> <td></td> <td>,</td> <td>,</td> <td></td> <td></td> <td></td> <td></td> <td>· · ·</td> <td>284</td>				,	,					· · ·	284
Roothey kicken air unit 3/3/20/4 22,10 S/L 15 1,474 11,792 10.3 Walkpuper Northington Dimig Ele 12/17/2013 24,929 S/L 5 - 24,930 - Corridon S. Locomelson Walkpuper 91/22014 59,293 S/L 5 - 52,933 - Repair to car parking lot 71/82014 11,029 S/L 8 1.0 1090 6,53 2.7 Dining Room 10on AC corolop 6302015 17,390 S/L 10 1,799 1.53 2.42 2.93 5.5 Modify HVAC chartwork names un 3/02015 9.80 S/L 20 49 343 6 Relocat 2 Sprinkelsen Name Spr 2.102015 3.420 S/L 15 - 3.12,99 1.5 Wall poselt door Name Super 2.102015 3.420 S/L 10 4.33 0.311 1.73 Rescal Dispring Kole Arone Sing Kole Aron		1			,						100
North Wing AC Condessor 8/52014 15,225 SL. 15 1,015 8,120 7.1 Willpaper Northingsbr.Dining File 12/17/2014 59,293 SL. 5 - 59,293 - Corndors & Loungs Willpaper 9/12/2014 59,293 SL. 5 - 59,293 - New ducless split AC unif for kit 8/20/2015 9,085 SL. 10 909 6,563 2.7 Dining Room 100n AC trooltop 6/20/2015 7,399 17,90 SL. 10 15,93 5.3 New charters with AC unif for kit 3/20/2015 5,271 SL. 15 25,83 16,99 16,90 New charters with AC unif for kit 3/20/2015 5,00 SL. 15 2,84 16,96 16,96 16,90 16,90 SL. 15 2,84 16 16,96 16,90 16,90 SL. 15 2,82 16,96 16,85 16,96 16,90 16,90 16,90 16,90 16,90 16,90 16,90 16,90 16,90 16,90 16,90 16,90 16,90 16,90 <td></td> <td></td> <td></td> <td>· · · · · · · · · · · · · · · · · · ·</td> <td>,</td> <td></td> <td></td> <td></td> <td>,</td> <td>· · · · · · · · · · · · · · · · · · ·</td> <td>2,131</td>				· · · · · · · · · · · · · · · · · · ·	,				,	· · · · · · · · · · · · · · · · · · ·	2,131
Wallpaper Northington/Dring/File 12/17/2013 24/292 8/1. 5 24/90 5 Corridors & Longes Wallpaper 9/12/2014 5/29/39 S8/1. 5 5/29/39 5 Repair to rear parking for 7/18/2014 11/029 8/L 8 1.079 11.031 New ductes split A/C unit for hit 8/20/2015 9.085 9.085 S/L 10 1.079 12.33 5.351 2.457 2.85 Modify IIVAC ductwork names su 3/6/2015 980 980 8/L 20 49 343 6 Relocate 2 Sprinkers Name Sprin 2/12/2015 3,420 8/L 5 - 1.2497 - New Carpering Social Service 2/10/2015 3,420 8/L 5 - 1.2498 - New Carpering Social Service 2/10/2015 3,420 8/L 8/L 20 4/L 3.415 5 - 1.2498 - - 1.2498 1.4 New Carpering Social Service 2/10/2015 3,420 3,420 8/L 20 1.331 1.331 <td></td> <td>10,318</td>											10,318
Cornings & Longes Malphyser 91/2014 59,293 St. 5 - 59,293 Reprit rots rup wiching lot 71/82014 11,029 11,029 St. 8 1,1379 11,031 New datcless split A/C unt for kit 8202015 9,085 St. 10 900 6,33 2,7 Dining Room (100 A/C confep 6302015 5,271 St.1 15 351 2,457 2,88 New dather Vorokatiationscenters 3102015 5,271 St.1 15 351 2,457 2,88 166 55 New charces typer 2122015 3,40 3,42 3,42 3,42 St.1 15 2,88 1,86 1,8 New Carpeting Social Service 21/02015 3,415 St.1 5 - - 3,415 5 - 1,229 - - 1,229 - - - 1,229 - - - 1,249 4,40 3,43 17,3 - 1,212,99 - - - - 1,249 - - - 1,229 - <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>1,015</td><td></td><td>7,105</td></td<>									1,015		7,105
Repair to rear parking to '' 718/2014 11,029 SL 8 1,379 11,031 New dockes Spit AC unit for kit 820/2015 17,990 SL 10 17,990 5.2,71 5.271 SL 10 17,990 SL 10 17,990 5.2,71 SL 15 511 2.497 2.2,93 55 2.2 28 166 5 Modify IVAC ductwork nurses super 2320115 700 700 SL 2.5 2.8 166 5 Wall pocket dor Nurse Super 2102015 3.400 SL 5 - 3.415 51 - 3.415 51 - 3.415 51 - 3.415 51 - 3.415 51 - 3.415 51 - 3.415 51 - 3.415 51 - 3.415 51 - 3.415 51 - 3.415 51 - 3.415 51 - 3.415 51 - 3.415 51									-		-
New ductes split AC unit for kit 82.02015 9.085 9.1 100 9090 6.363 2.7.2 Dining Koom (Don AC roofbop 63.00215 5.271 5.21 8.1 15 351 2.457 2.8 Modity HVAC ductwork names Spr 2232015 700 700 8.1 25 28 1.96 9.5 Wall /poclet door Nunes Super 2102015 3.420 3.421 5.5 - 3.415 - New Carpeting Social Service 2102015 3.420 3.425 5 - 3.415 - New Mardinskike vindowskewrap 8.272015 12.299 12.299 8.1 5 - 3.415 - New handraits for North & South 9.282015 2.6651 2.651 8.1 20 1.33<		5 i.			,				-	· · · · · · · · · · · · · · · · · · ·	-
Dining Room Juon AC rooftop 630/2015 17.99 17.99 S1. 10 1.799 12.593 5.3 Modify IIVAC dactwork nurse su 36/2015 980 980 S1. 20 49 443 6 Relexet 2 Sprinkles Nurse Super 2/10/2015 3.400 3.420 S1. 15 228 1.56 1.8 New Carpeting Social Service 2/10/2015 3.415 S1. 5 - 1.2299 - New Landmits For North & Stouth 8/28/2015 2.6651 S1. 20 4.333 9.331 1.73 1 set Extration does in rolwer hall way 9/28/2015 2.6651 S1. 20 4.333 9.331 1.73 1 set Extration does in rolwer hall way 9/28/2015 2.6651 S1. 20 4.333 9.331 1.73 1 set Extration does in rolwer hall way 9/28/2016 7.867 3.026 S1. 10 4.87 3.74 10 4.977 5.862 3.93 1.73 1.85 1.15 6.203 1.674 6.30 1 root of fluitiding 51/2016 7.878											(2)
New cahinets workstattions/connerse 3/02/015 5.271 5.271 5.12 1.5 351 2.457 2.8 Modify HVA Caturows nurse syn 2/23/015 700 700 5.12 25 28 1.66 5 Will (pock toor Nurse Syn 2/10/2015 3.413 3.415 5.1 5 - 3.415 5.1 Rescal Insulate windows kwrap 8/29/2015 1.2,299 12,299 S.L 5 - 12,299 - 12,333 2.031 1.73 New handhis for North & South 9/28/2015 2.6651 2.66 S.L 20 1.333 9.331 1.73 1 set Exterior doors in how randoms 1/1/2016 9/74 9/74 S.L 10 487 4.88 5.1 10 30.8 1.8 1.2 New Shingled Roof 9/20/2016 7.8870 8.2. 30 2.629 15.74 6.6.0 2.6 9.0 2.3.3 1.73 1.4.30 4.4.75 6.6.0 2.6 9.0 2.3.3 1.73 1.5.1 1.0.0 0.0.0 2.3.2 3.0.0 2.3.0 <td></td> <td>•</td> <td></td> <td></td> <td>,</td> <td></td> <td></td> <td></td> <td></td> <td>· · · · · · · · · · · · · · · · · · ·</td> <td>2,723</td>		•			,					· · · · · · · · · · · · · · · · · · ·	2,723
Modify HVAC ductwork nurse sur 3/42015 9/80 9/81 20 4/9 1/43 6 Relocate 2 Sprinklers Nurse Spr 2/10/2015 3/420 3/420 SL 15 228 1,596 1,8 New Carpeting Social Service 2/10/2015 3/415 3/415 SL 5 - 3/415 - 3/416 - 12/299 - 12/299 12/299 SL 5 - 3/415 - - 3/415 - 12/299 - 12/299 - 12/299 - 12/299 - 12/299 12/299 SL 5 - - 3/42 2/61 5/4 3/454 SL 20 1/333 9/31 17.3 1/3 1/3 1/4 1/4 1/10/2015 4/847 4/82 SL 10 4/9 1/33 1/15 1/10/2015 3/202 3/202 SL 10 3/33 1/818 1/12 1/9 3/31 1/15 1/10/2015 3/202 3/202 SL 10 3/31 1/16 1/16 0/17 1/10 1/10		e .									5,397
Relocaire 2 Sprinklers Nurse Spr 223/2015 700 SrL 25 28 196 55 Wall podet dor Nurse Super 21/0/2015 3,420 3,420 SrL 15 228 1,596 1.8 New Carpeting Social Service 21/0/2015 3,415 3,415 SrL 5 . .2,299 3,415 SrL 5 . .2,299 .5 .5 . .2,299 .5 .5 . .2,299 .5 .5 . .2,299 .5 .5 . .2,299 .5 .5 . .2,299 .5 .5 .5 .5 .5 .2 .5 .5 .2 .5 .5 .2 .5 .5 .2 .2 .6 .5 .5 .5 .5 .2 .5 .2 .2 .5 .5 .2 .5 .5 .2 .5 .5 .2 .5 .5 .5 .2 .5 .5 .5 .5 .5 .5 .5 .5 .5 .5 .5 .5 .5			3/10/2015		· · · · ·						2,814
Wall poolet door Nurse Super 21/0/2015 3,420 S.L 15 228 1,596 18,196 New Carpeting Social Service 21/0/2015 14,15 3,415 SIL 5		Modify HVAC ductwork nurse su	3/6/2015	980	980	S/L			49	343	637
New Carpeting Social Service 21/10/215 3,415 3,415 8/L 5 - 3,415 Reseal/Insulta windowskwap 8/29/2015 12,299 12,299 S/L 5 - 12,299 - 12,299 S/L 5 - 12,296 5,4 New handrails for North & South 9/28/2015 8,454 8,15 20 1,333 9,331 17,3 1 set Exterior doors in lower hall way 9/28/2015 4,887 4,887 S/L 10 488 2,943 1,9 1 set Exterior doors in lower hall 12/10/2016 4,887 4,887 S/L 10 488 2,934 1,8 1 word state of doors in lower hall way 9/28/2016 3,026 3,026 S/L 10 303 1,818 1,22 1,010 30,31 1,313 3,931 1,122 6,110 6,00 2,32 1,574 6,50 2,629 15,774 6,30 1,630 S/L 20 4,34 1,736 6,60 1,22 6,110		Relocate 2 Sprinklers Nurse Spr	2/23/2015	700	700	S/L			28	196	504
Result/insular_windows&vrap 8/29/2015 12.299 12.299 S/L 5 - 12.299 - New handrails for North & South 9/28/2015 26,651 26,651 S/L 20 1,33 29,31 17,3 I set Exterior doors in lower hall way 9/28/2015 26,651 26,651 S/L 20 1,33 9,31 17,3 I set Exterior doors in lower hall way 9/28/2015 26,651 26,651 S/L 10 489 2,934 19,9 Sign & Post Front of Building 11/2016 9,74 8,74 5/L 10 303 1,818 11,2 New Shingled Roof 9/302016 7.88,70 8/L 30 2,69 15,774 6,700 2,30 Parking lor ropins; drainage insta 12/2015 9,200 9,200 S/L 8 1,150 6,900 2,30 P Metal Konck & Fire Doors 3/31/2018 8,678 8,78 S/L 20 444 1,76 6,0 D bis Machine 228/2018 2,030 2,203 S/L 20 444 176 6,0			2/10/2015	3,420	3,420	S/L	15		228	1,596	1,824
New handrails for North & South 928/2015 8,454 8,454 8,454 8,454 20 423 2,961 5,4 Exterior doors in lower hall way 9/28/2015 26,651 26,651 8,12 20 1,333 9,331 17,3 1 set Exterior doors in rohab 1/1/2016 9,774 9,774 8,71 10 977 5,862 3,93 Sign & Poor Fort of Building 51/1/2016 3,026 8,7L 10 9,03 1,818 12 New Shingled Roof 9/30/2016 78,870 78,870 8,7L 30 2,629 15,774 65,0 Parking tor epairs; drainage insta 12/22/015 9,200 8,7L 8 1,150 6,900 2,32 9 Metal Smoke & Fire Doors 3/31/2018 8,678 8,7R 54,20 434 1,736 69,9 Dish Machine 2/28/2018 16,630 16,630 8,1<20		New Carpeting Social Service	2/10/2015	3,415	3,415	S/L			-	3,415	-
Exterior doors in lower hall way 9/28/2015 26.651 26.651 S/L 20 1,333 9,331 17.3 1 set Exterior doors in rehab 12/10/2015 4,887 S/L 10 489 2,934 1,93 Two Doors Exterier 11/2016 9,774 9,774 S/L 10 303 1,818 1,21 New Shingled Roof 9/30/2016 7,870 7,870 S/L 30 2,622 15,774 63.00 Parking for repairs; drainage insta 12/2/2015 9,200 9,200 S/L 8 1,150 6,900 2,33 HVAC rooftop unit-B wing 10/25/2016 18,335 18,335 S/L 20 434 1,736 6,90 Dish Machine 2/28/2018 16,630 15,630 S/L 20 434 1,73 6,90 2,32 3,328 13.3 Electrical Work for New Dish Machine 3/31/2018 8,75 S/L 20 44 1,76 6.6 Removal A Installation of new Smoke & Fire Doors 8/31/2018 8/35 S/L 20 144 1,76 6		Reseal/Insulate windows&wrap	8/29/2015	12,299	12,299	S/L	5		-	12,299	-
1 set Exterior does in rehab 12/10/2015 4,887 4,887 S/L 10 489 2,934 19 Two Doors Exterier 1/1/2016 9,774 9,774 S/L 10 977 5,862 333 Sign & Post Front of Building 5/1/2016 3,026 S/L 10 303 1,818 1,2 New Shingled Roof 9/30/2016 78,870 S/L 30 2,629 15,774 6,00 2,3 Parking torpairs: drainage insta 10/25/2016 18,335 18,335 S/L 15 1,222 6,110 12,22 9 Metal Smoke & Fire Doors 3/31/2018 8,678 8,678 S/L 20 434 1,736 6,90 2,30 9,00 13,8 13,3 14,173 6,30 9,200 13,8 16,630 S/L 20 110 440 1,7 6,76 6,6 6,78 S/L 20 144 1,76 6,6 6,71 1,22 6,110 1,22 1,10 440 1,7 7,7 3,24 1,27 7,7 2,241 1,7 7,7 <td< td=""><td></td><td>New handrails for North & South</td><td>9/28/2015</td><td>8,454</td><td>8,454</td><td>S/L</td><td>20</td><td></td><td>423</td><td>2,961</td><td>5,493</td></td<>		New handrails for North & South	9/28/2015	8,454	8,454	S/L	20		423	2,961	5,493
Two Doors Exterier $1/1/2016$ $9,774$ $9,774$ $8/L$ 10 977 $5,862$ 3.95 Sign & Post Front of Building $5/1/2016$ $3,026$ $3,026$ $8/L$ 10 303 $1,818$ $1,2$ New Shingled Roof $9/30/2016$ $78,870$ $78,870$ $8/L$ 30 $2,629$ $15,774$ 63.0 Parking lot repairs; drainage insta $12/2/2015$ $9,200$ $9/L$ 8 8 $1,150$ $6,900$ $2,3$ HVAC rooftop unit B wing $10/25/2016$ $18,335$ $18,335$ $8/L$ 15 $1,222$ $6,110$ $12,22$ 9 Metal Snoke & Fire Doors $331/2018$ $8,678$ $8,678$ $8/L$ 20 434 $1,76$ 6.90 Dish Machine $22/20/2018$ $22,000$ $22,00$ $8/L$ 10 $2,300$ $9,200$ $13,8$ Modeon Boiler $22/20/218$ $22,000$ $22,03$ $8/L$ 20 444 176 6 Replace RU #6 & heat exchange $10/31/2018$ 875 875 $8/L$ 20 444 176 6 Replace RU #6 & heat exchange $10/31/2018$ $14,945$ $14,945$ $8/L$ 20 747 $2,241$ $12,77$ Plooring in pub, elevators, rehab gym, & front entry $5/31/2019$ $19,029$ $9/L$ 15 $1,269$ $3,807$ $15,2$ Resident room wallpaper $7/31/2019$ $48,969$ $8/L$ 15 1333 $3,399$ $13,6$ Reinburse AHC for new telephone system		Exterior doors in lower hall way	9/28/2015	26,651	26,651	S/L	20		1,333	9,331	17,320
Sign & Post Front of Building 5/1/2016 3.026 3.026 S/L 10 303 1.818 1.2 New Shingled Roof 9/30/2016 78.870 78.870 S/L 30 2,629 15,774 66.00 Parking lot repairs, drainage insta 12/2/2015 9,200 S/L 8 1.150 6,000 2.3.3 HVAC rooftop unit- B wing 10/25/2016 18.335 18.335 S/L 15 1.222 6,110 12.2.2 9 Metal Smoke & Fire Doors 3/31/2018 8.678 S/L 20 434 1,736 6.9 Dish Machine 2/28/2018 2.3,000 S/L 10 2,300 9,200 13.8 Modeon Boiler 2/28/2018 2,030 2,203 S/L 20 44 176 6 Replace RU #6 k hat exchange 10/31/2018 41.945 S/L 20 44 176 6 Replace RU #6 k hat exchange 10/31/2018 41.945 S/L 20 747 2,241 12,7 Reinburse AHC for new telephone system 12/29/2020 2.893 S/L <td></td> <td>1 set Exterior doors in rehab</td> <td>12/10/2015</td> <td>4,887</td> <td>4,887</td> <td>S/L</td> <td>10</td> <td></td> <td>489</td> <td>2,934</td> <td>1,953</td>		1 set Exterior doors in rehab	12/10/2015	4,887	4,887	S/L	10		489	2,934	1,953
New Shingled Roof9/30/201678,87078,870S/L302,62915,77463.0Parking lot repairs; drainage insta12/2/20159,2009,200S/L81,1506,9002,3HVAC roofop unit- B wing10/25/201618,335S/L151,2226,11012,29 Metal Smoke & Fire Doors3/31/20188,6788,678S/L204341,7366.99Dish Machine2/28/201823,00023,000S/L102,3009,20013,8Modeon Boiler2/28/201816,63016,630S/L208323,32813,3Electrical Work for New Dish Machine3/31/20182,2032,203S/L204441,7Removal & Installation of new Smoke & Fire Doors8/31/2018875875S/L204441766Replace RU #6 & heat exchange10/31/201814,945S/L207472,24112,7Flooring in pub, elevators, rehab gym, & front entry5/31/201919,029S/L151,2593,80715,2Resident room wallpaper7/31/201948,96948,969S/L151,333,39913,6Reimburse AHC for new telphone system12/29/202028,99328,993S/L106,006,005,5Deborah Cross Interiors- reolas filter dryc on roof8/25/20216,2006,200S/L10609605,5Deborah Cross Interiors- reolas fi		Two Doors Exterier	1/1/2016	9,774	9,774	S/L	10		977	5,862	3,911
Parking for repairs; drainage insta 12/2/2015 9,200 9,200 S/L 8 1,150 6,900 2,3 HVAC rooftop unit - B wing 10/25/2016 18,335 18,335 S/L 15 1,222 6,110 12,2 9 Metal Smoke & Fire Doors 3/31/2018 8,678 8,678 S/L 20 434 1,736 6,90 2,30 Dish Machine 2/28/2018 23,000 23,000 S/L 10 2,300 9,200 13,8 Modeon Boiler 2/28/2018 16,630 16,630 S/L 20 832 3,328 13,3 Electrical Work for New Dish Machine 3/31/2018 8,75 875 S/L 20 110 440 1,76 6 Replace RU #6 & heat exchange 10/31/2018 14,945 S/L 20 747 2,241 12,7 Flooring in pub, elevators, rehab gym, & front entry 5/31/2019 19,029 19,029 S/L 15 3,265 9,795 39,1 Painting of building exterior 8/31/2019 17,000 17,000 S/L 10 660		Sign & Post Front of Building	5/1/2016	3,026	3,026	S/L	10		303	1,818	1,208
HVAC rooftop unit- B wing 10/25/2016 18,335 18,335 S/L 15 1,222 6,110 12,22 9 Metal Smoke & Fire Doors 3/31/2018 8,678 8,678 S/L 20 434 1,736 6,9 Dish Machine 2/28/2018 16,630 S/L 20 8,323 3,328 13,3 Electrical Work for New Dish Machine 3/31/2018 2,203 2,203 S/L 20 110 440 1,7 Removal & Installation of new Smoke & Fire Doors 8/31/2018 2,203 S/L 20 110 440 1,7 Replace RU #6 keat exchange 10/31/2018 14,945 14,945 S/L 20 747 2,241 12,7 Flooring in pub, elevators, rehab gym, & front entry 5/31/2019 19,029 S/L 15 1,269 3,807 15,2 Resident room wallpaper 7/31/2019 19,029 S/L 15 1,269 3,807 15,2 Reimburse AHC for new telephone system 12/29/2020 28,993 S/L 10 2,899 2,809 2,60 5,5 5,5 5,5		New Shingled Roof	9/30/2016	78,870	78,870	S/L	30		2,629	15,774	63,096
9 Metal Smoke & Fire Doors 3/31/2018 8,678 8,678 S/L 20 434 1,736 6,9 Dish Machine 2/28/2018 23,000 22,000 S/L 10 2,300 9,200 13,8 Modcon Boiler 2/28/2018 16,630 16,630 S/L 20 832 3,328 13,3 Electrical Work for New Dish Machine 3/31/2018 2,203 2,203 S/L 20 110 440 1,7 Removal & Installation of new Smoke & Fire Doors 8/31/2018 875 875 S/L 20 444 176 6 Replace RU #6 & heat exchange 10/31/2018 14,945 14,945 S/L 20 444 176 6 Replace RU #6 & heat exchange 7/31/2019 19,029 I/L 15 1,269 3,807 15.2 Resident room wallpaper 7/31/2019 19,029 I/L 15 1,33 3,399 13,6 Reimburse AHC for new telphone system 12/29/2020 28,993 S/L 10 660 960 8,6 Replace tru condenser coil & filter dry		Parking lot repairs; drainage insta	12/2/2015	9,200	9,200	S/L	8		1,150	6,900	2,300
Dish Machine2/28/201823,000S/L102,3009,20013,8Modcon Boiler2/28/201816,63016,630S/L208323,32813,3Electrical Work for New Dish Machine3/31/20182,2032,203S/L201104401,7Removal & Installation of new Smoke & Fire Doors8/31/2018875875S/L204441766Replace RU #6 & heat exchange10/31/201814,94514,945S/L207472,24112,7Flooring in pub, elevators, rehab gym, & front entry5/31/201919,02919,029S/L151,2693,80715,2Resident room wallpaper7/31/201948,96948,969S/L151,1333,39913,6Reimburse AHC for new telephone system12/29/202028,99328,993S/L102,8992,89926,00Deposit on new AC units (pub & lobby)8/16/20219,6009,600S/L1062062,005,5Deborah Cross Interiors-reclass from 20143/3/2014875875875/L1062062,005,5Deborah Cross Interiors-reclass from 20143/3/20204,7144,7148/L153143144,4Repave front parking lot11/9/202066,36266,362S/L88,2958,29558,0Phone system upgrade wiring7/6/2011(447)(447)S/L10(447)(447) </td <td></td> <td>HVAC rooftop unit- B wing</td> <td>10/25/2016</td> <td>18,335</td> <td>18,335</td> <td>S/L</td> <td>15</td> <td></td> <td>1,222</td> <td>6,110</td> <td>12,225</td>		HVAC rooftop unit- B wing	10/25/2016	18,335	18,335	S/L	15		1,222	6,110	12,225
Modeon Boiler2/28/201816,63016,630S/L208323,32813,3Electrical Work for New Dish Machine3/31/20182,2032,203S/L201104401,7Removal & Installation of new Smoke & Fire Doors8/31/2018875875S/L20441766Replace RU #6 & heat exchange10/31/201814,94514,9455/L207472,24112,7Flooring in pub, elevators, rehab gym, & front entry5/31/201919,02919,029S/L151,2693,80715,2Resident room wallpaper7/31/201948,96948,969S/L151,1333,39913,6Reimburse AHC for new telephone system12/29/202028,99328,993S/L102,8992,600Deposit on new AC units (pub & lobby)8/16/20219,6009,600S/L106206205,5Debosit for North Wing shower room renovation3/3/20204,7144,714S/L153143144,4Repave front parking lot11/9/202066,36266,362S/L88,2958,29558,0Phone system upgrade wiring7/6/2011(447)(447)S/L10(447)(447)-Carpet for Rehab Gym4/23/2013(2,394)2(,394)S/L10(447)(447)-		9 Metal Smoke & Fire Doors	3/31/2018	8,678	8,678	S/L	20		434	1,736	6,942
Electrical Work for New Dish Machine $3/31/2018$ $2,203$ $2,203$ S/L 20 110 440 $1,7$ Removal & Installation of new Smoke & Fire Doors $8/31/2018$ 875 875 S/L 20 44 176 6 Replace RU #6 & heat exchange $10/31/2018$ $14,945$ $14,945$ S/L 20 747 $2,241$ $12,7$ Flooring in pub, elevators, rehab gym, & front entry $5/31/2019$ $19,029$ $19,029$ S/L 15 $3,265$ $9,795$ $39,1$ Painting of building exterior $8/31/2019$ $17,000$ $17,000$ S/L 15 $3,265$ $9,795$ $39,1$ Painting of building exterior $8/31/2019$ $17,000$ $17,000$ S/L 15 $3,265$ $9,795$ $39,1$ Painting of building exterior $8/31/2019$ $17,000$ $17,000$ S/L 15 $3,265$ $9,795$ $39,1$ Painting of building exterior $8/31/2019$ $17,000$ $17,000$ S/L 15 $3,265$ $9,795$ $39,1$ Painting of building exterior $8/31/2019$ $17,000$ $17,000$ S/L 10 $2,899$ $2,809$ $2,600$ Deposit on new AC units (pub & lobby) $8/16/2021$ $6,200$ $6,200$ S/L 10 9600 960 86 Replace rtu condenser coil & filter dryer on roof $8/25/2021$ $6,200$ $6,200$ S/L 15 58 58 8 Deposit for North Wing shower room renovation $3/3/2020$ </td <td></td> <td>Dish Machine</td> <td>2/28/2018</td> <td>23,000</td> <td>23,000</td> <td>S/L</td> <td>10</td> <td></td> <td>2,300</td> <td>9,200</td> <td>13,800</td>		Dish Machine	2/28/2018	23,000	23,000	S/L	10		2,300	9,200	13,800
Removal & Installation of new Smoke & Fire Doors8/31/2018875875875S/L20441766Replace RU #6 & heat exchange10/31/201814,94514,945S/L207472,24112,7Flooring in pub, elevators, rehab gym, & front entry5/31/201919,02919,029S/L151,2693,80715,2Resident room wallpaper7/31/201948,96948,969S/L153,2659,79539,1Painting of building exterior8/31/201917,00017,000S/L151,1333,39913,6Reimburse AHC for new telephone system12/29/202028,99328,993S/L102,8992,89926,00Deposit on new AC units (pub & lobby)8/16/20219,6009,600S/L109609608,6Replace rtu condenser coil & filter dryer on roof8/25/20216,2006,200S/L106206205,5Deborah Cross Interiors- reclass from 20143/31/2014875875S/L1558588Deposit for North Wing shower room renovation3/3/20204,7144,714S/L153143144,4Repave front parking lot11/9/202066,36266,362S/L88,295\$8,29558,0Phone system upgrade wiring7/6/2011(447)(447)S/L10(447)(447)-Carpet for Rehab Gym2/32/2013(2,394)(2,394)<		Modcon Boiler	2/28/2018	16,630	16,630	S/L	20		832	3,328	13,302
Replace RU #6 & heat exchange $10/31/2018$ $14,945$ $14,945$ $8/L$ 20 747 $2,241$ $12,7$ Flooring in pub, elevators, rehab gym, & front entry $5/31/2019$ $19,029$ $19,029$ $8/L$ 15 $1,269$ $3,807$ $15,2$ Resident room wallpaper $7/31/2019$ $48,969$ $48,969$ $8/L$ 15 $3,265$ $9,795$ $39,1$ Painting of building exterior $8/31/2019$ $17,000$ $17,000$ $8/L$ 15 $1,133$ $3,399$ $13,6$ Reimburse AHC for new telephone system $12/29/2020$ $28,993$ $28,993$ $28,993$ $8/L$ 10 $2,899$ $2,899$ $2,600$ Deposit on new AC units (pub & lobby) $8/16/2021$ $9,600$ $9,600$ $8/L$ 10 960 960 86 Replace ru condenser coil & filter dryer on roof $8/25/2021$ $6,200$ $6,200$ $8/L$ 10 620 620 $5,5$ Deborah Cross Interiors- reclass from 2014 $3/31/2014$ 875 875 $8/L$ 15 314 314 $4,4$ Repave front parking lot $11/9/2020$ $66,362$ $66,362$ $8/L$ 8 $8,295$ $8,295$ $8,295$ $58,0$ Phone system upgrade wiring $7/6/2011$ (447) (447) $8/L$ 10 (447) (447) -7 Carpet for Rehab Gym $4/23/2013$ $(2,394)$ $(2,394)$ $8/L$ 5 $(2,394)$ $(2,394)$ $(2,394)$ $(2,394)$ $(2,394)$ $(2,394)$ <td< td=""><td></td><td>Electrical Work for New Dish Machine</td><td>3/31/2018</td><td>2,203</td><td>2,203</td><td>S/L</td><td>20</td><td></td><td>110</td><td>440</td><td>1,763</td></td<>		Electrical Work for New Dish Machine	3/31/2018	2,203	2,203	S/L	20		110	440	1,763
Flooring in pub, elevators, rehab gym, & front entry5/31/201919,02919,029S/L151,2693,80715,2Resident room wallpaper7/31/201948,96948,969S/L153,2659,79539,1Painting of building exterior8/31/201917,00017,000S/L151,1133,39913,6Reimburse AHC for new telephone system12/29/202028,99328,993S/L102,8992,89926,00Deposit on new AC units (pub & lobby)8/16/20219,6009,600S/L109609608,6Replace rut condenser coil & filter dryer on roof8/25/20216,2006,200S/L106206205,5Deborah Cross Interiors- reclass from 20143/31/2014875875S/L153143144,4Repave front parking lot11/9/202066,36266,362S/L88,2958,295<		Removal & Installation of new Smoke & Fire Doors	8/31/2018	875	875	S/L	20		44	176	699
Resident room wallpaper7/31/201948,96948,969S/L153,2659,79539,1Painting of building exterior8/31/201917,00017,000S/L151,1333,39913,6Reimburse AHC for new telephone system12/29/202028,99328,993S/L102,8992,89926,00Deposit on new AC units (pub & lobby)8/16/20219,6009,600S/L109609608,6Replace rtu condenser coil & filter dryer on roof8/25/20216,2006,200S/L106206205,5Debosit for North Wing shower room renovation3/31/2014875875S/L1558588Deposit for North Wing shower room renovation3/3/20204,7144,714S/L153143144,4Repave front parking lot11/9/202066,36266,362S/L88,2958,29558,00Phone system upgrade wiring7/6/2011(447)(447)S/L10(447)(447)Carpet for Rehab Gym4/23/2013(2,394)(2,394)S/L5(2,394)(2,394)		Replace RU #6 & heat exchange	10/31/2018	14,945	14,945	S/L	20		747	2,241	12,704
Resident room wallpaper7/31/201948,96948,969S/L153,2659,79539,1Painting of building exterior8/31/201917,00017,000S/L151,1333,39913,6Reimburse AHC for new telephone system12/29/202028,99328,993S/L102,8992,89926,00Deposit on new AC units (pub & lobby)8/16/20219,6009,600S/L109609608,6Replace rtu condenser coil & filter dryer on roof8/25/20216,2006,200S/L106206205,5Debosit for North Wing shower room renovation3/31/2014875875S/L1558588Deposit for North Wing shower room renovation3/3/20204,7144,714S/L153143144,4Repave front parking lot11/9/202066,36266,362S/L88,2958,29558,00Phone system upgrade wiring7/6/2011(447)(447)S/L10(447)(447)Carpet for Rehab Gym4/23/2013(2,394)(2,394)S/L5(2,394)(2,394)		Flooring in pub, elevators, rehab gym, & front entry	5/31/2019	19,029	19,029	S/L	15		1,269	3,807	15,222
Reimburse AHC for new telephone system12/29/202028,99328,993S/L102,8992,89926,00Deposit on new AC units (pub & lobby)8/16/20219,6009,600S/L109609608,6Replace rtu condenser coil & filter dryer on roof8/25/20216,2006,200S/L106206205,5Deborah Cross Interiors- reclass from 20143/31/2014875875S/L1558588Deposit for North Wing shower room renovation3/3/20204,7144,714S/L153143144,4Repave front parking lot11/9/202066,36266,362S/L10(447)4,47)5/L10(447)5/2058,02558,00Phone system upgrade wiring7/6/2011(447)(447)S/L10(2,394)(2,394)Carpet for Rehab Gym4/23/2013(2,394)(2,394)S/L50(2,394)(2,394)			7/31/2019	48,969	48,969	S/L	15		3,265	9,795	39,174
Reimburse AHC for new telephone system12/29/202028,99328,993S/L102,8992,89926,00Deposit on new AC units (pub & lobby)8/16/20219,6009,600S/L109609608,6Replace rtu condenser coil & filter dryer on roof8/25/20216,2006,200S/L106206205,5Deborah Cross Interiors- reclass from 20143/31/2014875875S/L1558588Deposit for North Wing shower room renovation3/3/20204,7144,714S/L153143144,4Repave front parking lot11/9/202066,36266,362S/L10(447)4,47)5/L10(447)5/2058,02558,00Phone system upgrade wiring7/6/2011(447)(447)S/L10(2,394)(2,394)Carpet for Rehab Gym4/23/2013(2,394)(2,394)S/L50(2,394)(2,394)		Painting of building exterior	8/31/2019	17,000	17,000	S/L	15		1,133	3,399	13,601
Deposit on new AC units (pub & lobby) 8/16/2021 9,600 9,600 S/L 10 960 960 8,6 Replace rtu condenser coil & filter dryer on roof 8/25/2021 6,200 6,200 S/L 10 620 620 5,5 Deborah Cross Interiors- reclass from 2014 3/31/2014 875 875 S/L 15 58 58 8 Deposit for North Wing shower room renovation 3/3/2020 4,714 4,714 S/L 15 314 314 4,4 Repave front parking lot 11/9/2020 66,362 66,362 S/L 8 8,295 8,295 58,00 Phone system upgrade wiring 7/6/2011 (447) (447) S/L 10 (447) (447) - Carpet for Rehab Gym 4/23/2013 (2,394) 2,394 S/L 5 (2,394) (2,394) -			12/29/2020	28,993		S/L	10			2,899	26,094
Replace rtu condenser coil & filter dryer on roof 8/25/2021 6,200 S/L 10 620 620 5,5 Deborah Cross Interiors- reclass from 2014 3/31/2014 875 875 S/L 15 58 58 8 Deposit for North Wing shower room renovation 3/3/2020 4,714 4,714 S/L 15 314 314 4,4 Repave front parking lot 11/9/2020 66,362 66,362 S/L 8 8,295 8,295 58,00 Phone system upgrade wiring 7/6/2011 (447) (447) S/L 10 (447) (447) - Carpet for Rehab Gym 4/23/2013 (2,394) (2,394) S/L 5 (2,394) (2,394) -			8/16/2021		9,600	S/L	10		960	960	8,640
Deborah Cross Interiors- reclass from 2014 3/31/2014 875 875 S/L 15 58 58 8 Deposit for North Wing shower room renovation 3/3/2020 4,714 4,714 S/L 15 314 314 4,4 Repave front parking lot 11/9/2020 66,362 66,362 S/L 8 8,295 8,295 58,00 Phone system upgrade wiring 7/6/2011 (447) (447) S/L 10 (447) (447) - Carpet for Rehab Gym 4/23/2013 (2,394) (2,394) S/L 5 (2,394) (2,394) -				6.200			10			620	5,580
Deposit for North Wing shower room renovation 3/3/2020 4,714 4,714 S/L 15 314 314 4,4 Repave front parking lot 11/9/2020 66,362 66,362 S/L 8 8,295 8,295 58,0 Phone system upgrade wiring 7/6/2011 (447) (447) S/L 10 (447) (447) - Carpet for Rehab Gym 4/23/2013 (2,394) (2,394) 5 (2,394) (2,394) -			3/31/2014	875	875	S/L	15		58	58	817
Repave front parking lot 11/9/2020 66,362 66,362 S/L 8 8,295 8,295 58,00 Phone system upgrade wiring 7/6/2011 (447) (447) S/L 10 (447) (447) - Carpet for Rehab Gym 4/23/2013 (2,394) (2,394) S/L 5 (2,394) (2,394) -											4,400
Phone system upgrade wiring Carpet for Rehab Gym 7/6/2011 (447) (447) S/L 10 (447) (447) -				· · · · · · · · · · · · · · · · · · ·	,						58,067
Carpet for Rehab Gym 4/23/2013 (2,394) S/L 5 (2,394) (2,394) -											-
1,560,584 1,560,584 73,156 971,441 589,1		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							()	. ,	-
				1,560,584	1,560,584				73,156	971,441	589,143

LHI Combined Totals for Cost Report	4,026,667	4,026,421	205,022	2,910,270	1,116,150

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD	USEFUL LIFE (IN YEARS)	MONTHLY DEPRECIATION	Depreciation EXPENSE FY 2021	ACC'D EXPENSE as of 9/30/21	NET VALUE
	Leasehold Improvements			2,429,121				127,354	1,934,317	494,803
	Additions			36,715				4,512	4,512	32,204
	Disposals			-				-	-	-
	Related Party Leasehold improvements			1,446,681				62,851	961,136	485,545
	Related Party Additions			113,903				10,305	10,305	103,598
	Prior Year C/R Variance									-
		Total		4,026,421				205,022	2,910,270	1,116,150

		DATE	HISTORICAL	BASIS		USEFUL				NET
Vendor	Description	OF	COST	FOR	DEPR.		MONTHLY	Depreciation		VALUE
	×	ACQUISITION		DEPRECIATION	METHOI) (YEARS)	DEPREC	30-Sep-21	30-Sep-21	
Balance Forward prior 2008			\$1,078,923	\$1,079,551			\$4,366			51,018
Build 'N Serve	2 Laptops	11-Oct-07	4,799	4,799	S/L	5	80	-	4,799	-
Harbor Sales	Northington Room Curtains	22-Oct-07	823	823	S/L	5	14	-	823	-
SMD	Pin Hole Camera	5-Oct-07	1,021	1,021	S/L	5	17	-	1,020	-
Digital Meida	27 LCD TV	29-Nov-07	8,589	8,589	S/L	5	143	-	8,589	-
Build 'N Serve	HP Laser Printer	31-Jan-08	1,001	1,001	S/L	5	17	-	1,001	-
Boston Showcase	Rotary Toaster	10-Jan-08	1,032	1,032	S/L	10	9	-	1,032	-
Gulf South Medical Supply	Matrix Bed	2-Jan-08	2,348	2,348	S/L	12	16	-	2,348	-
Puritan Furniture	Bookcase & console	31-Jan-08	1,107	1,107	S/L	20	5	55	704	403
Direct Supply	Vital Signs Monitor	28-Mar-08	1,607	1,607	S/L	8	17	-	1,607	-
Gulf South Medical Supply	Matrix Bed	18-Feb-08	1,405	1,405	S/L	12	10	-	1,405	-
Health Care Logistics	Emergency cart	19-Mar-08	849	849	S/L	10	7	-	849	-
Digital Meida	2 LCD TV	6-Feb-08	3,173	3,173	S/L	5	53	-	3,173	-
Direct Supply	Mobile Hydrocollator	11-Apr-08	1,178	1,178	S/L	10	10	-	1,178	-
Gulf South Medical Supply	Matrix Bed	16-Apr-08	1,499	1,499	S/L	12	10	-	1,499	-
HPC Foodservice	Smart Them Base Dinex	16-Apr-08	1,719	1,719	S/L	5	29	-	1,719	-
Medline	Vital Signs Monitor	22-May-08	1,386	1,386	S/L	8	14	-	1,386	-
Suburban Stationers	Shredder	18-Apr-08	1,324	1,324	S/L	5	22	-	1,324	-
Arjo	Patient Lifts	30-Apr-08	16,072	16,072	S/L	10	134	-	16,072	-
Build 'N Serve	2 Computers	1-Jun-08	1,571	1,571	S/L	5	26	-	1,571	-
Total Communication	Digital Card System	19-Jun-08	1,655	1,655	S/L	5	28	-	1,655	-
Titan Mechanical	Replace Economizer	10-Jun-08	1,166	1,166	S/L	12	8	-	1,166	-
Build 'N Serve	2 computers	1-Jul-08	2,490	2,490	S/L	5	42	-	2,490	-
Industrial Time	Time Clock Software	31-Aug-08	981	981	S/L	5	16	-	981	-
Direct Supply	7 QT Stainless Steel Bowl	31-Aug-08	834	834	S/L	5	14	-	834	-
Hartford Provision	Smart Them Base Dinex	31-Aug-08	3,392	3,392	S/L	5	57	-	3,392	-
Prior Year Adjustment							\$672			
2008 Ending			\$ 1,141,944	\$ 1,142,571			\$ 5,834 5	s 55 s	62,617	\$ 51,421
Amano	Time Clock - Leased	1-Oct-08	\$ 7,974	\$ 7,974	S/L	10	\$ 66	-	7,974	-
JCPenney	Windsor Benches	1-Oct-08	522	522	S/L	15	3	35	453	68
Build 'N Serve	Desktop & Monitor - Karen's	1-Nov-08	1,541	1,541	S/L	5	26	-	1,541	-
Sears	Refrigerator	22-Oct-08	613	613	S/L	10	5	-	613	-
Joerns Healthcare	Queen Anne Chair	10-Nov-08	884	884	S/L	15	5	59	761	122
Music Score	Piano	31-Dec-08	3,175	3,175	S/L	20	13	159	2,039	1,136
Chef's Equipment Emp	1 Gallon Blender	31-Dec-08	1,145	1,145	S/L	10	10	-	1,125	20
Lintech	Software & Installation	1-Jan-09	61,787	61,787	S/L	15	343	4,119	52,518	9,269
Build 'N Serve	New Server	1-Jan-09	7,155	7,155	S/L	5	119		7,155	,,20)
Joerns Healthcare	8 Overbed Tables	25-Feb-09	856	856	S/L	5	14		856	_
Harbor Linen	North Wing Day Room Valances	9-Mar-09	676	676	S/L	5	11	-	676	-
Encompass	3 Chairs Admissions Office	5-May-09	1,045	1,045	S/L	15	6	70	867	178
Joerns Healthcare	6 Overbed Tables	12-May-09	647	647	S/L	5	11		647	-
HD Supply Facilities	4 Linen Carts	20-May-09	1,063	1,063	S/L	10	9		1,062	
Best Buy (AMEX)	47" LCD TV for Rehab	31-May-09	1,124	1,005	S/L	5	19		1,124	
Build 'N Serve	Server Rack	31-May-09 31-May-09	1,124	1,124	S/L S/L	5	27	-	1,124	-
Build 'N Serve	Administrator Computer	30-Jun-09	1,166	1,052	S/L S/L	5	19	-	1,166	-
Office Depot	3 Refrigerators for Rehab	15-Jul-09	676	676	S/L S/L	10	6	-	676	-
Build 'N Serve	Dell Laptop for MDS Coordinator	31-Jul-09	1,007	1,007	S/L S/L	5	17	-	1,007	-
Amex - Ace Hardware	5 Leaf Benches	15-Jul-09	583	583	S/L S/L	15	3	- 39	477	106
A mex - Ace Hardware	Disposals	15-Jul-09	(18,705)	(18,705)	0/12	15	(251)	-		(18,705)
	Dispositio	-	(10,705)	-			(251)	-	-	(10,705)
	2009 Balance		\$ 1,218,506	\$ 1,219,134			5	s 4,536 \$	146,985	\$ 43,615
-									1.0,705	

Vendor	Description		DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOI	USEFUL LIFE (YEARS)	MONTHLY	Depreciation 30-Sep-21	NET Accum. VAL 30-Sep-21	UE
	6 Overbed Tables		30-Oct-09	\$ 668	\$ 668	S/L	5	\$11	-	668	-
Amex BestBuy	42" LCD HDTV		11-Dec-09	848	848	S/L	5	\$14	-	848	-
	Dell for Nursing Secretary		1-Jan-10	686	686	S/L	5	\$11	-	686	-
	6 Lounge chairs			1,326	1,326	S/L	10	\$11	43	1,326	-
	2 HP 2035n Printers			732	732	S/L	5	\$12	-	732	-
	7 Dining Table Tops			923	923	S/L	5	\$15	-	923	-
	36 insulated bases			2,210	2,210	S/L	5	\$37	-	2,210	-
	6 Overbed Tables			665	665	S/L	5	\$11	-	665	-
	6 Overbed Tables			665	665	S/L	5	\$11	-	665	-
	6 Overbed Tables			658	658	S/L	5	\$11	-	658	-
	2 Patio Dining Sets w/Umbrellas			1,391	1,391	S/L	10	\$12	139	1,251	140
	Software Training Resident Rooms A&B Wings Blinds			44,291 2,598	44,291 2,598	S/L S/L	3 5	\$1,230 \$43	-	44,291 2,598	-
	Enamel Shampoo Bowl			2,598	2,598	S/L S/L	20	\$43	- 33	2,398	379
	Enamel Snampoo Bowi	Adj.		055	055	5/L	20	\$3	55	274	379
	2010 Balance	×	5	\$ 1,276,819	\$ 1,277,447				\$ 4,751 \$	204,779 \$	44,134
TM Technology	3 HP Mini Notebooks - SS		10-Oct-10	\$ 1,701	\$ 1,701	S/L	3	\$ 47	-	1,701	-
SMD Inc.	Keypad outside of Front Doors		28-Oct-10	1,708	1,708	S/L	5	28	-	1,708	-
Direct Supply	Bladderscanner		12-Nov-10	13,640	13,640	S/L	5	227	-	13,640	-
Direct Supply	Vital Signs Monitor (South Wing)		9-Nov-10	1,604	1,604	S/L	8	17	-	1,604	-
TM Technology	2 Mini HP Desktops		17-Nov-10	1,813	1,813	S/L	5	30	-	1,813	-
TM Technology	Notebook & Printer		16-Jan-11	1,177	1,177	S/L	5	20	-	1,177	-
TM Technology	Samsung Laser Printer Admissions		18-Feb-11	665	665	S/L	5	11	-	665	-
Lintech	Care Plan Library		28-Feb-11	1,734	1,734	S/L	3	48	-	1,734	-
Alfax Furniture	7 Square Tables		1-Mar-11	1,387	1,387	S/L	15	8	92	899	488
TM Technology	Recpt Color Laserjet & other items		31-Mar-11	2,928	2,928	S/L	5	49	-	2,928	-
TM Technology	Wireless Router & Printer		30-Apr-11	900	900	S/L	5	15	-	900	-
Home Depot	18 Blinds N/S Wing Resident Rms		11-Apr-11	2,061	2,061	S/L	5	34	-	2,061	-
Best Buy (AMEX)	47" TV for PUB		12-Apr-11	954	954	S/L	5	16	-	954	-
InPro Corp	Bed Protectors		16-May-11	2,980	2,980	S/L	5	47	-	2,980	-
WB Mason	Lateral Filing Cabinet for Payroll		3-Jun-11	1,007	1,007	S/L	15	6	67	603	404
TM Technology	Admissions/Recpt Computers & Monitor		20-Jul-11	1,286	1,286	S/L	5	21	-	1,286	-
Perkins	Rack Tray Dispenser		25-Jul-11	1,520	1,520	S/L	5	25	-	1,520	-
American Healthcare Supply	2 Chair and table for Payroll Office		27-Jul-11	748	748	S/L	15	4	50	437	311
Carstens	Medical Records Cart		17-Aug-11	1,468	1,468	S/L	10	12	147	1,249	219
Direct Supply	Dragon 20i Floor Burnisher		26-Aug-11	1,317	1,317	S/L	5	22	-	1,317	-
Sigma Care/Lintech	eMar/eTar Software & Implementation Disposals		30-Sep-11	11,993 (19,396)	11,993 (19,396)	S/L	3	333	(3,998)	11,993 (10,904)	(8,492)
	2011 Balance			\$ 1,312,012					\$ 1,109 \$		37,064
				\$ 1,312,012	\$ 1,512,039				3 1,109 3	247,042 \$	37,004
2012 Additions:			\$ 40.840	1.000	e 1000	C/I	7	¢ 12		1.000	
Perkins TM Technology	China Mini Computer & Brinter		\$ 40,840 \$ 31-Oct-11	\$ 1,000 1,024	\$ 1,000 1,024	S/L S/L	7 3	\$ 12 28	-	1,000 1,024	-
TM Technology WB Mason	Mini Computer & Printer Office Furniture for Dietician Office		31-Oct-11 1-Jan-12	1,024	1,024	S/L S/L	3 15	28 7	- 82	1,024	- 447
WB Mason BSD Care	8 Dining Room Chairs		1-Jan-12 3-Jan-12	1,224	1,224	S/L S/L	15	11	82 130	1,236	447
Farmington Valley Equipment	Ariens Professional Snow Thrower		20-Jan-12	2,126	2,126	S/L S/L	5	35	150	2,126	/1/
Life Systems	2 Rosebud Oximeters		20-Jan-12 27-Jan-12	3,594	3,594	S/L S/L	10	30	359	3,412	182
TM Technology	HP 4530 Laptop for Dietician		31-Jan-12	1,059	1,059	S/L S/L	3	30 29	-	1,059	102
Amex - Best Buy	2 32" TV with mounts A/B Day Rooms		23-Feb-12	723	723	S/L	5	12	-	723	-
McKesson Medical	Ultrasonic Cleaner		19-Mar-12	1.061	1,061	S/L	10	9	106	972	89
TM Technology	Desktop for Medical Records		31-Mar-12	1,579	1,579	S/L	5	26	-	1,579	-
WB Mason	Office Furniture for Dietary Office		12-Apr-12	1,005	1,005	S/L	15	6	67	603	402
TM Technology	Desktop - Administrator		16-May-12	798	798	S/L	5	13	-	798	-
TM Technology	Laptob - Dietician		16-May-12	835	835	S/L	3	23	-	835	-
TM Technology	Epson GTS80 Scanner - Med Record		16-May-12	956	956	S/L	5	16	-	956	-
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			DA	ATE	HISTORICAL	BASIS		USEFUL					NET	
Vendor		Description)F	COST	FOR	DEPR.		MONTHI		Depreciation	Accum.	VALUE	
			ACQUI	ISITION		DEPRECIATION		· /			30-Sep-21	30-Sep-21		
Fire Equipment Headquarters TM Technology	Gas Meter to test air Desktop for A Wing #524			23-May-12 30-Jun-12	850 803	850 803	S/L S/L	8 5		9 13	19	850 803		-
TM Technology	Desktop for Payroll #526			30-Jun-12 30-Jun-12	936	936	S/L S/L	5		15	-	936		-
WB Mason	5 Task Chairs for Nursing			10-Jul-12	675	675	S/L	15		4	45	383		293
TM Technology	4 Minis-Therapy. 2 NB and Labler			12-Aug-12	3,751	3,751	S/L	3		04	-	3,751		-
65	Disposals			6	(3,819)	(3,819)					-	(3,819)		-
	2012 Balance		TOTALS	\$	1,334,144	\$ 1,334,771				\$	1,917 \$	267,046	\$	39,194
2013 Additions:	_													
HD Supply Facilities	6 Overbed Tables			1-Oct-12 \$			S/L	5		10	-	626		-
TM Technology	HP Laptop MDS Nurse			21-Oct-12	729	729	S/L	3		20	-	729		-
SigmaCare	eMar/eTar Software & Implemenation			31-Oct-12	12,335	12,335	S/L	3	34		-	12,335		-
TM Technology	Printer North & ADNS			15-Nov-12	1,013	1,013	S/L	5		17	-	1,013		-
Fire Equipment Headquarters	Tripod, Winch & Harness			14-Dec-12	2,201	2,201	S/L	20		9	110	990		1,211
Perkins	1 Gallon Blender			31-Dec-12	1,225	1,225	S/L	10		10	122	1,100		125
Bemes Inc.	Spirodoc & Oxi (combo Resp Eq)			25-Jan-13	1,717	1,717	S/L	5		29	-	1,717		-
TM Technology	Fax			10-Mar-13	532	532	S/L	3		15	-	532		-
TM Technology	Dietary Desktop Computer			10-Mar-13	1,664	1,664	S/L	5		28	-	1,664		-
Perkins	Hot Water Dispenser 5 gal			21-Mar-13	888	888	S/L	10		7	89	800		88
Dumouchel Paper	Walk Behind Auto Scrubber			4-Apr-13	4,842	4,842	S/L	5		81	-	4,842		-
Direct Supply	Blood Pressure Unit & Oximeter			5-Apr-13	1,371	1,371	S/L	6		19	-	1,371		-
Surface Solutions	Kaivac Omni Dispense & Vac			7-May-13	862	862	S/L	8		9	-	862		-
WB Mason	Office Furniture for Staff Development			19-Jun-13	1,177	1,177	S/L	15		7	78	704		473
WB Mason	Office Furniture for Staff Development			11-Jul-13	1,170	1,170	S/L	15		7	78	702		468
TM Technology	TM Desktop Machines #563 and 564			13-Jul-13	1,284	1,284	S/L	3		36	-	1,284		-
TM Technology	Inwin Mini Desktop			13-Jul-13	1,957	1,957	S/L	3		54	-	1,957		-
WB Mason	4 Grey Task Chairs - South Unit			19-Jul-13	583	583	S/L	10		5	58	465		118
Perkins	Advolution 20 xp Floor Burnisher			22-Jul-13	1,272	1,272	S/L	5		21	-	1,272		-
TM Technology	Printer Nursing Super & Staff Dev			31-Jul-13	956	956	S/L	5		16	-	956		-
TM Technology	Computer Nursing Supervisor			31-Aug-13	1,637	1,637	S/L	5		27	-	1,637		-
WB Mason	Office Furniture DNS Office			4-Sep-13	2,003	2,003	S/L	15		11	134	1,204		798
	Disposals				(316,187)	(316,187)					-	154,649		2,031
	2013 Balance		Totals	\$	1,059,999	\$ 1,060,627				\$	2,586 \$	460,456	\$	44,506
2014 4184														
2014 Additions: TM Technology	Laptop for B Wing			10/31/2013 \$	850	\$ 850	S/L	3	\$	24	-	850		-
Arjo	Sit to Stand Sara Lift			12/31/2013	2,911	2,911	S/L	10		24	291	2,328		583
McKesson Medical	2 Blood Pressure Monitors			1/21/2014	1,830	1,830	S/L	6		25		1,830		-
TM Technology	HP ProBook and Replicator			2/28/2014	1,070	1,070	S/L	3		30	-	1,070		-
TM Technology	HP ProBook Spare 1			3/31/2014	914	914	S/L	3		25	-	914		-
TM Technology	AP Bookkeeper PC			4/30/2014	1,073	1,073	S/L	5		18	_	1,073		-
TM Technology	QuickBooks Server			4/30/2014	1,282	1,282	S/L	5		21	-	1,282		-
SMD	Paging Transmitter			5/20/2014	1,590	1,590	S/L	20		7	79	633		956
Graham-Field	Bariatric Bed			5/30/2014	1,793	1,793	S/L	12		12	149	1,193		599
Space Tables	3 Oak Tables Northington Dining Room			5/31/2014	1,950	1,950	S/L	15		11	130	1,040		910
TM Technology	Computer Medical Records			5/31/2014	851	851	S/L	5		14	-	851		-
TM Technology	Sigmacare Server Hard Drive			5/31/2014	690	690	S/L	5		12	-	690		-
TM Technology	2 Color Printers and Windows 8.1			6/30/2014	1,216	1,216	S/L	5		20	-	1,216		-
TM Technology	Microsoft Office 2013			7/31/2014	3,191	3,191	S/L	5		53	-	3,191		-
TM Technology	Russell's Laptop			8/31/2014	994	994	S/L	3		28	-	994		-
Space Tables	A Wing Lounge Tables			8/31/2014	680	680	S/L	15		4	45	361		319
TM Technology	DNS Laptop			8/31/2014	744	744	S/L	3		21	-	744		-
TM Technology	Dietary Desktop Computer			8/31/2014	1,010	1,010	S/L	5		17	-	1,010		-
TM Technology	Admissions Desktop Computer			8/31/2014	1,206	1,206	S/L	5		20	-	1,206		-
TM Technology	North Wing Printer & Windows 7			9/30/2014	804	804	S/L	5		13	-	804		-
Arjo	······································			8/31/2001	(3,583)	(3,583)	S/L	7	-		-	(3,583)		-
1 110				0/01/2001	(3,363)	(3,383)	5/L	/	-		-	(3,383)	,	-

Vendor	Description	DATE OF ACQUISITION	HISTORICAL COST	BASIS FOR DEPRECIATION	DEPR. METHOD		MONTHI) DEPREC		preciation D-Sep-21	NE' Accum. VA 30-Sep-21	r LUE
	2014 Balance	Totals	\$ 1,083,064	\$ 1,083,691				\$	3,280 \$	480,153 \$	47,873
2015 Additions:											
WB Mason	Furniture for Infection Control Nurse	10/24/20	14 \$ 763	\$ 763	S/L	15	\$	4	51	357	406
TM Technology	2 HP LaserJet Pro Printers	12/31/20	14 596	596	S/L	5	1	0	-	595	-
TM Technology	Cisco Router with 3 Yr Ent License	12/31/20	14 2,953	2,953	S/L	3	8	32	-	2,953	-
TM Technology	3 Desktops, Printer and Dual Monitors	12/31/20	14 1,956	1,956	S/L	5	3	33	-	1,956	-
TM Technology	Cisco 52 port	4/30/20	15 1,442			5	2	24	-	1,441	-
WB Mason	2 Desks for Social Services	4/30/20			S/L	20		8	96	672	1,254
TM Technology	Notebook and Printer	4/30/20		860		3		24	-	860	-
McKesson Medical	Defibulator	4/8/20		1,539	S/L	5		26	-	1,539	-
Sure Response	Portable Radio w/6 earpieces	8/20/20		1,564	S/L	5		26	-	1,564	-
TM Technology	New Server	9/30/20	15 10,651	10,651	S/L	5	17	78	-	10,651	-
2015 Disposals:											
ACQUISITIONS		9/30/19	90 \$ (2,813	\$ (2,813) S/L	5	\$ (4	17)	-	(2,813)	-
ACQUISITIONS		9/30/19				10		(4)	-	(497)	-
ACQUISITIONS		9/30/19	90 (3,013	(3,013) S/L	15	(1	7)	-	(3,013)	-
ACQUISITIONS		9/30/19	91 (3,510	(3,510) S/L	3	(9	98)	-	(3,510)	-
ACQUISITIONS		9/30/19	91 (31,379) (31,379) S/L	5	(52	23)	-	(31,379)	-
ACQUISITIONS		9/30/19	91 (14,993) (14,993) S/L	10	(12	25)	-	(14,993)	-
ACQUISITIONS		9/30/19	91 (1,331) (1,331		15		(7)	-	(1,331)	-
Build 'N Serve		1/1/20	09 (7,155	(7,155) S/L	5	(11	9)	-	(7,155)	-
	2015 Balance	Totals	\$ 1,042,621	\$ 1,043,249				\$	3,427 \$	438,051 \$	49,533
				. ,, .					- / -		
2016 4186											
2016 Additions: TM Technology	HP Pro Book / HP Retail Desktop.	11/30/20	15 \$ 1,121	\$ 1,121	S/L	3	\$ 3	31	-	1,121	
W.B. Mason	Office Furiture Admin Office	3/31/20		3 1,121 1,819	S/L	15		0	121	726	1,092
W.B. Mason	Office Furiture Admin Office	3/31/20		1,819	S/L S/L	3		50	-	1,808	1,092
W.B. Mason	new file for admission office	3/31/20		465	S/L	15		3	31	1,808	279
Direct Supply	5 Classic 4 foot benches	7/31/20		3,180		15		8	212	1,272	1,908
TM Technology	17" Touch Computer	7/31/20	· · · · · · · · · · · · · · · · · · ·	3,607	S/L	5		50	2	3,607	-
TM Technology	2 HP ProBooks Spares	7/31/20		1,117	S/L	3		31	-	1,117	-
Space Tables	6 Tables	9/30/20	· · · · · · · · · · · · · · · · · · ·	2,003	S/L	15		1	134	804	1,199
opuee ruoteo		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2,005	2,005	0/2	10			-	-	-
2016 Disposals:									-	-	-
ACQUISITIONS		9/30/19				18		(4)	-	(829)	-
ACQUISITIONS		9/30/19				20		(9)	-	(2,076)	-
ACQUISITIONS		9/30/19				5		33)	-	(4,955)	-
ACQUISITIONS		9/30/19				10		56)	-	(6,706)	-
ACQUISITIONS		9/30/19				3	(12		-	(4,330)	-
ACQUISITIONS		9/30/19				15	(13		-	(23,328)	-
ACQUISITIONS		9/30/19				5		57)	-	(4,020)	-
ACQUISITIONS		9/30/19				10		56)	-	(6,714)	-
ACQUISITIONS		9/30/19	93 (4,280) (4,280) S/L	15	(2	24)	-	(4,280)	-
	2016 Balance	Totals	\$ 1,000,502	\$ 1,001,130				\$	3,927 \$	391,454 \$	54,011
2017 Additions:											
Space Tables	6 Tables Sales Tax	10/31/2016	\$ 127	\$ 127	S/L	15	\$	1	8	40	87
TM Technology	hp laserjet pro	11/30/2016	2,095	2,095	S/L	3	5	58	-	2,095	-
TM Technology	new computer for reception, new computer for hr	12/31/2016	1,813	1,813	S/L	5	3	30	361	1,813	-
EZProducts	digital pop up press label maker	1/31/2017	770	770	S/L	5	1	3	154	770	-
LPA Medical	glider chair between a&b wing	1/31/2017	1,030	1,030	S/L	15		6	69	345	685
TM Technology	hp probook 450	3/31/2017	1,143	1,143	S/L	3	3	32	-	1,143	-

		DATE	н	STORICAL	BASIS		USEFUL				NET	
Vendor	Description	OF	111	COST	FOR	DEPR.		MONTHLY	Depreciation		VALUE	
, ender	Destiption	ACQUISITION					(YEARS)		30-Sep-21	30-Sep-21		
American Express- Microsoft	tablet for admissions	4/30/2017		1,201	1,201	S/L	5	20	240	1,200		1
TM Technology	hp for mds nurse	5/31/2017		850	850	S/L	3	24	-	850		-
McKesson Medical	wheelchair scale	6/30/2017		2,909	2,909	S/L	10	24	291	1,455		1,454
Arjo	new scale	7/31/2017		1,016	1,016	S/L	10	8	102	510		506
Life Systems, Inc	3 rosebud vital sign caarts	7/31/2017		4,038	4,038	S/L	10	34	404	2,020		2,018
Dept of Revenue	use tax on Life systems purchase (above)	7/31/2017		256	256	S/L	10	2	26	130		126
Cisco wireless access point (cap		8/31/2017		12,906	12,906	S/L	5	215	2,581	12,905		1
Arjo	replacement of the scale portion	8/31/2017		1,532	1,532	S/L	10	13	153	765		767
Raintech	jeron pro alert 640 system	9/30/2017		4,075	4,075	S/L	10	34	408	2,040		2,035
TM Technology	HP Probook	9/30/2017		723	723	S/L	3	20	-	723		-
	2017 Balance	Totals	\$	1,036,986	\$ 1,037,614				\$ 8,724 \$	420,258	\$	61,691
2018 Additions:												
TM Technology	rehab- notebook; 3 nursing touchscreens	10/31/2017		5,599	5,599	S/L	3	156	1	5,599		_
TM Technology	2 hp notebooks- pam & sheila	11/30/2017		1,813	1,813	S/L	3	50	1	1,813		_
Medline Industries	Trainer, sit to stand, Neurogym	12/31/2017		5,371	5,371	S/L	5	90	1,074	4,296		1,075
Perkins	Epoxy Coated Steel Hose Reel	12/31/2017		967	967	S/L	7	12	138	552		415
Sysco Connecticut	spectrum electric conveyor toaster	2/28/2018		572	572	S/L	10	5	57	228		344
WB Mason	new furniture for HR	3/31/2018		1,429	1,429	S/L	10	12	143	572		857
Lowes	new freezer	7/31/2018		625	625	S/L	5	10	125	500		125
2018 Disposals: Disposal of Assets From Prior F	Variana	Various	\$	(555,666)	\$ (555,666)	S/L	Var					
Disposal of Assets From From From	various	various	Ф	(555,000)	\$ (555,000)	5/L	var					
	2018 Balance	Totals	\$	497,696	\$ 498,324				\$ 10,263 \$	433,818	\$	64,507
2010 (18)												
2019 Additions:	- special bed	10/31/2018		3,627	3,627	S/L	12	\$ 25	302	906		2,721
	intel nuc 7I5BNK mini pc for nursing supervisor's office	10/31/2018		904	5,027 904	S/L S/L	5	s 25 15	181	543		361
	user refurbished nuc mini pc for south wing nursing station	10/31/2018		978	904	S/L S/L	5	15	196	588		390
	maxi 500 2H SP Bar & Scale	12/31/2018		3,097	3,097	S/L S/L	5	52	619	1,857		1,240
	hardware, software, setup, & installation	12/31/2018		2,556	2,556	S/L S/L	5	43	511	1,533		1,023
	hardware, software, setup, & installation	12/31/2018		2,815	2,815	S/L	5	47	563	1,689		1,126
	ELO 17" all in one touch (backup touchscreens for cnas)	2/28/2019		3,171	3,171	S/L	5	53	634	1,902		1,120
	air curtain refrigerator, dinex model #DXIRAC12LS	3/31/2019		4,707	4,707	S/L	10	39	471	1,413		3,294
	10 chairs, 4 tables for professional development (Marla)	4/30/2019		3,372	3,372	S/L	10	28	337	1,011		2,361
	NUC computers #741, 742 admissons/A/P	7/31/2019		2,122	2,122	S/L	5	35	424	1,272		850
	dinex air curtain refrigerators	9/30/2019		3,767	3,767	S/L	10	31	377	1,131		2,636
	TM nuc 3748-Liz social services, TM nuc #749- south wing	9/30/2019		3,339	3,339	S/L	5	56	668	2,004		1,335
	······································			-,	-,		-		-	_,		-
	Vacuum	1/31/2005		(624)	(624)			-	-	(624)		-
	Call Cord	1/31/2005		(1,945)	(1,945)			-	-	(1,945)		-
	Computer	3/31/2005		(525)	(525)			-	-	(525)		-
	Food Warmer	4/30/2005		(4,056)	(4,056)			-	-	(4,056)		-
	Area Rug	6/30/2005		(1,973)	(1,973)			-	-	(1,973)		-
	Chart Racks	11/30/2005		(3,168)	(3,168)			-	-	(3,168)		-
	Rehab equipment	10/31/2006		(3,129)	(3,129)			-	-	(3,129)		-
	Termal Base to Plate/Tray for patient meals	11/30/2006		(1,475)	(1,475)			-	-	(1,475)		-
	Secretary/base; server (furniture for lobby)	1/31/2007		(912)	(912)			-	-	(912)		-
	3 Round tables	6/30/2007		(1,103)	(1,103)			-	-	(1,103)		-
	12 Arm chairs	6/30/2007		(2,424)	(2,424)			-	-	(2,424)		-
	27 LCD TV	11/29/2007		(8,589)	(8,589)			-	-	(8,589)		-
	Rotary Toaster	1/10/2008		(1,032)	(1,032)			-	-	(1,032)		-
	Bookcase & console	1/31/2008		(1,107)	(1,107)			-	-	(594)		(513)
	2 LCD TV	2/6/2008		(3,173)	(3,173)			-	-	(3,173)		-
	Smart Them Base 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)			-	-	(647)		-

		DATE	HISTORICAL	BASIS		USEFUL			Ν	IET
Vendor	Description	OF	COST	FOR	DEPR.	LIFE MONTHI	Y Deprecia	tion		/ALUE
		ACQUISITION		DEPRECIATION	METHOD	(YEARS) DEPREC	30-Sep-	21	30-Sep-21	
	3 Refrigerators for Rehab	7/15/2009	(676)	(676)		-		-	(676)	-
	6 Overbed Tables	10/30/2009	(667)	(667)		-		-	(667)	-
	42" LCD HDTV	12/11/2009	(848)	(848)		-		-	(848)	-
	2 HP 2035n Printers	3/14/2010	(732)	(732)		-		-	(732)	-
	6 Overbed Tables	4/9/2010	(665)	(665)		-		-	(665)	-
	6 Overbed Tables	5/14/2010	(665)	(665)		-		-	(665)	-
	6 Overbed Tables	6/17/2010	(658)	(658)		-		-	(658)	-
	Vital Signs Monitor (South Wing)	11/9/2010	(1,604)	(1,604)		-		-	(1,604)	-
	47" TV for PUB	4/12/2011	(954)	(954)		-		-	(954)	-
	HP 4530 Laptop for Dietician	1/31/2012	(1,059)	(1,059)		-		-	(1,059)	-
	Desktop for Medical Records	3/31/2012	(1,579)	(1,579)		-		-	(1,579)	-
	Desktop - Administrator	5/16/2012	(798)	(798)		-		-	(798)	-
	Epson GTS80 Scanner - Med Records	5/16/2012	(956)	(956)		-		-	(956)	-
	Desktop for A Wing #524	6/30/2012	(803)	(803)		-		-	(803)	-
	6 Overbed Tables	10/1/2012	(626)	(626)		-		-	(626)	-
	Blood Pressure Unit & Oximeter	4/5/2013	(1,371)	(1,371)		-		-	(1,371)	-
	TM Desktop Machines #563 and 564	7/13/2013	(1,284)	(1,284)		-		-	(1,284)	-
	Inwin Mini Desktop	7/13/2013	(1,957)	(1,957)		-		-	(1,957)	-
	4 Grey Task Chairs - South Unit	7/19/2013	(583)	(583)		-		-	(349)	(234)
	Computer Nursing Supervisor	8/31/2013	(1,637)	(1,637)		-		-	(1,637)	-
	Microsoft Office 2013	7/31/2014	(3,191)	(3,191)		-		-	(3,191)	-
	DNS Laptop	8/31/2014	(744)	(744)		-		-	(744)	-
	2019 Balance	Totals	\$ 466,248	\$ 466,876			\$ 1	15,546 \$	384,511	\$ 82,366
	,			,						
2020 Additions:		10/21/2010	5 205	5 205	0/1		0	7.50	1.616	2 700
	panacea wall defender	10/31/2019	5,305	5,305	S/L	7 75		758	1,516	3,789
	new furninture for adns	10/31/2019	1,226	1,226	S/L	10 12		123	246	980
	new furniture for adns	10/31/2019	1,006	1,006	S/L	10 10		101	202	804
	intel nuc- lisa barie recreation	10/31/2019	2,138 1,649	2,138	S/L S/L	5 42 5 33		428 330	856 660	1,282 989
	elo touch- replacement for cnas in hallway	10/31/2019	· · ·	1,649						
	new hp probook 450 g6 15 gb (carole roberge mds coordinator)	12/31/2019	1,514	1,514	S/L	5 30 5 38		303	606 770	908
	intel nuc for k wood in finance	1/31/2020	1,923	1,923	S/L			385		1,153
	computer NUC #776 HR dept for Lauire Caine	7/31/2020	2,587	2,587	S/L	5 51		517	1,034	1,553
	network upgrade	9/30/2020	6,817	6,817	S/L	10 68	2	682	1,364	5,453
		11/20/2004	(2.29())	(2.280)				-	-	-
	Electric Lift	11/30/2004	(3,286)	(3,286)		-		-	(3,286)	-
	Motor	12/31/2004	(1,207)	(1,207)		-		-	(1,207)	-
	Windows Exhaust fan dish machine	11/30/2005	(970)	(970) (2,724)		-		-	(970)	-
		1/31/2006	(2,724)			-		-	(2,724)	-
	Casters for lifts	6/30/2006	(730)	(730)		-		-	(730)	-
	Plate heater for kitchen Scale/lift	9/30/2006	(3,409)	(3,409)		-		-	(3,409)	-
		1/31/2007	(4,872)	(4,872)		-		-	(4,872)	-
	Northington Room Curtains	10/22/2007	(823)	(823)		-		-	(823)	-
	Digital Card System	6/19/2008	(1,655)	(1,655)		-		-	(1,655)	-
	1 Gallon Blender	12/31/2008	(1,145)	(1,145)		-		-	(1,145)	-
	Server Wiring	6/1/2009	(1,458)	(1,458)		-		-	(1,458)	-
	Network Wiring	9/15/2009	(3,751)	(3,751)		-		-	(3,751)	-
	36 Insulated Bases	3/2/2010	(2,210)	(2,210)		-		-	(2,210)	-
	Bed Protectors	5/16/2011	(2,980)	(2,980)		-		-	(2,980)	-
	Laptop - Dietician	5/16/2012	(835)	(835)		-		-	(835)	-
	Fax	3/10/2013	(532)	(532)		-		-	(532)	-
	Dietary Desktop Computer	3/10/2013	(1,664)	(1,664)		-		-	(1,664)	-
	Printer Nursing Super & Staff Dev	7/31/2013	(956)	(956)		-		-	(956)	-
	Laptop for B Wing	10/31/2013	(850)	(850)		-		-	(850)	-
	HP ProBook and Replicator- maintenance	2/28/2014	(1,070)	(1,070)		-		-	(1,070)	-
	HP ProBook Spare 1- spare	3/31/2014	(914)	(914)		-		-	(914)	-
	AP Bookkeeper PC- carol byus	4/30/2014	(1,073)	(1,073)		-		-	(1,073)	-
	QuickBooks Server	4/30/2014	(1,282)	(1,282)		-		-	(1,282)	-
	Computer Medical Records	5/31/2014	(851)	(851)		-		-	(851)	-

		DATE	HISTO	ORICAL	BASIS		USEFUL			NE	Т
Vendor	Description	OF	CC	OST	FOR	DEPR.		MONTHLY	Depreciation		LUE
		ACQUISITION				METHOD	(YEARS)	DEPREC	30-Sep-21	30-Sep-21	
	2 Color Printers and Windows 8.1	6/30/2014		(1,216)	(1,216)			-	-	(1,216)	-
	Dietary Desktop Computer	8/31/2014		(1,010)	(1,010)			-	-	(1,010)	-
	Admissions Desktop Computer	8/31/2014		(1,206)	(1,206)			-	-	(1,206)	-
	North Wing Printer & Windows 7	9/30/2014		(804)	(804)			-	-	(804)	-
	2 HP LaserJet Pro Printers	12/31/2014		(596)	(596)			-	-	(596)	-
	Cisco Router with 3 Yr Ent License	12/31/2014		(2,953)	(2,953)			-	-	(2,953)	-
	*	4/30/2015		(1,442)	(1,442)			-	-	(1,442)	-
	Notebook and Printer- nursing office	4/30/2015		(860)	(860)			-	-	(860)	-
	HP Pro Book / HP Retail Desktop laptop- joy, desktop- rec videos	11/30/2015		(1,121)	(1,121)			-	-	(1,121)	-
	17" Touch Computer	7/31/2016		(3,607)	(3,607)			-	-	(3,607)	-
	2020 Balance	Totals	\$	434,354 \$	434,982			\$ 3,627 \$	19,173 \$	335,705 \$	99,277
2021 Additions:											
TM Technology	cisco 3 year licenses	10/31/2020		5,254	5,254	S/L	3	146	1,751	1,751	3,503
Medline Industries	veritor test system- helps reduce false positive results	12/31/2020		1,902	1,902	S/L S/L	3	53	634	634	1,268
Medline Industries	veritor test system- helps reduce false positive results	12/31/2020		1,902	1,902	S/L S/L	3	53	634	634	1,268
TM Technology	housekeeping computer+ lan=bor to install meraki mr30h access points	12/31/2020		4,642	4,642	S/L S/L	3	129	1.547	1,547	3,095
TM Technology	cisco 3 year license + meraki access point	12/31/2020		5,267	5,267	S/L S/L	3	146	1,756	1,756	3,511
United Ag & Turf N.E.	2020 Arines ST28DLE snowblower	1/31/2020		2,445	2,445	S/L	5	41	489	489	1,956
Graham-Fields Healthcare	2 bariatric beds	1/31/2021		3,535	3,535	S/L S/L	5	59	707	707	2,828
oxford caster corp	100 medcaster	5/31/201		1,787	1,787	S/L	5	30	357	357	1,430
TM Technology	3 hp probooks for grace blasiak, aida guzman, iwona chute. Hardware & installation	6/30/2021		4,259	4,259	S/L	5	71	852	852	3,407
Advanced Entry	desktop face recognitiontemperature scanning kiosks and printers (1 for upstairs, 1 downstairs)	9/30/2021		2,661	2,661	S/L	5	44	532	532	2,129
Boston Showcase	Reach in refrigerator	4/30/2007		(1,418)	(1,418)	S/L	5		-	(1,418)	2,12)
TM Technology	3 Desktops, Printer and Dual Monitors- desktops- training, printer- soc. Services	12/31/2014		(1,956)	(1,956)	S/L		_		(1,956)	_
TM Technology	New Server	9/30/2015		(10,651)	(10,651)	S/L		_		(10,651)	_
TM Technology	2 HP ProBooks Spares	7/31/2016		(1,117)	(1,117)	S/L		_	-	(1,117)	_
TM Technology	new computer for reception, new computer for hr	12/31/2016		(1,813)	(1,813)	S/L		_		(1,813)	_
TM Technology	user refurbished nuc mini pc for south wing nursing station	10/31/2018		(978)	(978)	S/L		_		(978)	_
The recimology	Various	1/1/2020		(1,492)	(1,492)	S/L		-	-	(1,492)	-
	2021 Balance	Totals	\$	448,584 \$	449,212			\$ 4,399 \$	28,432 \$	325,539 \$	123,672
				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				. ,	, i	,	
		Per TB			500,849				30,575	257,184	243,665
		Difference		\$	(51,637)			\$	(2,143) \$	68,355 \$	(119,993)

Related Party Assets

Related Party Assets

	Related Farty Assets									
		Date								
Asset		Acquired	Cost					Depreciation	Accum Depr	NET
No.	Asset Description					Method	Life	9/30/2021	9/30/2021	VALUE
Movable Equipment										
25	56 Electric Beds	9-	Feb-09 \$	73,141 \$	73,141	S/L	12	2,085	73,141	-
17	56 Electric Beds	9-1	Mar-09	70,348	70,348	S/L	12	2,487	70,348	-
16	120 Chairs, Cabinets & Dressers	12-N	May-09	166,979	166,979	S/L	15	11,132	138,087	28,892
	21 Arm Chairs	3-	Jun-10	6,247	6,247	S/L	15	416	5,133	1,114
	7 Round Table	4	Apr-10	2,041	2,041	S/L	15	136	1,700	341
	2 Ice Makers	14	-Jul-10	5,583	5,583	S/L	10	-	5,583	-
	Steam Cooker	14-1	Dec-10	5,607	5,607	S/L	10	140	5,607	-
	2 Watt Sconces For Lobby	27-	Jun-11	204	204	S/L	10	16	204	-
	8 Doz Warming Trays	24-	Jun-11	1,583	1,583	S/L	10	112	1,584	-
	Plate Warming System	4-N	May-11	12,934	12,934	S/L	10	761	12,935	-
	Lobby Chandelairs	20-	Apr-11	937	937	S/L	10	47	937	-
	Security Camera	28-1	Mar-11	9,467	9,467	S/L	5	-	9,467	-
	Lobby & Admin Office Furniture	8	-Jul-11	13,616	13,616	S/L	15	908	9,297	4,319
	4 Tilt Tables for Pub		May-11	2,444	2,444	S/L	15	163	1,696	

Description ter Equipment for EMar ouch screen computers ter Equipment EMAR/ETAR ng Room Tables for lower ds/61 Valances ent Stepper Machine linds for dining room windows locks & time & attendance o Sara 3000 patient fit inds for A & B Wing Lounge	OF ACQUISITION 3-Aug-11 12-Sep-12 1-Oct-11 5-Apr-12 23-Aug-13 20-Jun-13 14-Jul-14 2-Apr-14	COST 22,251 12,560 23,835 7,256 14,615 4,694 772 17,022	FOR DEPRECIATION 22,251 12,560 23,835 7,256 14,615 4,694 772	S/L S/L S/L S/L S/L S/L	LIFE MONTHL (YEARS) DEPREC 5 5 5 15 5 10	1	30-Sep-21 22,251 12,560 23,835 4,595 14,615	- - - 2,661 -
touch screen computers ter Equipment EMAR/ETAR ng Room Tables for lower Is/61 Valances went Stepper Machine linds for dining room windows locks & time & time & attendance o Sara 3000 patient fit	3-Aug-11 12-Sep-12 1-Oct-11 5-Apr-12 23-Aug-13 20-Jun-13 14-Jul-14 2-Apr-14	12,560 23,835 7,256 14,615 4,694 772	22,251 12,560 23,835 7,256 14,615 4,694	S/L S/L S/L S/L S/L S/L	5 5 5 15 5	- - - 484 -	22,251 12,560 23,835 4,595 14,615	2,661
touch screen computers ter Equipment EMAR/ETAR ng Room Tables for lower Is/61 Valances went Stepper Machine linds for dining room windows locks & time & time & attendance o Sara 3000 patient fit	12-Sep-12 1-Oct-11 5-Apr-12 23-Aug-13 20-Jun-13 14-Jul-14 2-Apr-14	12,560 23,835 7,256 14,615 4,694 772	12,560 23,835 7,256 14,615 4,694	S/L S/L S/L S/L S/L	5	- 484 -	12,560 23,835 4,595 14,615	2,661
ter Equipment EMAR/ETAR ng Room Tables for lower Js/61 Valances bent Stepper Machine linds for dining room windows locks & time & time & attendance o Sara 3000 patient fit	1-Oct-11 5-Apr-12 23-Aug-13 20-Jun-13 14-Jul-14 2-Apr-14	23,835 7,256 14,615 4,694 772	23,835 7,256 14,615 4,694	S/L S/L S/L S/L	5	- 484 -	23,835 4,595 14,615	2,661
ng Room Tables for lower ds/61 Valances sent Stepper Machine linds for dining room windows locks & time & time & attendance o Sara 3000 patient fit	5-Apr-12 23-Aug-13 20-Jun-13 14-Jul-14 2-Apr-14	7,256 14,615 4,694 772	7,256 14,615 4,694	S/L S/L S/L	5	484	4,595 14,615	2,661
s/61 Valances bent Stepper Machine linds for dining room windows locks & time & time & attendance o Sara 3000 patient fit	23-Aug-13 20-Jun-13 14-Jul-14 2-Apr-14	14,615 4,694 772	14,615 4,694	S/L S/L	5	-	14,615	,
ent Stepper Machine linds for dining room windows docks & time & time & attendance o Sara 3000 patient fit	20-Jun-13 14-Jul-14 2-Apr-14	4,694 772	4,694	S/L				-
linds for dining room windows Jocks & time & time & attendance o Sara 3000 patient fit	14-Jul-14 2-Apr-14	772	· · · · ·		10	460		
locks & time & time & attendance o Sara 3000 patient fit	2-Apr-14		772			409	4,223	471
o Sara 3000 patient fit		17.022		S/L	10	77	546	227
	10.14 14	17,022	17,022	S/L	10	1,702	12,056	4,966
inds for A & B Wing I ounge	19-Mar-14	2,745	2,745	S/L	10	274	1,942	803
inds for A & B wing Lounge	8-Dec-14	459	459	S/L	10	46	322	137
tures for dining room & lo	24-Nov-14	940	940	S/L	15	63	441	499
each-in refrigerator to re	14-Apr-15	5,621	5,621	S/L	10	562	3,934	1,687
ster 24 dining room chair	31-Mar-15	16,793	16,793	S/L	10	1,679	11,753	5,040
t for connector hall/sofa	10-Mar-15	2,392	2,392	S/L	12	199	1,393	999
s Security Camera RearL	27-Feb-15	2,918	2,918	S/L	5	-	2,918	-
work resident corridors	27-Feb-15	8,418	8,418	S/L	10	842	5,894	2,524
Valence North Day Rm	5-Jan-15	1,075	1,075	S/L	10	108	756	320
Scrup floor finish machine	30-Jun-15	3,717	3,717	S/L	5	-	3,717	-
es	1-Jun-15	615	615	S/L	10	62	434	182
l of 3 Elo Touch Screen Computers	12-Sep-12	(3,768)	(3,768)			-	(3,768)	-
ouch screen computers - DISPOSAL	12-Sep-12	(8,792)	(8,792)			-	(8,792)	-
ter Equipment for Emar - DISPOSAL	3-Aug-11	(22,251)	(22,251)			-	(22,251)	-
ter Equipment for EMAR/ETAR - DISPOSAL	1-Oct-11	(23,835)	(23,835)			-	(23,835)	-
jo Sara 3000 patient fit	19-Mar-14	(2,745)	(2,745)	S/L	10	(2,745)	(2,745)	-
	-	\$ 458,437	\$ 458,437			\$ 22,225	\$ 402,509	\$ 55,930
		-	\$ 907.649			\$ 50,657	\$ 728.048	\$ 179,602
	crup floor finish machine es l of 3 Elo Touch Screen Computers uch screen computers - DISPOSAL er Equipment for Emar - DISPOSAL er Equipment for EMAR/ETAR - DISPOSAL	crup floor finish machine 30-Jun-15 es 1-Jun-15 l of 3 Elo Touch Screen Computers 12-Sep-12 uch screen computers - DISPOSAL 12-Sep-12 er Equipment for Emar - DISPOSAL 3-Aug-11 er Equipment for EMAR/ETAR - DISPOSAL 1-Oct-11	crup floor finish machine 30-Jun-15 3,717 cs 1-Jun-15 615 l of 3 Elo Touch Screen Computers 12-Sep-12 (3,768) uch screen computers - DISPOSAL 12-Sep-12 (8,792) er Equipment for Emar - DISPOSAL 3-Aug-11 (22,251) er Equipment for EMAR/ETAR - DISPOSAL 1-Oct-11 (23,835) jo Sara 3000 patient fit 19-Mar-14 (2,745)	crup floor finish machine 30-Jun-15 3,717 3,717 es 1-Jun-15 615 615 l of 3 Elo Touch Screen Computers 12-Sep-12 (3,768) (3,768) uch screen computers - DISPOSAL 12-Sep-12 (8,792) (8,792) er Equipment for Emar - DISPOSAL 3-Aug-11 (22,251) (22,251) er Equipment for EMAR/ETAR - DISPOSAL 1-Oct-11 (23,835) (23,835) jo Sara 3000 patient fit 19-Mar-14 (2,745) (2,745)	crup floor finish machine 30-Jun-15 3,717 3,717 S/L es 1-Jun-15 615 615 S/L l of 3 Elo Touch Screen Computers 12-Sep-12 (3,768) (3,768) uch screen computers - DISPOSAL 12-Sep-12 (8,792) (8,792) er Equipment for Emar - DISPOSAL 3-Aug-11 (22,251) (22,251) er Equipment for EMAR/ETAR - DISPOSAL 1-Oct-11 (23,835) (23,835) jo Sara 3000 patient fit 19-Mar-14 (2,745) S/L	crup floor finish machine 30-Jun-15 3,717 3,717 S/L 5 es 1-Jun-15 615 615 S/L 10 l of 3 Elo Touch Screen Computers 12-Sep-12 (3,768) (3,768) uch screen computers - DISPOSAL 12-Sep-12 (8,792) (8,792) er Equipment for EMAR/ETAR - DISPOSAL 3-Aug-11 (22,251) (22,251) of a 3000 patient fit 19-Mar-14 (2,745) S/L 10	crup floor finish machine 30-Jun-15 3,717 3,717 S/L 5 - es 1-Jun-15 615 615 S/L 10 62 l of 3 Elo Touch Screen Computers 12-Sep-12 (3,768) - - - uch screen computers - DISPOSAL 12-Sep-12 (8,792) (8,792) - - er Equipment for Emar - DISPOSAL 12-Sep-11 (22,251) (22,251) - - er Equipment for EMAR/ETAR - DISPOSAL 1-Oct-11 (23,835) (23,835) - - jo Sara 3000 patient fit 19-Mar-14 (2,745) S/L 10 (2,745)	crup floor finish machine 30-Jun-15 3,717 3,717 S/L 5 - 3,717 es 1-Jun-15 615 615 S/L 10 62 434 1 of 3 Elo Touch Screen Computers 12-Sep-12 (3,768) (3,768) - (3,768) uch screen computers - DISPOSAL 12-Sep-12 (8,792) (8,792) - (8,792) er Equipment for Emar - DISPOSAL 3-Aug-11 (22,251) (22,251) - (22,251) er Equipment for EMAR/ETAR - DISPOSAL 1-Oct-11 (23,835) (23,835) - (23,835) jo Sara 3000 patient fit 19-Mar-14 (2,745) S/L 10 (2,745) (2,745)

Vendor		Description	DATE OF ACQUISITION	HISTORICAL COST		BASIS FOR RECIATION	USEF DEPR. LIF METHOD (YEA	E MONTHLY	Depreciation 30-Sep-21	Accum. 30-Sep-21	NET VALUE <u>V</u> a	riance
	Buildings Additions				\$	7,495			375	2,62	5	4,870
	Disposals		Total		\$	7,495			\$ 375 \$	2,62	5 \$	4,870
	Movable Equipment Additions Disposals Related Party Movable Equipment Related Party Additions / Disposals Prior Year C/R Variance				S	415,557 33,655 (19,425) 461,182 (2,745)			\$ 19,173 \$ 9,259 (19,425) 24,970 (2,745)	316,28 9,25 (19,42 405,25 (2,74	9 5) 4 5)	99,277 24,396 - 55,928 -
			Total		\$	888,224			\$ 31,232 \$	708,62		179,601
	Leasehold Improvements Additions Disposals				\$	2,429,121 36,715			127,354 4,512	1,934,31 4,51		494,804 32,203
	Related Party Leasehold improvements Related Party Additions Prior Year C/R Variance					1,446,681 113,903			62,851 10,305	961,13 10,30		485,546 103,598 -
			Total		\$	4,026,421			\$ 205,022 \$	2,910,27	0 \$	1,116,151
	Per Trial Balance Per Cost Report Depreciation Related Party				\$	2,985,151 4,922,140 2,019,022			\$ 145,080 \$ 236,629 95,381	2,298,86 3,621,51 1,373,95	8	686,282 1,300,622 645,072
	F/S vs C/R Variance Rounding Variance					82,033			3,832	51,30	1	30,732
									3,832			30,732
	F/S vs C/R NBV - Page 31, Line 9B F/S vs C/R Dep Page 36, Line F1 Reserve for Dep Page 35, Line A3		30,732 3,832 645,072									

Amortization Schedule*

Nam	e of Facility			License No.		Report for Yea	r Ended		Page	of
Avor	Convalescent Home, Inc., d/b/a Avon H	ealth Ce	enter	938	-C	9/30/2021			24	37
						Accumulated				
		Dat	e of			Amort. to				
		Acqui	isition			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.									
A-4.	Subtotal									
B.	Mortgage Expense									
	1.									
	2.									
	3.									
B-4.	Subtotal									
C.	Leasehold Improvements and Other									
	1. Acquired prior to this report period	Var	Var	Various	3,875,803	2,705,247	S/L	Variou	127,354	
	2. Disposals (attach schedule)									
	3. Acquired during this report period									
	(attach schedule)	Var	Var	Various	36,715		S/L	Variou	4,512	
C-4.	Subtotal									131,866
D.	Total Amortization								131,866	

* Straight-line method must be used.

** Specify which of the following bases were used:

A. Minimum of 5 years or 60 months.

B. Life of mortgage; OR

C. Remaining Life of Lease; OR

D. Actual Life if owned by Related Party.

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

-	License No.	Report for Year En	ded		Page of
Avon Convalescent Home, Inc., d/b/a	938-C	9/30/2021			25 37
11. Property Questionnaire					
Part A					
Is the property either owned by the	Facility	Yes	0	NO	If "Yes," complete Part B.
or leased from a Related Party?*					If "No," complete Part C.
*If any owner or operator of this facil					
business association to any person or related party transaction.	organization from whom	buildings are leased, the	n it is considered a		
Description		Total			
1. Date Land Purchased		1000			
2. Date Structure Completed					
3. If NOT Original Owner, Date	of Purchase				
4. Date of Initial Licensure					
5. Total Licensed Bed Capacity		120			
6. Square Footage					
7. Acquisition Cost					
a. Land					
b. Building				_	_
Part B - Owner and Related Part	ties	1st Mortgage	2nd Mortgage	3rd Mortgage	4th Mortgage
1. Financing					
a. Type of Financing (e.g., fix	ed, variable)	Fixed			
b. Date Mortgage Obtained		08/26/13			
c. Interest Rate for the Cost Y		3.78%			
d. Term of Mortgage (number		30			
e. Amount of Principal Borro		3,903,200			
f. Principal balance outstandi	-	3,281,414			
Complete if Mortgage was R					
During Current Cost Yea					
g. Type of Financing (e.g., fix	ed, variable)				
h. Date of Refinancing i. New Interest Rate					
j. Term of Mortgage (number	of years)				
k. Amount of Principal Borro					
1. Principal Outstanding on N					
Part C - Arms-Length Leases			J	L	
Name and Address of Lessor		perty Leased		Term of Lease	Annual Amount of Lease
	110	perty Leased	Dute of Lease		

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

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

Name of Facility License No.		Report for Ye	ear Ended		Page of	
Avon Convalescent Home, Inc., d/b/a 938-C		9/30/2021			26 37	
Item		Total	CCNH	RHNS	(Specify)	
12. Interest					•	
A. Building, Land Improvement & Non-Movab	le					
Equipment	¢					
1. First Mortgage Name of Lender	Rate					
	Kate					
Address of Lender						
2. Second Mortgage						
Name of Lender	Rate					
	Rute					
Address of Lender	-					
3. Third Mortgage						
Name of Lender	Rate					
Address of Lender						
4. Fourth Mortgage	\$					
Name of Lender	Rate					
Address of Lender						
B. CHEFA Loan Information						
1. Original Loan Amount	\$		_			
2. Loan Origination Date			_			
3. Interest Rate %						
4. Term						
5. CHEFA Interest Expense						
12 B7. Total Building Interest Expense (A1 - A4 + B5)) \$					

(Carry Subtotals forward to next page)

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

Name of FacilityLicense IAvon Convalescent Home, Inc., d/b93	No. 8-C		Report for Ye 9/30/2021		Page of 27 37	
Item			Total	CCNH	RHNS	(Specify)
	ototals Bro	ught Forward:				
12. C. Movable Equipment		0				
1. Automotive Equipment		\$				
A. Item	Rate	Amount				
Lender	<u> </u>		•			
Address of Lender						
2. Other (<i>Specify</i>)		\$				
A. Item	Rate	Amount				
A. Item	Rate	Allount				
Lender	ļ	<u> </u>				
Address of Lender						
	-					
B. Item	Rate	Amount				
Lender						
Address of Lender						
12. C. 3. Total Movable Equipment Inter-	est					
Expense $(C1 + 2)$		\$				
12. D. Other Interest Expense (Specify)		\$				
13. Total All Interest Expense (12B7 + 120	$(23 \pm 12D)$	\$				
14. Insurance)	······				
a. Insurance on Property (buildings or	nly)	\$	79,627	79,627		
b. Insurance on Automobiles	y /	\$	· · · ·			
c. Insurance other than Property (as s	pecified ab					
1. Umbrella (Blanket Coverage)						
2. Fire and Extended Coverage		\$ \$				
3. Other (Specify)						
14d. Total Insurance Expenditures (14a + b	(+c)	\$	79,627	79,627		
15. Total All Expenditures (A-13 thru C-14		\$	12,361,590	12,361,590		

D. Adjustments to Statement of Expenditures

Name	e of Fa	acility		Lic	ense No.	Report for Yea	r Ended	Page	of
Avon	Conv	alesce	ent Home, Inc., d/b/a Avon Health Center		938-C	9/30/2021		28	37
					Total				
Item	Page	Line			Amount of				
No.	No.		Item Description		Decrease	CCNH	RHNS	(Spe	cify)
Page	10 - S	Salarie	es and Wages						• /
1.			Outpatient Service Costs	\$					
2.			Salaries not related to Resident Care	\$					
3.			Occupational Therapy	\$					
4.			Other - See attached Schedule	\$					
Page	13 - F	Profes	sional Fees						
5.		Ľ.	Resident Care Physicians **	\$					
6.	13	B10a	Occupational Therapy	\$	304,809	304,809			
7.			Other - See attached Schedule	\$	1,100	1,100			
Page	s 15 &	. 16 -	Administrative and General						
8.			Discriminatory Benefits	\$					
9.	15	1c	Bad Debts	\$	95,000	95,000			
10.			Accounting	\$					
10a.			Legal	\$	21,817	21,817			
11.			Telephone	\$					
12.			Cellular Telephone	\$					
13.			Life insurance premiums on the life						
			of Owners, Partners, Operators	\$					
14.	16	L3	Gifts, flowers and coffee shops	\$	707	707			
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						
			travel in excess of one representative	\$	2,483	2,483			
17.			Automobile Expense (e.g. personal use)	\$					
18.	16		Unallowable Advertising *	\$	17,847	17,847			
19.	15	k1	Income Tax / Corporate Business Tax	\$	4,704	4,704			
20.	16	m10	Fund Raising / Contributions	\$	1,475	1,475			
21.			Unallowable Management Fees	\$					
22.			Barber and Beauty	\$					
23.			Other - See attached Schedule	\$	30,329	30,329			
Page	18 - L	Dietar	y Expenditures						
24.			Meals to employees, guests and others						
			who are not residents	\$					
-	19 - L	aund	ry Expenditures						
25.			Laundry services to employees, guests						
			and others who are not residents	\$					
Page	20 - I	Iouse	keeping Expenditures						
26.			Housekeeping services to employees, guests						
			and others who are not residents	\$					
			Subtotal (Items 1 - 26) \$	480,271	480,271			

* All except "Help Wanted".

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

⁽Carry Subtotal forward to next page)

Schedule of Other Salaries Adjustment

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Total Othe	r Salaries A	Adjustment	\$-	\$ -	\$ -
		•			

Schedule of Fees Adjustments

Page Ref	Line Ref	Description	CC	CNH	RHNS	(Specify)
13	120	Consult Psychiatrist	\$	1,100			
Total Othe	Fotal Other Fees Adjustments				\$ -	\$	-

Schedule of Other A&G Adjustments

Page Ref	Line Ref	Description	0	CNH	RHNS	(Specify)
16	m8a	Chamber of Commerce Dues	\$	140		
15	1a9	Tuition Expense	\$	5,795		
16	m13	Employee Gifts and Food	\$	24,394		
Total Othe	otal Other A&G Adjustments				\$-	\$ -

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			D. Adjustments to Stateme	nt	of Expend	litures (co	nt'd)		
Name	e of Fa	acility		Lic	cense No.	Report for Y	ear Ended	Page	of
Avon	Conv	alesco	ent Home, Inc., d/b/a Avon Health Center		938-C	9/30/2021		29	37
					Total				
Item	Page	Line			Amount of				
No.	No.	No.	Item Description		Decrease	CCNH	RHNS	(Spe	cify)
			Subtotals Brought Forward	\$	480,271	480,271			
Page	20 - 1	Reside	ent Care Supplies***						
27.	20	5a2	Prescription Drugs	\$	248,521	248,521			
28.	20	5d	Ambulance/Limousine	\$	820	820			
29.	20	5f	X-rays, etc	\$	4,976	4,976			
30.	20	5h	Laboratory	\$	33,454	33,454			
31.			Medical Supplies	\$					
32.	20	5e2	Oxygen (non emergency)	\$	14,488	14,488			
33.			Occupational Therapy	\$, , , , , , , , , , , , , , , , , , ,			
34.			Other - See Attached Schedule	\$	31,639	31,639			
Page	22 - I	Maint	enance and Property						
35.			Excess Movable Equipment Depreciation						
			See Attached Schedule	\$	-				
36.			Depreciation on Unallowable						
			Motor Vehicles	\$					
37.			Unallowable Property and Real						
			Estate Taxes	\$					
38.			Rental of Building Space or Rooms	\$					
39.			Other - See Attached Schedule	\$					
Page	27 - 1	nsura							
40.			Mortgage Insurance	\$					
41.			Property Insurance	\$					
Othe	r - Mi	scella	neous						
42.			Other - Indirect	\$	6,000	6,000			
43.			Interest Income on Account Rec.	\$, í	, i i i i i i i i i i i i i i i i i i i			
44.			Other - Miscellaneous Administrative	\$					
45.			Management Fees Direct	\$					
46.			Management Fees Indirect	\$					
47.			Other - Direct	\$				1	
Not 1	For Pr	ofit P	roviders Only						
48.		5	Building/Non Movable Eq. Depreciation						
			Unallowable Building Interest -						
			See Attached Schedule	\$					
49.	Total	Amo	unt of Decrease (Items 1 - 48)	\$	820,169	820,169			

Stateme f F---- --- d:4------ (- --- 41 d)

*** 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	C	CNH	RHNS	(Specify)
20	5i	Cable TV Disallowance (See Attached)	\$	4,662		
20 5	51	Therapy Equipment Rental (See Attached)	\$	7,342		
20	51	IV Therapy Supplies	\$	10,140		
20	51	Supplies - Patient Personal	\$	737		
20 5	51	Nursing Equipment Med A	\$	5,887		
20 5	51	Nursing Equipment Rental (Disallowed)	\$	2,871		
Total Other	Ancillary	Costs	\$	31,639	\$-	\$ -

Schedule of Excess Movable Equipment Depreciation

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

Schedule of Other Property Adjustments

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

Schedule of Other - Indirect Adjustments

Page Ref	Line Ref	Description	С	CNH	RHNS	(Specify)
30	IV 8	University of Mexico	\$	6,000		
Total Othe	Fotal Other Adjustments				\$ -	\$ -

Schedule of Other - Miscellaneous Administrative Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Total Othe	r Adjustme	nts	\$ -	\$ -	\$ -

Schedule of Other - Direct Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Total Othe	r Adjustme	nts	\$-	\$ -	\$ -

Schedule of Unallowable Building Interest

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Total Unal	lowable Bui	Iding Interest	\$ -	\$ -	\$ -

Avon Health Care OT Therapy Equipment Rental Disallowance September 30, 2021

	# of Treatments Page 9	Percentage	
Physical Therapy	14,674	44.79%	
Occupational Therapy	18,086	55.21%	{a}
	32,760	100.00%	
Therapy Equipment Rental	Pg. 20 / Line 5j	13,298	{ b }
OT Equipment Rental Disallowed	Pg. 29 attachment	7,342	{a} x {b}

Avon Health Care 2021 Cost Report Disallowance Schedule for Cable TV September 30, 2021

	Amount			
Total Cable TV Expense acct #65450	\$	8,262 TB Linked		
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	\$	4,662		

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F. Statement of Revenue

F. Statement of Ke Name of Facility License No.	even	Report for Y	ear Ended		Page of		
Avon Convalescent Home, Inc., d/b/a Av(938-C	9/30/2021				$30 \mid 37$		
Item		Total	CCNH	RHNS	(Specify)		
I. Resident Room, Board & Routine Care Revenue							
1. a. Medicaid Residents (CT only)	\$	10,475,064	10,475,064				
b. Medicaid Room and Board Contractual Allowance **	\$	(4,430,115)	(4,430,115)				
2. a. Medicaid (All other states)	\$						
b. Other States Room and Board Contractual Allowance **	\$						
3. a. Medicare Residents (all inclusive)	\$	2,424,703	2,424,703				
b. Medicare Room and Board Contractual Allowance **	\$	302,614	302,614				
4. a. Private-Pay Residents and Other	\$	2,073,977	2,073,977				
b. Private-Pay Room and Board Contractual Allowance **	\$						
II. Other Resident Revenue							
1. a. Prescription Drugs - Medicare	\$	307,106	307,106				
b. Prescription Drugs - Medicare Contractual Allowance **	\$	(307,106)	(307,106)				
c. Prescription Drugs - Non-Medicare	\$	14,807	14,807				
d. Prescription Drugs - Non-Medicare Contractual Allowance **	\$	(14,807)	(14,807)				
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	\$	395,660	395,660				
b. Physical Therapy - Medicare Contractual Allowance **	\$	(244,109)	(244,109)				
c. Physical Therapy - Non-Medicare	\$	19,974	19,974				
d. Physical Therapy - Non-Medicare Contractual Allowance **	\$	(16,458)	(16,458)				
4. a. Speech Therapy - Medicare	\$	252,365	252,365				
b. Speech Therapy - Medicare Contractual Allowance **	\$	(154,037)	(154,037)				
c. Speech Therapy - Non-Medicare	\$	8,152	8,152				
d. Speech Therapy - Non-Medicare Contractual Allowance **	\$	(8,152)	(8,152)				
5. a. Occupational Therapy - Medicare	\$	698,755	698,755				
b. Occupational Therapy - Medicare Contractual Allowance **	\$	(476,473)	(476,473)				
c. Occupational Therapy - Non-Medicare	\$	19,965	19,965				
d. Occupational Therapy - Non-Medicare Contractual Allowance **	\$	(19,002)	(19,002)				
6. a. Other (Specify) - Medicare	\$	4,878	4,878				
b. Other (Specify) - Non-Medicare	\$						
III. Total Resident Revenue (Section I. thru Section II.)	\$	11,327,761	11,327,761	_			
IV. Other Revenue*							
1. Meals sold to guests, employees & others	\$						
2. Rental of rooms to non-residents	\$						
3. Telephone	\$						
4. Rental of Television and Cable Services	\$				 		
5. Interest Income (<i>Specify</i>)	\$	6	6		<u> </u>		
6. Private Duty Nurses' Fees	\$						
7. Barber, Coffee, Beauty and Gift shops	\$						
8. Other (<i>Specify</i>)	\$	1,744,774	1,744,774				
· · ·		1,744,774 1,744,780	1,744,774 1,744,780				

* 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

Description	CC	NH	RHNS	5	(Specify	y)
		-				
Medicare Discounts	\$	17				
Pharmacy Med B	\$	4,861				
Total Other Resident Revenue - Medicare			\$	-	\$	-
	Medicare Discounts Pharmacy Med B	Medicare Discounts \$ Pharmacy Med B	Medicare Discounts \$ 17 Pharmacy Med B \$ 4,861	Medicare Discounts \$ 17 Pharmacy Med B \$ 4,861 Image: Constraint of the second s	Medicare Discounts \$ 17 Pharmacy Med B \$ 4,861	Medicare Discounts \$ 17 Pharmacy Med B \$ 4,861 Image: Constraint of the second s

Schedule of Other Non-Medicare Resident Revenue

Related Exp

Page Ref	Description	CCNH	RHNS	(Specify)
		-		
Total Oth	er Resident Revenue	\$-	\$-	\$ -

Interest Income

Account

Page Ref	ef Account		CCNH	RHNS	(Specify)
			-		
30 IV 5	Interest Income		\$ 6		
Total Interest Income			\$ 6	\$ -	\$ -

Schedule of Other Revenue

Page Ref	Description	CCNH	RHNS	(Specify)
		-		
30 IV 8	Insurance Dividends (No Expense Offset Necessary)	\$ 17,425		
30 IV 8	HHS Income	\$ 372,793		
30 IV 8	University of Mexico (Disallow)	\$ 6,000		
30 IV 8	NGS	\$ 6,211		
30 IV 8	Gain on PPP Loan Forgiveness Recognition	\$ 1,342,345		
Total Othe	er Revenue	\$ 1,744,774	\$ -	\$ -

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G. Balance Sheet

Name of Facility	License No.	Report for Year Ended	Page	of
Avon Convalescent Home, Inc., d/b/a	А 938-С	9/30/2021	31	37
	Account		A	mount
Assets				
A. Current Assets				
1. Cash (on hand and in banks)			\$	2,276,373
2. Resident Accounts Receivabl	`	/	\$	1,025,517
3. Other Accounts Receivable (I	Excluding Owners of	or Related Parties)	\$	57,946
4 Inventories			\$	39,943
5. Prepaid Expenses			\$	53,884
a. Prepaid Insurance		47,900	_	
b. Prepaid Federal Taxes		(12,194)		
c. Prepaid Other		18,178		
d. See Schedule				
6. Interest Receivable			\$	
7. Medicare Final Settlement Re	eceivable		\$	
8. Other Current Assets (itemize)		\$	
			_	
			_	
See Schedule				
A-9. Total Current Assets (Lines A1	thru 8)		\$	3,453,663
B. Fixed Assets				
1. Land			\$	
2. Land Improvements	*Historical Cost		\$	
	Accum. Depreciat	ion Net		
3. Buildings	*Historical Cost	7,495	\$	4,870
	Accum. Depreciat	ion 2,625 Net		
4. Leasehold Improvements	*Historical Cost	2,465,836	\$	527,007
_	Accum. Depreciat	ion 1,938,829 Net		
5. Non-Movable Equipment	*Historical Cost		\$	
	Accum. Depreciat	ion Net		
6. Movable Equipment	*Historical Cost	429,787	\$	123,673
	Accum. Depreciat	ion 306,114 Net		
7. Motor Vehicles	*Historical Cost		\$	
	Accum. Depreciat	ion Net		
8. Minor Equipment-Not Depred		-	\$	
9. Other Fixed Assets (<i>itemize</i>)			\$	30,732
F/S vr C/R NBV		30,732	Ť	<i>c c</i> ,, <i>c z</i>
See Schedule		50,152	—	
B-10. Total Fixed Assets (Lines B1	thru 9)		\$	686,282

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

(Carry Total forward to next page)

Attachment Page 31-34

Schedule of Prepaid Expenses Page 31 Line A5

Page Ref	Line Ref	Description	
Total Prep	aid Expense	28	\$ -

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

Page Ref	Line Ref	Description	
Total Othe	r Current A	Assets (Itemize)	\$ -

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

Page Ref	Line Ref	Description			
Total Other Other Fixed Assets (Itemize)					

Schedule of Other Assets Page 32 Line D7

Page Ref	Line Ref	Description	
Total Othe	r Assets		\$ -

Schedule of Notes Payable (Itemize) Page 33 Line A2

Page Ref Line Ref Description

Total Note	s Payable	s	\$ -

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

Page Ref	Line Ref	Description		
33	A12	Accrued Property Taxes	\$	1,948
33	A12	Accrued Insurance	\$	25,390
33	A12	Accrued Expense Other	\$	3,439
Total Other Current Liabilities (Itemize)				30,777

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

Page Ref	Line Ref	Description			
Total Other Current Liabilities (Itemize)					

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G. Balance Sheet (cont'd)

		Facility	License No.	Report for Year	Ended	Page	of
Avor	n Co	onvalescent Home, Inc., d/b/a A	938-C	9/30/2021		32	37
			Account			Amoun	t
				Total Broug	ht Forward:	\$ 4,	139,945
C.	Le	asehold or like property record	ed for Equity Purpose	s.			
	1.	Land				\$	
	2.	Land Improvements	*Historical Cost		_		
			Accum. Depreciation	1	Net	\$	
	3.	Buildings	*Historical Cost	1,560,584	_		
			Accum. Depreciation	n 971,441	Net	\$	589,143
	4.	Non-Movable Equipment	*Historical Cost				
			Accum. Depreciation	1	Net	\$	
	5.	Movable Equipment	*Historical Cost	458,437			
			Accum. Depreciation	n 402,509	Net	\$	55,928
	6.	Motor Vehicles	*Historical Cost				
			Accum. Depreciation	n	Net	\$	
	7.	Minor Equipment-Not Depred	ciable			\$	
C-8	То	tal Leasehold or Like Propert	ies (C1 thru 7)			\$	645,071
D.	Inv	vestment and Other Assets					
	1.	Deferred Deposits				\$	
	2.	Escrow Deposits				\$	
	3.	Organization Expense	*Historical Cost				
			Accum. Depreciation	n	Net	\$	
	4.	Goodwill (Purchased Only)	*			\$	
	5.	Investments Related to Reside	ent Care <i>(temize</i>)			\$ 	
	6.	Loans to Owners or Related P	Parties (itemize)			\$	845,220
		Name and Address	Amount	Loan D	ate		-
		Due from Avon Realty /					
		West Hartford Rehab	845,220	Various			
	7.	Other Assets (<i>itemize</i>)				\$	1
		Rounding		1			
		See Schedule					
D-8.	То	tal Investments and Other Ass	\$	845,221			
D-9.	То	tal All Assets (Lines A9 + B10	() + C8 + D8)			\$	630,237

* 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			License No.	Report for Year I	Ended	Page	of
Avon Conva	lesce	nt Home, Inc., d/b/a Avon H	938-C	9/30/2021		33	37
Account				А	mount		
Liabilities							
А.	Cu	rrent Liabilities					
	1.	Trade Accounts Payable			5		190,600
	2.	Notes Payable (itemize)			5	5	
		See Schedule					
	3.	Loans Payable for Equipme				\$	
		Name of Lender	Purpose	Amount	Date Due		
	4	A samuel Dermell (Enclusion	of Orum and an d/an St	o okholdowa owky)		5	297 562
						Þ 5	287,562
	<u> </u>	Accrued Payroll Taxes Pay		niy)		Þ 5	5 500
	7.						5,599
	7. 8.						
	<u> </u>	Mortgage Payable (Current	• •				
		Interest Payable (Exclusive		atad Dantias)			
		Accrued Income Taxes*	of Owner and/or Ke	alea Farlies)			
		Other Current Liabilities (<i>it</i>	(amiza)			5	933,509
	12.	Credit Balance Liabilities	-	5 Accrued Pension	117,366	Þ	755,509
		Medicare Advance	,		16,225		
		Due to State		2 Accrued Accounting 0 Accrued User Fee	312,273		
		Due to Cash Resident Funds		1 See Schedule	312,273		
A-13	To	tal Current Liabilities (Line			50,777	5	1,417,270

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

(Carry Total forward to next page)

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G. Balance Sheet (cont'd)

Name of Facility	License No.	Report for Year	Ended	Page	0
Avon Convalescent Home, Inc., d/b/a Avo	n 938-C	9/30/2021		34	37
		А	mount		
		Total Broug	ght Forward:		1,417,27
Liabilities (cont'd)					
B. Long-Term Liabilities					
1. Loans Payable-Equipmen			\$		
Name of Lender	Purpose	Amount	Date Due		
2. Mortgages Payable			\$		
3. Loans from Owners or Re	lated Parties (itemize)	\$		
Name and Address of Lender	Amount	Loan D			
4. Other Long-Term Liabilit	ies (itamize)		\$		312,94
4. Other Long-Term Liaonit Misc. HHS Income	ies (itemize)	212 042	Ф		512,94
MISC. HHS Income		312,943			
See Schedule					
B-5. <i>Total Long-Term Liabilities</i>	(Lines B1 thru 4)		\$		312,94
C. <i>Total All Liabilities</i> (Lines A			\$		1,730,21

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

	ne of Facility License No. Report for Year Ended	Page	
Avo	n Convalescent Home, Inc., d/b/a A 938-C 9/30/2021	35	37
A.	Account Reserves		Amount
л.		¢	
	1. Reserve for value of leased land	\$	
	2. Reserve for depreciation value of leased buildings and appurtenances to be amortized	\$	645 072
	to be amortized	Ф	645,072
	3. Reserve for depreciation value of leased personal property (<i>Equity</i>)	\$	
	4. Reserve for leasehold real properties on which fair rental value is based	\$	
	5. Reserve for funds set aside as donor restricted	\$	
	6. Total Reserves	\$	645,072
B.	Net Worth		
	1. Owner's Capital	\$	
	2. Capital Stock	\$	156,000
	3. Paid-in Surplus	\$	
	4. Treasury Stock	\$	
	5. Cumulated Earnings	\$	2,391,833
	6. Gain or Loss for Period 10/1/2020 thru 9/30/2021	\$	707,119
	7. Total Net Worth	\$	3,254,952
C.	Total Reserves and Net Worth	\$	3,900,024
D.	Total Liabilities, Reserves, and Net Worth	\$	5,630,237

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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	9/30/2021		36	37		
Account						
A. Balance at End of Prior Period as shown on Report of	609/30/2020	\$	5	2,344,480		
B. Total Revenue (From Statement of Revenue Page 30)		\$	5	13,072,541		
C. Total Expenditures (From Statement of Expenditures	Page 27)	\$		12,365,422		
D. Net Income or Deficit		\$		707,119		
E. Balance		\$	5	3,051,599		
 F. Additions 1. Additional Capital Contributed (<i>itemize</i>) Total Expenses per Page 27 \$12,381,015 						
F/S vs C/R Depreciation \$3,832						
Total Expenses \$12,365,422						
 Other (<i>itemize</i>) Reconcilation of YE Retained Earnings 	203,353					
F-3. Total Additions		9	2	203,353		
G. Deductions		4)	205,555		
1. Drawings of Owners/Operators/Partners (<i>Specify</i>)		5	3			
Name and Address (<i>No., City, State, Zip</i>)	Title	Amount	, 			
Shareholder Distributions						
2. Other Withdrawings (Specify)	·	\$				
Purpose	Amo	unt				
3. Total Deductions	·	\$				
H. Balance at End of Period 09/30	/21	\$		3,254,952		

Name of Facility			Page	of				
Avon Convalescent Home, Inc., d/b/a Avon	938-C	9/30/2021	37	37				
	Check appropriate category	1						
☑ Chronic and Convalescent Nursing Home only (CCNH)	□ Rest Home with Nursing Supervision only (RHNS)	□ (Specify)						
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						
Matthew S Bavolack	Principal	02/09/2022						
Printed Name of Preparer								
Matthew S. Bavolack								
Addres Address		Phone Number						
555 Long Wharf Drive, New Haven, CT 06511	203-781-9600							
Contacted Person Regarding Additional Information	ation Needed Regarding This Report	Phone Number						
Russell Schwartz	860-673-2521							
Contact Email Address								
manall ashurate ash aslahal nat								
russell.schwartz@sbcglobal.net								

I. Preparer's/Reviewer's Certification



Workpaper Index:400.2Prepared By:Reviewed By:Workpaper Date:2/5/2022Run Date:2/5/2022

Provider Name:	Avon Health Care Center
Provider Number:	938-C
Period Ended:	9/30/21

VEHICLE COMPLIANCE CHECKLIST

Name of Workpaper: VHCL CKLST

PURPOSE:

To determine that vehicles comply with the published February 15, 2000 guidelines developed to assist providers in understanding what transportation costs are allowable and how the costs must be documented.

		Yes	No	Support Filed at?	Finding Issued?
1	Are all vehicles registered and insured in the facility's name? <i>Request insurance cards</i> and current vehicle registration.	N/A			
2	Are all purchase and lease agreements made in the facility's name?				
3	Were mileage logs obtained for facility vehicles claimed for reimbursement				
4	Were the number of vehicles allowed for reimbursement determined?				
5	Was personal use of the facility vehicles determined?				
6	Has the maximum cost allowed for depreciation purposes or the maximum allowablemonthly lease expense been determined?				
7	Were all newly acquired vehicle additions for the cost years specified to supporting invoices and cancelled checks verified?				
8	Were all motor vehicle additions physically inspected?	•			

Conclusion:

Client: Engagement: Period Ending: Trial Balance:	Avon Health Care Medicaid - Avon Health Care 2021 Cost 9/30/2021 A.01 - TB-CCNH	Report			
Account	Description	ADJ JE Ref #	RJE	FINAL	1st PP-FINAL
		9/30/2021		9/30/2021	9/30/2020
11020	Petty Cash	300.00		300.00	300.00
11140	Cash Operating Account	2,222,222.00		2,222,222.00	3,056,553.00
11620	Cash Resident Funds	53,851.00		53,851.00	38,765.00
13010	A/R Private	32,424.00		32,424.00	153,059.00
13020 13040	A/R Medicaid A/R Medicare A	889,251.00 83,000.00		889,251.00 83,000.00	1,049,068.00
13040	A/R Medicare B	(69,241.00)		(69,241.00)	153,825.00 39,450.00
13070	A/R Medicare Replacement	29,825.00		29,825.00	103,185.00
13080	A/R Insurance Other	73,683.00		73,683.00	81,636.00
13290	Allowance for Doubtful Accounts	(17,472.00)		(17,472.00)	(15,141.00)
13300	A/R Refunds	4,483.00		4,483.00	5,535.00
13600	A/R Suspense	(436.00)		(436.00)	(436.00)
15300	Prepaid Insurance	47,900.00		47,900.00	46,454.00
15380	Inventory	39,943.00		39,943.00	56,367.00
15600	Prepaid Federal Taxes	0.00	(12,194.00)	(12,194.00)	0.00
15800	Prepaid Other	18,178.00		18,178.00	30,912.00
17690	Due from Avon Realty	0.00		0.00	14,817.00
17700	Due from West Hartford Rehab	845,220.00		845,220.00	730,191.00
19220 19290	Buildings Accum Depr Buildings	7,495.00		7,495.00	7,495.00
19290	Leasehold Improvements	<mark>(2,280.00)</mark> 2,476,807.00		(2,280.00) 2,476,807.00	<mark>(1,905.00)</mark> 2,440,092.00
19420	Accum Depr Leasehold Impvmts	(1,916,532.00)		(1,916,532.00)	(1,806,522.00)
19520	Furniture & Equipment	368,708.00		368,708.00	354,478.00
19590	Accum Depr Furniture & Equipmt	(257,184.00)		(257,184.00)	(246,668.00)
19620	Computer Software	132,141.00		132,141.00	132,141.00
19690	Accum Depr Computer Software	(122,873.00)		(122,873.00)	(118,754.00)
21020	Accounts Payable Trade	(190,600.00)		(190,600.00)	(226,586.00)
21300	Credit Balance Liabilities	(207,675.00)		(207,675.00)	(352,176.00)
21400	Medicare Advance	(86,342.00)		(86,342.00)	(250,000.00)
21420	PPP- Covid	0.00		0.00	(1,342,345.00)
21600	Due to State	(109,000.00)		(109,000.00)	(109,000.00)
21610	Due to Cash Resident Funds	(53,851.00)		(53,851.00)	(38,765.00)
22200M 23115	CP of CL&P Loan Misc. HHS Income	0.00 (312,943.00)		0.00 (312,943.00)	(2,974.00) (782,488.00)
25360	P/R Garnishment	(312,943.00)		(312,943.00)	(782,400.00) (33.00)
25500	Accrued Payroll	(81,873.00)		(81,873.00)	(188,327.00)
25600	Accrued FICA Taxes	(5,386.00)		(5,386.00)	(12,229.00)
25610	Accrued SUI Taxes	(187.00)		(187.00)	(448.00)
25620	Accrued FUI Taxes	(26.00)		(26.00)	(74.00)
25650	Accrued Vac Personal Sick	(205,656.00)		(205,656.00)	(175,062.00)
25680	Accrued Pension	(117,366.00)		(117,366.00)	(113,539.00)
26100	Accrued Accounting	(16,225.00)		(16,225.00)	(17,350.00)
26110	Accrued User Fee	(312,273.00)		(312,273.00)	(315,489.00)
26120	Accrued Property Taxes	(1,948.00)		(1,948.00)	(1,882.00)
26130 26150	Accrued Insurance Financing Accrued Expense Other	(25,390.00)		(25,390.00)	(24,822.00)
30100	Shareholder Distributions	<mark>(3,439.00)</mark> 152,700.00		(3,439.00) 152,700.00	<mark>(6,828.00)</mark> 151,200.00
30110	Capital Stock	(156,000.00)		(156,000.00)	(156,000.00)
30120	Retained Earnings	(2,544,533.00)		(2,544,533.00)	(2,521,432.00)
40100	Room & Board Private	(1,824,483.00)		(1,824,483.00)	(1,993,199.00)
40110	Private Discounts	256.00		256.00	0.00
40220	PT Private	(805.00)		(805.00)	(44.00)
40230	OT Private	(963.00)		(963.00)	(76.00)
41100	Room & Board Medicaid	(10,257,053.00)			(12,426,734.00)
41110	Allowance R&B Medicaid	4,283,363.00		4,283,363.00	5,601,438.00
41150	Rate Adjustment Medicaid- COVID	(108,333.00)		(108,333.00)	(114,524.00)
41210	Pharmacy Medicaid	(1,941.00)		(1,941.00)	(691.00)
41215 41220	Allow Phar MCD PT Medicaid	1,941.00 (4,226.00)		1,941.00 (4,226.00)	691.00 (1,908.00)
41220	Allow PT MCD	4,226.00)		4,226.00)	(1,908.00)
41223	OT Medicaid	(4,066.00)		(4,066.00)	(2,077.00)
41235	Allow OT MCD	4,066.00		4,066.00	2,077.00
41240	ST Medicaid	(1,630.00)		(1,630.00)	(94.00)

Account	Description	ADJ	JE Ref # RJE	FINAL	1st PP-FINAL
		9/30/2021		9/30/2021	9/30/2020
41245	Allow ST MCD	1,630.00		1,630.00	94.00
43100	Room & Board Medicare	(919,540.00)		(919,540.00)	(945,999.00)
43110	Allowance R&B Medicare	(310,808.00)		(310,808.00)	(290,786.00)
43120 43210	Medicare Discounts Pharmacy Medicare A	(17.00) (100,554.00)		(17.00) (100,554.00)	13,851.00 (100,996.00)
43215	Allow Phar MCR A	(100,554.00)		100,554.00	100,996.00
43220	PT Medicare A	(146,675.00)		(146,675.00)	(139,125.00)
43225	Allow PT MCR A	146,675.00		146,675.00	139,125.00
43230	OT Medicare A	(151,749.00)		(151,749.00)	(147,376.00)
43235 43240	Allow OT MCR A ST Medicare A	151,749.00		151,749.00 (56,210.00)	147,376.00
43245	Allow ST MCR A	<mark>(56,210.00)</mark> 56,210.00		56,210.00	(39,726.00) 39,726.00
43250	Lab Medicare A	(15,813.00)		(15,813.00)	(11,085.00)
43255	Allow Lab MCR A	15,813.00		15,813.00	11,085.00
43270	X-ray Medicare A	(2,569.00)		(2,569.00)	(3,876.00)
43275	Allow X-ray MCR A	2,569.00		2,569.00	3,876.00
43310 43320	Pharmacy MCR B PT Medicare B	(4,861.00)		(4,861.00)	(6,077.00)
43325	Allow PT MCR B	(<mark>69,051.00)</mark> 9,898.00		(69,051.00) 9,898.00	(77,876.00) 13,707.00
43330	OT Medicare B	(109,650.00)		(109,650.00)	(94,140.00)
43335	Allow OT MCR B	18,564.00		18,564.00	17,972.00
43340	ST Medicare B	(39,542.00)		(39,542.00)	(35,421.00)
43345	Allow ST MCR B	2,754.00		2,754.00	1,066.00
44100	Room & Board Insurance Other	(83,871.00)		(83,871.00)	(53,150.00)
44110 44120	Allowance R&B Insurance Other Insurance Other Dividends	19,129.00 (17,425.00)		19,129.00 (17,425.00)	6,248.00 (21,890.00)
44510	Pharmacy Insurance Other	(12,866.00)		(12,866.00)	(1,427.00)
44515	Allow Phar Insurance Other	12,866.00		12,866.00	1,427.00
44520	PT Insurance Other	(14,943.00)		(14,943.00)	(8,582.00)
44525	Allow PT Insurance Other	14,943.00		14,943.00	8,582.00
44530	OT Insurance Other	(14,936.00)		(14,936.00)	(10,030.00)
44535 44540	Allow OT Insurance Other ST Insurance Other	14,936.00 (6,522.00)		14,936.00 (6,522.00)	10,030.00 (3,921.00)
44545	Allow ST Insurance Other	6,522.00		6,522.00	3,921.00
44550	Lab Insurance Other	(1,436.00)		(1,436.00)	(391.00)
44555	Allow Lab Insurance Other	1,436.00		1,436.00	391.00
44570	X-ray Insurance Other	(241.00)		(241.00)	(85.00)
44575 44820	Allow X-ray Insurance Other PT Insurance B	241.00 (130,244.00)		241.00 (130,244.00)	85.00 (107,546.00)
44825	Allow PT Insurance B	37,846.00		37,846.00	26,282.00
44830	OT Insurance B	(194,663.00)		(194,663.00)	(130,336.00)
44835	Allow OT Insurance B	63,467.00		63,467.00	28,692.00
44840	ST Insurance B	(71,405.00)		(71,405.00)	(52,658.00)
44845	Allow ST Insurance B	9,865.00		9,865.00	6,302.00
46100 46110	Medicare Replacement Room&Board Allowance R&B Medicare Replacem	(1,460,397.00) 8,194.00		(1,460,397.00) 8,194.00	(1,424,686.00) 129,859.00
46510	Pharmacy Medicare Replacement	(206,552.00)		(206,552.00)	(119,642.00)
46515	Allow Phar Medicare Replacement	206,552.00		206,552.00	119,642.00
46520	PT Medicare Replacement	(234,211.00)		(234,211.00)	(206,998.00)
46525	Allow PT Medicare Replacement	234,211.00		234,211.00	206,998.00
46530 46535	OT Medicare Replacement Allow OT Medicare Replacement	(242,693.00) 242,693.00		(242,693.00) 242,693.00	<mark>(217,903.00)</mark> 217,903.00
46540	ST Medicare Replacement	(85,208.00)		(85,208.00)	(56,154.00)
46545	Allow ST Medicare Replacement	85,208.00		85,208.00	56,154.00
46550	Lab Medicare Replacement	(19,016.00)		(19,016.00)	(17,461.00)
46555	Allow Lab Medicare Replacement	19,016.00		19,016.00	17,461.00
46570	Xray Medicare Replacement	(3,491.00)		(3,491.00)	(3,944.00)
46575 48000	Allow Xray Medicare Replacement Room & Board Retro Private	3,491.00 (185,008.00)		3,491.00 (185,008.00)	3,944.00 (37,493.00)
48100	Room & Board Retro Medicaid	146,752.00		146,752.00	(1,951.00)
48300	Room & Board Retro Medicare	(2,489.00)		(2,489.00)	(32,871.00)
48400	Room & Board Retro Ins Other	0.00		0.00	(20,112.00)
4846-010	INTEREST INCOME	0.00		(6.00) (6.00)	0.00
48500	Room & Board Retro Mcr Replacem	(42,277.00)		(42,277.00)	0.00
48600 49170	Retro Ancillaries Bad Debt Recovery	(2,711.00) 0.00		(2,711.00) 0.00	(2,193.00) (1,544.00)
49200	Miscellaneous Income	(385,004.00)		(385,004.00)	0.00
		(300,00		(223,0000)	0.00

Account	Description	ADJ	JE Ref # RJE	FINAL	1st PP-FINAL
		9/30/2021		9/30/2021	9/30/2020
49250	Rebate income	0.00		0.00	(17,108.00)
49300	Other Medicaid Revenue- Covid	(109,678.00)		(109,678.00)	(268,317.00)
49400	PPP Loan Forgiveness	(1,342,345.00)		(1,342,345.00)	0.00
51010	P/R Administrator	103,109.00		103,109.00	116,614.00
51020	P/R Director of Operations	119,692.00		119,692.00	123,455.00
51150	P/R Office	254,789.00		254,789.00	392,132.00
51240	Legal Fees	65,387.00		65,387.00	40,290.00
51260	Accounting Fees	57,735.00		57,735.00	43,992.00
51280 51290	Professional Fees Telephone	3,033.00 8,697.00		3,033.00 8,697.00	34,128.00 8,643.00
51290	Cellular Phones	554.00		554.00	554.00
51310	Advertising Help Wanted	2,232.00		2,232.00	19,323.00
51330	Business Promotion	17,847.00		17,847.00	32,261.00
51340	Dues Chamber Of Commerce	140.00		140.00	140.00
51350	Dues / Association	9,679.00	(26.00)	9,653.00	9,397.00
51360	Subscriptions	2,315.00	26.00	2,341.00	1,053.00
51370	Licenses	3,323.00		3,323.00	2,992.00
51380	Office Supplies	32,499.00		32,499.00	32,270.00
51390	Purchased Services Office	5,616.00		5,616.00	7,657.00
51400	Courier & Postage	5,487.00		5,487.00	6,888.00
51410	Office Equipment Rental	8,276.00		8,276.00	9,204.00
51420	Employee Travel	2,483.00		2,483.00	2,698.00
51430 51450	Professional Development Bank Charges	13,397.00 0.00		13,397.00 0.00	15,039.00 2,844.00
51460	Payroll Processing	23,162.00		23,162.00	23,499.00
51470	Donation Expense	1,475.00		1,475.00	3,625.00
51480	Employee Relations	25,503.00		25,503.00	33,064.00
51490	Gifts To Residents	707.00		707.00	0.00
51500	Computer Services	73,303.00		73,303.00	69,373.00
51570	Bad Debt Expense	95,000.00		95,000.00	60,000.00
51580	Penalties	0.00		0.00	2,000.00
51700	Other Insurance	16,332.00		16,332.00	16,563.00
51950	State Provider Tax	567,246.00		567,246.00	686,198.00
53600	Fica Tax	418,737.00		418,737.00	439,145.00
53610	State Unemployment Taxes	41,200.00		41,200.00	49,741.00
53620 53630	Federal Unemployment Taxes	6,939.00		6,939.00	8,128.00
53640	Workers Compensation Ins Employee Group Insurance	121,467.00 757,014.00		121,467.00 757,014.00	115,522.00 822,074.00
53660	Pension Expense	113,398.00		113,398.00	119,001.00
53770	Tuition Expense	5,795.00		5,795.00	1,750.00
53780	New Hire Expense	3,616.00		3,616.00	2,021.00
53790	Employee Physicals/Medication	1,591.00		1,591.00	596.00
55010	P/R Maintenance Supervisor	66,282.00		66,282.00	80,419.00
55150	P/R Maintenance Staff	53,830.00		53,830.00	54,303.00
55380	Maintenance Supplies	32,136.00		32,136.00	36,044.00
55390	Repair & Maintenance	38,229.00		38,229.00	52,846.00
55430	Groundskeeping	20,183.00		20,183.00	18,645.00
55470	Rubbish Removal Snow Removal	21,299.00		21,299.00	22,973.00
55480 55490	Purchased Maintanence Contract	13,294.00 46,344.00		13,294.00 46,344.00	13,294.00 45,697.00
5566-010	PERSONAL PROPERTY TAX	40,344.00	5,785.00	5,785.00	5,819.00
55660	Personal Property Taxes	6,744.00	0,700.00	6,744.00	6,352.00
55710	Water & Sewer	41,940.00		41,940.00	43,121.00
55720	Gas	69,880.00		69,880.00	68,854.00
55740	Electricity	36,452.00		36,452.00	27,285.00
57150	P/R Laundry Staff	105,026.00		105,026.00	112,732.00
57380	Laundry Supplies	6,811.00		6,811.00	6,926.00
57400	Linen & Bedding	6,858.00		6,858.00	8,519.00
59010	P/R Housekeeping Supervisor	52,879.00		52,879.00	52,650.00
59150	P/R Housekeeping Staff	316,427.00		316,427.00	328,876.00
59160	Housekeeping Purchased Service	0.00		0.00	592.00
59380 63010	Housekeeping Supplies	40,442.00		40,442.00	47,073.00
63010 63030	P/R Food Supervisor P/R Dietician	0.00 0.00		0.00 0.00	26,762.00 16,067.00
63150	P/R Dietary Staff	416,260.00		416,260.00	419,198.00
63230	Consult Dietician	55,505.00		55,505.00	35,095.00
63340	Raw Food	220,441.00		220,441.00	260,992.00
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Account	Description	ADJ	JE Ref #	RJE	FINAL	1st PP-FINAL
		9/30/2021			9/30/2021	9/30/2020
63380	Dietary Supplies	50,671.00			50,671.00	55,369.00
63390	Dietary Purchase Services	199,170.00			199,170.00	128,443.00
65010	P/R Recreation Director	73,896.00			73,896.00	73,272.00
65150	P/R Recreation Staff	92,436.00			92,436.00	90,748.00
65380	Recreation Supplies	1,790.00			1,790.00	4,031.00
65400	Resident & Family Entertainment	3,064.00			3,064.00	8,658.00
65450 65500	Cable TV	8,262.00			8,262.00	5,101.00
67010	Volunteer Expense P/R Social Service Supervisor	0.00 78,669.00			0.00 78,669.00	200.00 76,096.00
67150	P/R Social Service Staff	150,281.00			150,281.00	145,877.00
70200	Medical Director	37,800.00			37,800.00	37,800.00
70210	Medical Director Program	16,380.00			16,380.00	13,500.00
70280	Consult Psychiatrist	1,100.00			1,100.00	1,250.00
70300	Consult Pharmacist	9,303.00			9,303.00	9,817.00
70920	Consult Dentist	7,860.00			7,860.00	7,803.00
73160	Therapy Equipment Rental	13,298.00			13,298.00	10,958.00
73170	Purchased Physical Therapy	249,373.00			249,373.00	241,042.00
73180	Physical Therapy Supplies	6,316.00			6,316.00	3,188.00
73190	Purchased Speech Therapy	111,193.00			111,193.00	71,487.00
73200	Purchased Occupational Therapy	304,809.00			304,809.00	267,388.00
76290	Pharmacy	5,850.00			5,850.00	4,822.00
76380	Oxygen Supplies	14,488.00			14,488.00	12,870.00
76400	Pharmacy Other	13,951.00			13,951.00	10,434.00
76500	Pharmacy Medicare	228,720.00			228,720.00	152,632.00
76600	IV Therapy Expense	10,140.00			10,140.00	7,900.00
76700	Lab Expense	33,454.00			33,454.00	25,366.00
76760	X-Ray Expense	4,976.00			4,976.00	6,145.00
76860	Resident Travel	820.00			820.00	375.00
76900	Supplies Patient Personal	737.00			737.00	2,908.00
83010	P/R Director Of Nursing	125,346.00			125,346.00	121,536.00
83030 83050	P/R Asst Director Of Nursing P/R Nursing Support Staff	90,863.00 115,831.00			90,863.00 115,831.00	95,999.00 107,377.00
83070	P/R Nursing Support RN	227,249.00			227,249.00	225,737.00
83080	P/R Infection Control Nurse	68,561.00			68,561.00	73,545.00
83100	P/R Nursing Supervisors	523,558.00			523,558.00	508,556.00
83110	P/R RN	517,728.00			517,728.00	703,733.00
83120	P/R LPN	848,252.00			848,252.00	715,736.00
83130	P/R Aides	1,781,711.00			1,781,711.00	1,988,875.00
83370	Nursing Equipment Rental	2,871.00			2,871.00	4,100.00
83375	Nursing Equipment Med A	5,887.00			5,887.00	5,203.00
83380	Nursing Supplies	306,937.00			306,937.00	298,882.00
83385	Non Qual T19 Part B Supplies	1,565.00			1,565.00	1,288.00
83395	Non Qual Other Part B Supplies	686.00			686.00	442.00
83400	Medical Software Subscriptions	46,973.00			46,973.00	50,768.00
83510	Nursing Dept Consultant	65,612.00			65,612.00	71,531.00
83520	Purchased Service LPNs	82,805.00			82,805.00	581.00
83540	Purchased Service Aides	491,319.00			491,319.00	186,738.00
97000	Interest:97600 -+ Interest - Vendors	(6.00)		6.00	0.00	0.00
97700	Rent	526,790.00		(172,890.00)	353,900.00	303,306.00
9780-010	Related Taxes	0.00		90,134.00	90,134.00	118,605.00
9781-010	Related Insurance	0.00		63,295.00	63,295.00	74,401.00
9782-010	Related Mortgage Insurance	0.00		13,676.00	13,676.00	18,791.00
97900	State Corporate Taxes	50,706.00		(45,752.00)	4,954.00	47,128.00
98260	Depr Leasehold Improvement	110,011.00			110,011.00	117,994.00
98270	Depr Furniture & Equipment	30,575.00			30,575.00	27,232.00
98280 98290	Depr Computer Software	4,119.00			4,119.00	4,119.00
98290 Marcum 109	Depr Buildings Sewage Use	375.00 0.00			375.00 0.00	375.00
Marcum 109 Marcum 110	Sewage Use State Refund Receivable	0.00		57,946.00	0.00 57,946.00	0.00 0.00
Total		0.00		0.00	0.00	0.00
Total		0.00		0.00	0.00	0.00
	Net (Income) Loss	(661,367.00))	(45,752.00)	(707,119.00)	181,752.00

Client: Avon Health Care Engagement: Medicaid - Avon Health Care 2021 Cost Report Period Ending: 9/30/2021 Trial Balance: A.01 - TB-CCNH Workpaper: A.03 - Grouping Report - P&L Account Description

Workpaper:	A.01 - IB-CCNH A.03 - Grouping Report - P&L					
Account	Description	ADJ	JE Ref#	RJE	FINAL	1st PP-FINAL
ricount	2000.19.001	9/30/2021		0/2021	9/30/2021	9/30/2020
Group : [10-A]	Salaries and Wages					
Subgroup : [2]	Administrators					
51010	P/R Administrator	103,109.00		0.00	103,109.00	116,614.00
Subtotal [2]	Administrators	103,109.00		0.00	103,109.00	116,614.00
Subgroup : [4]	Other Administrative Salaries	440.000.00		0.00	110 000 00	400 455 00
51020	P/R Director of Operations	119,692.00		0.00	119,692.00	123,455.00
51150 Subtotal [4]	P/R Office Other Administrative Salaries	254,789.00 374,481.00		0.00	254,789.00 374,481.00	392,132.00 515,587.00
Subiotai [4]	Other Administrative Salaries	374,401.00		0.00	374,401.00	515,567.00
Subgroup : [5A]	Head Dietitian					
63030	P/R Dietician	0.00		0.00	0.00	16,067.00
Subtotal [5A]	Head Dietitian	0.00		0.00	0.00	16,067.00
Subgroup : [5B]	Food Service Supervisor					
63010	P/R Food Supervisor	0.00		0.00	0.00	26,762.00
Subtotal [5B]	Food Service Supervisor	0.00		0.00	0.00	26,762.00
Subgroup : [5C]	Dietary Workers					
63150	P/R Dietary Staff	416,260.00		0.00	416,260.00	419,198.00
Subtotal [5C]	Dietary Workers	416,260.00		0.00	416,260.00	419,198.00
Subgroup : [6A]	Head Housekeeper					
59010	P/R Housekeeping Supervisor	52,879.00		0.00	52,879.00	52,650.00
Subtotal [6A]	Head Housekeeper	52,879.00		0.00	52,879.00	52,650.00
Subgroup (ICP)	Other Housekeeping Werkere					
Subgroup : [6B] 59150	Other Housekeeping Workers P/R Housekeeping Staff	316,427.00		0.00	316,427.00	328,876.00
	Other Housekeeping Workers	316,427.00		0.00	316,427.00	328,876.00
Subtotal [6B]	Other Housekeeping workers	310,427.00		0.00	318,427.00	320,070.00
Subgroup : [7A]	Engineer or Chief of Maintenance					
55010	P/R Maintenance Supervisor	66,282.00		0.00	66,282.00	80,419.00
Subtotal [7A]	Engineer or Chief of Maintenance	66,282.00		0.00	66,282.00	80,419.00
oubtotu: [//·]		00,202.00		0.00		00,110100
Subgroup : [7B]	Other Maintenance Workers					
55150	P/R Maintenance Staff	53,830.00		0.00	53,830.00	54,303.00
Subtotal [7B]	Other Maintenance Workers	53,830.00		0.00	53,830.00	54,303.00
Subgroup : [8B]	Other Laundry Workers					
57150	P/R Laundry Staff	105,026.00		0.00	105,026.00	112,732.00
Subtotal [8B]	Other Laundry Workers	105,026.00		0.00	105,026.00	112,732.00
Subgroup : [12A]	Director of Nurses					
83010	P/R Director Of Nursing	125,346.00		0.00	125,346.00	121,536.00
83030	P/R Asst Director Of Nursing	90,863.00		0.00	90,863.00	95,999.00
Subtotal [12A]	Director of Nurses	216,209.00		0.00	216,209.00	217,535.00
Subgroup : [12B1]	RNs - Direct Care	500 550 00			500 550 00	500 550 00
83100 83110	P/R Nursing Supervisors	523,558.00		0.00	523,558.00	508,556.00
	P/R RN RNs - Direct Care	517,728.00 1,041,286.00		0.00	517,728.00 1,041,286.00	703,733.00 1,212,289.00
Subtotal [12B1]	Kits - Direct Care	1,041,200.00		0.00	1,041,200.00	1,212,203.00
Subgroup : [12B2]	RNs - Administrative					
83050	P/R Nursing Support Staff	115,831.00		0.00	115,831.00	107,377.00
83070	P/R Nursing Support RN	227,249.00		0.00	227,249.00	225,737.00
83080	P/R Infection Control Nurse	68,561.00		0.00	68,561.00	73,545.00
Subtotal [12B2]	RNs - Administrative	411,641.00		0.00	411,641.00	406,659.00
Subgroup : [12C1]	LPNs - Direct Care					
83120	P/R LPN	848,252.00		0.00	848,252.00	715,736.00
Subtotal [12C1]	LPNs - Direct Care	848,252.00		0.00	848,252.00	715,736.00
Subgroup : [12D]	Aides and Attendants					
83130	P/R Aides	1,781,711.00		0.00	1,781,711.00	1,988,875.00
Subtotal [12D]	Aides and Attendants	1,781,711.00		0.00	1,781,711.00	1,988,875.00
Subgroup : [12H]	Protection Workers					
65010	Recreation Workers P/R Recreation Director	73,896.00		0.00	73,896.00	73,272.00
65150	P/R Recreation Staff	92,436.00		0.00	92,436.00	90,748.00
Subtotal [12H]	Recreation Workers	166,332.00		0.00	166,332.00	164,020.00
2000000 [1811]		100,002.00		0.00		.04,020.00
Subgroup : [12M]	Social Workers/Case Management					
67010	P/R Social Service Supervisor	78,669.00		0.00	78,669.00	76,096.00
67150	P/R Social Service Staff	150,281.00		0.00	150,281.00	145,877.00
Subtotal [12M]	Social Workers/Case Management	228,950.00		0.00	228,950.00	221,973.00
Total [10-A]	Salaries and Wages	6,182,675.00		0.00	6,182,675.00	6,650,295.00
Group : [13-B]	Professional Fees					
Subgroup : [1]	Dietitian					
63230	Consult Dietician	55,505.00		0.00	55,505.00	35,095.00
Subtotal [1]	Dietitian	55,505.00		0.00	55,505.00	35,095.00
0h	Dentist					
Subaroup : [2]	LINE TO STATE OF STAT					

Subgroup : [2] Dentist

70920 Subtotal [2]	Consult Dentist Dentist	7,860.00 7,860.00	0.00	7,860.00 7,860.00	7,803.00 7,803.00
Subgroup : [3] 70300 Subtotal [3]	Pharmacist Consult Pharmacist Pharmacist	9,303.00 9,303.00	0.00	9,303.00 9,303.00	9,817.00 9,817.00
Subgroup : [5A] 73170	PT - Resident Care Purchased Physical Therapy	249,373.00	0.00	249,373.00 249,373.00	241,042.00 241,042.00
Subtotal [5A] Subgroup : [8A] 70200	PT - Resident Care Medical Director Medical Director	249,373.00 37,800.00	0.00	37,800.00	37,800.00
Subtotal [8A] Subgroup : [8E]	Medical Director Other	37,800.00	0.00	37,800.00	37,800.00
70210 Subtotal [8E] Subgroup : [9A]	Medical Director Program Other ST - Resident Care	16,380.00 16,380.00	0.00	16,380.00 16,380.00	13,500.00 13,500.00
73190 Subtotal [9A]	Purchased Speech Therapy ST - Resident Care	111,193.00 111,193.00	0.00	<u>111,193.00</u> 111,193.00	71,487.00 71,487.00
Subgroup : [10A] 73200 Subtotal [10A]	OT - Resident Care Purchased Occupational Therapy OT - Resident Care	304,809.00 304,809.00	0.00	304,809.00 304,809.00	267,388.00 267,388.00
Subgroup : [11B1] 83520 Subtotal [11B1]	LPN's - Direct Care Purchased Service LPNs LPN's - Direct Care	82,805.00 82,805.00	0.00	82,805.00 82,805.00	581.00 581.00
Subgroup : [11C] 83540 Subtotal [11C]	Aides Purchased Service Aides Aides	491,319.00 491,319.00	0.00	491,319.00 491,319.00	186,738.00 186,738.00
Subgroup : [12] 70280 83510	Other Consult Psychiatrist Nursing Dept Consultant	1,100.00 65,612.00	0.00 0.00	1,100.00 65,612.00	1,250.00 71,531.00
Subtotal [12] Total [13-B]	Other Professional Fees	66,712.00	0.00	66,712.00	72,781.00
Group : [15] Subgroup : [1A1]	Expenditures Other than Salaries Workmen's Compensation				
53630 Subtotal [1A1]	Workers Compensation Ins Workmen's Compensation	121,467.00 121,467.00	0.00	121,467.00 121,467.00	115,522.00 115,522.00
Subgroup : [1A3] 53610 53620 Subtotal [1A3]	Unemployment Insurance State Unemployment Taxes Federal Unemployment Taxes Unemployment Insurance	41,200.00 6,939.00 48,139.00	0.00 0.00 0.00	41,200.00 6,939.00 48,139.00	49,741.00 8,128.00 57,869.00
Subgroup : [1A4] 53600	Social Security (FICA) Fica Tax Social Security (FICA)	418,737.00	0.00	418,737.00	439,145.00
Subtotal [1A4] Subgroup : [1A5] 53640	Health Insurance Employee Group Insurance	<u>418,737.00</u> 757,014.00	0.00	418,737.00 757,014.00	439,145.00 822,074.00
Subtotal [1A5] Subgroup : [1A7]	Health Insurance Pensions	757,014.00	0.00	757,014.00	822,074.00
53660 Subtotal [1A7]	Pension Expense Pensions	113,398.00 113,398.00	0.00	113,398.00 113,398.00	119,001.00 119,001.00
Subgroup : [1A9] 53770 53780	Other Tuition Expense New Hire Expense	5,795.00 3,616.00	0.00 0.00	5,795.00 3,616.00	1,750.00 2,021.00
53790 Subtotal [1A9]	Employee Physicals/Medication Other	1,591.00 11,002.00	0.00	1,591.00 11,002.00	596.00 4,367.00
Subgroup : [1C] 51570 Subtotal [1C]	Bad Debts Bad Debt Expense Bad Debts	95,000.00 95,000.00	0.00	95,000.00 95,000.00	60,000.00 60,000.00
Subgroup : [1D] 51260 Subtotal [1D]	Accounting and Auditing Accounting Fees Accounting and Auditing	57,735.00 57,735.00	0.00	57,735.00 57,735.00	43,992.00 43,992.00
Subgroup : [1E] 51240 Subtotal [1E]	Legal Legal Fees Legal	65,387.00 65,387.00	0.00	65,387.00 65,387.00	40,290.00 40,290.00
Subgroup : [1G] 51380 Subtotal [1G]	Office Supplies Office Supplies Office Supplies	32,499.00 32,499.00	0.00	32,499.00 32,499.00	32,270.00 32,270.00
Subgroup : [1H1] 51290 Subtotal [1H1]	Telephone and Telegraph Telephone Telephone and Telegraph	8,697.00 8,697.00	0.00	8,697.00 8,697.00	8,643.00 8,643.00
Subgroup : [1H2] 51300	Cellular Phones and Beepers Cellular Phones	554.00	0.00	554.00	554.00

Subtotal [1H2]	Cellular Phones and Beepers	554.00		0.00	554.00	554.00
Subgroup : [1K1] 97900	Income Taxes State Corporate Taxes	50,706.00		(45,752.00)	4,954.00	47,128.00
Subtotal [1K1]	Income Taxes	50,706.00	RJE - 2	(45,752.00) (45,752.00)	4,954.00	47,128.00
Subgroup : [1K3] 51950	Resident Day User Fee State Provider Tax	567,246.00		0.00	567,246.00	686,198.00
Subtotal [1K3]	Resident Day User Fee	567,246.00		0.00	567,246.00	686,198.00
Total [15]	Expenditures Other than Salaries	2,347,581.00		(45,752.00)	2,301,829.00	2,477,053.00
Group : [16] Subgroup : [3]	Expenditures Other than Salaries (cont'd) - Admin. and General Gifts to Staff Gifts To Residents	707.00		0.00	707.00	0.00
51490 Subtotal [3]	Gifts to Staff	707.00 707.00		0.00	707.00 707.00	0.00
Subgroup : [4] 51420	Employee Travel Employee Travel	2,483.00		0.00	2,483.00	2,698.00
Subtotal [4] Subgroup : [5]	Employee Travel Education Expense	2,483.00		0.00	2,483.00	2,698.00
51430 Subtotal [5]	Professional Development Education Expense	13,397.00 13,397.00		0.00	13,397.00 13,397.00	15,039.00 15,039.00
Subgroup : [M1]	Advertising Help Wanted				0.000.00	40.000.00
51310 Subtotal [M1]	Advertising Help Wanted Advertising Help Wanted	2,232.00 2,232.00		0.00	2,232.00 2,232.00	19,323.00 19,323.00
Subgroup : [M3] 51330	Advertising Other Business Promotion	17,847.00		0.00	17,847.00	32,261.00
Subtotal [M3]	Advertising Other	17,847.00		0.00	17,847.00	32,261.00
Subgroup : [M7] 51400 Subtotal [M7]	Postage Courier & Postage Postage	5,487.00 5,487.00		0.00	5,487.00 5,487.00	6,888.00 6,888.00
Subgroup : [M8]	Dues					
51350 Subtotal [M8]	Dues / Association	9,679.00	RJE - 3	(26.00) (26.00) (26.00)	9,653.00 9,653.00	9,397.00 9,397.00
Subtrotal [Mo]	Dues to Chamber of Commerce			(20.00)	3,033.00	3,337.00
51340 Subtotal [M8A]	Dues Chamber Of Commerce Dues to Chamber of Commerce	140.00 140.00		0.00	140.00 140.00	140.00 140.00
Subgroup : [M9] 51360	Subscriptions Subscriptions	2,315.00		26.00	2,341.00	1,053.00
Subtotal [M9]	Subscriptions	2,315.00	RJE - 3	26.00 26.00	2,341.00	1,053.00
Subgroup : [M10] 51470	Contributions	1 475 00		0.00	1 475 00	3 635 00
Subtotal [M10]	Donation Expense Contributions	1,475.00 1,475.00		0.00	1,475.00 1,475.00	3,625.00 3,625.00
Subgroup : [M11] 51280	Services Provided by Contract Professional Fees	3,033.00		0.00	3,033.00	34,128.00
51460 Subtotal [M11]	Payroll Processing Services Provided by Contract	23,162.00 26,195.00		0.00	23,162.00 26,195.00	23,499.00 57,627.00
Subgroup : [M13] 51370	Other Licenses	3,323.00		0.00	3,323.00	2,992.00
51390 51450	Purchased Services Office Bank Charges	5,616.00 0.00		0.00 0.00	5,616.00 0.00	7,657.00 2,844.00
51480 51500	Employee Relations Computer Services	25,503.00 73,303.00		0.00 0.00	25,503.00 73,303.00	33,064.00 69,373.00
51580	Penalties	0.00		0.00	0.00	2,000.00
65500 Subtotal [M13]	Volunteer Expense Other	0.00 107,745.00		0.00	0.00 107,745.00	200.00 118,130.00
Total [16]	Expenditures Other than Salaries (cont'd) - Admin. and General	189,702.00		0.00	189,702.00	266,181.00
Group : [18] Subgroup : [2A1]	Dietary Basis for Allocation of Costs Raw Food					
63340 Subtotal [2A1]	Raw Food Raw Food	220,441.00 220,441.00		0.00	220,441.00 220,441.00	260,992.00 260,992.00
Subgroup : [2A2]	Non-Food Supplies	50 074 00		0.00	50 674 00	55 200 00
63380 Subtotal [2A2]	Dietary Supplies Non-Food Supplies	50,671.00 50,671.00		0.00	50,671.00 50,671.00	55,369.00 55,369.00
Subgroup : [2B] 63390	Purchased Services Dietary Purchase Services	199,170.00		0.00	199,170.00	128,443.00
Subtotal [2B] Total [18]	Purchased Services Dietary Basis for Allocation of Costs	470,282.00		0.00	199,170.00	444,804.00
Group : [19]	Laundry-Basis for Allocation of Costs	470,202.00		0.00	470,202.00	444,004.00
Subgroup : [3A1] 57400	Bed Linens, etcwashed, ironed Linen & Bedding	6,858.00		0.00	6,858.00	8,519.00
Subtotal [3A1]	Bed Linens, etcwashed, ironed	6,858.00		0.00	6,858.00	8,519.00

Subgroup : [3C]	Other				
57380	Laundry Supplies Other	6,811.00 6,811.00	0.00	6,811.00 6,811.00	6,926.00 6,926.00
Subtotal [3C]		13,669.00	0.00	13,669.00	15,445.00
Total [19]	Laundry-Basis for Allocation of Costs	13,009.00	0.00	13,009.00	15,445.00
Group : [20] Subgroup : [4A1]	Housekeeping and Resident Care Basis for Allocation of Costs In-Houe Care Supplies				
59380 Subtotal [4A1]	Housekeeping Supplies In-Houe Care Supplies	40,442.00	0.00	40,442.00 40,442.00	47,073.00 47,073.00
		40,442.00	0.00	40,442.00	47,073.00
Subgroup : [4B] 59160	Purchased Services Housekeeping Purchased Service	0.00	0.00	0.00	592.00
Subtotal [4B]	Purchased Services	0.00	0.00	0.00	592.00
Subgroup : [5A2]	Purchased From				
76290 76400	Pharmacy Pharmacy Other	5,850.00 13,951.00	0.00 0.00	5,850.00 13,951.00	4,822.00 10,434.00
76500	Pharmacy Medicare	228,720.00	0.00	228,720.00	152,632.00
Subtotal [5A2]	Purchased From	248,521.00	0.00	248,521.00	167,888.00
Subgroup : [5B] 83380	Medicine Cabinet Drugs Nursing Supplies	306,937.00	0.00	306,937.00	298,882.00
Subtotal [5B]	Medicine Cabinet Drugs	306,937.00	0.00	306,937.00	298,882.00
Subgroup : [5C]	Medical and Therapeutic Supplies				
83385	Non Qual T19 Part B Supplies	1,565.00	0.00	1,565.00	1,288.00
83395 Subtotal [5C]	Non Qual Other Part B Supplies Medical and Therapeutic Supplies	<u>686.00</u> 2,251.00	0.00	686.00 2,251.00	442.00 1,730.00
Subgroup : [5D]	Ambulance/Limousine				
76860	Resident Travel	820.00	0.00	820.00	375.00
Subtotal [5D]	Ambulance/Limousine	820.00	0.00	820.00	375.00
Subgroup : [5E2]	Oxygen - Other	11 100 00		44.400.00	10.070.00
76380 Subtotal [5E2]	Oxygen Supplies Oxygen - Other	14,488.00 14,488.00	0.00	14,488.00 14,488.00	12,870.00 12,870.00
Subgroup : [5F]	X-Rays and related radiological				
76760	X-Ray Expense	4,976.00	0.00	4,976.00	6,145.00
Subtotal [5F]	X-Rays and related radiological	4,976.00	0.00	4,976.00	6,145.00
Subgroup : [5H]	Laboratory				
76700 Subtotal [5H]	Lab Expense Laboratory	33,454.00 33,454.00	0.00	33,454.00 33,454.00	25,366.00 25,366.00
Subgroup : [5l]	Recreation				
65380	Recreation Supplies	1,790.00	0.00	1,790.00	4,031.00
65400 65450	Resident & Family Entertainment Cable TV	3,064.00 8,262.00	0.00 0.00	3,064.00 8,262.00	8,658.00 5,101.00
Subtotal [51]	Recreation	13,116.00	0.00	13,116.00	17,790.00
Subgroup : [5L]	Other				
73160 73180	Therapy Equipment Rental Physical Therapy Supplies	13,298.00 6,316.00	0.00 0.00	13,298.00 6,316.00	10,958.00 3,188.00
76600	IV Therapy Expense	10,140.00	0.00	10,140.00	7,900.00
76900 83370	Supplies Patient Personal Nursing Equipment Rental	737.00 2,871.00	0.00 0.00	737.00 2,871.00	2,908.00 4,100.00
83375	Nursing Equipment Med A	5,887.00	0.00	5,887.00	5,203.00
83400 Subtotal [5L]	Medical Software Subscriptions Other	46,973.00 86,222.00	0.00	46,973.00 86,222.00	50,768.00 85,025.00
			0.00		
Total [20]	Housekeeping and Resident Care Basis for Allocation of Costs	751,227.00	0.00	751,227.00	663,736.00
Group : [22] Subgroup : [6A]	Maintenance and Property Repairs and Maintenance				
55380	Maintenance Supplies	32,136.00	0.00	32,136.00	36,044.00
55390 Subtotal [6A]	Repair & Maintenance Repairs and Maintenance	38,229.00 70,365.00	0.00	38,229.00 70,365.00	52,846.00 88,890.00
	Heat				
Subgroup : [6B] 55720	Gas	69,880.00	0.00	69,880.00	68,854.00
Subtotal [6B]	Heat	69,880.00	0.00	69,880.00	68,854.00
Subgroup : [6C]	Light & Power				
55740 Subtotal [6C]	Electricity Light & Power	36,452.00 36,452.00	0.00	36,452.00 36,452.00	27,285.00 27,285.00
Subgroup - [6D]	Water				
Subgroup : [6D] 55710	Water & Sewer	41,940.00	0.00	41,940.00	43,121.00
Subtotal [6D]	Water	41,940.00	0.00	41,940.00	43,121.00
Subgroup : [6E]	Equipment Lease	0.070.00	0.00	9.070.00	0.004.00
51410 Subtotal [6E]	Office Equipment Rental Equipment Lease	8,276.00 8,276.00	0.00	8,276.00 8,276.00	9,204.00 9,204.00
Subgroup : [6F]	Other				
55430	Groundskeeping	20,183.00	0.00	20,183.00	18,645.00
55470 55480	Rubbish Removal Snow Removal	21,299.00 13,294.00	0.00 0.00	21,299.00 13,294.00	22,973.00 13,294.00
55490	Purchased Maintanence Contract	46,344.00	0.00	46,344.00	45,697.00

Subtotal [6F]	Other	101,120.00		0.00	101,120.00	100,609.00
Subgroup : [7B]	Building & Building Improvements					
98290 Subtotal [7B]	Depr Buildings Building & Building Improvements	375.00 375.00		0.00	375.00 375.00	375.00 375.00
Subgroup : [7D]	Movable Equipment					
98270	Depr Furniture & Equipment	30,575.00		0.00	30,575.00	27,232.00
98280 Subtotal [7D]	Depr Computer Software Movable Equipment	4,119.00 34,694.00		0.00	4,119.00 34,694.00	4,119.00 31,351.00
Subgroup : [8C]	Leasehold Improvements					
98260 Subtotal [8C]	Depr Leasehold Improvement Leasehold Improvements	110,011.00 110,011.00		0.00	110,011.00 110,011.00	117,994.00 117,994.00
	Rental Payments					
Subgroup : [9] 97700	Rent	526,790.00		(172,890.00)	353,900.00	303,306.00
9782-010	Related Mortgage Insurance	0.00	RJE - 1	(172,890.00) 13,676.00	13,676.00	18,791.00
Subtotal [9]	Rental Payments	526,790.00	RJE - 1	13,676.00 (159,214.00)	367,576.00	322,097.00
Subgroup : [10B]	Real estate taxes paid by lessor					
9780-010	Related Taxes	0.00	RJE - 1	90,134.00 90,134.00	90,134.00	118,605.00
Subtotal [10B]	Real estate taxes paid by lessor	0.00		90,134.00	90,134.00	118,605.00
Subgroup : [10C] 5566-010	Personal property taxes PERSONAL PROPERTY TAX	0.00		5,785.00	5,785.00	5,819.00
55660	Personal Property Taxes	6,744.00	RJE - 1	5,785.00 0.00	6,744.00	6,352.00
Subtotal [10C]	Personal property taxes	6,744.00		5,785.00	12,529.00	12,171.00
Total [22]	Maintenance and Property	1,006,647.00		(63,295.00)	943,352.00	940,556.00
Group : [27]	Interest and Insurance					
Subgroup : [12D] 97000	Other Interest Expense Interest:97600 -+ Interest - Vendors	(6.00)		6.00	0.00	0.00
Subtotal [12D]	Other Interest Expense	(6.00)	RJE - 4	6.00 6.00	0.00	0.00
Subgroup : [14A]	Insurance on Property					
51700 9781-010	Other Insurance Related Insurance	16,332.00 0.00		0.00 63,295.00	16,332.00 63,295.00	16,563.00 74,401.00
Subtotal [14A]	Insurance on Property	16,332.00	RJE - 1	63,295.00 63,295.00	79,627.00	90,964.00
Total [27]	Interest and Insurance	16.326.00		63.301.00	79.627.00	90,964,00
Total [27]	Interest and Insurance	16,326.00		63,301.00	79,627.00	90,964.00
Group : [30] Subgroup : [1A]	Statement of Revenue Medicaid Residents (CT only)	<u> </u>				
Group : [30]	Statement of Revenue	16,326.00 (10,257,053.00) (108,333.00)		63,301.00 0.00 0.00	79,627.00 (10,257,053.00) (108,333.00)	90,964.00 (12,426,734.00) (114,524.00)
Group : [30] Subgroup : [1A] 41100 41150 49300	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid	(10,257,053.00) (108,333.00) (109,678.00)		0.00 0.00 0.00	(10,257,053.00) (108,333.00) (109,678.00)	(12,426,734.00) (114,524.00) (268,317.00)
Group : [30] Subgroup : [1A] 41100 41150 49300 Subtotal [1A]	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only)	(10,257,053.00) (108,333.00)		0.00 0.00	(10,257,053.00) (108,333.00)	(12,426,734.00) (114,524.00)
Group : [30] Subgroup : [1A] 41100 41150 49300 Subtotal [1A] Subgroup : [1B] 41110	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00		0.00 0.00 0.00 0.00	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00	(12,426,734.00) (114,524.00) (288,317.00) (12,809,575.00) 5,601,438.00
Group : [30] Subgroup : [1A] 41100 41150 49300 Subtotal [1A] Subgroup : [1B]	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid room and board contractual allowance	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00)		0.00 0.00 0.00 0.00	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00)	(12,426,734.00) (114,524.00) (286,317.00) (12,809,575.00)
Group : [30] Subgroup : [1A] 41100 41150 Subtotal [1A] Subgroup : [1B] 41110 48100	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Room & Board Retro Medicaid	(10,257,053.00) (108,333.00) (10,678.00) (10,475,064.00) 4,283,363.00 146,752.00		0.00 0.00 0.00 0.00 0.00	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00)
Group : [30] Subgroup : [1A] 41100 41150 49300 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Room & Board Retro Medicaid Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Medicare	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00)
Group : [30] Subgroup : [1A] 41100 41150 49300 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 46100 48300	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Room & Board Retro Medicaid Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Medicare	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (2,489.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00
Group : [30] Subgroup : [1A] 41100 41150 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 46100 48300	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Room & Board Retro Medicaid Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Medicare	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,488.00) (42,277.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (32,871.00) 0,00
Group : [30] Subgroup : [1A] 41100 41150 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 48300 48500 Subtotal [3A]	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Room & Board Retro Medicaid Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Medicare Room & Board Retro Medicare	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (2,489.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (32,871.00)
Group : [30] Subgroup : [1A] 41100 41150 43300 Subtotal [1A] 43100 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 48500 Subtotal [3A] Subgroup : [3B] 43110	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Medicare Residents (All Inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Mer Replacem Medicare Residents (All Inclusive) Medicare Residents (All Inclusive)	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,424,703.00) (310,808.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,424,703.00) (310,808.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (2,403,556.00) (2,403,556.00)
Group : [30] Subgroup : [1A] 41100 41150 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 46100 48500 Subtotal [3A] Subgroup : [3B]	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid Room and board contractual allowance Allowance R&B Medicaid Room & Board Retro Medicaid Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Medicare Room & Board Retro Mor Replacem Medicare room and board contractual allowance	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,424,703.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,424,703.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (1,424,686.00) (1,424,686.00) (2,2871.00) 0.00 (2,403,556.00)
Group : [30] Subgroup : [1A] 41100 41150 49300 Subtotal [1A] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 48300 48500 Subtotal [3A] Subgroup : [3B] 43110 Subtotal [3B] Subgroup : [4A]	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Medicare Room & Board Retro Mer Replacem Medicare Residents (All inclusive) Medicare Residents (All inclusive) Medicare Residente (All inclusive) Medicare Residente (All inclusive) Medicare Residente Replacem Allowance R&B Medicare Allowance R&B Medicare Replacem	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,489.00) (42,277.00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (32,871.00) 0.00 (2,403,556.00) (290,786.00) 129,859.00 (160,927.00)
Group : [30] Subgroup : [1A] 41100 41150 Subtotal [1A] Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 46500 Subtotal [3A] Subgroup : [3B] 43110 46110 Subtotal [3B] Subgroup : [4A] 40100	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Room & Board Retro Medicaid Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Medicare Room & Board Retro Medicare Allowance R&B Medicare Allowance R&B Medicare Replacem Medicare room and board contractual allowance Private-pay residents and other Room & Board Private	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (32,871.00) (2,403,556.00) (2,403,556.00) (290,786.00) (290,786.00) (290,786.00) (160,927.00) (1,993,199.00)
Group : [30] Subgroup : [1A] 41100 41150 49300 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 48300 48500 Subtotal [3A] Subgroup : [3B] 43110 46110 Subtotal [3B] Subgroup : [4A] 40110 40110 40110	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Medicare Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Mer Replacem Medicare Residents (All inclusive) Medicare Room and board contractual allowance Allowance R&B Medicare Allowance R&B Medicare Room & Board Private Private Discounts Room & Board Insurance Other	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,489.00) (42,277.00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00) 256.00 (83,877.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,429,00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00) 2566.00 (83,871.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (32,871.00) 0.00 (2,403,556.00) (290,786.00) (290,786.00) (1993,199.00) (1,933,199.00) 0.00 (53,150.00)
Group : [30] Subgroup : [1A] 41100 41150 Subtotal [1A] Subtotal [1A] Subtotal [1A] Subtotal [1B] Subtotal [1B] Subtotal [1B] Subtotal [1B] Subtotal [1B] Subtotal [3A] Subtotal [3A] Subtotal [3A] Subtotal [3B] Subtotal [3B] Subtotal [3B] Subtotal [3B]	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Room & Board Retro Medicaid Medicare Residents (All inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Medicare Allowance R&B Medicare Allowance R&B Medicare Allowance R&B Medicare Replacem Medicare room and board contractual allowance Allowance R&B Medicare Room & Board Private Private-pay residents and other Room & Board Insurance Other Allowance R&B Insurance Other	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,489.00) (42,277.00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00) 256.00 (83,871.00) 19,129.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,429.00) (42,277.00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00) 256.00 (83,871.00) 19,129.00	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (1,424,686.00) (22,871.00) (2,403,556.00) (2,403,556.00) (2,403,556.00) (160,927.00) (1,993,199.00) 0.00 (53,150.00) (53,150.00) 6,248.00
Group : [30] Subgroup : [1A] 41100 41150 49300 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 48300 48500 Subtotal [3A] Subgroup : [3B] 43110 46110 Subtotal [3B] Subgroup : [4A] 40110 40110 40110	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Medicare Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Mer Replacem Medicare Residents (All inclusive) Medicare Room and board contractual allowance Allowance R&B Medicare Allowance R&B Medicare Room & Board Private Private Discounts Room & Board Insurance Other	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,489.00) (42,277.00) (2,489.00) (42,277.00) (2,489.00) (42,277.00) (2,449.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00) 256.00 (83,677.00) 19,129.00 (185,008.00) (18,008.00) 0.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) (10,475,064.00) (1,475,064.00) (1,467,52.00 (4,430,115.00 (1,460,397.00) (2,489.00) (2,489.00) (2,422,777.00) (2,422,777.00) (2,424,703.00) (2,424,703.00) (2,424,703.00) (1,824,483.00) (302,614.00) (1,824,483.00) (302,614.00) (1,824,483.00) (1,824,483.00) (1,824,008.00) (1,826.00 (1,826.008.00) (1,829.008.00) (0,000) (0,000) (0,000) (0,000)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (32,871.00) 0.00 (2,403,556.00) (290,786.00) (290,786.00) (193,199.00) (1,93,199.00) (53,150.00) (53,150.00) (53,150.00) (6,248.00 (37,493.00) (20,112.00)
Group : [30] Subgroup : [1A] 41100 41150 43300 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 48500 Subtotal [3A] Subgroup : [3B] 43110 46110 Subtotal [3B] Subgroup : [4A] 40100 40100 44110 44110	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue-Covid Medicaid Residents (CT only) Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Allowance R&B Medicaid Medicare Residents (All Inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Medicare Room & Board Retro Mer Replacem Medicare Residents (All Inclusive) Room & Board Retro Mer Replacem Allowance R&B Medicare Allowance R&B Medicare Allowance R&B Medicare Replacem Medicare room and board contractual allowance Allowance R&B Medicare Replacem Medicare room and board contractual allowance Private Discounts Room & Board Private Private Discounts Room & Board Insurance Other Allowance R&B Insurance Other Allowance R&B Insurance Other Room & Board Retro Private	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (2,428,00) (2,428,00) (2,428,00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00) 256.00 (83,871.00) 19,129.00 (185,008.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,424,703.00) (2,424,703.00) (310,808.00) 8,194.00 (302,644.00) (302,644.00) (18,204.483.00) 256.00 (38,871.00) 19,129.00 (185,008.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (22,871.00) (2,403,556.00) (290,786.00) 129,859.00 (160,927.00) (1,993,199.00) 0,00 (53,150.00) 6,248.00 (37,433.00)
Group : [30] Subgroup : [1A] 41100 41150 49300 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 48300 48500 Subtotal [3A] Subgroup : [3B] 43110 46110 Subtotal [3B] Subgroup : [4A] 40110 44110 44100 44100 44100 44100 5ubtotal [4A] Subgroup : [5A]	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Medicaid room and board contractual allowance Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Medicare Allowance R&B Medicare Allowance R&B Medicare Allowance R&B Medicare Room & Board Private Private Discounts Room & Board Insurance Other Allowance R&B Ins	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (1,460,397.00) (2,489.00) (42,277.00) (2,489.00) (42,277.00) (2,449.00) (42,277.00) (2,449.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00) 2,566.00 (83,671.00) 19,129.00 (185,008.00) 0,00 (2,073,977.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (1,460,397.00) (2,489.00) (42,277.00) (2,424,703.00) (2,424,703.00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00) (18,266.00 (83,871.00) 19,129.00 (185,008.00) 0,00 (2,073,977.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (32,871.00) 0.00 (22,403,556.00) (290,786.00) 129,859.00 (160,927.00) (1,93,199.00) 0.00 (53,150.00) 6,248.00 (37,493.00) (20,112.00) (2,097,706.00)
Group : [30] Subgroup : [1A] 41100 41150 43300 Subtotal [1A] 5ubgroup : [1B] 41110 48100 Subtotal [1B] 5ubgroup : [3A] 43100 46100 48500 Subtotal [3A] 5ubgroup : [3B] 43110 46110 Subtotal [3B] 5ubgroup : [4A] 40100 40100 40100 44110 44110 44110 5ubgroup : [4A] 4000 44000 48400 5ubtotal [4A]	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue-Covid Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Medicare Residents (All Inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Medicare Room & Board Retro Mer Replacem Medicare Residents (All Inclusive) Medicare form and board contractual allowance Allowance R&B Medicare Pivate Discounts Room & Board Private Private Discounts Room & Board Retro Private Room & Board Retro Ins Other Private-pay residents and other	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,489.00) (42,277.00) (2,489.00) (42,277.00) (2,489.00) (42,277.00) (2,449.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00) 256.00 (83,677.00) 19,129.00 (185,008.00) (18,008.00) 0.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) (10,475,064.00) (1,475,064.00) (1,467,52.00 (4,430,115.00 (1,460,397.00) (2,489.00) (2,489.00) (2,422,777.00) (2,422,777.00) (2,424,703.00) (2,424,703.00) (2,424,703.00) (1,824,483.00) (302,614.00) (1,824,483.00) (302,614.00) (1,824,483.00) (1,824,483.00) (1,824,008.00) (1,826.00 (1,826.008.00) (1,829.008.00) (0,000) (0,000) (0,000) (0,000)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (32,871.00) 0.00 (2,403,556.00) (290,786.00) (290,786.00) (193,199.00) (1,93,199.00) (53,150.00) (53,150.00) (53,150.00) (6,248.00 (37,493.00) (20,112.00)
Group : [30] Subgroup : [1A] 41100 41150 49300 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 48500 Subtotal [3A] Subgroup : [3B] 43110 46110 Subtotal [3A] Subgroup : [4A] 40100 40110 44110 44100 44110 Subgroup : [4A] 4000 44100 44100 500 Subtotal [4A] Subgroup : [5A] 43210	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Retro Medicare Medicare Replacement Room&Board Room & Board Retro Medicare Room & Board Retro Mor Replacem Medicare Residents (All inclusive) Medicare Rosidents (All inclusive) Medicare Ros Medicare Allowance R&B Medicare Allowance R&B Medicare Replacem Medicare room and board contractual allowance Room & Board Insurance Other Allowance R&B Insurance Other Allowance R&B Insurance Other Room & Board Retro Private Room & Board Retro Private Room & Board Retro Dither Private-pay residents and other Private-pay residents and other Private-pay residents and other	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,489.00) (42,277.00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00) (302,614.00) (1,824,483.00) 256.00 (83,877.00) (1,824,483.00) 256.00 (1,824,483.00) 256.00 (1,824,483.00) (2,073,977.00) (100,554.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (1,460,397.00) (2,489.00) (42,277.00) (2,424,703.00) (310,808.00) (310,808.00) (310,808.00) (310,808.00) (310,808.00) (310,808.00) (310,808.00) (310,808.00) (310,808.00) (310,261.00) (18,24,483.00) (26,073,977.00) (100,554.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (1,424,686.00) (32,871.00) (32,871.00) (32,871.00) (32,871.00) (32,871.00) (32,871.00) (32,871.00) (32,871.00) (32,871.00) (32,871.00) (32,871.00) (32,871.00) (32,871.00) (32,871.00) (32,859.00) (160,927.00) (1,993,199.00) (33,150.00) (33,150.00) (20,112.00) (20,97,706.00) (100,996.00)
Group: [30] Subgroup: [1A] 41100 41150 43300 Subtotal [1A] Subgroup: [1B] 41110 48100 Subtotal [1B] Subgroup: [3A] 43100 48500 Subtotal [3A] Subgroup: [3B] 43110 46110 Subtotal [3B] Subtotal [3B] Subgroup: [4A] 40100 400000 4000000	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue-Covid Medicaid Residents (CT only) Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Allowance R&B Medicaid Medicare Residents (All Inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Mer Replacem Medicare Residents (All Inclusive) Medicare Residents (All Inclusive) Me	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (4,2277.00) (2,489.00) (42,277.00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00) 2,56.00 (83,871.00) 19,129.00 (185,008.00) 0.00 (2,073,977.00) (100,554.00) (206,552.00)		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460.397.00) (2,489.00) (42,277.00) (2,424,703.00) (2,424,703.00) (310,808.00) 8,194.00 (302,644.00) (302,644.00) (185,008.00) 0.00 (2,073,977.00) (100,554.00) (206,552.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (22,871.00) (2,403,556.00) (290,786.00) 129,859.00 (160,927.00) (1993,199.00) (0,00 (3,7,493.00) (20,112.00) (2,097,706.00) (119,642.00)
Group : [30] Subgroup : [1A] 41100 41150 49300 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 48300 48300 Subtotal [3A] Subgroup : [3B] 43110 46110 Subtotal [3B] Subgroup : [3B] 43110 44110 44110 44110 44110 44100 44100 44100 Subtotal [3B] Subgroup : [4A] 4000 48400 Subtotal [4A] Subgroup : [5A] 43210 46510 Subgroup : [5B] 43215	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue- Covid Medicaid Residents (CT only) Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Medicaid room and board contractual allowance Medicaid room and board contractual allowance Medicare Residents (All inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Medicare Room & Board Retro Medicare Room & Board Retro Mer Replacem Medicare Residents (All inclusive) Medicare Rossidents (All inclusive) Medicare Replacement Pharmacy Medicare A Pharmacy Medicare A Medicare Replacement Prescription Drugs - Medicare	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (42,277.00) (2,449.00) (42,277.00) (2,449.00) (42,277.00) (2,449.00) (310,808.00) 8,194.00 (302,614.00) (185,008.00) (185,008.00) (206,552.00) (307,106.00) 100,554.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) (10,475,064.00) (1,475,064.00) (1,467,52.00 (4,430,115.00 (1,460,397.00) (2,489.00) (42,277.00) (2,424,703.00) (2,424,703.00) (2,424,703.00) (2,424,703.00) (2,424,703.00) (2,424,703.00) (2,424,703.00) (2,424,703.00) (2,424,703.00) (1,824,483.00) (302,614.00) (1,824,483.00) (1,824,483.00) (1,824,483.00) (1,824,483.00) (1,824,483.00) (1,824,483.00) (1,824,483.00) (1,824,483.00) (2,073,977.00) (1,00,554.00) (307,106.00)	(12,426,734.00) (114,524.00) (268,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (32,871.00) 0.00 (22,403,555.00) (22,403,555.00) (290,786.00) (290,786.00) (1993,199.00) (1993,199.00) (53,150.00) (53,150.00) (53,150.00) (53,150.00) (53,150.00) (2,248.00) (20,77,766.00) (119,642.00) (100,996.00) (100,996.00)
Group : [30] Subgroup : [1A] 41100 41150 43300 Subtotal [1A] Subgroup : [1B] 41110 48100 Subtotal [1B] Subgroup : [3A] 43100 48500 Subtotal [3A] Subgroup : [3B] 43110 46110 Subtotal [3B] Subgroup : [4A] 40100 4000 40	Statement of Revenue Medicaid Residents (CT only) Room & Board Medicaid Rate Adjustment Medicaid- COVID Other Medicaid Revenue-Covid Medicaid Residents (CT only) Medicaid Residents (CT only) Medicaid room and board contractual allowance Allowance R&B Medicaid Medicaid room and board contractual allowance Medicare Residents (All Inclusive) Room & Board Medicare Medicare Replacement Room&Board Room & Board Medicare Medicare Replacement Room&Board Room & Board Medicare Medicare Replacement Room&Board Room & Board Retro Mer Replacem Medicare Residents (All Inclusive) Medicare Residents (All Inclusive) Medica	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (919,540.00) (1,460,397.00) (2,489.00) (2,489.00) (2,429,703.00) (2,429,703.00) (310,808.00) 8,194.00 (302,614.00) (1,824,483.00) 256.00 (83,871.00) (1,824,483.00) 256.00 (83,871.00) (1,824,00) (1,925,0		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(10,257,053.00) (108,333.00) (109,678.00) (10,475,064.00) 4,283,363.00 146,752.00 4,430,115.00 (1,460,397.00) (2,489.00) (2,422,77.00) (2,422,77.00) (2,422,77.00) (2,424,703.00) (310,808.00) 8,194.00 (302,614.00) (302,614.00) (185,008.00) 0,00 (185,008.00) 0,00 (185,008.00) (100,554.00) (206,552.00) (307,106.00)	(12,426,734.00) (114,524.00) (288,317.00) (12,809,575.00) 5,601,438.00 (1,951.00) 5,599,487.00 (945,999.00) (1,424,686.00) (32,871.00) 0,00 (2,403,556.00) (290,786.00) 129,859.00 (160,927.00) (1993,199.00) 0,00 (33,150.00) 6,244.00 (37,493.00) (20,172.00) (2,097,706.00) (119,642.00) (119,642.00) (220,638.00)

Longing Promise function (191100) (10100)	Subgroup : [5C]	Prescription Drugs - Non-medicare				
Batter (D) Pace (pin) (D) Pace (pin) (D) Class (Pin) (D) Class (Pin) (D) 6100 (D) Period (D) Class (Pin) (D) Class (Pin) (D) Class (Pin) (D) 6100 (D) Period (D) Class (Pin) (D) Class (Pin) (D) Class (Pin) (D) 6100 (D) Period (D) Class (Pin) (D) Class (Pin) (D) Class (Pin) (D) Class (Pin) (D) 6100 (D) Period (D) Class (Pin) (D) Clas (Pin) (D) Class (Pin) (D)			(1,941.00)	0.00	(1,941.00)	
Advance (1) Presentation Constraint Alterance (34.63) (35.63)		,				
dib Ales Ret NDD 194100 000 194100 000 194100 000 194100 000 194100 00000 194100 00000 194100 000000 1941000 0000000 1941000 00000000 1941000 000000000 1941000 1941000 194100000000000000000000000000000000000	Subiotai [50]	Prescription Drugs - Non-medicare	(14,807.00)	0.00	(14,807.00)	(2,118.00)
44:55 Main Proce Integral, Proceed Constraint Allowance 0.084000 0.084000 0.084000 0.102700 Sanguer, JM, Paytesh Tangy, Nethera -						
Balteling Perscription Trans, - Societational Allerance 1.057 67 0.157 67 1.118 4029 FT Additional Allerance 1.057 67 0.00 (103.55.0) (103.55.0) 4029 AFT FT Additional Allerance 0.00 (103.55.0) (103.55.0) 4029 AFT FT Additional Allerance 0.00 (102.55.0) (102.55.0) 4029 AFT FT Additional Allerance 0.00 (102.55.0) (102.55.0) 4029 AFT FT Additional Allerance 0.00 (102.55.0) (102.55.0) 4029 Additional Allerance 0.00 0.00 0.00 (102.55.0) 4025 Additional Allerance 0.06.00 0.00 0.00 (102.55.0) 4025 Additional Allerance 0.06.00 0.00 0.00 (102.55.0) 4026 FT Additional Allerance 0.06.00 (102.55.0) (102.55.0) 4027 FT FT FT FT (102.55.0) (102.55.0						
4132 PT NetGrap A (145/1750) 0.00 (145/1750) (15/1750) 4403 APP TOCA 140/07120 0.00 140/07120 0.00 (12/1750) 4403 APP TOCA 140/07120 0.00 12/14/00 0.00 (12/14/00) 0.00 (12/14/00) 0.00 12/14/00 0.00 12/14/00 0.00 12/14/00 0.00 12/14/00 0.00 12/14/00 0.00 10/07/00 0.00 10/07/00 0.00 10/07/00 0.00 10/07/00 0.00 10/07/00 0.00 10/07/00 0.00 10/07/00 0.00 10/07/00 0.00 10/07/00 0.00 10/07/00 0.00 10/07/00 0.00 10/07/00 0.00 10/07/00 0.00						
4132 Pf Netters A (193,753) (193,753) (193,753) (193,753) 4403 APP TACA (192,743) 60.0 (192,743) (192,743) 4403 APP TACA (192,743) 60.0 (192,743) (192,743) 4404 Pf Names B (192,743) 60.0 (192,443) (192,743) 4404 Pf Names B (192,743) 60.0 (192,443) (192,743) 8404 Pf Names B (192,443) 60.0 (192,443) (192,443) 8404 Provide Tearger, Indiana (192,443) 60.0 (192,453) (193,743) 8404 Provide Tearger, Indiana (192,443) (192,453) (193,743) (193,743) 8404 Provide Tearger, Indiana (192,443) (193,743) (193,743) (193,743) 8409 Provide Tearger, Indiana Contrastal Alonana (192,743) (193,743) (193,743) 8409 Provide Tearger, Indiana Contrastal Alonana (193,743) (193,743) (193,743) 8409 Provide Tearger, Indiana Contras						
Labo Mov PT LOR A 1405700 0.00 1405700 179,8200 Labo Mov PT Loren Replement 127,4400 0.00 </td <td></td> <td></td> <td>(146 675 00)</td> <td>0.00</td> <td>(146 675 00)</td> <td>(139 125 00)</td>			(146 675 00)	0.00	(146 675 00)	(139 125 00)
4425 PT Insurance III (182.4.80) (182.4.						
L405 More PT instance B 27 Matco 0.00 C2044100						
4605 P1 Mokase Registement D23:100 C0020000 C0040000 C00400000 C0040000 C00400000 C00400000 C00400000 C00400000 C00400000 C00400000 C004000000 C0040000000000 C0040000000000000000000000000000000000						
Body (F) Prysical Theory - decision Contractual Allowance 244100 0.00 0.412100 0.20000 0.212100 0.00 0.212100 0.20000 0.200000						
abs://abs Abs://abs Base Processing	Subtotal [7A]	Physical Therapy - Medicare	(395,660.00)	0.00	(395,660.00)	(366,138.00)
4455 Abs PT Markan Registered Contractal Allowance 224(100) 0.00 22(210) 226(260) Budgeroy (FC) Prylat Threny - Non-selicites 42(100) 0.00 ((4200) ((1400)) 4220 PT has ((2200) 0.00 ((4200) ((1400)) 4200 PT has ((2200) 0.00 ((4200) ((1400)) 4200 (1200) 0.00 ((1400) ((1400)) ((1400)) 4200 0.00 ((1400) ((1400)) ((1400)) ((1400)) 4200 0.00 ((1400)) ((1400)) ((1400)) ((1400)) 4201 0.00 ((1400)) ((1400)) ((1400)) ((1400)) 4201 0.00 ((1400)) ((1400)) ((1400)) ((1400)) 54464 ((1400)) ((1400)) ((1400)) ((1400)) ((1400)) 544660 0.00 ((1400)) ((1400)) ((1400)) ((1400)) 54460 0.00 ((1400)) ((1400)) ((1400)) ((14	Subgroup : [7B]	Physical Therapy - Medicare Contractual Allowance				
Babbail [19] Physici Thrany - Market Contractal Allowance 24(198) B.0 24(198) 25(785) 4020 F7 Proj Model all (12200) 0.00 (00500) (14000) 4220 F7 Proj Model all (12200) 0.00 (14400) 0.00 (14400) 4220 F7 Market Thrany - Monendiane (12200) 0.00 (14400) (12800) 4220 Aver FM ACC Market Thrany - Monendiane 42200 0.00 (12800) (12800) 4220 Aver FM ACC 42200 0.00 (128100) 0.00 (128100) 4220 Aver FM ACC (128100) 0.00 (128100) (128100) 4400 ST Mark Aver FM ACC (128100) 0.00 (128100) (128100) 4404 ST Mark Aver FM ACC (128100) 0.00 (128100) (128100) 4404 ST Mark Aver FM ACC (128100) 0.00 (128100) (128100) 4404 ST Mark Aver FM ACC (128100) 0.00 (128200) (128200) (1						
Subgroup [C] Protect Thrugs - Non-Indicate (05.00)						
dz20 ri Phota (00.00) 0.00 (00.00) (00.00) d200 ri Mostano Core (19.83.00) 0.00 (19.83.00) 0.00 (19.83.00) d200 ri Mostano Core (19.83.00) 0.00 (19.83.00) 0.00 (19.83.00) d200 ri Mostano Core (19.83.00) 0.00 (19.83.00) 0.00 (19.83.00) d200 ri Mostano Core (19.83.00) 0.00 (19.83.00) (19.83.00) d200 Rep Anolines (19.83.00) 0.00 (19.83.00) (19.83.00) d200 Rep Anolines (19.83.00) 0.00 (19.20.00) (19.83.00) d200 State Tore, "Instance Tore Tore tore tore tore tore tore tore tore t	Subiotai [7 B]	Physical Therapy - Medicare Contractual Allowance	244,109.00	0.00	244,109.00	220,705.00
4120 PT Median (19.200) 0.00 (19.200) (19.200) 84.000 Project Practy - Non-mediance (19.200) 0.00 (19.200) (19.200) 84.000 Project Practy - Non-mediance Contractual Allowance 90.00 (19.200) 0.00 (19.200)						
4520 biolog (F) Project Program - Non-sectors Contractual Allowance 0.00 (1427-00) (1424.00) (1427-00) 0.00 (1427-00) (1424.00) (1427-00) 4425 Alloy FT Incurses Other 4425 Alloy FT Incurses Other 4425 Alloy FT Incurses Other 4426 Alloy F						
Subgroup: Project Theory - Non-medicare Contractual Allowance 4.250.0 0.0 4.220.0 0.0 4.220.0 0.0 4.220.0 0.00 4.220.0 0.00 4.220.0 0.00 4.220.0 0.00 4.220.0 0.00 4.220.0 0.00 4.220.0 0.00 4.220.0 0.00 4.220.00 0.00 4.220.00 0.00 4.220.00 0.00 4.220.00 0.00 4.220.00 0.00 4.220.00 0.00 4.220.00 0.00 4.220.00 0.00 4.220.00 0.00 6.924.000 0.00 6.924.000 0.00 6.924.000 0.00 6.924.000 0.00 6.924.000 0.00 6.924.000 0.00 6.924.000 0.00 6.924.000 0.00 6.924.000 0.00 6.924.000 0.00 6.924.000 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00 9.924.00						
4225 Allow FT Nazarono Ober 4,200.0 0.0 4,200.0 1,900.0 4253 Allow FT Nazarono Ober 1,941.00 0.00 1,241.00 0.01 4263 Allow FT Nazarono Ober 1,941.00 0.00 1,241.00 0.01 4264 Allow FT Nazarono Ober 1,941.00 0.00 1,041.00 0.00 1,041.00 0.00 1,041.00 0.00 1,041.00 0.00 1,041.00 0.00 1,041.00 1,041.00 <td>Subtotal [7C]</td> <td>Physical Therapy - Non-medicare</td> <td>(19,974.00)</td> <td>0.00</td> <td>(19,974.00)</td> <td>(10,534.00)</td>	Subtotal [7C]	Physical Therapy - Non-medicare	(19,974.00)	0.00	(19,974.00)	(10,534.00)
4225 Allow FT Names Ober 4,226.00 0.00 4,226.00 1,000.00 4253 Allow FT Insurance Ober 1,426.00 0.00 1,424.00 0.00 2,711.00 0.711.00	Subgroup : [7D]	Physical Therapy - Non-medicare Contractual Allowance				
6600 Reto Anclines (2.11.00) (2.11.00) (2.11.00) (2.11.00) Subbiol (7) Spech Inversy - Nendeace (2.10.00) (1.0.100) (1.0.100) Subbiol (7) Spech Inversy - Nendeace (2.0.100) (0.0.100) (0.0.100) 4330 ST Molecen (2.0.100) (0.0.100) (0.0.100) (0.0.100) 4340 ST Molecen (2.0.100) (0.0.100) (0.0.100) (0.0.100) 4340 ST Molecen (2.0.100) (0.0.100)			4,226.00	0.00	4,226.00	1,908.00
Subbit (7) Physical Thargy - Mon-medican Contractual Allowance 16.485.00 0.50 16.485.00 0.50 16.485.00 0.50 16.485.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.527.00 0.627.000 0.627.000 0.627.000 0.627.000 0.627.000 0.627.000 0.627.000 0.627.000 0.627.000 0.627.000 0.627.000 0.657.000						
Subgroup: IA: Joseph Tenzy - Medicare A (50,210.0) 0.00 (63,210.0) (63,210.0) (63,210.0) (63,210.0) (63,220.0) (63,220.0) (63,220.0) (63,220.0) (63,220.0) (63,220.0) (63,220.0) (63,230.0) (63,200.0) </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
d320 ST Medicare A (56.210.00) 0.00 (56.210.00) (56.2		· · ,				-,
4330 ST Malaura B (09,42.00) 0.00 (09,42.00) (09,42.00) (09,42.00) (00,42.00) (00,42.00) (00,42.00) (00,42.00) (00,42.00) (00,42.00) (00,42.00) (00,42.00) (00,41.00) (01,43.00) (01,43.00) (02,43.00) (00,41.00) (01,43.00)			(50.040.00)	0.00	(50.040.00)	(20,700,00)
4480 ST Insurance B (71,405.00) 0.00 (71,405.00) (62,503.00) (65,154.00) 6450 Stepeth Therapy-Medicare (82,365.00) 0.600 (82,365.00) (65,154.00) Stubptop (R) Spech Therapy-Medicare Contractual Allowance 92,210.00 93,720.00 93,720.00 93,720.00 4446 Alwe ST MacRA 92,210.00 93,720.00 <						
Subbind (k) Spech Therapy - Medicare (282,385,00) 0.00 (282,385,00) (683,985,00) Subgroup : [81] Spech Therapy - Medicare Contractual Allowance 52,210,00 0.00 52,210,00 1,046,00 43345 Alow ST INCR 5,2710,00 0.00 5,2710,00 1,046,00 4345 Alow ST INCR 5,2710,00 0.00 5,2710,00 5,0220,00 64465 Alow ST INCR 1,046,00 0.00 1,046,00 6,022,00 Subgroup : [60] Spech Therapy - Non-medicare 1,040,00 0,00 (1,532,00) (1,632,00) 41240 ST Medical (1,632,00) 0.00 (1,632,00) (1,642,00) Subgroup : [60] Spech Therapy - Non-medicare 1,602,00 0.00 1,632,00 (1,642,00) Subgroup : [60] Spech Therapy - Non-medicare Contractual Allowance 1,522,00 0.00 1,532,00 3,821,00 Subforus : [61] Spech Therapy - Non-medicare Contractual Allowance 1,522,00 0.00 (1,64,050,00) (1,67,76,00) Subforus : [61] Cocupational Therapy -			(71,405.00)		(71,405.00)	(52,658.00)
Subgroup: [8] Speech Therapy - Medicare Contractual Allowance 50,210,00 50,210,00 50,210,00 50,210,00 50,210,00 50,210,00 50,210,00 50,210,00 50,210,00 50,210,00 50,210,00 50,210,00 50,210,00 50,210,00 50,210,00 50,220,00 50,220,00 50,220,00 50,220,00 50,220,00 50,220,00 50,220,00 50,220,00 50,220,00 50,220,00 50,200,00 50,220,00 50,200,00 50,220,00 50,200,00 50,220,00 50,200,00<						
Allws TMCRA 552(10.0) 0.00 522(10.0) 39,726.00 3335 Allws TMCRA 5,724.00 0.00 2,724.00 1,066.00 4485 Allws TMCRA Reglacement 8,5208.00 0.00 8,5208.00 6,5154.00 Subgroup (BC) Speech Therapy - Medicare Contractual Allowance 154,037.00 0.00 164,000 (#40.0) Subgroup (BC) Speech Therapy - Non-medicare (#40.00) 0.00 (#42.00) (#40.00) Subgroup (BC) Speech Therapy - Non-medicare (#4.52.00) 0.00 (#4.52.00) (#4.00) Subgroup (BC) Speech Therapy - Non-medicare Contractual Allowance 4.52.00 0.00 1.53.00 9.400 Subgroup (BC) Speech Therapy - Non-medicare Contractual Allowance 5.122.00 0.00 6.522.00 3.621.00 Subford (D) Speech Therapy - Non-medicare Contractual Allowance 5.122.00 0.00 6.522.00 3.621.00 Subford (DA) Cocupational Therapy - Modicare 6.152.00 0.00 1.637.00 1.627.00 1.627.00 1.627.00 1.627.00 <t< td=""><td>oubtotal [04]</td><td></td><td>(102,000.00)</td><td>0.00</td><td>(202,000.00)</td><td>(100,000.00)</td></t<>	oubtotal [04]		(102,000.00)	0.00	(202,000.00)	(100,000.00)
4345 Allw ST MCR B 2.75 400 0.00 2.75 400 1.068.00 4445 Allw ST Medicane Replacement 85.268.00 0.00 88.208.00 65.154.00 Subgroup ; [60] Speech Theray - Non-medicare 154.037.00 0.00 154.037.00 105.408.00 Subgroup ; [60] Speech Theray - Non-medicare (1.530.00) 0.00 (1.520.00) 0.02 (3.522.00) 0.3221.00) Subgroup ; [60] Speech Theray - Non-medicare Contractual Allowance (6.522.00) 0.00 (1.530.00) (4.016.00) Subgroup ; [60] Speech Theray - Non-medicare Contractual Allowance 5.152.00 0.00 1.530.00 94.00 Subgroup ; [61] Speech Theray - Non-medicare Contractual Allowance 6.522.00 0.00 1.530.00 94.00 Subgroup ; [61] Cocupational Theray - Medicare 6.522.00 0.00 (1.51.740.00) (1.74.78.00) Subgroup ; [62] Cocupational Theray - Medicare (1.96.80.00) 0.00 (1.96.80.00) (1.96.80.00) (1.96.87.80.00) (1.97.87.80) (1.97.87.80) (1.97.87.80) (1.97.87.80)						
4445 Allw ST Instrance B 8,805.00 0.00 8,805.00 6,302.00 84655 Allw ST Medicane Replacement 85,087.00 0.00 85,087.00 193,248.00 Subgroup (BC) Speech Therapy - Non-medicare (1,530.00) 0.00 (1,530.00) (1,630.00) 41240 ST Instance Other (0,522.00) 0.00 (1,530.00) (1,620.00) Subgroup (BC) Speech Therapy - Non-medicare Contractual Allowance 41245 (1,620.00) (1,620.00) (1,620.00) Subgroup (BC) Speech Therapy - Non-medicare Contractual Allowance 5132.00 0.00 6,522.00 3,221.00 Subgroup (BC) Speech Therapy - Non-medicare Contractual Allowance 5132.00 0.00 6,522.00 3,221.00 Subgroup (BA) Occupational Therapy - Modicare 6,522.00 0.00 (153.740.00) (147.376.00) Subgroup (BA) Occupational Therapy - Modicare 6,522.00 0.00 (153.740.00) (147.376.00) Subgroup (BA) Occupational Therapy - Modicare 6,527.00 0.00 (153.740.00) (147.376.00) <						
Substal (B) Speech Therap - Medicare Contractual Allowance 154.037.00 0.00 154.037.00 103.248.00 Subgroup : (C) Speech Therap - Non-medicare (1.530.00) 0.00 (1.530.00) (0.400) 41240 ST Medical (1.530.00) 0.00 (6.522.00) (3.221.00) Subgroup : (D) Speech Therap - Non-medicare Contractual Allowance (4.52.00) 0.00 (4.515.00) Subgroup : (D) Speech Therap - Non-medicare Contractual Allowance (5.52.00) 0.00 (4.515.00) Subgroup : (D) Speech Therap - Non-medicare Contractual Allowance (5.52.00) 0.00 (4.515.00) Subgroup : (BA) Cocupational Therap - Medicare (5.52.00) 0.00 (4.7375.00) Subgroup : (BA) Cocupational Therap - Medicare (166.63.00) 0.00 (169.63.00) (24.735.00) Subgroup : (BA) Cocupational Therap - Medicare (548.755.69) 0.00 (169.67.700.0) (24.735.00) Subgroup : (BA) Cocupational Therap - Medicare (548.755.69) 0.00 (157.740.00) (24.735.00) (24.268.30.0) (24.268.30.0)						
Subgroup: [80] Speech Therap - Non-medicare (1530.00) 0.00 (1530.00) (6400) 41450 ST Insurance Other (652.00) 0.00 (652.00) (65						
11240 ST Medicaid (1630.00) 0.00 (1630.00) (94.00) 54450 ST Insurance Oher (6.522.00) 0.00 (1630.00)	Subtotal [8B]	Speech Therapy - Medicare Contractual Allowance	154,037.00	0.00	154,037.00	103,248.00
4450 ST Insurance Other (6,522,00) 0.00 (6,522,00) (6,321,00) Subtoriu [CC] Speech Therapy - Non-medicare Contractual Allowance (6,522,00) 0.00 (6,522,00) (6,315,00) (4,405,00) Subtoriu [CD] Speech Therapy - Non-medicare Contractual Allowance 1530,00 0.00 1,530,00 3421,00 Subtoriu [DD] Speech Therapy - Mon-medicare Contractual Allowance 6,522,00 0.00 6,552,00 3,321,00 Subtoriu [DD] Speech Therapy - Mon-medicare Contractual Allowance 6,152,00 0.00 6,152,00 4,015,00 Subtoriu [DA] Occupational Therapy - Medicare (109,650,00) 0.00 (151,749,00) (147,376,00) 44535 OT Medicare Replacement (242,693,00) 0.00 (242,693,00) (217,030,00) Subtoriu [PA] Occupational Therapy - Medicare 698,755,00 0.00 15,740,00 17,730,00 Subtoriu [PA] Occupational Therapy - Medicare Contractual Allowance 4 4 4 4 4 4 4 4 4 4 4 4		Speech Therapy - Non-medicare				
Subtotal [BC] Speech Therapy - Non-medicare Contractual Allowance (8,152,00) (8,152,00) (4,615,00) Subgroup : [BD] Speech Therapy - Non-medicare Contractual Allowance 6,152,00 0,000 6,552,00 3,821,00 Subtotal [BD] Speech Therapy - Non-medicare Contractual Allowance 6,152,00 0,000 6,152,00 4,015,00 Subtotal [BD] Cocupational Therapy - Medicare (101,740,00) 0,000 (151,740,00) (147,376,00) 43330 OT Medicare A (104,653,00) 0,000 (194,653,00) (104,663,00) (130,380,00) (143,330,00) (143,380,00) (143,380,00) (143,380,00) (143,380,00) (143,380,00) (143,380,00) (143,380,00) (143,380,00) (143,380,00) (143,380,						
112.6 Allow ST MCD 1680.00 0.00 1.830.00 94.00 Subtotal [RD] Speech Therapy - Non-medicare Contractual Allowance 6.522.00 0.00 6.522.00 0.321.00 Subtotal [RD] Speech Therapy - Non-medicare Contractual Allowance 6.152.00 0.00 6.152.00 4.015.00 Subgroup : [BA] Occupational Therapy - Medicare 9.00 0.00 (151.748.00) 0.00 (151.748.00) 0.00 (151.748.00) 0.00 (147.376.00) (147.376.00) 44350 OT Instrance B (109.650.00) (147.376.00) 0.00 (124.2683.00) 0.00 (124.2683.00) 0.00 (124.2683.00) 0.00 (124.2683.00) 0.01 (137.376.00) 0.01 (137.376.00) 0.01 (137.376.00) 0.01 (137.376.00) 0.00 (137.376.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0						
112.6 Allow ST MCD 1680.00 0.00 1.830.00 94.00 Subtotal [RD] Speech Therapy - Non-medicare Contractual Allowance 6.522.00 0.00 6.522.00 0.321.00 Subtotal [RD] Speech Therapy - Non-medicare Contractual Allowance 6.152.00 0.00 6.152.00 4.015.00 Subgroup : [BA] Occupational Therapy - Medicare 9.00 0.00 (151.748.00) 0.00 (151.748.00) 0.00 (151.748.00) 0.00 (147.376.00) (147.376.00) 44350 OT Instrance B (109.650.00) (147.376.00) 0.00 (124.2683.00) 0.00 (124.2683.00) 0.00 (124.2683.00) 0.00 (124.2683.00) 0.01 (137.376.00) 0.01 (137.376.00) 0.01 (137.376.00) 0.01 (137.376.00) 0.00 (137.376.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0.00 (151.749.00) 0			<u> </u>			
4455 Allow ST Insurance Other 6.522.00 0.00 6.522.00 3.821.00 Subtotal [8] Speech Therapy - Non-medicare Contractual Allowance 8,152.00 0.00 8,152.00 4,015.00 Subgroup: [9] Occupational Therapy - Medicare 114,000 4,015.00 104,000 43330 OT Medicare A (151,749.00) 0.00 (194,653.00) 103.036.00 4450 OT Insurance B (194,663.00) 0.00 (194,653.00) (224,083.00) (224,083.00) (217,03.00) Subtotal [9] Occupational Therapy - Medicare (687,755.00) 0.00 (688,755.00) (688,755.00) (688,755.00) (688,755.00) (688,755.00) (688,755.00) (688,755.00) (688,755.00) (77,756.00) (77,756.00) (77,756.00) (77,756.00) (77,756.00) (77,756.00) (77,756.00) (77,756.00) (77,756.00) (77,760,757.00) (77,760,757.00) (77,763.00) (77,760,756.00) (77,760,756.00) (77,760,756.00) (77,700) (77,700) (77,700) (77,700) (77,700) (77,700) (77,700) (77,700) <td></td> <td></td> <td>1 630 00</td> <td>0.00</td> <td>1 630 00</td> <td>04.00</td>			1 630 00	0.00	1 630 00	04.00
Subgroup: [SA] Occupational Therapy - Medicare (151,749,00) 0.00 (151,749,00) (147,376,00) 4330 OT Medicare B (109,650,00) 0.00 (194,663,00) (194,663,00) (194,663,00) (194,663,00) (194,663,00) (194,663,00) (194,663,00) (194,663,00) (194,663,00) (194,663,00) (194,663,00) (194,663,00) (194,663,00) (194,663,00) (217,903,00) (2119,913,00) (2119,913,00)						
4320 OT Medicare A (151,749 00) 0.00 (151,749 00) (147,376.00) 4330 OT Medicare B (109,650.00) 0.00 (194,663.00) (242,693.00) (243,693.00) (242,693.00) (217,603.00) (242,693.00) (242,69	Subtotal [8D]	Speech Therapy - Non-medicare Contractual Allowance	8,152.00	0.00	8,152.00	4,015.00
4320 OT Medicare A (151,740,00) (147,376,00) 4330 OT Medicare B (109,650,00) 0.00 (194,663,00) 0.00 (194,663,00) (242,693,00) (247,972,00) (443,776,00) (476,473,00) (476,473,00) (476,473,00) (476,473,00) (476,473,00) (476,473,00) (476,473,00) (476,47	Subgroup · [94]	Occupational Therapy - Medicare				
44830 OT Insurance B (194,683.00) 0.00 (194,683.00) (217,093.00)	• • • •		(151,749.00)	0.00		(147,376.00)
4630 OT Medicare Replacement (242,693.00) 0.00 (242,693.00) (217,903.00) Subtroal [9A] Occupational Therapy - Medicare (698,755.00) 0.00 (698,756.00) (698,756.00) Subgroup : [9B] Occupational Therapy - Medicare Contractual Allowance 43235 Allow OT MCR B 151,749.00 0.00 151,749.00 147,376.00 43335 Allow OT MCR B 18,564.00 0.00 18,564.00 17,972.00 44335 Allow OT Medicare Replacement 242,693.00 0.00 242,693.00 2						
Subtotal [9A] Occupational Therapy - Medicare (698,755.00) 0.00 (698,755.00) (589,755.00) Subgroup : [9B] Occupational Therapy - Medicare Contractual Allowance 0.00 151,749.00 0.00 151,749.00 147,376.00 43235 Allow OT MCR A 15,749.00 0.00 155,640.0 179,72.00 44335 Allow OT MCR B 63,467.00 0.00 63,467.00 28,692.00 44535 Allow OT Medicare Replacement 242,693.00 0.00 242,693.00 217,903.00 Subtotal [9B] Occupational Therapy - Medicare Contractual Allowance 476,473.00 0.00 476,473.00 411,943.00 Subgroup : [9C] Occupational Therapy - Non-medicare (963.00) 0.00 (4,066.00) (2,077.00) 44530 OT Insurance Other (19,965.00) 0.00 (14,936.00) (10,00,00) Subtotal [9C] Occupational Therapy - Non-medicare Contractual Allowance 4,066.00 2,077.00 0.00 (14,936.00) (12,178.00) Subgroup : [9D] Occupational Therapy - Non-medicare Contractual Allowance 4,066.00 <td< td=""><td></td><td>of modified b</td><td></td><td></td><td></td><td></td></td<>		of modified b				
43235 Allow OT MCR A 151,749.00 0.00 151,749.00 147,376.00 43335 Allow OT MCR B 18,564.00 0.00 18,564.00 17,972.00 44335 Allow OT MCR B 63,467.00 0.00 63,467.00 28,692.00 45335 Allow OT Medicare Replacement 242,693.00 0.00 242,693.00 217,903.00 Subtotal [9B] Occupational Therapy - Medicare Contractual Allowance 476,473.00 0.00 476,473.00 411,943.00 Subgroup : [9C] Occupational Therapy - Non-medicare						
43235 Allow OT MCR A 151,749.00 0.00 151,749.00 147,376.00 43335 Allow OT MCR B 18,564.00 0.00 18,564.00 17,972.00 44335 Allow OT MCR B 63,467.00 0.00 63,467.00 28,692.00 45335 Allow OT Medicare Replacement 242,693.00 0.00 242,693.00 217,903.00 Subtotal [9B] Occupational Therapy - Medicare Contractual Allowance 476,473.00 0.00 476,473.00 411,943.00 Subgroup : [9C] Occupational Therapy - Non-medicare	Subgroup - [98]	Occupational Therapy Modicare Contractual Allowance				
44835 Allow OT Insurance B 63,467.00 242,693.00 242,693.00 242,693.00 242,693.00 242,693.00 242,693.00 217,903.00 411,943.00 Subtotal [9B] Occupational Therapy - Medicare Contractual Allowance 476,473.00 0.00 476,473.00 411,943.00 Subgroup : [9C] Occupational Therapy - Non-medicare (963.00) 0.00 (963.00) (76.00) 41230 OT Medicaid (4,066.00) 0.00 (14,936.00) (10,030.00) (11,030.00) (12,183.00) (10,030.00) (12,183.00) <th< td=""><td></td><td></td><td>151,749.00</td><td>0.00</td><td>151,749.00</td><td>147,376.00</td></th<>			151,749.00	0.00	151,749.00	147,376.00
46535 Allow OT Medicare Replacement 242,693.00 0.00 242,693.00 217,903.00 Subtotal [9B] Occupational Therapy - Medicare Contractual Allowance 476,473.00 0.00 476,473.00 411,943.00 Subgroup : [9C] Occupational Therapy - Non-medicare (963.00) 0.00 (963.00) (76.00) 41230 OT Insurance Other (14,936.00) 0.00 (4066.00) (20,077.00) 44530 OT Insurance Other (14,936.00) 0.00 (14,936.00) (10,030.00) Subtotal [9C] Occupational Therapy - Non-medicare (19,965.00) 0.00 (19,965.00) (12,183.00) Subtotal [9C] Occupational Therapy - Non-medicare Contractual Allowance 4,066.00 0.00 4,066.00 2,077.00 44535 Allow OT Insurance Other 14,936.00 0.00 14,936.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 0.00 12,107.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 12,107.00 Subtotal [9D]						
Subtotal [9B] Occupational Therapy - Medicare Contractual Allowance 476,473.00 0.00 476,473.00 411,943.00 Subgroup : [9C] Occupational Therapy - Non-medicare (963.00) 0.00 (963.00) (76.00) 41230 OT Private (963.00) 0.00 (40.066.00) (2.077.00) 44530 OT Insurance Other (14,936.00) 0.00 (14,936.00) (10.030.00) Subtotal [9C] Occupational Therapy - Non-medicare (19,966.00) 0.00 (19,966.00) (10,030.00) Subporup : [9D] Occupational Therapy - Non-medicare Contractual Allowance 4,066.00 0.00 4,066.00 2,077.00 41235 Allow OT Insurance Other 14,936.00 0.00 14,936.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 14,030.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 10,030.00 10,030.00 Subporup : [10A] Other - Medicare 14,936.00 0.00 (17.00) 13,851.00 10,030.00 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
40230 OT Private (963.00) 0.00 (963.00) (76.00) 41230 OT Medicaid (4,066.00) 0.00 (4,066.00) (2,077.00) 44530 OT Insurance Other (14,936.00) 0.00 (14,936.00) (12,183.00) Subtotal [9C] Occupational Therapy - Non-medicare Contractual Allowance (19,965.00) (19,965.00) (12,183.00) Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 4,066.00 0.00 4,066.00 2,077.00 44535 Allow OT IncD 4,066.00 0.00 14,936.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 10,030.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 12,107.00 12,107.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 10,030.00 12,107.00 Subgroup : [10A] Other - Medicare 14,936.00 0.00 (17.00) 13,851.00 43220 Lab Medicare A (15,813.00)						
40230 OT Private (963.00) 0.00 (963.00) (76.00) 41230 OT Medicaid (4,066.00) 0.00 (4,066.00) (2,077.00) 44530 OT Insurance Other (14,936.00) 0.00 (14,936.00) (12,183.00) Subtotal [9C] Occupational Therapy - Non-medicare Contractual Allowance (19,965.00) (19,965.00) (12,183.00) Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 4,066.00 0.00 4,066.00 2,077.00 44535 Allow OT IncD 4,066.00 0.00 14,936.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 10,030.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 12,107.00 12,107.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 10,030.00 12,107.00 Subgroup : [10A] Other - Medicare 14,936.00 0.00 (17.00) 13,851.00 43220 Lab Medicare A (15,813.00)						
41230 OT Medicaid (4,066.00) 0.00 (4,066.00) (2,077.00) 44530 OT Insurance Other (14,936.00) 0.00 (14,936.00) (10,030.00) Subtotal [9C] Occupational Therapy - Non-medicare (19,965.00) 0.00 (19,965.00) (12,183.00) Subgroup : [9D] Occupational Therapy - Non-medicare Contractual Allowance 4 4 4 (14,936.00) 0.00 (19,965.00) (12,183.00) 41235 Allow OT Insurance Other 14,936.00 0.00 4,066.00 2,077.00 44535 Allow OT Insurance Other 14,936.00 0.00 14,936.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 10,030.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 10,030.00 10,030.00 Subtotal [9D] Other - Medicare 19,002.00 0.00 (17,00) 13,851.00 43200 Medicare A (15,813.00) 0.00 (16,813.00) 11,085.00 43255 <td></td> <td></td> <td>(963.00)</td> <td>0.00</td> <td>(963.00)</td> <td>(76.00)</td>			(963.00)	0.00	(963.00)	(76.00)
Subtotal [9C] Occupational Therapy - Non-medicare (19,965.00) (12,183.00) Subgroup: [9D] Occupational Therapy - Non-medicare Contractual Allowance 4,066.00 0.00 (19,965.00) (12,183.00) 41235 Allow OT MCD 4,066.00 0.00 4,066.00 2,077.00 44535 Allow OT Insurance Other 14,936.00 0.00 14,936.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 0.00 19,002.00 12,107.00 Subgroup: [10A] Other - Medicare (17.00) 0.00 (17.00) 13,851.00 43250 Lab Medicare A (15,813.00) 0.00 (15,813.00) (11,085.00) 43255 Allow Lab MCR A 15,813.00 0.00 15,813.00 11,085.00 43270 X-ray Medicare A (2,569.00) 0.00 (2,569.00) 3,876.00) 43310 Pharmacy MCR B (4,861.00) 0.00 (4,881.00) (6,077.00)					. ,	
Subgroup : [9D] Occupational Therapy - Non-medicare Contractual Allowance 4,066.00 0.00 4,066.00 2,077.00 41235 Allow OT Inco 14,936.00 0.00 14,936.00 10,030.00 44535 Allow OT Insurance Other 14,936.00 0.00 14,936.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 0.00 19,002.00 12,107.00 Subgroup : [10A] Other - Medicare 19,002.00 0.00 (17.00) 13,851.00 43250 Lab Medicare A (15,813.00) 0.00 (17.00) 14,085.00 43255 Allow Lab MCR A 15,813.00 0.00 15,813.00 11,085.00 43270 X-ray Medicare A (2,569.00) 0.00 (2,569.00) (3,876.00) 43275 Allow X-ray MCR A 2,589.00 0.00 2,659.00 3,876.00 43310 Pharmacy MCR B (4,861.00) 0.00 (4,861.00) (6,077.00)						
41235 Allow OT MCD 4,066.00 0.00 4,066.00 2,077.00 44535 Allow OT Insurance Other 14,936.00 0.00 14,936.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 0.00 19,002.00 12,107.00 Subtotal [9D] Other - Medicare 19,002.00 0.00 19,002.00 12,107.00 Subtotal [9D] Other - Medicare Discounts (17.00) 0.00 (17.00) 13,851.00 43120 Medicare Discounts (15,813.00) 0.00 (15,813.00) (11,085.00) 43255 Allow Lab MCR A 15,813.00 0.00 15,813.00 11,085.00 43270 X-ray Medicare A (2,569.00) 0.00 (2,569.00) (3,876.00) 43215 Allow X-ray MCR A 2,569.00 0.00 (2,569.00) 3,876.00 43210 Pharmacy MCR B (4,861.00) 0.00 (4,861.00) 6,077.00	Subtotal [9C]	Occupational Therapy - Non-medicare	(19,965.00)	0.00	(19,965.00)	(12,183.00)
44535 Allow OT Insurance Other 14,936.00 0.00 14,936.00 10,030.00 Subtotal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 0.00 19,002.00 12,107.00 Subgroup : [10A] Otter - Medicare 12,107.00 12,107.00 Subgroup : [10A] Otter - Medicare 43120 Medicare Discounts (17.00) 0.00 (17.00) 13,851.00 43250 Lab Medicare A (15,813.00) 0.00 (15,813.00) 0.10 (15,813.00) 43255 Allow Lab MCR A 15,813.00 0.00 (2,569.00) (3,876.00) 43270 X-ray Medicare A (2,569.00) 0.00 (2,569.00) (3,876.00) 43310 Pharmacy MCR B (4,861.00) 0.00 (4,861.00) 0.00 (4,861.00) (6,077.00)	• • • •					
Subtoal [9D] Occupational Therapy - Non-medicare Contractual Allowance 19,002.00 0.00 19,002.00 12,107.00 Subgroup : [10A] Other - Medicare 43120 Medicare Discounts (17.00) 0.00 (17.00) 13,851.00 43250 Lab Medicare A (15,813.00) 0.00 (15,813.00) (11,085.00) 43255 Allow Lab MCR A 15,813.00 0.00 15,813.00 11,085.00 43270 X-ray Medicare A (2,569.00) 0.00 (2,569.00) (3,876.00) 43275 Allow X-ray MCR A 2,569.00 0.00 2,569.00 3,876.00 43310 Pharmacy MCR B (4,861.00) 0.00 (4,861.00) (6,077.00)						
43120 Medicare Discounts (17.00) 0.00 (17.00) 13,851.00 43250 Lab Medicare A (15,813.00) 0.00 (15,813.00) (11,085.00) 43255 Allow Lab MCR A 15,813.00 0.00 15,813.00 10,085.00 43270 X-ray Medicare A (2,569.00) 0.00 (2,569.00) (3,876.00) 43275 Allow X-ray MCR A 2,669.00 0.00 (2,681.00) 3,876.00 43310 Pharmacy MCR B (4,861.00) 0.00 (4,861.00) (6,077.00)						
43120 Medicare Discounts (17.00) 0.00 (17.00) 13,851.00 43250 Lab Medicare A (15,813.00) 0.00 (15,813.00) (11,085.00) 43255 Allow Lab MCR A 15,813.00 0.00 15,813.00 10,085.00 43270 X-ray Medicare A (2,569.00) 0.00 (2,569.00) (3,876.00) 43275 Allow X-ray MCR A 2,669.00 0.00 (2,681.00) 3,876.00 43310 Pharmacy MCR B (4,861.00) 0.00 (4,861.00) (6,077.00)						
43250 Lab Medicare A (15, 813.00) 0.00 (15, 813.00) (11, 085.00) 43255 Allow Lab MCR A 15, 813.00 0.00 15, 813.00 11, 085.00 43270 X-ray Medicare A (2, 569.00) 0.00 (2, 569.00) (3, 876.00) 43275 Allow X-ray MCR A 2, 569.00 0.00 (2, 569.00) 3, 876.00 43310 Pharmacy MCR B (4, 861.00) 0.00 (4, 861.00) (6, 077.00)			(17.00)	0.00	(17.00)	13.851.00
43270 X-ray Medicare A (2,569.00) 0.00 (2,569.00) (3,876.00) 43275 Allow X-ray MCR A 2,569.00 0.00 2,569.00 3,876.00 43310 Pharmacy MCR B (4,861.00) 0.00 (4,861.00) (6,077.00)	43250	Lab Medicare A	(15,813.00)			(11,085.00)
43275 Allow X-ray MCR A 2,569.00 0.00 2,569.00 3,876.00 43310 Pharmacy MCR B (4,861.00) 0.00 (4,861.00) (6,077.00)						
43310 Pharmacy MCR B (4,861.00) 0.00 (4,861.00) (6,077.00)						
46550 Lab Medicare Replacement (19,016.00) 0.00 (19,016.00) (17,461.00)	43310	Pharmacy MCR B	(4,861.00)	0.00	(4,861.00)	(6,077.00)
	46550	Lab Medicare Replacement	(19,016.00)	0.00	(19,016.00)	(17,461.00)

46555	Allow Lab Medicare Replacement	19,016.00		0.00	19,016.00	17,461.00
46570	Xray Medicare Replacement	(3,491.00)		0.00	(3,491.00)	(3,944.00)
46575	Allow Xray Medicare Replacement	3,491.00		0.00	3,491.00	3,944.00
Subtotal [10A]	Other - Medicare	(4,878.00)	-	0.00	(4,878.00)	7,774.00
Subgroup : [10B]	Other - Non-medicare					
44550	Lab Insurance Other	(1,436.00)		0.00	(1,436.00)	(391.00)
44555	Allow Lab Insurance Other	1,436.00		0.00	1,436.00	391.00
44570	X-ray Insurance Other	(241.00)		0.00	(241.00)	(85.00)
44575	Allow X-ray Insurance Other	241.00		0.00	241.00	85.00
Subtotal [10B]	Other - Non-medicare	0.00	-	0.00	0.00	0.00
			-			
Subgroup : [15]	Interest Income					
4846-010	INTEREST INCOME	0.00		(6.00)	(6.00)	0.00
			RJE - 4	(6.00)		
Subtotal [15]	Interest Income	0.00	-	(6.00)	(6.00)	0.00
			-		<u>`</u>	
Subgroup : [18]	Other Revenue					
44120	Insurance Other Dividends	(17,425.00)		0.00	(17,425.00)	(21,890.00)
49170	Bad Debt Recovery	0.00		0.00	0.00	(1,544.00)
49200	Miscellaneous Income	(385,004.00)		0.00	(385,004.00)	0.00
49250	Rebate income	0.00		0.00	0.00	(17,108.00)
49400	PPP Loan Forgiveness	(1,342,345.00)		0.00	(1,342,345.00)	0.00
Subtotal [18]	Other Revenue	(1,744,774.00)	-	0.00	(1,744,774.00)	(40,542.00)
• •			-			
Total [30]	Statement of Revenue	(13,072,535.00)	-	(6.00)	(13,072,541.00)	(12,311,314.00)
				(***)	, , , , , , , , , , , , , , , , , , , ,	,
	NET (INCOME) LOSS	(661,367.00)		(45,752.00)	(707,119.00)	181,752.00
		(001,001.00)	•	(30,702.00)	(.07,115.00)	101,702.00

Client:	Avon Health Care
Engagement:	Medicaid - Avon Health Care 2021 Cost Report
Period Ending:	9/30/2021
Trial Balance:	A.01 - TB-CCNH
Workpaper:	A.04 - Grouping Report - Balance Sheet
Account	Description

иопарет.	A.04 - Grouping Report - Balance Sheet					
Account	Description	ADJ	JE Ref #	RJE	FINAL	1st PP-FINAL
		9/30/2021			9/30/2021	9/30/2020
Group : [31-32]	Assets					
Subgroup : [A1]	Cash					
1020	Petty Cash	300.00		0.00	300.00	300.00
1140	Cash Operating Account	2,222,222.00		0.00	2,222,222.00	3,056,553.00
1620	Cash Resident Funds	53,851.00		0.00	53,851.00	38,765.00
Subtotal [A1] Cas	sh	2,276,373.00	_	0.00	2,276,373.00	3,095,618.00
ubgroup : [A2]	A/R					
3010	A/R Private	32,424.00		0.00	32,424.00	153,059.00
3020	A/R Medicaid	889,251.00		0.00	889,251.00	1,049,068.00
3040	A/R Medicare A	83,000.00		0.00	83,000.00	153,825.00
3050	A/R Medicare B	(69,241.00)		0.00	(69,241.00)	39,450.00
3070	A/R Medicare Replacement	29,825.00		0.00	29,825.00	103,185.00
3080 3290	A/R Insurance Other Allowance for Doubtful Accounts	73,683.00 (17,472.00)		0.00 0.00	73,683.00 (17,472.00)	81,636.00 (15,141.00)
3300	A/R Refunds	4,483.00		0.00	4,483.00	5,535.00
3600	A/R Suspense	(436.00)		0.00	(436.00)	(436.00)
ubtotal [A2] A/R	•	1,025,517.00		0.00	1,025,517.00	1,570,181.00
					i	
ubgroup : [A3]	A/R Other					
larcum 110	State Refund Receivable	0.00		57,946.00	57,946.00	0.00
	Other	0.00	RJE - 2	57,946.00 57,946.00	E7 046 00	0.00
ubtotal [A3] A/R	Other	0.00	_	57,946.00	57,946.00	0.00
ubgroup : [A4]	Inventories					
5380	Inventory	39,943.00		0.00	39,943.00	56,367.00
ubtotal [A4] Inve	entories	39,943.00		0.00	39,943.00	56,367.00
ubgroup : [A5]	Prepaid Expenses					
5300 5600	Prepaid Insurance	47,900.00 0.00		0.00	47,900.00 (12,194.00)	46,454.00 0.00
5600	Prepaid Federal Taxes	0.00	RJE - 2	(12,194.00) (12,194.00)	(12,194.00)	0.00
5800	Prepaid Other	18,178.00	NJL - Z	0.00	18,178.00	30,912.00
Subtotal [A5] Pre		66,078.00	_	(12,194.00)	53,884.00	77,366.00
			_			
Subgroup : [B3]	Buildings					
9220	Buildings	7,495.00		0.00	7,495.00	7,495.00
9290	Accum Depr Buildings	(2,280.00)	_	0.00	(2,280.00)	(1,905.00)
Subtotal [B3] Bui	laings	5,215.00	_	0.00	5,215.00	5,590.00
Subgroup : [B4]	Leasehold Improvements					
9420	Leasehold Improvements	2,476,807.00		0.00	2,476,807.00	2,440,092.00
9490	Accum Depr Leasehold Impvmts	(1,916,532.00)		0.00	(1,916,532.00)	(1,806,522.00)
Subtotal [B4] Lea	sehold Improvements	560,275.00	_	0.00	560,275.00	633,570.00
Subgroup : [B6]	Movable Equipment	000 700 00		0.00	200 700 00	054 470 00
9520 9590	Furniture & Equipment Accum Depr Furniture & Equipmt	368,708.00		0.00 0.00	368,708.00	354,478.00
9620	Computer Software	(257,184.00) 132,141.00		0.00	(257,184.00) 132,141.00	(246,668.00) 132,141.00
9690	Accum Depr Computer Software	(122,873.00)		0.00	(122,873.00)	(118,754.00)
	vable Equipment	120,792.00	_	0.00	120,792.00	121,197.00
					·	
ubgroup : [D6]	Loans to Owners or Related Parties					
7690	Due from Avon Realty	0.00		0.00	0.00	14,817.00
7700	Due from West Hartford Rehab	845,220.00	_	0.00	845,220.00	730,191.00
otal [31-32] Ass	ans to Owners or Related Parties	845,220.00 4,939,413.00	_	0.00 45,752.00	845,220.00 4,985,165.00	745,008.00 6,304,897.00
otal [51-52] ASS	613	4,333,413.00	_	43,732.00	4,505,105.00	0,304,037.00
roup : [33-34]	Liabilities					
ubgroup : [A1]	A/P					
1020	Accounts Payable Trade	(190,600.00)		0.00	(190,600.00)	(226,586.00)
ubtotal [A1] A/P		(190,600.00)		0.00	(190,600.00)	(226,586.00)
ubgroup : [A3]	Loans Payable for Equipment					(0 0 0 0 0 0 ···
2200M	CP of CL&P Loan	0.00	_	0.00	0.00	(2,974.00)
ubiotai [A3] L0a	ans Payable for Equipment	0.00		0.00	0.00	(2,974.00)
ubgroup : [A4]	Accrued Payroll					
5360	P/R Garnishment	(33.00)		0.00	(33.00)	(33.00)
	Accrued Payroll	(81,873.00)		0.00	(81,873.00)	(188,327.00)
5500 5650	Accrued Payroll Accrued Vac Personal Sick	(81,873.00) (205,656.00)	_	0.00	(81,873.00) (205,656.00)	(188,327.00) (175,062.00)

Subgroup : [A6] Accrued Payroll Taxes Payable

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Client:	Avon Health Care	
Engagement:	Medicaid - Avon Health Care 2021 Cost Report	
Period Ending:	9/30/2021	
Trial Balance:	A.01 - TB-CCNH	
Workpaper:	A.04 - Grouping Report - Balance Sheet	
Account	Description	

workpaper.	A.04 - Grouping Report - Balance Sh	leet				
Account	Description	ADJ	JE Ref #	RJE	FINAL	1st PP-FINAL
		9/30/2021			9/30/2021	9/30/2020
25600	Accrued FICA Taxes	(5,386.00)		0.00	(5,386.00)	(12,229.00)
25610	Accrued SUI Taxes	(187.00)		0.00	(187.00)	(448.00)
25620	Accrued FUI Taxes	(26.00)		0.00	(26.00)	(74.00)
Subtotal [A6] Ac	crued Payroll Taxes Payable	(5,599.00)		0.00	(5,599.00)	(12,751.00)
Subgroup : [A12]] Other Current Liabilities					
21300	Credit Balance Liabilities	(207,675.00)		0.00	(207,675.00)	(352,176.00)
21400	Medicare Advance	(86,342.00)		0.00	(86,342.00)	(250,000.00)
21600	Due to State	(109,000.00)		0.00	(109,000.00)	(109,000.00)
21610	Due to Cash Resident Funds	(53,851.00)		0.00	(53,851.00)	(38,765.00)
25680	Accrued Pension	(117,366.00)		0.00	(117,366.00)	(113,539.00)
26100	Accrued Accounting	(16,225.00)		0.00	(16,225.00)	(17,350.00)
26110	Accrued User Fee	(312,273.00)		0.00	(312,273.00)	(315,489.00)
26120	Accrued Property Taxes	(1,948.00)		0.00	(1,948.00)	(1,882.00)
26130	Accrued Insurance Financing	(25,390.00)		0.00	(25,390.00)	(24,822.00)
26150	Accrued Expense Other	(3,439.00)		0.00	(3,439.00)	(6,828.00)
Subtotal [A12] O	ther Current Liabilities	(933,509.00)		0.00	(933,509.00)	(1,229,851.00)
Subgroup : [B4]	Other Long-Term Liabilities					
21420	PPP- Covid	0.00		0.00	0.00	(1,342,345.00)
23115	Misc. HHS Income	(312,943.00)		0.00	(312,943.00)	(782,488.00)
Subtotal [B4] Otl	her Long-Term Liabilities	(312,943.00)		0.00	(312,943.00)	(2,124,833.00)
Total [33-34] Lial	bilities	(1,730,213.00)	_	0.00	(1,730,213.00)	(3,960,417.00)
Group : [35]	Equity					
Subgroup : [B2]	Capital Stock					
30110	Capital Stock	(156,000.00)		0.00	(156,000.00)	(156,000.00)
Subtotal [B2] Ca	pital Stock	(156,000.00)		0.00	(156,000.00)	(156,000.00)
Subgroup : [B5] 30100	Cumulated Earnings Shareholder Distributions	152 700 00		0.00	152.700.00	151,200.00
30100		152,700.00		0.00		,
	Retained Earnings	(2,544,533.00)		0.00	(2,544,533.00)	(2,521,432.00)
	mulated Earnings	(2,391,833.00) (2,547,833.00)		0.00	(2,391,833.00) (2,547,833.00)	(2,370,232.00) (2,526,232.00)
Total [35] Equity		(2,347,033.00)	—	0.00	(2,341,033.00)	(2,320,232.00)
	Sum of Account Groups	661,367.00		45,752.00	707,119.00	(181,752.00)
	Net (Income) Loss	(661,367.00)		(45,752.00)	(707,119.00)	181,752.00
	Net (income) 2033	(001,007.00)		(40,702.00)	(107,110.00)	101,702.

Client:	Avon Health Care
Engagement:	Medicaid - Avon Health Care 2021 Cost Report
Period Ending:	9/30/2021
Trial Balance:	A.01 - TB-CCNH
Workpaper:	H.01 - Reclassifying Journal Entries Report

Account	Description	W/P Ref	Debit	Credit
	ournal Entries JE # 1	G.02		
	, insurance and mortgage insurance to correct cost			
centers from ren				
5566-010	PERSONAL PROPERTY TAX		5,785.00	
9780-010	Related Taxes		90,134.00	
9781-010	Related Insurance		63,295.00	
9782-010	Related Mortgage Insurance		13,676.00	
97700	Rent			172,890.00
Marcum 109	Sewage Use			
Total			172,890.00	172,890.00
Reclassifying J	ournal Entries JE # 2	N.01f		
To reclass State	Refund out of State Corporate Taxes			
Marcum 110	State Refund Receivable		57,946.00	
15600	Prepaid Federal Taxes			12,194.00
97900	State Corporate Taxes			45,752.00
Total			57,946.00	57,946.00
Reclassifying J	ournal Entries JE # 3	D.01 - Tab Dues		
To reclass Visa// account	Amazon Prime out of dues and into the subscriptions			
51360	Subscriptions		26.00	
51350	Dues / Association			26.00
Total			26.00	26.00
	ournal Entries JE # 4 st income out of the interest expense account	N/A		
97000	Interest:97600 -+ Interest - Vendors		6.00	
4846-010	INTEREST INCOME			6.00
Total			6.00	6.00