#### *Town of New Fairfield* 4 Brush Hill Road New Fairfield, CT 06812

#### AGENDA

#### BOARD OF FINANCE REGULAR MEETING WEDNESDAY, December 15, 2021 7:30 PM VIRTUAL MEETING Code: https://zoom.us/j/91381035122 Or dial in phone: (929) 205-6099

- 1. Call to order
- 2. Pledge of Allegiance
- 3. Appointments
- 4. Correspondence/Announcements
  - a. Appointments of Board of Finance Chairman and Clerk
- 5. Public Comment
- 6. Approval of Minutes November 17, 2021 regular meeting
- 7. Budget Transfers
- 8. Discuss and possible vote to approve BOF Department Budget for FY2022/23
- 9. Discuss FY2022/23 Budget Planning
  - a. Bonding Expense (Debt Service) Terry Friedman Town Treasurer
  - b. Board member's information requests guidance
  - c. Directions to Board of Selectmen and Board of Education
- 10. Discuss Sub-committee Membership: Audit / Medical
- 11. Discuss Membership: School Safety and Security Committee / Fire Department Liaison
- 12. Discuss Paramedic Contract
- 13. ONGOING UPDATES
  - a. Medical update
  - b. Legal update
  - c. Year to date expenses review
  - d. Current year revenue
  - e. Cap&Non (details: Bridges & Drainage, and Town Properties)
- 14. Public Comment
- 15. Future Agenda items
- 16. Board Member Comments
- 17. Adjournment

Received by email on 12/8/2021 @1:38 p.m.

By: Holly Z Smith, Asst. Town Clerk, New Fairfield

**BOARD OF SELECTMEN REQUESTED BUDGET** 

MUNICIPAL BUDGET--General Government

FISCAL 2022/2023

2022/2023 SELECTMEN REQUEST					1	(79,137)	-100.00%	
2022/2023 DEPARTMENT REQUEST	2,690	61,098	3,000	15,000	81,788	2,651	3.35%	
2021/2022 APPROVED BUDGET	2,637	58,500	3,000	15,000	79,137	17,618	28.86%	
2020/2021 ACTUAL	2,183	57,000	2,336		61,519	462	0.76%	
2019/2020 ACTUAL	2,231	55,625	3,201		61,057	2,469	4.21%	
2018/2019 ACTUAL	1,881	54,000	2,707		58,588	3,073	5.54%	
	Salarics	Town Audit	Materials & Supplics	Contingency	total	<b>Budget to Budget Change</b>		Salaries - Board secretary (non-union).
	<u>Board of Finance</u> 1-001-4151-110-0000-000	1-001-4151-336-0000-000	1-001-4151-610-0000-000	1-001-4151-801-0000-000				

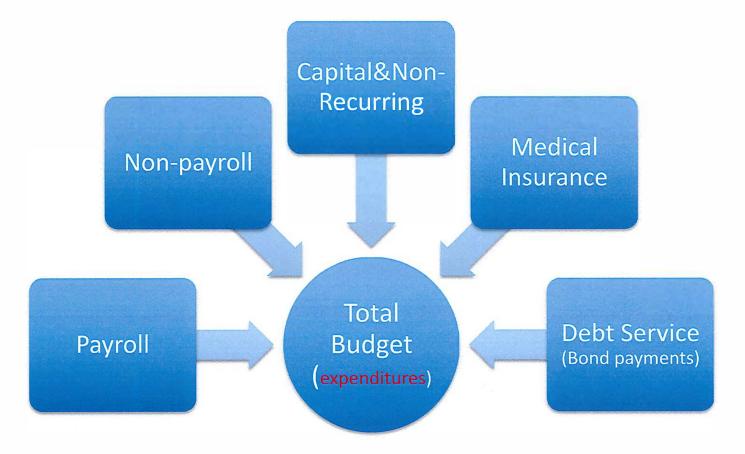
Town Audit - financial statement audit.

Materials & Supplies - general supplies, Citizen News publication of budgets)

Contingency - limited to 3% of the total estimated expenditures for the fiscal year. For unforeseen expenditures or for anticipated expenditures of an uncertain amount

BOS Budget Detail 2022 / 2023

# Municipal and Education Budget Expenditure Parts – New Fairfield



Total Budget (expenditures) minus <u>Non-Taxpayer Revenue</u> equals Total Property Taxes <u>Non-Taxpayer Revenue - Local</u> {permits, real estate conveyance, interest} and **State** {ECS, Town aid, Muni Stab. Grant}

Total Property Taxes divided by Taxable Grand List equals Mill Rate (Mill Rate = # of Mills/1000) The mill rate % increase over previous year's mill rate equals <u>taxpayer's % tax increase</u>

Mill Rate multiplied by property assessment equals taxpayer's tax (Taxpayer Revenue) Property assessment = 70% of property market value

#### 12/6/2021

To Suzanne Kloos

From Thora Perkins BOF

Hi Suzanne, please forward this to Chair Wes Marsh:

# <u>Re:</u> Guidance I am requesting as a need for documentation for BOF and myself before Jan 10<sup>th</sup> start of <u>Budget Season</u>. I prepared this early so that the Chair could share this with the BOF for our Dec. <u>meeting</u>:

Note: Much of my primary career in education involved years of experience as a specialist on the District Diagnostic and Placement team, as an educational department head in three areas over the years, and as the director of all remedial services in a 1,000 student- middle School for ten years. The requested information will help give BOF members additional clarity and background for the understanding of the full education budget for our town, perhaps help to lead us to better decision making for the town, and some possible suggestions for Boards during the budget process. The BOF is responsible for all budget funding and accounting and policies in the town. I feel that adequate information is required for the BOF to engage in sound discussions with ourselves and others as we reach budget decisions.

Possibly much of the information that is requested can be provided with copies of documents readily available. Respectfully, my request is for all this information prior to the beginning of our Budget season on January 10<sup>th</sup> 2022.

- 1. Respectfully requested for <u>Each</u> of our 4 Schools, NFHS, NFMS, Meeting House, Consolidated, and any preschool program that the Town funds, all the following information, separately delineated by school. Thank you:
  - Number of students in each school
  - List of all personnel in each school on an administrative salary contract, description of position, and cost of that position
  - Total number of regular homeroom classroom teachers per grade in each school, not including special Ed teachers or any specialists such as art and music.
  - Average homeroom size for each grade in each of the schools
  - Total number of paraprofessionals per school who also work in regular ed classrooms
  - Total number of special education certified teachers per school excluding speech pathologists
  - Total number of school psychologists for the district
  - Total number of behavioralists per school.
  - Total number of guidance counselors per school.
  - List of any self-contained classroom time held in each school.
  - Number of students on an IEP for each grade in each school
  - Number of students on 504 plans in each grade per school.

- Total number of computer, math, vocational, or language specialists etc. -- other certified regular contract personnel not assigned a homeroom, per school.
- Certified library staff per school.
- Total number of P.E. staff per school.
- Total number of certified staff in art and music for each school.
- Total expense for teacher professional development for the years of 2018-19, 2019-20, 2020-21, 2021 thru Jan 1,2022 in each school.
- 2. Central office Staff and expenses:
  - List of all central office administrators on an administrator contract and their descriptive titles. Respectfully, Superintendent and all Central Office Administrators.
  - List of all Department heads in the district, and exact title of their responsibilities.
  - List of any department heads and their exact title who are on administrative contract.
  - List of any School Librarians on an administrative contract.
  - List of 2018 through Jan 1,2022 of Professional development Expenses for Central Office Administration and BOE including retreats, and conferences and trainings delineated by fiscal year.
- 3. Special Education:

Respectfully, during School Budget process may the Director of District Special Education give a brief presentation to the BOF to present the number of students who are served by out of district placement and whether there is any present or future plans to develop an additional program for any of our Special education students who would then be excellently served within the district.

4. With respect to each school please let The BOF know how the budget process is begun in each school; and whether the principals will then review each department or grade level proposal with department heads or team leaders.

Much appreciation for all efforts to furnish this documentation prior to January 10<sup>th</sup>, 2022. I am very committed to a good budget result for all concerned. It is an honor to be part of this process for the Town of New Fairfield.

Sincerely, Thora Perkins

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# **TOWN OF NEW FAIRFIELD**

FINANCE DEPARTMENT 4 Brush Hill Road New Fairfield, CT 06812-2665 (203) 312-5650 FAX (203) 312-5659

June 29 2021

Western Connecticut Health Network Affiliates, Inc. 24 Hospital Avenue Danbury, CT 06810 Attn: Matthew Cassavechia

Dear Mr. Cassavechia

The Town of New Fairfield would like to extend your contract for one addition year, to provide EMT and Paramedic Services for the Town of New Fairfield.

This extension letter will follow all Terms and Conditions in the Service Agreement - EMT and Paramedic Services entered into as of June 30, 2017 as amend by the Amendment dated as of June 13, 2018 and the letter from the Town of New Fairfield dated April 1, 2019 and the extension of services letter dated June 10, 2020, between the Town of New Fairfield and Western Connecticut Health Network Affiliates, Inc. (collectively, the "Agreement"). The Town of New Fairfield has opted to extend the Agreement for one additional year with a 2% increase, with additional years after that not to exceed a 2% increase.

This extension will be in effect July 1, 2021 until June 30, 2022. The current Certificate of Insurance on file expires on 10/1/2021. An updated Certificate of Insurance must be replaced after the expiration date.

Your signature is needed on these letters; one copy shall be kept in your files after both parties have executed the letter.

We appreciate your service with the Town of New Fairfield; we look forward to your service for an additional year.

DocuSigned by: John Murphy

John Murphy, M.D. President and CEO Western Connecticut Health Network Affiliates, Inc.

Patricia Del Monaco First Selectman Town of New Fairfield

Sincerely,

Patty Mota Town of New Fairfield Purchasing Agent/Contract Administrator

cc: Matthew Cassavechia, Director, Emergency Medical Services

#### TOWN OF NEW FAIRFIELD FINANCE DEPARTMENT 4 Brush Hill Road New Fairfield, CT 06812-2665 (203) 312-5650 FAX (203) 312-5659

June 10 2020

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The Town of New Fairfield would like to extend your contract for one addition year, to provide EMT and Paramedic Services for the Town of New Fairfield.

This extension letter will follow all Terms and Conditions in the Agreement entered into as of June 30, 2017 and the extension of services letter dated February 14, 2018, between the Town of New Fairfield and Western Connecticut Health Network Affiliates, Inc. The Town of New Fairfield has opted to extend this agreement for one additional year with a 2% increase, with additional years after that not to exceed a 2% increase.

This extension will be in effect July 1, 2020 until June 30, 2021. The current Certificate of Insurance on file expires on 10/1/2020. An updated Certificate of Insurance must be replaced after the expiration date.

Your signature is needed on these letters; one copy shall be kept in your files after both parties have executed the letter.

We appreciate your service with the Town of New Fairfield; we look forward to your service for an additional year.

-Docusioned by: Hun Murphy

> President and CEO Western CT Health Network Affiliates, Inc

6/25/2020

Sincerely,

Patty Mota Town of New Fairfield Purchasing Agent/Contract Administrator

cc: Matthew Cassavechia, Director, Emergency Medical Services

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Patricia Del Monaco First Selectman Town of New Fairfield



# THE TOWN OF NEW FAIRFIELD

First Selectman 4 Brush Hill Road, New Fairfield, CT 06812 PH: 203-312-5600 FAX: 203-312-5612 www.newfairfield.org

April 1, 2019

WCHN Attn: Matt Cassavechia 24 Hospital Ave Danbury, CT 06810

Dear Matt:

As previously discussed, the Town of New Fairfield requests additional emergency medical staffing provided by WCHN to ensure adequate staffing on all shifts. The additional cost to the Town of New Fairfield for the remaining last two months of this fiscal year will be \$11,856.00 per month; the total additional cost would be \$23,712.00 for May and June, 2019. The next fiscal year expense will be a total of \$722,542.00, with a monthly payment of \$60,211.00. Reasonable housing accommodations to will be provided to accommodate two additional Emergency Medical Personnel.

Sincerely,

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Patricia Del Monaco First Selectman Town of New Fairfield

#### AMENDMENT TO SERVICE AGREEMENT EMT AND PARAMEDIC SERVICES

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THIS AMENDMENT (the "Amendment") is made as of the day of April; 2018 (the "Amendment Effective Date") by and between Western Connecticut Health Network Affiliates, Inc. ("WCHNA"), a non-stock corporation organized under the laws of the State of Connecticut, and the **Town of New Fairfield** a municipal corporation organized and existing under the laws of the State of Connecticut ("Town"). Each of WCHNA and Town are referred to herein as a "Party" and, collectively, as the "Partics."

WHEREAS, the Parties entered into that certain Service Agreement dated as of June 30, 2017 (the "Agreement"), pursuant to which WCHNA agreed to provide EMT and paramedic services to the Town, as set forth in the Agreement; and

WHEREAS, the Parties desire to amend certain terms of the Agreement as set forth below.

NOW, THEREFORE, in consideration of the mutual covenants herein contained, the Parties hereto agree as follows:

- 1. <u>Capitalized Terms.</u> Capitalized terms not defined herein shall have the meanings set forth in the Agreement.
- 2. <u>Paragraph 10</u>. The Agreement is hereby amended to delete <u>Paragraph 10</u> in its entirety.
- 3. <u>Paragraph 13.</u> The Agreement is hereby amended to delete <u>Paragraph 13</u> in its entirety and replace it with an amended and restated <u>Paragraph 13</u> as follows:

WCHNA presently maintains and shall during the term hereof maintain (1) general public liability insurance coverage in the amount of no less than \$1,000,000.00 single limit / \$3, 000,000.00 annual aggregate limit, (2) professional (malpractice) liability insurance coverage of no less than \$1,000,000.00 single limit / \$3,000,000.00 aggregate limit, and (3) excess general liability coverage and excess professional (malpractice) liability insurance coverage of no less than \$15,000,000.00. Any loss within the deductible shall be borne by WCHNA. WCHNA shall name the Town and it's officials, agents and employees, and the NFVFD and its officers members agents and employees as an Additional Insured under any and all such insurance policies or programs throughout the term of this Agreement, but solely in the event of WCHNA's sole negligence, and shall provide the Town on an ongoing basis and whenever requested with an insurance certificate evidencing such continuing insurance coverage in accordance with Paragraph 2. WCHNA may vary the above coverage, provided that the total insurance provided is in the aggregate, not less than the coverage specified in this subparagraph and subject to the notice provisions set forth in Paragraph 2. A copy of the additional insured endorsement shall be attached to such certificates of insurance. The amount of insurance contained in aforementioned insurance coverage's shall not be construed to be a limitation of liability on the part of WCHNA to the Town and the carrying of the insurance

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described shall in no way be interpreted as relieving WCHNA of any responsibility or liability to the Town under this Agreement.

- 4. <u>Ratification of Agreement</u>. Except as specifically amended in this Amendment, the Agreement shall be and remain in full force and effect and is hereby ratified and affirmed by the Parties. To the extent that this Amendment conflicts with any of the comparable provisions of the Agreement, this Amendment shall control and supersede the Agreement with respect to the subject matter hereof.
- 5. <u>Entire Agreement</u>. The Agreement, as amended by this Amendment, constitutes the entire agreement between the Parties, all oral agreements being merged herein, and supersedes all prior representations and understandings, regarding the subject matter hereof.
- 6. <u>Governing Law.</u> This Amendment and all matters arising out of or relating to this Amendment shall be governed by the law of the State of Connecticut without regard to conflict of law principles.

IN WITNESS WHEREOF, the Parties hereto have duly executed this Amendment as of the Amendment Effective Date.

Western Connecticut Health Network Affiliates, Inc.

By: Name: Title: residen 1 i)

**Town of New Fairfield** mars Bv: onaco Name: Selectman Title: First

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#### TOWN OF NEW FAIRFIELD PARAMEDIC and EMT PROGRAM 3 YEAR BUDGET Option 2

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EMT & Paramedic staffing 12hrs per day 7 days per week.	July 1, 2017	July 1, 2018	July 1, 2019
Paramedic on-duty in non-transport unit remaining 12hrs 7 days per week.	to	to	to
	June 30, 2018	<u>June 30, 2019</u>	June 30, 2020
Amount to be paid to WCHNA for the following:			
Wages, Salaries and Benefits (Human Resources) *	\$538,764.00	\$549,539.00	\$ 560,529.00
Non Salary Expenses:			
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**Total Non-Salary Expenses	\$16,080.00	\$16,401.00	\$ 16,729.00
Total amount to be paid to WCHNA	\$554,844.00	\$565,940.00	\$ 577,258.00
Total monthly payment to WCHNA	\$46,237.00	\$47,161.00	\$ 48,104.00

\* Based on FTE's assigned to Town of New Fairfield

\*\* Insurance coverage to \$15,000.00

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\*\* Includes provision of back-up vehcile

\*\* Includes all non - salary expenses ie: uniform and proctective gear

#### SERVICE AGREEMENT – EMT AND PARAMEDIC SERVICES WESTERN CONNECTICUT HEALTH NETWORK AFFILIATES, INC. AND THE TOWN OF NEW FAIRFIELD

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This Service Agreement ("Agreement") is entered into as of June **30**, 2017 between the TOWN OF NEW FAIRFIELD, a municipal corporation organized and existing under the laws of the State of Connecticut, hereinafter the "Town", and WESTERN CONNECTICUT HEALTH NETWORK AFFILIATES, INC., a nonstock corporation organized and existing under the laws of the State of Connecticut having a usual place of business at 24 Hospital Avenue, Danbury, Connecticut hereinafter called "WCHNA."

- 1) The term of this Agreement shall be from 12:00 a.m. on July 1, 2017 until 11:59 p.m. on June 30, 2020, unless sooner terminated as hereinafter provided or extended by the written agreement of the parties (the "Term"). During the Term, WCHNA will provide the following services: WCHNA shall provide advanced life support ambulance coverage to the Town with one (1) EMT and one (1) Paramedic from 6:00 a.m. to 6:00 p.m. Monday through Friday. WCHNA shall provide one (1) paramedic in a Town owned and supplied mobile intensive care non-transport unit Monday through Friday 6:00p.m. to 6:00 a.m. WCHNA shall provide one (1) Paramedic in a Town owned and supplied mobile intensive care nontransport unit Saturday and Sunday, twenty four (24) hours each weekend day. The aforementioned staffing configuration shall be stationed and readily deployed within the Town of New Fairfield's geographic boundaries. The actual times of coverage are flexible and may be adjusted with adequate notice and by mutual agreement of the parties. In addition, the actual numbers of full time equivalents ("FTEs") may also be modified by prior written mutual agreement of the parties. In the event that the parties agree to modify the FTEs', compensation to WCHNA shall be adjusted to reflect the additional cost of personnel and other associated expenses (or adjusted downward to reflect the reduced cost, in the event said modified mutual agreement reduces coverage). As used herein, the term "EMT" means an individual who has successfully completed and maintains the requirements of Section 19a-179-16a of the Regulations of Connecticut State Agencies or any successor provisions (the "Regulations"), and is certified as an EMT by the Connecticut office of Emergency Medical Services ("OEMS"). When EMT coverage is required pursuant to this Agreement, WCHNA may, but need not, provide such services through A-EMTs. The term "A-EMT" means an individual who has successfully completed and maintains the requirements established for advanced level EMT's as provided pursuant to Section 19a-179-16a of the Regulations, and is certified by OEMS as an A-EMT. As used herein, the term "Paramedic" means an EMT who has successfully completed and maintains the requirements established for paramedics pursuant to Section 19a-179-16a of the Regulations and is licensed by OEMS as an EMT-Paramedic. The Town at its sole option may extend this agreement for two (2) additional one (1) year periods. Both the Town and WCHNA will have the right under the terms of the proposed contract, to cancel the contract as of July 1, of any year on notice to the other party at least 90 days prior to that July 1. This Contract shall be effective upon signing by all parties hereto.
- 2) WCHNA shall carry said Paramedics and EMTs on its payroll, and is solely responsible for payment of all employee related expenses, including but not limited to, Unemployment Compensation Insurance and payments, Workers' Compensation Insurance and payments and all required State and Federal taxes or contributions thereto for which WCHNA currently is or may, during the term of this Agreement, become liable. Proof of insurance is required at the time of execution of this Agreement, and WCHNA shall provide the Town with such proof upon request by the Town at any time during the term of this Agreement. WCHNA shall notify the Town in writing of any changes made to any insurance policy or

carrier at least fifteen (15) days prior to the effective date of such proposed change. Failure to produce proof of insurance within five (5) business days of a request or failure to notify the Town of changes in such insurance within the time period set forth above shall be construed as a material breach of this Agreement and shall entitle the Town to terminate this Agreement by written notice to WCHNA and seek its remedies at law for the breach, provided that WCHNA shall have fifteen (15) days after receipt of the notice to cure the breach. If the breach is cured and proof thereof provided within said fifteen (15) days, this Agreement shall not terminate.

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- 3) The WCHNA Paramedics and EMTs shall conform to all applicable rules and regulations of the State of Connecticut Public Health Department, OEMS, the Northwestern Connecticut Regional EMS Council, The Danbury Hospital, the New Fairfield Volunteer Fire Department ("NFVFD"), and WCHNA.
- 4) All certification and licensing requirements of such Paramedics or EMTs shall be the responsibility of WCHNA. The Town shall have the right to demand copies of any and all certifications and licenses pertinent to the Paramedics' and EMTs' duties while serving in or for the Town. Failure of the Paramedics or EMTs providing services hereunder to have current, valid, licenses and certifications shall be a material breach of this Agreement.
- 5) WCHNA shall provide the Town and the NFVFD annually with a list of all Paramedics employed by WCHNA, indicating on that list the number of years of active field experience of each Paramedic. This list shall be amended from time to time and as necessary throughout the calendar year and such amendments shall be provided to the NFVFD. WCHNA shall furnish all uniforms and protective clothing necessary for the EMTs/Paramedic(s) to function. Uniform shall consist of slacks, shirt with State of Connecticut Paramedic patch and a WCHNA patch and a nametag. As part of this Agreement and during the summer months and periods of warmer weather in the late spring and early fall, WCHNA personnel shall be permitted to wear polo type uniform shirts. Outer garments shall clearly identify the individual as a Paramedic. Turn out gear clearly marked PARAMEDIC or EMT shall be provided by WCHNA for situations requiring protective clothing, i.e. rescue and motor vehicle accidents.
- 6) WCHNA Paramedics and EMTs will conform to operational guidelines established by officials of the NFVFD and WCHNA. Such guidelines will be periodically reviewed and amended accordingly and mutually agreed upon by both parties (WCHNA and the NFVFD) and therefore contained in an operational guidebook made available by the NFVFD to all WCHNA staff.
- 7) The Town will dispatch the Paramedic(s) to calls based on mutually agreed upon Emergency Medical Dispatch criteria. NFVFD personnel at the EMT level or above, at the scene, may cancel the Paramedic in accordance with written protocols to be established by the NFVFD and WCHNA, and in accordance with medical control policy, without cost to the Town or the patient. The parties will mutually agree upon any such dispatch changes.
- 8) During staffing hours, upon receipt of dispatch by the Town's dispatcher, the Paramedic or EMT will acknowledge response within 2 minutes. The response will be from a mutually agreed upon central location that is provided by the NFVFD and/or The Town and within the Town's geo-political boundaries.

- 9) Paramedics and EMTs shall at all times remain under the Medical Control of WCHNA (through The Danbury Hospital). For purposes of this Agreement, the term "Medical Control" means the active surveillance of mobile intensive care by physicians from The Danbury Hospital, sufficient for the assessment of overall practice levels as defined by recognized statewide emergency medical service protocols. Documentation of Medical Control through The Danbury Hospital shall be provided by WCHNA at the time of execution of this Agreement. All decisions regarding the treatment and transportation of the patient shall be at the sole discretion of the Paramedic, except when cancelled according to the protocol established in Paragraph 8.
- 10) WCHNA agrees to indemnify and hold the Town and each of its directors, officers, agents, independent contractors and employees, and the NFVFD and its officers members agents and employees harmless from and against any and all claims, liabilities, losses, damages, expenses and actions, including reasonable attorney's fees, which result from, are caused by or are related to (a) the violation of state, federal, or local law, rules or regulations by WCHNA, its directors, officers, agents, independent contractors and employees, which results in bodily injury or physical or actual damages or the imposition of a fine, penalty or other charge; or (b) the breach of the Agreement, as amended, by WCHNA, its directors, officers, agents, independent contractors and employees; or (c) the negligence or willful misconduct of WCHNA, its directors, officers, agents, independent contractors and employees.
- 11) All patients shall be transported in accordance with the policies established by the NFVFD. As such, the use of mutual aid and back up services shall be utilized in strict accordance with written policy and under the sole direction of the NFVFD.
- 2) The Town will not subcontract the Paramedics or EMTs to any other town, or other geopolitical entity, without the prior written consent of WCHNA. WCHNA will not subcontract the Paramedic to any other town or other geographical entity without the prior written consent of the Town. Nothing herein shall be deemed to affect any mutual aid pact to which the Town is or may become a party with respect to EMS activations within the Town.
- 13) WCHNA presently maintains and shall during the term hereof maintain (1) general public liability insurance coverage in the amount of no less than \$1,000,000.00 single limit / \$3,000,000.00 annual aggregate limit with a \$25,000.00 deductible each occurrence, (2) professional (malpractice) liability insurance coverage of no less than \$1,000,000.00 single limit / \$3,000,000.00 aggregate limit with a \$5,000.00 deductible, with (3) excess general liability coverage and excess professional (malpractice) liability insurance coverage of no less than \$15,000,000.00. Any loss within the deductible shall be borne by WCHNA. WCHNA shall name the Town and it's officials, agents and employees, and the NFVFD and its officers members agents and employees as an Additional Insured under any and all such insurance policies or programs throughout the term of this Agreement and shall provide the Town on an ongoing basis and whenever requested with an insurance certificate evidencing such continuing insurance coverage in accordance with Paragraph 2. WCHNA may vary the above coverage, provided that the total insurance provided is in the aggregate, not less than the coverage specified in this subparagraph and subject to the notice provisions set forth in Paragraph 2. A copy of the additional insured endorsement shall be attached to such certificates of insurance. The amount of insurance contained in aforementioned insurance coverage's shall not be construed to be a limitation of liability on the part of WCHNA to the Town and the carrying of the insurance described shall in no way be interpreted as relieving WCHNA of any responsibility or liability to the Town under this Agreement.

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- 14) The Town maintains automobile liability for its paramedic intercept vehicle and ambulances in the amount of \$1,000,000.00. The Town maintains Public Officials Liability insurance for its emergency medical services in the amount of \$1,000,000.00. The Town agrees to name WCHNA as insured certificate holder under such insurance policy throughout the term of this Agreement and to provide WCHNA with an insurance certificate evidencing such insurance coverage. WCHNA shall maintain insurance on its back up paramedic vehicles which will cover pre-determined, mutually agreed upon chief officers of the NFVFD who may from time to time be called upon to operate such vehicles and, except as set forth below, shall hold harmless NFVFD personnel and the Town from all damages to such vehicle or its contents. WCHNA shall notify the Town in writing of any changes made to such insurance policy or carrier at least fifteen (15) days prior to the effective date of such proposed change. Nothing in Paragraph 13 is intended to require WCHNA to hold the Town, or its agents, employees or officers harmless from liability resulting from their own negligent or willful acts or omissions.
- 15) The Town and NFVD agrees to indemnify and hold WCHNA and each of its directors, officers, agents, independent contractors and employees harmless from and against any and all claims, liabilities, losses, damages, expenses and actions, including reasonable attorney's fees, which result from, are caused by or are related to (a) the violation of state, federal, or local law, rules or regulations by The Town, its directors, officers, agents, independent contractors and employees, which results in bodily injury or physical or actual damages or the imposition of a fine, penalty or other charge; or (b) the breach of the Agreement, as amended, by The Town, its directors, officers, agents, independent contractors and employees; or (c) the negligence or willful misconduct of The Town, its directors, officers, agents, independent contractors and employees.
- WCHNA agrees to indemnify and hold the Town and each of its directors, officers, agents, independent contractors and employees, and the NFVFD and its officers members agents and employees harmless from and against any and all claims, liabilities, losses, damages, expenses and actions, including reasonable attorney's fees, which result from, are caused by or are related to (a) the violation of state, federal, or local law, rules or regulations by WCHNA, its directors, officers, agents, independent contractors and employees, which results in bodily injury or physical or actual damages or the imposition of a fine, penalty or other charge; or (b) the breach of the Agreement, as amended, by WCHNA, its directors, officers, agents, independent contractors and employees; or (c) the negligence or willful misconduct of WCHNA, its directors, officers, agents, independent contractors and employees.
- 16) WCHNA shall provide to the Town with a preventative maintenance and replacement schedule program for the Town's paramedic intercept vehicle used by the Paramedic intercept program.
- 17) If the parties wish to renew this Agreement upon expiration of the initial term, then prior to the expiration of the initial term, the Town and WCHNA will enter into good faith negotiations for a renewal. Such renewal budget, terms and conditions, if any, shall be set forth in a written agreement between the parties.
- 18) For good cause shown the Town, acting through its Fire Chief, may require the replacement of any Paramedic or EMT who fails to perform the service contemplated herein in a satisfactory manner, including the immediate or urgent replacement of such personnel in an emergency or appropriately serious situation.

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- 19) WCHNA shall have no responsibility for the collection of bills issued on behalf of the Town. On an ongoing basis, WCHNA will thoroughly train its staff in proper ambulance call reporting documentation procedures.
- 20) The Town shall provide a four wheel drive paramedic intercept vehicle and all necessary advanced life support equipment in sound mechanical and operating condition subject to mutually agreed upon specifications between the Town and WCHNA. The Town shall supply fuel and a comprehensive preventive and reparative vehicle maintenance program identifying the paramedic intercept vehicle as a primary piece of emergency equipment and thus among the highest of priorities in reparative maintenance, and all disposable medical supplies to WCHNA for the provision of services in this Agreement. In the event the vehicle is disabled or otherwise unavailable, WCHNA will provide a back-up paramedic vehicle on a temporary basis.
- 21) The Town will make annual payments to WCHNA from the operating budget detail provided in Schedule B. Such annual payments shall be paid to WCHNA in twelve (12) equal monthly payments by the Town to WCHNA in advance. It is recognized that such budgets reflect estimates of those expenditures to be made by WCHNA in connection with the services provided hereunder and that actual expenditures may be either greater than or lesser than the amounts agreed by the parties from time to time. WCHNA will provide updated fiscal year budget information as prescribed every (6) six months by the Town, but no less than annually. WCHNA understands and acknowledges that the Town is a municipal corporation and that the Town's obligation is to make monthly payments under a mutually agreed upon annual fiscal year ambulance and paramedic operating budget. WCHNA officials shall be available to all municipal Boards to address specific questions regarding the operating budget each fiscal budget year cycle throughout the Term of this Agreement. If sufficient funds are not appropriated by the Town in any fiscal year, either party may terminate this Agreement as of the first day of any month in which sufficient funds are not available. The Town agrees to use its best efforts to obtain such funds to continue to meet its monetary obligations under this Agreement by taking all appropriate actions to request the necessary funding.
- 22) If WCHNA's expenditures hereunder exceed the budget, the Town will fund such excess. The parties agree that compensation to be paid to WCHNA by the Town shall not exceed the amount actually expended by WCHNA in connection with said services. In the event that payments by the Town to WCHNA exceed the actual expenditures made by WCHNA and in connection herewith, WCHNA shall promptly notify the Town, and in such event WCHNA shall either promptly reimburse the Town for said excess payments, or shall credit the amount of said excess payments against future payments to be made to WCHNA by the Town; in the event WCHNA chooses the latter option (i.e., credit excess towards future payments), the parties agree that future monthly payments shall immediately be downwardly adjusted over a reasonable period, pro rata until such excess shall have been exhausted.
- 23) Both WCHNA and the Town will attain and maintain HIPAA compliance including but not limited to entering into a business associate agreement contained in <u>Schedule A</u> as necessary or appropriate. The parties shall comply with all applicable state and federal laws, rules and regulations regarding the confidentiality of patient information, including, without limitation, HIPAA. The parties hereby acknowledge that the Town is a "covered entity" under HIPAA and WCHNA shall be a business associate of the Town, as that term is defined in the regulations implementing HIPAA, and the parties shall execute and comply with the Business Associate Addendum attached hereto as <u>Schedule A</u> and incorporated herein by reference.

- 24) The Town shall provide WCHNA, on request, copies of all records, recordings, documents and or testimony pertaining to any and all radio, telephone, or written documentation on calls that involve the use of WCHNA personnel. WCHNA shall notify the Town as soon as WCHNA knows of the need to save and/or copy any records, recordings, documents, and/or testimony on any call. Originals of all such requested records, recordings, documents and/or testimony shall be maintained by the Town for a period of seven years and shall be produced at appropriate times and places in response to compulsory legal process or otherwise as may be agreed on advice of counsel.
- 25) The parties agree that any disputes which may arise during the Term of this Agreement will be referred to a special committee of arbitrators comprised of one Town representative, one WCHNA representative and one neutral, mutually agreed upon third party. Decisions of the committee of arbitrators shall be binding upon the parties subject to appeal of issues of law only, to the Superior Court for the Judicial District of Danbury. In the event that a neutral third party cannot be agreed upon, the parties agree to petition the Danbury Superior Court to appoint the third party in its sole discretion by means of a complaint for declaratory relief under this Agreement.
- 26) All notices sent and communications made under this Agreement will be deemed sufficient if sent prepaid by first class United States Mail,

In the case of the "Town" to:

New Fairfield Town Hall 4 Brush Hill Road New Fairfield, CT 06812 Attn: Selectman's Office New Fairfield Town Hall 4 Brush Hill Road New Fairfield, CT 06812 Attn: Fire Chief

In the case of "WCHNA" to:

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WESTERN CT HEALTH NETWORK AFFILIATES, INC. 24 Hospital Ave. Danbury, CT 06810 Attn: Matthew Cassavechia With a copy to: John M. Murphy

27) Both parties reserve the right to cancel this Agreement for convenience and without cause on one hundred eighty-days (180) written notice of same to the other. Except as here in above expressly stated in other paragraphs, both parties reserve the right to cancel this Agreement for material breach of any of the terms of this Agreement at any time during the duration of this Agreement. To exercise its right of termination for breach under this paragraph, the terminating party shall give written notice of its intention to do so not less than thirty (30) days prior to the date of termination. The breaching party shall have fifteen (15) days after receipt of the notice to cure the breach. If the breach is cured and proof thereof provided within said fifteen (15) days this Agreement shall not terminate. In the event of termination of this Agreement for any reason, including but not limited to a termination pursuant to this Paragraph 27, the Town shall continue to pay WCHNA for its services rendered prior to the effective date of services

WESTERN CT HEALTH NETWORK AFFILIATES INC. AND THE TOWN OF NEW FAIRFIELD

Page 6 of 14

termination. Such payment shall include all costs and expenses incurred by WCHNA until the effective date of termination, including all accrued and unpaid expenses. Notwithstanding any other provision contained in this Agreement, the Town will have no obligation to make any payment at any time WCHNA is in material breach of this Agreement.

28) Paramedics shall attend NFVFD EMS drills for purposes of working with NFVFD members on the NFVFD Basic Life Support interface.

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- 29) WCHNA shall provide response for the requests for mutual aid as determined and dispatched by the Town of New Fairfield, 911 Communications Center in accordance with Paragraph 8. Such services shall include but not be limited to rehabilitation services at the scene of major incidents within the Town.
- 30) WCHNA shall assign one person from its staff to be the liaison between WCHNA, the Town and the NFVFD. The name and twenty-four hour a day contact phone number of such assigned liaison shall be provided to the Town and the NFVFD upon signing of this Agreement and prior to any change in the assigned liaison. This liaison shall not be affiliated with the NFVFD and shall be mutually agreed upon between WCHNA, the Town and the NFVFD.
- 31) For the duration of this Agreement, WCHNA shall maintain the base of operations for all Paramedics providing service to the Town under this Agreement at 24 Hospital Avenue, Danbury, CT or another location acceptable to the Town.
- 2) WCHNA shall not assign, sell or transfer this Agreement or any responsibilities without Town approval.
  - 33) WCHNA shall maintain a comprehensive program for all of its EMS personnel subject to random urinalysis drug testing pursuant to Connecticut General Statutes 31-51 x (b) 2 and the Regulations of Connecticut State Agencies 21-51x-1 et seq.
  - 34) The Town may terminate this Agreement on three (3) business days' notice to WCHNA if WCHNA shall (i) apply for or consent to or suffer the appointment of a receiver, trustee or liquidator of all or a substantial part of the assets of WCHNA, (ii) make a general assignment for the benefit of creditors, (iii) be adjudicated as bankrupt or insolvent, (iv) file a voluntary petition in bankruptcy or for an arrangement with creditors or take advantage of any insolvency law or file an answer admitting the material allegations of a petition filed against WCHNA in any bankruptcy or insolvency proceeding, or (v) suffer the filing against it of an involuntary petition in any bankruptcy or insolvency proceeding.
  - 35) Neither party shall discriminate against any employee or applicant for employment because of race, creed, color, national origin, age, sex, handicap, marital status, sexual orientation or affectional preference with respect to any employment decision including, but not limited to, recruiting, hiring, upgrading, demoting, promoting, selecting or training (including apprenticeship), rates of pay and other forms of compensation, laying off, terminating or any other term or condition of employment. All advertising for employment shall indicate that WCHNA is an Equal Opportunity Employer.
- <sup>36</sup> WCHNA represents and warrants that it is a nonstock corporation duly organized, validly existing and in good standing under the laws of the State of Connecticut and is duly qualified to do business in the State

of Connecticut with requisite power to (i) execute and deliver this Agreement, (ii) carry on its business as now conducted and (iii) operate the Paramedic services provided pursuant to this Agreement.

37) WCHNA represents and warrants that its Certificate of Incorporation does not prohibit WCHNA from entering into this Agreement and that the execution and delivery of this Agreement (i) does not conflict with or result in a breach of any term or provision of, or constitute a default under, or result in the creation of any lien, charge or encumbrance upon its property or assets under its Certificate of Incorporation or Bylaws or any agreement to which it is a party or by which it or any of its property is bound or affected and (ii) does not violate the provisions of any statute, order, rule or regulation of any federal, state or local government agency or body having jurisdiction over it.

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- 38) It is expressly understood that each party is not and does not hereby become in any way or for any purpose a partner of the other party hereto in the conduct of its business or otherwise or joint venture or a member of a joint enterprise with such other party.
- 39) The terms of this agreement expressly incorporate by reference all representations made in the written Paramedic and EMT Services Proposal to the Town. Except as hereinbefore noted, this Agreement contains the entire agreement of the parties and no agreement or understanding varying or extending the terms hereof shall be binding upon either party unless embodied in writing signed by the party against whom it is to be enforced.
- 40) In the event that OEMS requires WCHNA to obtain a license or other authorization to perform any of the services required by this Agreement, WCHNA shall promptly apply for such license or authorization and shall diligently work for its approval, and the Town and the NFVFD shall provide WCHNA with reasonable assistance in obtaining such license or authorization.
- 41) All provisions in this Agreement requiring the maintenance of insurance shall survive termination or expiration of this Agreement for any reason; all policies either shall be written on an occurrence basis, or, if not written on an occurrence basis, the party carrying the policy shall obtain tail coverage; certificates of insurance relating to tail coverage shall be provided promptly to the other party.
- 42) It is recognized by the parties that this Agreement may be deemed by the Secretary of Health and Human Services ("HHS") to be subject to 42 U.S.C. 1395X (V) (1) (I) and 42 C.F.R. Part 420, Subpart D 420.300 et seq. Accordingly, in accordance with such law, the parties shall, until the expiration of four (4) years after the furnishing of any Medicare reimbursable services pursuant to this Agreement, shall upon proper written request allow the Comptroller General of the United States, the Secretary of HHS, and their duly authorized representatives, access to this Agreement and to the parties, books, documents, and records necessary to certify the nature and extent of the costs of Medicare reimbursable services provided under this Agreement.

IN WITNESS WHEREOF, the parties hereto have hereunto set their hands and seals on and as of the date first above written:

Signed, Sealed and Delivered in the presence of:

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TOWN OF NEW FAIRFIELD

By: -Susan Chapman, FIRST SELECTMAN

WESTERN CONNECTICUT HEALTH NETWORK AFFILIATES INC.

MD By:

Tohn Murphy M/D) PRESIDENT AND CHIEF EXECUTIVE OFFICER, Buly Authorized

SERVICE AGREEMENT EMT AND PARAMEDIC SERVICES WESTERN CT HEALTH NETWORK AFFILIATES INC. AND THE TOWN OF NEW FAIRFIELD

#### SCHEDULE A

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#### **BUSINESS ASSOCIATE ADDENDUM**

THIS BUSINESS ASSOCIATE ADDENDUM (the <u>"Business Associate Addendum"</u>) is made and entered into as of the date of the Addendum (as defined below) by and between the TOWN OF NEW FAIRFIELD (<u>"the "Covered Entity"</u>), and Western Connecticut Health Network Affiliates, Inc., on behalf of itself and its affiliated entities ("Business Associates").

Business Associate and Covered Entity have entered into that certain Service Agreement to which this Addendum is attached as Schedule A (the <u>"Agreement"</u>) under which Business Associate performs or assists Covered Entity with a function or activity involving the use or disclosure of Individually Identifiable Health Information. In connection with the foregoing, Covered Entity and Business Associate desire to comply with the requirements of regulations promulgated pursuant to the Health Insurance Portability and Accountability Act of 1996 (<u>"HIPAA"</u>), which privacy regulations are codified at 45 C.F.R. Parts 160 and 164 and which security regulations are codified at 45 C.F.R. Parts 160, 162 and 164, as amended by the Health Information Technology for Economic and Clinical Health Act of 2009 (<u>"HITECH Act"</u>), and as such regulations may be further amended from time to time (collectively, the <u>"HIPAA Standards"</u>). Terms used, but not otherwise fined, herein are as defined in the HIPAA Standards. In consideration of the mutual covenants and agreements contained herein and other good and valuable consideration, the receipt of which is hereby acknowledged by parties, the parties hereto agree as follows:

#### 1. Obligations and Activities of Business Associate.

Business Associate agrees to:

a. Not use or disclose protected health information other than as permitted or required by the Agreement or as required by law;

b. Without limiting the provisions set forth in Section 1(a), not transmit protected health information over the internet or over any unsecure or open communication channel unless the protected health information is encrypted;

c. Use appropriate safeguards, and comply with Subpart C of 45 C.F.R. Part 164 with respect to electronic protected health information, to prevent use or disclosure of protected health information other than as provided for by the Agreement;

d. Report to Covered Entity any use or disclosure of protected health information not provided for by the Agreement of which it becomes aware, including but not limited to breaches of unsecured protected health information as required at 45 C.F.R. §164.410, and any security incident of which it becomes aware, {

which breaches and security incidents shall be reported in accordance with Section 3 of this Business Associate ddendum;

e. In accordance with 45 C.F.R. §164.502(e)(1)(ii) and §164.308(b)(2), if applicable, ensure that any subcontractors that create, receive, maintain, or transmit protected health information on behalf of Business Associate agree to the same restrictions, conditions, and requirements that apply to Business Associate with respect to such information;

- f. If Business Associate maintains information in a designated record set, Business Associate shall:
  - i. make available protected health information in a designated record set to Covered Entity as necessary to satisfy Covered Entity's obligations under 45 C.F.R. §164.524; and
  - ii. make any amendment(s) to protected health information in a designated record set as directed or agreed to by Covered Entity pursuant to 45 C.F.R. §164.526, or take other measures as necessary to satisfy Covered Entity's obligations under 45 C.F.R. §164.526;

g. Maintain and make available the information required to provide an accounting of disclosures to Covered Entity as necessary to satisfy Covered Entity's obligations under 45 C.F.R. §164.528;

h. To the extent Business Associate is to carry out one or more of Covered Entity's obligation(s) under Subpart E of 45 C.F.R. Part 164, comply with the requirements of Subpart E that apply to Covered Entity in the performance of such obligation(s); and

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i. Make its internal practices, books, and records available to the Secretary for purposes of determining compliance with the HIPAA Rules.

#### 2. <u>Permitted Uses and Disclosures by Business Associate.</u>

a. Business Associate may only use or disclose protected health information as necessary to perform the services set forth in the Agreement, provided such disclosures would not violate the HIPAA Standards if done by Covered Entity.

b. Business Associate may use or disclose protected health information to the extent required by law.

c. Business Associate agrees to make uses and disclosures and requests for protected health information consistent with Covered Entity's minimum necessary policies and procedures.

#### 3. Reporting and Mitigating the Effect of Unauthorized Uses and Disclosures.

a. Business Associate shall report, in writing, to Covered Entity's Privacy Officer any security incident or breach (as defined by the HIPAA Standards) as soon as practicable, but in all events no later than forty-eight (48) hours after Business Associate discovers the breach. Business Associate shall be deemed to have discovered a breach as of the first day on which the breach is, or should reasonably have been, known to ') Business Associate or (ii) any employee, officer or other agent of Business Associate other than the

individual committing the breach. Further, Business Associate shall investigate the breach and provide to overed Entity as soon as possible, all information Covered Entity may require to make notifications of the breach to individuals, or other persons or entities. Business Associate shall cooperate with Covered Entity in addressing the breach. Covered Entity may elect, in its sole discretion, for Business Associate to make the notifications and implement other mitigation steps, in a form and manner and within timeframes directed by Covered Entity, consistent with Covered Entity's obligations under the law. Without limitation as to any other remedies available to Covered Entity under the Agreement, this Business Associate Addendum or the law, Business Associate shall pay, or reimburse Covered Entity for, all costs of the notifications, including all costs incurred to mitigate the harmful effects, or potentially harmful effects, of the breach.

b. In addition to its obligations under Section 3(a), Business Associate shall establish policies and procedures for mitigating, to the greatest extent possible, any deleterious effects arising from any improper use and/or disclosure of protected health information, and shall implement all such procedures and all other reasonable mitigation steps requested by Covered Entity.

#### 4. <u>Term and Termination.</u>

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a. <u>Term.</u> Subject to Section 4(b), this Business Associate Addendum shall be effective as of the date of the Agreement, and shall continue in effect while the Agreement remains in force, and thereafter with respect to those obligations intended to survive the termination of the Agreement and this Business Associate Addendum.

b. <u>Termination for Cause</u>. Business Associate authorizes termination of this Business Associate ddendum by Covered Entity if Covered Entity determines Business Associate has violated a material term of this Business Associate Addendum. Covered Entity may, in its discretion, provide Business Associate with an opportunity to cure such breach. In such event, this Business Associate Addendum shall terminate if Business Associate has not cured the breach or ended the violation within the time specified by Covered Entity.

c. <u>Obligations of Business Associate Upon Termination</u>. Upon termination of this Business Associate Addendum for any reason, Business Associate shall return to Covered Entity or, if agreed to by Covered Entity, destroy, all protected health information received from Covered Entity, or created, maintained, or received by Business Associate on behalf of Covered Entity, that the Business Associate still maintains in any form. Business Associate shall retain no copies of the protected health information.

d. <u>Survival.</u> The obligations of Business Associate under this Section 4 shall survive the termination of this Business Associate Addendum.

#### 5. <u>Miscellaneous.</u>

a. <u>Injunctive Relief.</u> Notwithstanding any dispute resolution requirements under the Agreement, either party shall be entitled to seek injunctive relief in a court of law with respect to any breach of the terms of this Business Associate Addendum.

b. <u>Interpretation; Amendments; Waiver</u>. Any ambiguity in this Business Associate Addendum shall be resolved in favor of a meaning that permits the parties to comply with the HIPAA Standards. Where y applicable provision of Connecticut law relates to the privacy or security of health information and is not

preempted by HIPAA, as determined by application of the HIPAA Standards, the parties shall comply with the

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*p*plicable provisions of Connecticut law. This Business Associate Addendum may not be modified, nor shall any provision hereof be waived or amended, except in a writing duly signed by authorized representatives of the parties; provided, however that Covered Entity may amend this Business Associate Addendum upon written notice to Business Associate in the event: (i) any law or regulation regarding the protection of health information is in any way inconsistent with the terms of this Business Associate Addendum, and the amendment is necessary to address the inconsistency; or (ii) the HIPAA Standards are amended or modified such that an amendment to this Business Associate Addendum is necessary to effectuate the change. A waiver with respect to one event shall not be construed as continuing, or as a bar to or waiver of any right or remedy as to subsequent events.

c. <u>No Third Party Beneficiaries</u>. Nothing express or implied in this Business Associate Addendum is intended to confer, nor shall anything herein confer, upon any person other than the Parties and the respective successors and permitted assigns of the parties, any rights, remedies, obligations, or liabilities whatsoever.

d. <u>Notices.</u> Any notice to be given under this Business Associate Addendum to a party shall be made via U.S. Mail, commercial courier or hand delivery to such party at its address given below, and/or via facsimile to the facsimile telephone number listed below, or to such other address or facsimile number as shall hereafter be specified by notice from the party. Any such notice shall be deemed given when so delivered to or received at the proper address.

If to Covered Entity, to:	If to Business Associate, to:
Western Connecticut Health Network, Inc.	New Fairfield Volunteer Fire Department
?4 Hospital Avenue Danbury, CT 06810	PO Box 8307 New Fairfield, CT 06812
Attn: Chief Risk & Compliance Officer	Attn: Fire Chief
Fax: 203-739-8576	Fax: 203-312-5732

e. <u>Counterparts</u>. This Business Associate Addendum may be executed in more than one, each of which shall be deemed an original.

WESTERN CONNECTICUT HEALTH NETWORK AFFILIATES, INC. By: Name: CEU Its:

TOWN OF NEW FAIRFIELD By: Musan Magnan Name: Susan Chapman Its: First Selectmon

SERVICE AGREEMENT EMT AND PARAMEDIC SERVICES WESTERN CT HEALTH NETWORK AFFILIATES INC. AND THE TOWN OF NEW FAIRFIELD

#### SCHEDULE B

#### TOWN OF NEW PAIRFIELD PARAMEDIC and EMT PROGRAM 3 YEAR BUDGET Option 1 - Current

	r		
EMT & Paramedic staffing 12hrs per day 5 days per week.	July 1, 2017	July 1, 2018	July 1, 2019
Paramedic on-duty in non-transport unit remaining 12hrs M-F & 24hrs SAT-SUN	to	to	to
	<u>June 30, 2018</u>	<u>June 30, 2019</u>	June 30, 2020
	1		
Amount to be paid to WCHNA for the following;			
Wages, Salaries and Benefits (Human Resources) *	\$499,055.00	\$509,036.00	\$ 519,216.00
Non Salary Expenses;	24331033.00	\$303,030.00	\$ 515,210.00
			0
	×.		
**Total Non-Salary Expenses	\$13,400.00	\$13,668.00	\$ 13,941.00
Total amount to be paid to WCHNA	\$512,455.00	\$522,704.00	\$ 533,157.00
Total monthly payment to WCHNA	\$42,704.00	\$43,558.00	\$ 44,429.00

\* Based on FTE's assigned to Town of New Fairfield

\*\* Insurance coverage to \$15,000.00

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\*\* Includes provision of back-up vehcite

Mincludes all non - salary expenses ie: uniform and proctective gear

Note: Zero increase (from current fiscal year) in contract year 1

SERVICE AGREEMENT EMT AND PARAMEDIC SERVICES WESTERN CT HEALTH NETWORK AFFILIATES INC. AND THE TOWN OF NEW FAIRFIELD

Page 14 of 14

	Town of New Fai	rfield Sumn	f New Fairfield Summary of Transfers		
	Fisca	Fiscal Year 2021/2022	2022		
					Final
					<u>Approval</u>
	Intra-De	Intra-Departmental Transfers	ansfers		
<u>S's</u>	Transfer From:	<u>S's</u>	<u>Transfer To:</u>		
5,000.00	001-4160-0000 / 250.00 Unclassified P&B - Unemployment	5,000.00	001-4160-0000-000 / 130.01	001-4160-0000-000 / 130.01 Unclassified P&B - OT Contingency	9/23/21
300.00		300.00	001-4410-0000-000 / 610.00	001-4410-0000-000 / 610.00 Health - Materials & Supplies	10/14/21
2,500.00		2,500.00	001-4194-0000-000 / 110.00	001-4194-0000-000 / 110.00 Economic Development - Salaries	11/9/21
1,000.00	001-4210-0000-000 / 322.00 Police - Education & Training	1,000.00	001-4210-0000-000 / 610.00 Police - M&S	Police - M&S	11/9/21
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		-			
:					
		-			
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					-

# M:\Ed\Transfers & Summaries\21-22 Transfer Summary

		Tov	vn of New Fai Fiscal	w Fairfield Summary Fiscal Year 2021/2022	<u>Town of New Fairfield Summary of Transfers</u> Fiscal Year 2021/2022		
				:			Final
		Addi	Additional Appropria	ation - No Tov	Appropriation - No Town Meeting Required		
s	<u>Transfer From:</u>			<mark>\$1</mark>	<u>Transfer To:</u>		
60,899.08	E25321	General Fund - Unreserved		118,645.83	306-4600-0000-000 / 700.03 BOE Cap & Non	BOE Cap & Non	9/15/21
57,746.75	E25321	(2020/2021 Junpub) General Fund - Unreserved (Prior Year Close outs)					
			:				
				At 100			:
					-		
							-
		<del>Volu</del>	Additional Appropr	riation - Town	Appropriation - Town Meeting Required		
<u>S:</u>	Transfer From:		• • • •	S'S	<u>Transfer To:</u>		:
715,443.52 6,824.62	E25321 E25321	General Fund - Unreserved (2020/2021 Surplus) General Fund - Unreserved (Prior Year Close outs)		2,268.14 60,000.00 110,000.00 125,000.00 425,000.00	301-4220-0000-000 / 700.14 301-4220-0000-000 / 700.14 301-4210-0000-000 / 742.02 001-4310-0000-000 / 451.00 301-4196-0000-000 / 700.06	FD Equipment Reserve Fund (Operating Surplus) Cap & Non-Fire Co.(Co.A Firehouse Vinyl Siding) Cap & Non-Police Cars & Equipment (Cameras) Road Repair 13 & 15 Route 37 Property Purchase	11/9/21
			- - - -				
			1 Colt Transford & C		) Transfar Summany		· ·
		M.	NEON FRANSFERS & S	ummaries vz 1-z	W. YEON PARSIES & SUMMARIES & 1-24 FRANSIER SUMMARY		

\$33M Bonded YTY % Impact \$80M+ 0.44% 0.79% 1.77% to Date) 4.28% -0.86% 3.84% 4.70% \$12M @ TBD, 20 Yrs \$35M @ 2%, 20 Yrs March 2023+ Mill Rate \$12M+ 32.84 0.14 1.48 -0.27 0.26 0.58 1.21 March 2023 March 2022 \$428.34 \$2,450 <u>-\$450</u> \$2,000 \$2,231 \$35M \$960 \$231 쑀 - With Principal Deferral (Opt 1 \$450K, Opt 2 \$230K) - May 2021 & Feb/Early March 2022 Bonding 2022/2023 Mill Rate & YTY Impact - Feb/Early March 2022 Bonding, 2%, 20 Yr CELA & HS Projects Cash Requirements 2023 Bonding, 3% (TBD), 20 Yr (Over \$33M Bonded to Date) 2021/2022 Mill Rate = 31.49 - May 2021 Bonding Mill Rate Impacts Feb/March 2023 Net Impact March 1, 2022

MARCH 2022 BONDING SUMMARY

Note: Assumes bond premum or discount amortized over the length of the loan

2.55%

33.68

\$1,388

2023/2024 Mill Rate & YTY Impact

#### TOWN OF NEW FAIRFIELD INSURANCE RESERVE FUND - TOWN & BOE

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		@ 9/30/2021	YEAR TO DATE	FISCAL 21/22 YEAR END
	TOWN	BOE	TOTAL	PROJECTION
REVENUES:				
Transfer from General Fund			1,512,501.00	6,050,000
EE Contributions	23,621.37	201,552.07	225,173.44	1,324,468
			1,737,674.44	7,374,468
EXPENDITURES:				
Claims Paid	151,360.17	1,362,241.49	1,513,601.66	6,120,998
Prescription drug rebate	5,864.08	52,776.69	(58,640.77)	(285,521)
Premiums Paid-Anthem	11,835.53	106,519.69	118,355.22	473,421
Premiums Paid-Teamsters	101,594.10	0.00	101,594.10	406,376
Premiums Paid-Hartford	3,642.06	34,847.17	38,489.23	153,957
Contributions to H.S.A.	37,406.29	568,535.12	605,941.41	612,671
Affordable Care Act fees	0.00	0.00	0.00	2,029
Other	750.00	8,350.00	9,100.00	9,100
Employee Assistance Program	159.89	1,439.05	1,598.94	6,396
	312,612.12	2,134,709.21	2,330,039.79	7,499,427
	Revenues le	ess Expenditures	(592,365.35)	(124,959)
Beginning Fund Balance			2,135,635.27	2,135,635
Reserve for IBNR increase			-	-
TOTAL Fund Balance			1,543,269.92	2,010,676

# TOWN OF NEW FAIRFIELD INSURANCE RESERVE FUND Fiscal 2022

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	PRELIMINARY	
<u>Fund #601</u>	BALANCE	BALANCE
	<u>6/30/2021</u>	<u>9/30/2021</u>
ASSETS		
Cash - Medical Fund	1,642,956.45	1,136,262.51
Due From General Fund	1,003,950.17	867,267.84
Due from Preschool	0.00	0.00
Prepaid Expense	0.00	0.00
Due from Blue Cross	0.00	0.00
Accounts Receivable	6,746.86	1,351.23
ASSETS	2,653,653.48	2,004,881.58
LIABILITIES		
Claims Payable	146,434.62	92,611.66
Deferred Revenue-EE contributions	2,583.59	0.00
Reserve for IBNR	369,000.00	369,000.00
LIABILITIES	518,018.21	461,611.66
FUND BALANCE		
Fund Balance - Medical	2,135,635.27	1,543,269.92
FUND BALANCE	2,135,635.27	1,543,269.92
TOTAL LIAB. & FUND BALANCE	2,653,653.48	2,004,881.58
REVENUES		
Employee Contributions	1,299,987.49	225,173.44
REVENUES	1,299,987.49	225,173.44
EXPENDITURES		
Claims	5,615,695.66	1,454,960.89
Claims Admin. & premiums	1,211,156.17	258,438.55
Increase/Decrease in IBNR Reserve	10,000.00	0.00
Contributions to H.S.A.	641,379.24	605,941.41
Other	5,473.46	9,100.00
Employee Assistance Program	6,395.76	1,598.94
EXPENDITURES	7,490,100.29	2,330,039.79
Operating Transfers In	6,129,200.00	1,512,501.00
EXCESS OF REVENUES OVER		
EXPENDITURES & OPER TRANSFERS	(60,912.80)	(592,365.35)
BEGINNING FUND BALANCE	2,196,548.07	2,135,635.27

# Town of New Fairfield Finance Department Legal Matters - November December 6, 2021

### **Breakdown by Category**

	2021/2022 Budget		0		Expenditures to Date	Balance 12/06/21
Taxation/Assessment	\$	7,500			\$ 6,550	\$ 950
Labor	\$	35,000			\$ 1,623	\$ 33,378
General Counsel	\$	35,000			\$ 20,200	\$ 14,800
Health/Enforcement	\$	7,000			\$ 1,068	\$ 5,933
Land Use - Miscellaneous	\$	5,000			\$ -	\$ 5,000
Planning	\$	5,000			\$ 1,410	\$ 3,590
Zoning	\$	15,000			\$ 5,513	\$ 9,488
Zoning Board of Appeals	\$	15,000			\$ -	\$ 15,000
Inlands/Wetlands	\$	5,000			\$ 70	\$ 4,930
TOTAL	\$	129,500	\$ <u>`</u> -	<u>\$</u> -	\$ 36,433	\$ 93,068

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Available Balance

\$ 93,068

#### Town of New Fairfield Finance Department Legal Matters - November December 6, 2021

#### **General Counsel/Other Legal Fees**

141610060004 - 332.01 Coben and Wolf, P.C.

мо	YR	ATTNY	นา	DEPT	CAT	SUB-CAT	MATTER		AMOUNT		DESCRIPTION
07	21	DLG						s	1,802.50		General Representation
08	21	DLG						\$	4,620.00	ľ	General Representation
09	21	DLG						s	7,227.50		General Representation
10	21	DLG						s	5,810.00		General Representation
10	21	DLG						s	740.00		Board of Firemans Permit
										Ι	
lota	l favo	ices Rec	eived					S	20,200.00	_	

<u>Total General Counsel</u>

#### 20,200.00

\$

Taxation / Assessment Legal Fees

141610000002 - 332.01

мо	YR	ATTNY	IJТ	DEPT	CAT	SUB-CAT	MATTER		AMOUNT	DESCRIPTION
08	21	JAB						5	1,220.00	First Light
10	21	JAB						\$	900.00	First Light
09	21							s	2,500.00	Federal Appraisal
10	21							5	1,930.00	Federal Appraisal
				-	• …					
Tota	l Invoi	ices Rec	eived					\$	6,550.00	

Total Taxation/Assessment Legal Fees S 6,550.00

Legal Fees - Land Use Miscellaneous

310	YR	ATTNY	ur	DEPT	САТ	SUB-CA1	MATTER			DESCRIPTION
Tota	l Invoi	ices Reci	eived					s	-	

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TOTAL LAND USE - MISCELLANEOUS S

Legal Fees - Health Code Enforcement

Cohen & Wolf

	11 14 77									
MO	YR	ATTNY	ЦΤ	DEPT	CAT	SUB-CAT	MATTER			DESCRIPTION
09	21	DRG						s	910.00	60 Sawmill Road
10	21	DRG						2	157.50	Miscellaneous Matters
						i i				
Tota	linvo	ices Rec	cived					\$	1,067.50	

1

#### Town of New Fairfield Finance Department Legal Matters - November December 6, 2021

Legal Fees - Planning

Cohe	en & H	Volf									
MO	12	ATTNY	ut	DEPT	CAT	SUB-CAT	MATTER				DESCRIPTION
08	21	NRM						S	350.00		Bambrook
10	21	NRM						5	1,060.00	Γ	Bambrook
										1	
					<u> </u>			í T		<b>—</b>	
	$\square$				<u> </u>	1		ſ		Γ	
Tota	l Invo	ices Rece	eived					\$	1.410.00	-	•

5

1,410.00

Total Planning Legal Fees

Legal Fees - Zoning Enforcement 00141610000007 - 332.01 Cohen & Wolf

мо	ŶR	ATTNY	LIT	DEPT	CAT	SUB-CAT	MATTER	AMOUNT	DESCRIPTION
07	21	NRM						227.50	Zoning Matters
08	21	NRM						1,085.00	Zoning Matters
09	21	NRM						2,485.00	Zoning Matters
10	21	NRM						1,715.00	Zoning Matters
Fota	l Invoi	ices Rec	eived				\$	5,512.50	

S

Total Zoning Legal Fees

5,512.50

Legal Fees - Zoning Board of Appeals 4161-332-0000-008 Cohen & Wolf

мо	77 de 19 - YR	ATTNY	UT	DENT	e	NT B CLT	MATTER	AMOUNT	DESCRIPTION
.00	TR	ALLAL		DELL	CAI	albecal	MALLER	ANOUNT	DESCRIPTION
	•••••								
						· · ·			· · · · · · · · · · · · · · · · · · ·
otal	Invo	ices Rec	eived					<u>s</u> .	

S

Total Zoning Board of Appeals Legal Fees

Legal Fees - Inlands/Wetlands 4161-332-0000-009

мо	YR	ATTNY	LIT	DEPT	CAT	SUB-CAT	MATTER	AMOUN	t	DESCRIPTION
08	21	NRM							70.00	Ball Pond
Tota	l Invoi	ices Rec	elved					\$	70.00	

-

# <u>Legal Fees - Labor</u> 00141610000003 - 332.01 Cohen & Wolf

мо	YR	ATTNY	LIT	DEPT	CAT	SUB-CAT	MATTER		AMOUNT	DESCRIPTION
07	21	LCC						\$	1,045.00	Labor Matters
08	21	LCC						s	440.00	Labor Matters
09	21	LCC						\$	137.50	Labor Matters
									1	
_						•		5	1,622,50	

Total Labor Legal Fees

1,622.50 s

TOTAL LEGAL FEES \$ 36,432.50

POWERSCHOOL DATE: 12/10/2021 TIME: 09:59:51

TOWN OF NEW FAIRFIELD EXPENDITURE STATUS REPORT

SELECTION CRITERIA: orgn.fund='001' and orgn.orgn1 between '4110' and '4550' accounting PerioD: 6/22

SORTED BY: FUND, DEPARTMENT, BUDGET UNIT, ACCOUNT TOTALED ON: FUND, DEPARTMENT PAGE BREAKS ON:

FUND-001 GENERAL FUND DEPARTMENT-4110 BOARD OF SELECTMAN BUDGET UNIT-00141100000000 BOS

YEAR TO DATE EXP 51,164.08 25,533.65 672.71 13,000.00 1,296.65 91,667.09	35,193.12 34,983.07 7,588.12 7,588.12 7,588.12 7,57.12 7,57.12	9,642.12 9,642.12	14,935.68 4,896.75 5,687.10 25,519.53	203,598.97 787.30 204,386.27
ENCUMBRANCES OUTSTANDING 00 827.29 827.29 .00 3,203.35 4,030.64	13,411.00 13,411.00 1,800.00 19,533.14	00.	.00 4,633.74 4,633.74	2,426.47 2,426.47
EXPENDITURES 5,141.10 2,214.80 136.77 136.77 .00 .00 .00 .00	2,907.76 2,899.52 1,249.16 -00 -00 -00 -00 -7,728.12	00.	1,244.64 4,769.25 6,013.89	27,144.12 27,144.12
112,610.00 64,117.00 14,500.00 14,500.00 3,500.00 200,227.00	75,902.00 79,364.00 21,000.00 1,800.00 183,766.00	FACILITY FEES 9,721.00 9,721.00	32,361.00 17,000.00 11,440.00 60,801.00	295,093.00 6,500.00 301,593.00
TITLE ELECTED SALARIES SALARIES SALARIE LAND RECORD CABLE BROADCASTING GRANTS ADMISTRATOR MATERIALS & SUPPLIE . BOARD OF SELECTMAN	AENT-4120 TOWN CLERK UNIT-0014120000000 TC ELECTED SALARIES SALARIES INDEXING & MICROFIL VITAL STATISTICS ORDINANCE UPDATE MATERIALS & SUPPLIE FOTAL TOWN CLERK	ЗАТЕ 000000 РКОВАТЕ -	DEPARTMENT-4140 REGISTRARS OF VOTERS BUDGET UNIT-0014140000000 ROV 105.00 ELECTED SALARIES 110.00 SALARIES 610.00 MATERIALS & SUPPLIE TOTAL REGISTRARS OF VOTERS	DEPARTMENT-4150 FINANCE BUDGET UNIT-00141500000000 FIN 110.00 SALARIES 610.00 MATERIALS & SUPPLIE TOTAL FINANCE
ACCOUNT 105.00 110.00 320.00 330.00 610.00 610.00	DEPARTMENT-4120 BUDGET UNIT-0014 105.00 110.00 340.00 341.00 342.00 610.00 for Tomm	DEPARTMENT-4121 PRO BUDGET UNIT-00141210 610.01 TOTAL PROBATE	DEPARTMENT-4 BUDGET UNIT-105.00 110.00 610.00 707AL	DEPARTMENT- BUDGET UNIT 110.00 610.00 TOTAL

DEPARTMENT-4152 TREASURER BUDGET UNIT-00141520000000 TREAS

YTD/ BUD 45.43 39.82 100.00 92.86 92.86 100.00 100.00

AVATLABLE BALANCE 61,445.92 38,583.35 38,583.35 38,583.35 38,500.00 1,000.00 3,500.00 3,500.00 104,529.27

46.37 44.08 100.00 100.00 100.00 100.00 53.70

40,708.88 44,380.93 00 00 85,089.81

46.15 28.80 90.22 49.59

17,425.32 12,103.25 1,119.16 30,647.73

99.19 99.19

78.88 78.88

68.99 49.44 68.57

91,494.03 3,286.23 94,780.26

13.60 100.00 66.67 76.90

2,278.30 00 15,000.00 18,278.30

358.70 32,500.00 .00 32,858.70

26,000.00 2,000.00 28,000.00

105.50 00 105.50

2,637.00 58,500.00 3,000.00 15,000.00 79,137.00

DEPARTMENT-4151 BOARD OF FINANCE BUDGET UNIT-00141510000000 BOF 110.00 SALARIES 336.00 TOWN AUDIT 610.00 MATERIALS & SUPPLIE 801.00 CONTINGENCY TOTAL BOARD OF FINANCE

POWERSCHOOL DATE: 12/10/2021 TIME: 09:59:51

TOWN OF NEW FAIRFIELD EXPENDITURE STATUS REPORT

SELECTION CRITERIA: orgn.fund='001' and orgn.orgn1 between '4110' and '4550' ACCOUNTING PERIOD: 6/22.

SORTED BY: FUND,DEPARTMENT,BUDGET UNIT,ACCOUNT TOTALED ON: FUND,DEPARTMENT PAGE BREAKS ON:

FUND-001 GENERAL FUND DEPARTMENT-4152 TREASURER BUDGET UNIT-00141520000000 TREAS

43.56 100.00 75.43 48.49 49.38 44.94 3.77 100.00 47.17 12.00 11.42 21.30 12.38 33.95 98.71 98.71 100.00 100.00 83.33 80.397 80.397 YTD/ BUD 41.67 41.67 80. 100.00 AVAILABLE BALANCE 4,765.80 4,765.80 41,251.32 59,317.51 4,811.50 105,380.33 89,878.97 00 2,463.06 92,342.03 5,284.05 40,818.00 194,785.92 9,108.15 00 500.00 890.35 251,386.47 572.00 596.12 78.70 1,246.82 8 3,000.00 40,243.68 48,410.49 .00 1,301.62 89,955.79 69,380.03 3,550.10 736.94 73,667.07 2,715.95 00.08.08 518,367.37 3,404.20 3,404.20 78.00 76.88 21.30 176.18 102,964.50 480.00 109.65 797,445.55 YEAR TO DATE EXP 8 8 8 ENCUMBRANCES OUTSTANDING .00 .00 00 181,024.48 10,000.00 39,755.50 2,020.00 6,449.90 6,825.00 13,274.90 .00 .00 .00 3,938.38 4,126.88 232,799.98 8888 8 5,000.00 PERIOD EXPENDITURES 680.84 680.84 6,185.44 10.02 .00 6,195.46 3,303.64 4,256.46 .00 7,710.10 34,321.50 .00 8888 155.61 .00 14,529.80 49,006.91 8 8 8,000.00 367,594.00 708,500.00 110,000.00 132,700.00 122,000.00 1,281,632.00 81,495.00 107,728.00 5,000.00 5,240.00 199,463.00 BUDGET 170.00 159,259.00 10,000.00 10,025.00 179,284.00 650.00 673.00 100.00 1,423.00 3,000.00 5,000.00 ထ်ထ် DEPARTMENT-4160 UNCLSFD PAYROLL & BENEFITS BUDGET UNIT-0014160000000 U P& B 130.01 OVERTIME CONTINGENC 140.00 SALARY ADJUSTMENTS 220.00 SOCIAL SECURITY 250.00 UNEMPLOYMENT 250.00 UNEMPLOYMENT 260.00 EMPLOYEE PHYSICALS 580.00 MILEAGE REIMBURSEME 1 DEPARTMENT-4155 BOARD OF ASSESMENT APPEAL BUDGET UNIT-0014155000000 BOAA 105.00 ELECTED SALARIES 110.00 SALARIES 610.00 MATERIALS & SUPPLIE TOTAL BOARD OF ASSESMENT APPE DEPARTMENT-4161 PROFESSIONAL SERVICES BUDGET UNIT-00141610000000 LEGAL 334.01 CONSULTING BUDGET UNIT-00141610000001 LEGAL-LAND 332.01 BUDGET UNIT-00141610000002 LEGAL-TAX 332.01 BUDGET UNIT-00141610000003 LEGAL-LABOR 332.01 ī ı. ı. D GIS & AUDITS-PERS P MATERIALS & SUPPLIE TOTAL ASSESSOR DELING. TAX COLLECT. MATERIALS & SUPPLIE TOTAL TAX COLLECTOR TOTAL UNCLSFD PAYROLL &BENEFI I. DEPARTMENT-4154 TAX COLLECTOR BUDGET UNIT-00141540000000 TAX 105.00 ELECTED SALARIES 110.00 SALARIES 331.00 DELINQ.TAX COLLEC 610.00 MATERIALS & SUPPL VI ----TITLE · DELECTED SALARIES TOTAL TREASURER DEPARTMENT-4153 ASSESSOR BUDGET UNIT-00141530000000 A-TAX SALARIES ACCOUNT 105.00 337.00 610.00

100.00 100.00

8 8

6,550.00 1,622.50

33,377.50 950.00

8 8

7,500.00 35,000.00

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FUND-001 GENERAL FUND DEPARTMENT-4161 PROFESSIONAL SERVICES BUDGET UNIT-00141610000004 LEGAL-GENERAL/OTHER	JER	PFRTOD	FNCLMBRANCES	YEAR TO DATE	ΔΥΔΤΙ <b>Δ</b> ΒΙ Ε	/dTY
UNTT-00141610000004   EGAL-GENERAL/OTH	BUDGET	PEKIUU EXPENDITURES	ENCUMBRANCES	YEAK IU DATE EXP	AVALLABLE BALANCE	
UNIT-00141410000005 IECAI DEALTURE	25,000.00	00.	14,800.00	20,200.00	.00	100.00
- 2	7,000.00	00.	5,932.50	1,067.50	.00	100.00
UNII-UUT4TDIUUUUU0 LEGAL-FLANNING	5,000.00	00.	3,590.00	1,410.00	00.	100.00
	15,000.00	00.	9,487.50	5,512.50	00.	100.00
	15,000.00	00.	15,000.00	00.	00.	100.00
UNTI-VULTELUVUVUV LEVAL-INLANU/WEIT	T32,500.00	00.	4,930.00 93,067.50	70.00 36,432.50	3,000.00	100.00 97.74
DEPARTMENT-4162 INTERGOVERNMENTAL AGENCY BUDGET UNIT-00141620000000 1/G 312.00 CT COUNCIL OF SMALL 316.00 PUBLIC TRANSPORTATI 10 421.00 HOUSEHOLD HAZARD WA 1	$1,175.00\\104,670.00\\15,000.00$	000 0.00	61,057.50 13,057.85	1,175.00 43,612.50 1,942.15	00000	100.00 100.00 100.00
L (	COUNCIL 9,242.00	00.	00.	9,242.00	00.	100.00
BUDGET UNIT-UU14162U0UZUUU I/G-CANDLEWOOD L/ 313.00 1 0014170000000 1/G-CANDLEWOOD L/ 12	AKE 39,281.00	00.	00.	139,281.00	00.	100.00
UNI UU14105UUU4UUU 1/6 C MUNICIPAL TOTAL INTERGOVERNMENTAL AGENC 27	АL 8,929.00 278,297.00	00.00	.00 74,115.35	8,929.00 204,181.65	00.	100.00 100.00
DEPARTMENT-4163 GENERAL INSURANCE BUDGET UNIT-00141630000000 G-INS 520.01 PROPERTY & CASUALTY 18 TOTAL GENERAL INSURANCE 18	180,000.00 180,000.00	23,459.75 23,459.75	19,841.55 19,841.55	155,158.45 155,158.45	5,000.00	97.22 97.22
NES PPLIE	4,400.00 26,500.00	.00 439.90	1,342.02 16,560.10	2,546.74 9,197.86	511.24 742.04	88.38 97.20
UNTI-UUT4164UUULUUU B/M ASSESSOR EQUIPMENT	19,877.00	00.	833.01	19,043.99	00.	100.00
E LEA EQUIP	1,200.00 13,590.00	.00 456.00	990.00 1,081.34	210.00 12,053.72	.00 454.94	100.00 96.65
TENAN ENT	2,990.00 16,000.00	00.	822.72 973.25	2,167.28 12,956.59	.00 2,070.16	100.00 87.06
UNTI-UUT4T5440044000 B/M LAN EQUIP MAINTENAN	82,935.00	2,122.00	40,040.30	37,354.79	5,539.91	93.32

TOWN OF NEW FAIRFIELD EXPENDITURE STATUS REPORT SELECTION CRITERIA: orgn.fund='001' and orgn.orgn1 between '4110' and '4550' ACCOUNTING PERIOD: 6/22

POWERSCHOOL DATE: 12/10/2021 TIME: 09:59:51

SORTED BY: FUND, DEPARTMENT, BUDGET UNIT, ACCOUNT TOTALED ON: FUND, DEPARTMENT PAGE BREAKS ON:

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m PAGE NUMBER: EXPSTA11

POWERSCHOOL DATE: 12/10/2021 TIME: 09:59:51

TOWN OF NEW FAIRFIELD EXPENDITURE STATUS REPORT

SELECTION CRITERIA: orgn.fund='001' and orgn.orgn1 between '4110' and '4550'
ACCOUNTING PERIOD: 6/22

SORTED BY: FUND, DEPARTMENT, BUDGET UNIT, ACCOUNT TOTALED ON: FUND, DEPARTMENT PAGE BREAKS ON:

FUND-001 GENERAL FUND DEPARTMENT-4164 BUSINESS MACHINES BUDGET UNIT-00141640004000 B/M

YEAR TO DATE EXP 32.778.58	2,536.71 11,724.88	2,282.27	247.44 1,200.00	3,189.33	10,775.70 160,265.88	31,795.00 31,795.00	318.99 110.05 429.04	28,172.25 1,150.14 29,322.39	2,943.45 1,036.60 3,980.05	2,018.11 -25.00
ENCUMBRANCES OUTSTANDING 17.221.36	2,373.29 4,449.76	6,288.99	262.56 .00	00.	180.30 93,419.00	000.	888	.00 875.94 875.94	.00 1,963.40 1,963.40	120.00
PERIOD EXPENDITURES .00	52.00	.00	83.03 .00	00.	.00 3,152.93	00.	0000	2,479.32 81.06 2,560.38	569.70 .00 569.70	115.32 .00
BUDGET 50,000.00	4,910.00 16,175.00	11,610.00	88,899.00 1,300.00	3,190.00	10,956.00 354,532.00	32,000.00 32,000.00	3,087.00 3,000.00 6,087.00	75,888.00 7,215.00 83,103.00	s 7,385.00 4,500.00 11,885.00	3,557.00
ACCOUNT TITLE 431.03 COMM. CENTER EQUIP	BUDGET UNIT-00141640005000 B/M 430.04 COPIER MAINTENANCE 431.04 COPIEE EQUIPMENT	BUDGEL UNIT-UUI41640006000 B/M 431.05 PUDGET UNIT ON11640000 C //	430.06 SYSTEMS ADMINISTRAT 430.06 SYSTEMS ADMINISTRAT 431.06 FIRE MARSHALL EQUIP	600661 0NL1-00141040006000 B/M 431.07 FILE EQUIPMENT	TOTAL BUSINESS MACHINES	DEPARTMENT-4190 HUMAN RESOURCES BUDGET UNIT-00141900000000 HR 345.00 BUSINESS SERVICES TOTAL HUMAN RESOURCES	DEPARTMENT-4191 PLANNING COMMISSION BUDGET UNIT-00141910000000 PLAN 110.00 SALARIES 610.00 MATERIALS & SUPPLIE TOTAL PLANNING COMMISSION	DEPARTMENT-4192 ZONING COMMISSION BUDGET UNIT-00141920000000 ZONING 110.00 SALARIES 610.00 MATERIALS & SUPPLIE TOTAL ZONING COMMISSION	DEPARTMENT-4193 ZONING BOARD OF APPEALS BUDGET UNIT-00141930000000 ZBA 110.00 SALARIES 610.00 MATERIALS & SUPPLIE TOTAL ZONING BOARD OF APPEALS	DEPARTMENT-4194 ECONOMIC DEVELOPMENT BUDGET UNIT-00141940000000 E/D 110.00 SALARIES 610.00 MATERIES & SUPPLIE TOTAL ECONOMIC DEVELOPMENT

PAGE NUMBER: EXPSTA11

4

ΥТD/ ВUD 100.00

AVATLABLE BALANCE .06

100.00 73.83

00 98 98

99.98

.67

100.00 71.55

.00 100,847.12

92.31

88,389.00 100.00

3,038.74

99.36 99.36

205.00 205.00

10.33 3.67 7.05

2,768.01 2,889.95 5,657.96

37.12 28.08 36.34

47,715.75 5,188.92 52,904.67

39.86 66.67 50.01

4,441.55 1,500.00 5,941.55

56.74 3.17 32.23

1, 538.89 2, 905.00 4, 443.89

2,018.11 -25.00 1,993.11

120.00 120.00 120.00

115.32 .00 115.32

3,557.00 3,000.00 6,557.00

TOTAL ECONOMIC DEVELOPMENT

DEPARTMENT-4195 UTILITIES BUDGET UNIT-0014195000000 UTIL

POWERSCHOOL DATE: 12/10/2021 TIME: 09:59:51

TOWN OF NEW FAIRFIELD EXPENDITURE STATUS REPORT

SELECTION CRITERIA: orgn.fund='001' and orgn.orgn1 between '4110' and '4550' ACCOUNTING PERIOD: 6/22

SORTED BY: FUND, DEPARTMENT, BUDGET UNIT, ACCOUNT TOTALED ON: FUND, DEPARTMENT PAGE BREAKS ON:

FUND-001 GENERAL FUND DEPARTMENT-4195 UTILITIES BUDGET UNIT-00141950000000 UTIL

ΥΤD/ BUD 100.00 82.08	100.00	100.00	99.43	100.00	100.00 96.75	15.97 .00 15.37	4.16 88.89 6.50	000.	00.	42.57 47.01 380.00 385.00 85.00 56.77 50.00
AVAILABLE BALANCE 00 10,713.92	.00	00.	157.60	.00	10,871.52	3,191.37 150.00 3,341.37	15,187.48 50.00 15,237.48	250.00 250.00	1,000.00 1,000.00	312, 792, 19 6, 888, 75 6, 888, 75 4, 320, 00 1, 500, 00 3, 768, 51 5, 187, 91 5, 187, 91 200, 00
YEAR TO DATE EXP 4,954.96 17,223.98	12,161.19	50,253.81	13,152.67	2,139.35	7,184.26 107,070.22	606.63 .00 .606.63	659.52 657.65 957.17	00.	00.	231,833.81 4,884.97 1,930.00 2,758.97 1,344.45 3,792.61
ENCUMBRANCES OUTSTANDING 9,545.04 31,838.10	40,583.81	65,746.19	14,434.73	42,610.65	11,568.74 216,327.26	888.	.00 102.35 102.35	00.	00.	241,226.28 241,000.00 5,741.03 1,887.04 3,019.48 200.00
PERIOD EXPENDITURES 59.01 .00	370.27	12.17	2,571.30	626.52	602.80 4,242.07	888.	888.	00.	00.	19,271.13 162.05 00 475.53 36.54
BUDGET 14,500.00 59,776.00	52,745.00	116,000.00	27,745.00	44,750.00	18,753.00 334,269.00	TEE 3,798.00 3,948.00 3,948.00	15,847.00 450.00 16,297.00	PROPERTIES M&S 250.00 250.00	F 1,000.00 1,000.00	544, 626.00 13,000.00 241,000.00 10,000.00 7,000.00 12,000.00 12,000.00 12,000.00
ACCOUNT TITLE 622.00 STREET LIGHTS 622.00 GASOLINE & DIESEL			UNTIUUL41950004000 TELEPHONE	UNLI-UUL4195000000	BUDGET UNTI-UUL4133000000 UTL 620.04 OTHER TOTAL UTILITIES	DEPARTMENT-4196 PERMANENT BUILDNG COMITEE BUDGET UNIT-00141960000000 PBC 110.00 SALARIES 610.00 MATERIALS & SUPPLIE TOTAL PERMANENT BUILDNG COMIT	DEPARTMENT-4197 GENERAL LAND USE BUDGET UNIT-00141970000000 LAND 110.00 SALARIES 610.00 MATERIALS & SUPPLIE TOTAL GENERAL LAND USE	DEPARTMENT-4198 HISTORICAL PROPERTIES BUDGET UNIT-00141980000000 HISTORICAL 610.01 TOTAL HISTORICAL PROPERTIES	DEPARTMENT-4199 COMMISSN OF YOUTH OF NF BUDGET UNIT-00141990000000 YOUTH 610.00 MATERIALS & SUPPLIE TOTAL COMMISSN OF YOUTH OF NF	DEPARTMENT-4210 POLICE BUDGET UNIT-0014210000000 PD 110.00 SALARIES 291.00 UNIFORMS 317.00 RESIDENT STATE TROO 322.00 EQUICATION & TRAININ 430.07 MATERIALS & SUPPLIE 742.00 VEHICLE MAINTENANCE 810.00 SR0 PROGRAMS

POWERSCHOOL DATE: 12/10/2021 TIME: 09:59:51

TOWN OF NEW FAIRFIELD EXPENDITURE STATUS REPORT

SELECTION CRITERIA: orgn.fund='001' and orgn.orgn1 between '4110' and '4550' ACCOUNTING PERIOD: 6/22

SORTED BY: FUND, DEPARTMENT, BUDGET UNIT, ACCOUNT TOTALED ON: FUND, DEPARTMENT PAGE BREAKS ON:

FUND-001 GENERAL FUND DEPARTMENT-4210 POLICE BUDGET UNIT-00142100001000 PD

YTD/ BUD	27.70 62.55 100.00	59.88 100.00	00.001 00.001	32.65 36.98	18.34	75.00 78.05	42.07	30.53 65.65	100.00	44.10	44.51		00.001	62.51 35.82 62.13	74.19 43.23	25.00	33.33 54.05
AVAILABLE BALANCE	29,598.00 30,898.86 .00	8,024.02 .00	14,468.00 1,000.00 .00	1,650.00 3,151.03	136,213.00	1,800.00 561,460.27	141,831.28	29,226.04 8,062.32		1,397.56	180,517.20		20,000.00	2,568.15 29,007.60 5,490.70	21,940.38 11,750.40	2,250.00	2,000.00 95,007.23
YEAR TO DATE EXP	11,340.00 51,601.14 11,842.33	11,975.98 .00	.00 .00 29,045.81	800.00 1,848.97	30,597.00	5,400.00 400,996.04	102,983.72	12,843.96 15,409.68	799.82 2,896.00		140,752.65		1,295.00 .00	4,265.60 7,045.94 3,483.76	45,821.12 5,836.26	323.96	604.60 68,676.24
ENCUMBRANCES OUTSTANDING	.00 .00 25,157.67	.00 1,138,000.00	.00 .00 178,954.19	00.00	00.	.00 1,595,935.69	00.	8.8.	700.18 2,904.00	432.97	4,037.15		7,205.00	16.25 9,146.46 5,525.54	17,238.50 3,113.34	426.04	395.40 43,066.53
PERIOD EXPENDITURES	1,252.50 5,579.77 .00	484.32 .00	0000	00.	2,118.90	5,400.00 34,780.74	9,531.60	1,097.74 1,254.83	00	8.0	11,884.17		00.	2,600.00 638.99 844.00	11,684.96 4,197.88	161.98	458.95 20,586.76
BUDGET	40,938.00 82,500.00 37,000.00	20,000.00 1,138,000.00	14,468.00 1,000.00 208,000.00	2,450.00 5,000.00		r (V	244,815.00	42,070.00 23,472.00	1,500.00 5,800.00	2,500.00	325,307.00		8,500.00 20,000.00	6,850.00 45,200.00 14,500.00	85,000.00 20,700.00		ц С
ACCOUNT	BUDGET UNIT-UU1421UUUULUUU PD 110.02 SECRETARY 130.00 OVERTIME 317.01 RESIDENT SERGEANT O	BUDGET UNIT-UU14210UU22000 PD 130.02 PREVATE DUTY OT 317.02 OTHER RESIDENT TROO	BUDGET UNIT-UU14210UU030UU PD 110.04 T-DAYS/VACATION 130.03 DARE OVERTIME 317.03 RESIDENT TROOPER OT	UNIT-0014210004000 PD LONGEVITY/EDUC TRAINING OVER	UNIT-00142100005000	BUDGET UNIT-UUL421UUUUDUUU PU SPECIALIY 100.01 TOTAL POLICE	DEPARTMENT-4215 COMMUNICATIONS CENTER BUDGET UNIT-00142150000000 CC 110.00 SALARIES	112.00 PART-TIME SALARIES 130.00 OVERTIME	322.01 TRAINING - EMD 530.00 NW-PSCC		DOU.UU EMERGENCY NULFICAT TOTAL COMMUNICATIONS CENTER	MENT-4220 UNIT-0014	290.01 PHYSICALS 322.00 EDUCATION & TRAININ			UNIT-UU14220002000 DRY HYDRANT	BUDGET UNTI-UUT422UUUUSUUU FU PUKIABLE 610.01 TOTAL FIRE COMPANIES

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62,650.31 178.80 107.09 62,936.20 24,827.13 1,074.44 25,901.57 20,646.72 365.56 21,012.28 360,087.27 56,995.64 6,479.97 5,120.92 4,781.37 4,781.37 119,664.94 119,664.94 119,664.94 7,616.20 54,025.00 54,225.00 377,394.00 377,394.00 31,090.33 1,540.07 32,630.40 YEAR TO DATE EXP .00 569.49 569.49 255,000.00 376,469.00 376,469.00 3,157.90 3,157.90 .00 647.78 647.78 152,983.72 141,324.50 55,664.62 ENCUMBRANCES OUTSTANDING 00.00 00.00 70.90 TOWN OF NEW FAIRFIELD EXPENDITURE STATUS REPORT SELECTION CRITERIA: orgn.fund='001' and orgn.orgn1 between '4110' and '4550'
ACCOUNTING PERIOD: 6/22 31,644.78 3,407.20 376.56 292.43 .00 2,785.38 156.06 2,941.44 5,563.56 .00 5,573.58 980.00 .00 .00 .00 .339.51 62,644.00 62,644.00 2,092.22 303.02 2,395.24 1,849.74 41.05 1,890.79 PERIOD EXPENDITURES 8 72,520.00 5,750.00 78,270.00 48,185.00 9,500.00 57,685.00 48,093.00 7,175.00 55,268.00 753,933.00 BUDGET fund-001 general fund department-4220 fire companies budget unit-00142200005000 fd portable equipment SORTED BY: FUND, DEPARTMENT, BUDGET UNIT, ACCOUNT TOTALED ON: FUND, DEPARTMENT PAGE BREAKS ON: I 01 TOWN ENGINEER 01 TOWN ENGINEER 00 UNIFORMS 01 DISPOSAL OF WASTE 01 DISPOSAL OF WASTE 02 UNIFORMS 03 DISPOSAL OF WASTE 04 DISPOSAL OF WASTE 05 DISPOSAL OF WASTE 00 D Т ī. ) SALARIES ) MATERIALS & SUPPLIE TOTAL FIRE MARSHALL Т DEPARTMENT-4221 AMBULANCE-PARA/EMT BUDGET UNIT-00142210000000 AMB 338.01 AMBULANCE-PARA./EMT TOTAL BUILDING INSPECTOR TOTAL EMERGENCY PLANNING ) MATERIALS & SUPPLIE TOTAL ANIMAL CONTROL DEPARTMENT-4240 BUILDING INSPECTOR BUDGET UNIT-0014240000000 B/I 110.00 SALARIES 609.00 ICC PLAN REVIEWS/CC 610.00 MATERIALS & SUPPLIE DEPARTMENT-4290 EMERGENCY PLANNING BUDGET UNIT-0014290000000 OEM 110.00 SALARIES 610.00 MATERIALS & SUPPLIE DEPARTMENT-4295 ANIMAL CONTROL BUDGET UNIT-00142950000000 A-CONT 110.00 SALARIES 610.00 MATERIALS & SUPPLJ τ - - - - - TITLE TOTAL AMBULANCE-PARA/EMT DEPARTMENT-4225 FIRE MARSHALL BUDGET UNIT-0014225000000 FM 110.00 SALARIES DEPARTMENT-4310 PUBLIC WORKS BUDGET UNIT-00143100000000 PW 110.00 SALARIES DATE: 12/10/2021 TIME: 09:59:51 POWERSCHOOL ACCOUNT 610.00

42.84 5.96 41.25

83,589.69 2,821.20 3,322.01 89,732.90 51.52 44.55 50.38

23,357.87 5,267.66 28,625.53 42.93 14.12 39.19

27,446.28 6,161.66 33,607.94 42.15 51.81 22.11 22.11 6.33 94.91 94.97 85.75 85.75

> 10,000.00 9,400.00 159,994.50 17,104.69

494, 237.73 53,004.36 22,834.03 75,796.08 3,608.58 5,600.58 5,600.09 5,600.09 5,600.00 5,600.00 5,600.00 5,600.00

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AVAILABLE BALANCE 42.87 36.69 42.42

41,429.67 3,640.44 45,070.11

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POWERSCHOOL DATE: 12/10/2021 TIME: 09:59:51

TOWN OF NEW FAIRFIELD EXPENDITURE STATUS REPORT

SELECTION CRITERIA: orgn.fund='001' and orgn.orgnl between '4110' and '4550' ACCOUNTING PERIOD: 6/22

SORTED BY: FUND, DEPARTMENT, BUDGET UNIT, ACCOUNT TOTALED ON: FUND, DEPARTMENT PAGE BREAKS ON:

( E I O FUND-001 GENERAL FUND DEPARTMENT-4310 PUBLIC WORKS BUDGET UNIT-00143100001000 PW

	ΥΤD/ BUD 95.39	35.66	00.67	.00 61.64	43.11 -00 50.70	96.80 44.01	25.93 100.00	80.00 60.51	0000		39.96 60.46	100.00	100.00	100.00	100.00	100.00	100.00
	AVAILABLE BALANCE 3,690.34	<u>19</u> ,302.00	21,002.00	300.00 896,309.24	156,769.26 100.00 2 700.00	159,658.74	2,109.50 .00	200.00 2,309.50	615.00 900.00 1.515.00	-	47,387.04 355.85	.00	00.	00.	00.	00.	00
	YEAR TO DATE EXP 36,355.67	2,287.75	2,026.27	.00 703,266.77	118,791.74 00 2 617.00	1,301.54 122,710.28	738.50 2,000.00	3,029.60	0000		31,537.96 544.15	2,200.00	2,000.00	1,500.00	3,100.00	1,500.00	640.00
	ENCUMBRANCES OUTSTANDING 39,953.99	8,410.25	76,971.73	.00 737,123.99	00.535 -	1,408.98 2,791.98	00.	508.90 508.90	000		00.	00.	.00	.00	00.	.00	00.
	PERIOD EXPENDITURES 1,404.82	120.00	109.07	.00 38,674.37	10,661.12 .00 .00	169.11 10,830.23	158.25	.00 158.25	0000		2,735.70 196.17	00.	00.	00.	00.	00.	00.
D. & GROUNDS M&S	(   •	A VIKE		SAFEIY CUMMIIIEE M&S 300.00 2,336,700.00	275,561.00 275,561.00	285,	52	E 1,000.00 5,848.00	615.00 900.00 1.515.00			NUMEN'S CENTER 2,200.00			REGLUNAL HUMELESS 3,100.00 DREVENTION COUNCIL		
DEPARTMENT-431U PUBLIC WORKS BUDGET UNIT-00143100001000 PW BUILD		W4 00020000124200 TIM	BUDGEL UNIT-UUL45100005000 PW SNUW	BUDGET UNIT-UU1451UUU4UUU PW SAFE 610.01 TOTAL PUBLIC WORKS	DEPARTMENT-4410 HEALTH BUDGET UNIT-00144100000000 H 110.00 SALARIES 334.02 HEALTH CLINIC	10.00 WATER LESIS 10.00 MATERIALS & SUPPLIE TOTAL HEALTH	DEPARTMENT-4420 INLAND WETLANDS BUDGET UNIT-00144200000000 IN-WET 110.00 SALARIES 346.00 FEES & SERVICES	10.00 MATERIALS & SUPPLIE TOTAL INLAND WETLANDS	DEPARTMENT-4430 WPCA BUDGET UNIT-00144300000000 WPCA 110.00 SALARIES 610.00 MATERIALS & SUPPLIE TOTAU WPCA	DEPARTMENT-4440 SOCIAL SERVICES BUDGET UNIT-00144400000000 SOCIAL	110.00 SALARIES 610.00 MATERIALS & SUPPLIE	UNIT-UU14440U0U1000 SOCIAL	UNIT-UU144400002000 50CIAL	UNIT-UU144400005000 50CTAL	UNI 1-00144400005000 50CTAL	UNIT 0014440000000 SOCIAL	BUDGET UNTI-UUT4440000/000 SULTAL 1 350.00

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POWERSCHOOL DATE: 12/10/2021 TIME: 09:59:51

TOWN OF NEW FAIRFIELD EXPENDITURE STATUS REPORT

SELECTION CRITERIA: orgn.fund='001' and orgn.orgn1 between '4110' and '4550' ACCOUNTING PERIOD: 6/22

SORTED BY: FUND, DEPARTMENT, BUDGET UNIT, ACCOUNT TOTALED ON: FUND, DEPARTMENT PAGE BREAKS ON:

FUND-001 GENERAL FUND DEPARTMENT-4440 SOCIAL SERVICES BUDGET UNIT-0014440009000 SOCIAL FAMILY & CHILDREN

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	YTD/ BUD	00.	100.00	00.	.00 46.12	μ4	14.57 93.69 55.51	59.97 27.49 30.34	4.38 .00 3.08	43.86 43.86		89.1/ 100.00 85.94 45.28	
	AVAILABLE BALANCE	650.00	00.	1,556.00	1,250.00 51,198.89	66. 34.	2,550.00 2,523.04 82,074.18	269.38 5,076.00 5,345.38	2,940.46 1,300.00 4,240.46	41,386.14 41,386.14	271,545.06 2,901.18 2,901.18	104.00 5,311.00 4,170.04 284.161.36	{ ) ( )
	YEAR TO DATE EXP	00.	800.00	.00	.00 43,822.11	58,764.43 1,677.06	435.00 12,614.09 73,490.58	403.62 1,924.00 2,327.62	134.54 .00 134.54	32,334.86 32,334.86	575. 229.	1,242.00 1,233.95 15,336.74 216,288.41 216,288.41	
	ENCUMBRANCES OUTSTANDING	00.	00.	00.	00.	.00 4,038.37	.00 24,862.87 28,901.24	0000	0000	00.	.00 1,825.00	16,618.05 16,618.05 18,817.23	
	PERIOD EXPENDITURES	00.	00.	00.	.00 2,931.87	5,156.58 .00	.00 1,787.13 6,943.71	76.88 .00 76.88	00.00.	2,841.28 2,841.28	14,630.45 .00 .00	340.00 2,102.43 17,072.90	
	<u>م</u>		2	1,556.00	1,250.00 95,021.00		2,985.00 40,000.00 184,466.00	TEE 673.00 7,000.00 7,673.00	3,075.00 1,300.00 4,375.00	73,721.00 73,721.00	, 121. 800.	1,514.00 37,766.00 519,267.00	
DUDGET UNIT-UUL+++UUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUU	: 	350.00 BUDDE 001111-00111100010000 50CTAL PRIM	800051 UNIT-001444400010000 SOCIAL WELANK 350.00 BUDGET UNIT-00144400011000 SOCIAL BEGIONA		,	DEPARTMENT-4450 SENIOR SERVICES BUDGET UNIT-00144500000000 SENIOR 110.00 SALARIES 610.00 MATERIALS & SUPPLIE	803.03 NUTRITION PROGRAM 810.01 PROGRAMS TOTAL SENIOR SERVICES	DEPARTMENT-4460 BALL POND ADVISRY COMITEE BUDGET UNIT-0014460000000 B-POND 110.00 SALARIES 344.02 WATER TESTING TOTAL BALL POND ADVISRY COMIT	DEPARTMENT-4470 COMMISSION ON AGING BUDGET UNIT-00144700000000 AGING 110.00 SALARIES 610.00 MATERIALS & SUPPLIE TOTAL COMMISSION ON AGING	DEPARTMENT-4510 RECREATION BUDGET UNIT-00145100000000 REC 110.00 SALARIES TOTAL RECREATION	MENT-4550 UNIT-0014	430.10 MAINICHANCE 610.04 TECHNICAL SUPPLIES 640.00 BOOKS & MATERIALS 810.01 PROGRAMS TOTAL LIBRARY	

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TOWN OF NEW FAIRFIELD EXPENDITURE STATUS REPORT

SELECTION CRITERIA: orgn.fund='001' and orgn.orgn1 between '4110' and '4550' ACCOUNTING PERIOD: 6/22

SORTED BY: FUND, DEPARTMENT, BUDGET UNIT, ACCOUNT TOTALED ON: FUND, DEPARTMENT PAGE BREAKS ON:

FUND-001 GENERAL FUND DEPARTMENT-4550 LIBRARY BUDGET UNIT-00145500000000 LIBRARY

YTD/ BUD 69.44	69.44
AVAILABLE BALANCE 3,559,516.33	3,559,516.33
YEAR TO DATE EXP 4,467,761.79	4,467,761.79
ENCUMBRANCES OUTSTANDING 3,620,755.88	3,620,755.88
PERIDD EXPENDITURES 368, 504.66	368,504.66
TITLE BUDGET RAL FUND 11,648,034.00	11,648,034.00
ACCOUNT	TOTAL REPORT

PAGE NUMBER: 10 EXPSTA11 TOWN OF NEW FAIRFIELD REVENUE STATUS REPORT

SELECTION CRITERIA: Orgn.fund='001' ACCOUNTING PERIOD: 5/22 POWERSCHOOL DATE: 12/08/2021 TIME: 15:42:56

SORTED BY: FUND,1ST SUBTOTAL,ACCOUNT TOTALED ON: 1ST SUBTOTAL PAGE BREAKS ON:

FUND-001 GENERAL FUND 1ST SUBTOTAL-R3110000 PROPERTY TAXES

AVAILABLE BALANCE	22,485,671.61 -140,915,66 85,910.69 470,000.00 22,900,666.64	18,565.95 10,565.95 27,140.00 27,140.00 168,560.14 5,034.00 3,764.00 3,764.00 2,210.00 247,314.09	17,000.00 7,002.00 137,468.63 4,830.69 -3,831.89 -3,831.89 -3,831.89 -3,15,293.43 3,015,293.43	326, 539, 86 5, 619, 50 45, 366, 75 5, 000, 00 5, 000, 00 168, 384, 49 168, 384, 49 200, 000, 00 291, 659, 67 390, 000 390, 000 1, 178, 858, 27
YEAR TO DATE RECEIPTS	28, 796, 608. 39 140, 915. 66 69, 089. 31 .00 29,006, 613. 36	16,434.05 97,439.00 972,860.00 2,966.00 3,7750.00 2,125.00 1,105.00 142,000 142,000 142,00 142,0000000000000000000000000	.00 265,666.00 137,729.37 1,320.00 14,016.31 4,980.89 870,280.00 1,293,992.57	23,460.14 54,633.25 54,633.25 102.00 181,615.51 108,340.33 10,610.00 387,141.73
RECEIVABLES	88888	888888888888888888888888888888888888888	88888888888888888	888888888888888888888888888888888888888
PERIOD RECEIPTS	-9,265.71 .00 .00 .00 -9,265.71	$\begin{array}{c} 1,100.00\\ 1,728.00\\ 2,294.00\\ 2654.00\\ 100.00\\ 75.00\\ 75.00\\ 7,014.00\end{array}$	888888888888888888888888888888888888888	3,135.00 13,017.50 33,418.25 33,418.25 4,507.50 54,110.25
BUDGET	51,282,280.00 00 155,000.00 51,907,280.00	ITTS 35,000.00 13,000.00 266,000.00 266,000.00 266,000.00 266,000.00 13,000.00 13,000.00 13,000.00 389,335.00	$\begin{array}{c} 17,00000\\ 255,66600\\ 275,19800\\ 18,99700\\ 18,199700\\ 3,292,66800\\ 3,292,66800\\ 4,309,28600\\ \end{array}$	$\begin{array}{c} \begin{array}{c} 350,00000\\ 1004,00000\\ 5,00000\\ 350,00000\\ 350,00000\\ 400,00000\\ 200,00000\\ 1,566,00000\\ 0\\ \end{array}$
ACCOUNT TITLE	R3110001 PROPERTY TAXES R3110002 PROPERTY TAXES - PRIOR R3111002 INTEREST LIENS & FEES R3111003 MOTOR VEHICLE SUPPLEMENT TOTAL PROPERTY TAXES	1ST SUBTOTAL-R3200000 LICENSES & PERMITS R3200002 HEALTH R3200003 ZONING BOARD OF APPEALS R3200005 BUILDING R3200005 BUILDING R3200007 PLANNING R3200008 ENVIRONMENTAL ENFORCEMEN R3200009 PUBLIC WORKS FEES R3200009 PUBLIC WORKS FEES R3200009 OTHER LICENSES & PERMITS TOTAL LICENSES & PERMITS	1ST SUBTOTAL-R3300000 GRANTS R3300009 VETERANS EXEMPTION R3300033 EMERGENCY MGMT PERF GRAN R3300033 EMERGENCY MGMT PERF GRAN R330001 TOWN AID ROAD R3303001 TOWN AID ROAD R3303001 TOWN AID ROAD R3303013 PILOT-STATE PROPERTY R3303012 PILOT-STATE PROPERTY R3305012 LOCIP R3305012 LOCIP R3305056 SPECTAL EDUCATION TOTAL GRANTS	1ST SUBTOTAL-R3400000 LOCAL REVENUES R3400001 INTEREST INCOME R3402012 SENIOR SERVICES PROGRAMS R3404099 TOWN CLERK RECEIPTS R3404999 TOWN ENGINEER R3410199 OTHER LOCAL REVENUES R3416011 FELEPHONE LINE ACCESS R3416010 STUDENT TUTION R3422006 POLICE PRIVATE DUTY R3422007 EMS/PARAMEDIC BILLING TOTAL LOCAL REVENUES

PAGE NUMBER: REVSTA11

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56.15 .00 44.57 .00 55.88

YTD/ BUD

46.95 19.85 32.15 32.15 37.08 37.08 49.00 49.00 49.00 88.50 36.48

.00 50.05 50.05 66.00 73.78 73.78 73.78 26.43 26.43 26.43 26.43 26.00 26.00 26.00 26.00 26.00 26.00 26.00 26.00 26.00 26.00 26.00 26.00 26.00 26.00 26.00 20.000 20.00 2

6.70 59.86 54.63 54.63 51.89 51.89 53.05 53.05 53.05 53.05

PAGE NUMBER: 2 REVSTA11

> POWERSCHOOL DATE: 12/08/2021 TIME: 15:42:56

TOWN OF NEW FAIRFIELD REVENUE STATUS REPORT

> SELECTION CRITERIA: orgn.fund='001' ACCOUNTING PERIOD: 5/22

SORTED BY: FUND, 1ST SUBTOTAL, ACCOUNT TOTALED ON: 1ST SUBTOTAL PAGE BREAKS ON: FUND-001 GENERAL FUND 15T SUBTOTAL-R3400000 LOCAL REVENUES YTD/ BUB 53.00 AVAILABLE BALANCE 27,342,132.43 YEAR TO DATE RECEIPTS 30,829,768.57 8. RECEIVABLES PERIOD RECEIPTS 51,858.54 BUDGET 58,171,901.00 I. ī ı ACCOUNT - - - - TITLE - -TOTAL REPORT

	CAPITAL & NONRECURRING ACCOUNT	L & NO	NREC	URRIN	NG AC	COUN	Þ		
	- - - - -					•			
-				Available		Expenses		Encumbered	
		Balance	Budget	Funds		thru		Funds thru	
Account #'s	Name	<u>July 1, 2021</u>	FY 21-22	FY 21-22	<u>Transfers</u>	11/30/2021	Balance	11/30/2021	Balance
301-4110-0000-000 / 000.00	Lake Studies	21,735.04		21,735.04		638.00	21,097.04	638.00	20,459.04
301-4150-0000-000 / 700.04	Boat Dock Replacement Lock Box	36,023.99		36,023.99			36,023.99	9,001.00	27,022.99
301-4153-0000-000 / 337.01	Revaluation	84,558.81	40,000.00	124,558.81			124,558.81	124,558.81	I
301-4164-0001-000 / 740.02	Business Machines & Equip.	2,645.49	39,000.00	41,645.49		3,000.00	38,645.49	-	38,645.49
301-4192-0000-000 / 700.05	Zoning Regulations Maintenance	52,700.00	8,000.00	60,700.00			60,700.00		60,700.00
301-4196-0000-000 / 700.06	13 & 15 Route 37 Property Purchase	1		1	425,000.00		425,000.00		425,000.00
301-4210-0000-000 / 742.02	Police Cars & Equipment	311.28	55,600.00	55,911.28	110,500.00		166,411.28	37,070.16	129,341.12
301-4220-0000-000 / 700.14	Fire Co.	42,277.53	125,000.00	167,277.53	62,268.14		229,545.67	41,828.19	187,717.48
301-4220-0001-000 / 700.14	Paramedic Capital	21,383.79		21,383.79			21,383.79		21,383.79
301-4290-0000-000 / 740.05	Emergency Planning Capital	10,281.44	1,700.00	11,981.44		749.17	11,232.27	3,773.00	7,459.27
301-4295-0000-000 / 700.14	Animal Control	17,363.96		17,363.96			17,363.96		17,363.96
301-4330-0000-000 / 742.03	Public Works Trucks & Equip.	252,930.03	139,000.00	391,930.03		47,834.54	344,095.49	227,910.65	116,184.84
301-4330-0001-000 / 742.04	Bridge & Drainage	416,392.71	139,500.00	555,892.71		3,401.83	552,490.88	89,159.92	463,330.96
301-4330-0002-000 / 742.05	Musket Ridge Bridge	(1,874.69)		(1,874.69)			(1,874.69)		(1,874.69)
301-4340-0003-000 / 700.09	Police Dept. Oil Tank R&R	2,757.54		2,757.54			2,757.54	1.00	2,756.54
301-4340-0000-000 / 700.14	Town Properties Capital	371,501.76	60,000.00	431,501.76		178,907.00	252,594.76	59,447.51	193,147.25
301-4340-0002-000 / 700.14	Town Properties-Furniture	3,593.47	3,000.00	6,593.47		501.60	6,091.87	320.00	5,771.87
301-4410-0000-000 / 742.07	Health Department (COVID)	127,010.42		127,010.42		14,979.99	112,030.43	2,452.50	109,577.93
301-4510-0000-000 / 700.14	Recreation Capital	116,903.97		116,903.97			116,903.97	1,875.00	115,028.97
301-4550-0000-000 / 457.00	Library Renovations	47,639.65		47,639.65	17,039.00	22,074.93	42,603.72		42,603.72
301-4900-0000-000 / 002.11	BOE Capital	1	93,389.00	93,389.00	(93,389.00)		•		1
301-4900-0000-000 / 003.11	Fire Co. Reserve	1	159,413.00	159,413.00	(159,413.00)		•		ı
Appropriated Fund Balance		1,626,136.19	863,602.00	2,489,738.19	362,005.14	272,087.06	2,579,656.27	598,035.74	1,981,620.53
					· · · · · · · · · · · · · · · · · · ·				
Unappropriated Fund Balance:	\$47,216.32								

## M:\Ed\Cap & Non\21-22\CapNon 21-22 Summary & Detail

## **BRIDGE and DRAINAGE**

	Town Wide Drainage	Sewer	Columbia Drive	Bear Mountain	Pedestrian Safety	Yale Hudson	Replace Sawmill	Candle Wood	Bridges Under 20'	Bigelow Road	Warwick Bridge	Lower Merlin	Street	
Carryover Currant Year	Brush Drive 13,962.40	Study 45,682.75	Bridge 27,821.09 25,000.00	Bridge 106,000.00 5.000.00	Projects 41,793.65 6.000.00	Spillway 15,896.47 9.500.00	Bridge 85,680.77	Corners 39,765.42	Inspection 16,015.00 20.000.00	Realign 6,000.00 22.000.00	Rehab. 9,645.49 5.000.00	Avenue 25.000.00	Scape 8,129.67 10.000.00	Total 416,392.71 139.500.00
Transfers		!												
Expenditures PO #22000549 - Pioneer Research PO #22000616 - Dom's Garden Center			·• ··· · · · · · · · · · · · · · · · ·	· · · · ·	· · ·								(2,995.50) (446.33)	(2,995.50) (446.33)
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Encumbered PO# 21000494 - WMC Consulting-TH Crosswelk PO #c0025685 - WMC Consulting Engineers PO #c0030800 - New England Infrastructure	· · · · · · · · · · · · · · · · · · ·	(14 A00 75)			(2,000.00)		(3.00) (1.00)							(2.000.00) (3.00) (1.00)
PO #21000606 - 1 ata & Howard, Inc. PO #22000545 - BMP Construction PO #22000614 - Eagle Flag of America		(0) 704 (04)			(33,719.50)		· ·· ···	· · ·		· · · · · · · · · · ·			(1.500.00) (2.900.00)	(1,500.00) (1,500.00)
PO #22000015 - Dunies with the PO #22000616 - Dom's Garden Center PO #22000618 - Godfather Promotions										······	· · · · · · · · · · · · · · · · · · ·	· · · · ·	(1,553.67) (1,500.00) (500.00)	(1,553.67) (1,500.00) (500.00)
Offsetting Revenues Received 9/27/21 - Hometown Hero Banners - CR93		• • • • •		:			· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·		40.00	40.00
Balance	25,962.40	200.00	52,821.09	111,000.00	12,074.15	25,396.47	85,676.77	39,765.42	36,015.00	28,000.00	14,645.49	25,000.00	6,774.17	463,330.96
														]

## TOWN PROPERTIES CAPITAL BUDGET

	Building Repair Reserve	STEAP Town Hall Annex	Conf. Room PD	PW Overhead Doors	Ped Safety Signage	Replace Furnace Co. A	PD Cameras	Annex Generator	Interior Painting Annex	Town Hall Septic	Replace Fountain Co. A	Replace Carpet PW	Repair Chimney Town Hall	Replace TH-Tank & Furnace	PD & FD Cat 6 Wire Upgrade	Comm Rm Tricaster & Addti 48-port switch at PD	Total
Carryover Current Year	60,532,65 20,000.00	215,728.20	1,600.00	6,480.10	5,000.00	45,000.00	4,900.00	58.81	11,000.00	1,800.00	2,500.00	6,902.00	10,000.00	40,000.00	•	•	371,501.76 60,000.00
Transfers Per Lupid Decker 9/1/21 Per BOS 11/23/2021 Per BOS 11/23/2021	58.81 (21,420.00) (10,000.00)							(58.81)							21,420.00	10,000,00	
Expenditures PO #22000481 - Tucker Mechanical PO #21000713 - Tacy Floors PO # 21000580 - Loureiro Engineering	(2,949,00)	(173,280,00)										(2.578.00)					(00, 846, 2) (00, 875, 2) (00, 052, 571)
			· · · · ·	·····							••••			· · · · · ·		· · · · ·	• • • •
Ettermbered PC #c0030449 - Safety Marking Inc. PC #41.800 Colony & Safety marking Inc. PC #12100350 - Loureiro Engineening PC #22000555 - Waterboy Plumbing PC #22000555 - Safet Harbor Company PC #22000597 - Safet Harbor Company	(1,684.00) (1,274.00)	(13,720.00)	· · ·	· · · · · · · · · · · ·			• • • • • • • • •		(6, 600, 00)	(1,800.00)	(1,850.00)	•	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	(21,420.00)		(1,800,00) (6,600,00) (13,720,00) (1,850,00) (1,856,00) (1,274,00) (1,274,00) (1,274,00)
PG #22000589 - Mariam Company PC #22000628 - RNB Enterprises PO #22000629 - Ergonomic Group	(resont)	i					•••••								· · ·	(9,972 48) (27.52)	(1,055,0) (9,972,48) (27,52)
Balance	42,164.95	28,728.20	1,600.00	6,480.10	5,000.00	45,000.00	4,900.00		4,400.00		650.00	4,224.00	10,000.00	40,000.00	,	0.0	193,147.25
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