TOWN CLERK / TAX COLLECTOR'S MONTHLY

TOWN OF ALMOND, NEW YORK

DECEMBER, 2021

TO THE SUPERVISOR:

PAGE 1

Pursuant to Section 27, Subd 1 of the Town Law, I hereby make the following statement of all fees and moneys received by me in connection with my office during the month stated above, excepting only such fees and moneys the application and payment of which are otherwise provided for by Law:

A1255		41 m			
	1	LANDFILL TICKETS		2.00	
			TOTAL TOWN CLERK / TAX C	COLLECTOR	2.00
			FEES		
A1603					
	11	VITAL STATS FEE		110.00	
			TOTAL A1603		110.00
A2410			2		
	1	BUILDING RENTAL		100.00	
			TOTAL A2410		100.00
A2544					
	3	DOG LICENSES		26.00	
			TOTAL A2544		26.00
A615	11 Marco 9 1 1 1 de 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	1	SECURITY DEPOSIT		50.00	
			TOTAL A615	3	50.00
DA2650					
	1	SCRAP METAL		271.29	
			TOTAL DA2650		271.29

TOWN CLERK / TAX COLLECTOR'S MONTHLY REPORT

DECEMBER, 2021

page 2

TA H	CITO	TITLE	KEKE	AFN	TOTAL
	NK		N H IV	/ H I	

PAID TO SUPERVISOR FOR GENERAL FUND PAID TO SUPERVISOR FOR HIGHWAY PAID TO AG & MARKETS FOR DOG LICENSES

PAID TO DEPT OF PUBLIC WORKS FOR LANDFILL TICKETS

TICKETS $\frac{\pm 1688}{560.29}$ $\frac{288.00}{271.294}$ $\frac{288.00}{3.004.00}$

TOTAL DISBURSEMENTS

601.29

* I dog is military service - NO Charge so AAH 1553.00

TOWN OF ALMOND CLERK ACCOUNT	50-755/213	1688
PO BOX K ALMOND, NY 14804-0511	DATE 1/ Co/c	2022
PAY TO THE Dan Regardy Superus True hundred sixty and d	50R	\$ 560.29
Community	.1700	DOLLARS (Security Features included. Details on Back.
Bank N.A. Alfred New York 14802 91 MEMO Sec 252	Ran OA	an souled
#021307559# 910033901#	1688	

JANUARY 5, 2022

Dawn Wildrick-Cole

STATE OF NEW YORK, COUNTY OF ALLEGANY, TOWN OF ALMOND

I, Julie Phillips , being duly	y sworn, says that I am the Clerk of the Town of Almond
	all Fees and moneys received by me during the month above stated, excepting
only such Fees the application and payment of v	which are otherwise provided for by law.
Subscribed and sworn to before me this	Town Clerk / 5
day of 20	
Notary Public	

01/06/2022 07:16:26

Town of Almond

Detail of Dog License Transactions

For the period 12/01/2021 through 12/31/2021

	Id		Date	Licens Type		Local Fee		APCP Surcharge
Origi	nal I.D. Do	g Licenses	Issued:					
1	0000601		12/29/2021	FS	BRYAN SNYDER	9.00		1.00
						9.00		1.00
Rene	wal License	es and Nev	v Owners Is	sued:				
1	0000574	1101317	12/02/2021	FS	RAUBER, JEANIE	9.00		1.00
2	0000194	1101318	12/07/2021	FS	STUART, RICHARD	9.00		1.00
3	0000581	1101319	12/22/2021	MN	BROWN, JIM Service dog-	9.00	-10.00	1.00
			#1 #1		TOTAL SALES	36.00	-10.00	4.00

NEW YORK STATE DEPARTMENT OF HEALTH Empire State Plaza - Corning Tower Bureau of Accounts Management - Revenue Unit - Room 2784 Albany, New York 12237-0016

Monthly Report of Marriage Licenses Issued

SEE INSTRUCTIONS AT BOTTOM OF PAGE

Report for the month of		DEP. NO.	9		
DECEMBER 2021		ı			
City or Town of ALMOND		CHECK #			
County of Allegany		DO NOT	WRITE IN AI	BOVE SPACE	
Pursuant to the provisions of Section 15 of the Domestic Relations Law, as last amended by Chapter 62 of the Laws of 2003, I herewith transmit to the State Commissioner of Health a fee of twenty-two dollars and fifty cents for each marriage license issued by me during the month covered by this report.					
Licenses were numbered from	NONE to	inclusive. (Total A	Active Military	:0)	
(if ONE license was issued place m	amber in first spa	ce only!) (if NO licenses v	were issued	write "NONE" in above space)	
	Name of City or	Town Clerk (Please Print)			
Make remittance by CHECK or MONEY ORDER payable to the	Julie Phillips			5	
State Department of Health				·	
	Signature of City	y or fown check	1 -	Date	
DO NOT SEND CASH	/ Then	aced Marie	\$2	01/05/2022	
Amount of remittance with this	Mailing Address				
report	_1 Marvin Lan	e PO Box K			
\$	Almond NY			Zip 14804	
	E-mail Address	lmondny.com		Phone (607) 276-6665	
	towncierkwa	inionary.com		(007) 270-0003	
INSTRUCTIONS					
THIS MONTHLY REPORT OF DEPARTMENT OF HEALTH A licenses were issued. If no license	T THE ABOVE	ADDRESS FOR EACH MO	ONTH regard	lless of whether or not any	
The issuance of a marriage license makes you responsible for the remittance fee of \$22.50 regardless of whether or not the marriage ceremony is ever performed.					
Marriage licenses must be numbered and reported consecutively throughout the year starting with number 1 at the beginning of EACH calendar year.					
Pursuant to the authority of Sect Health has directed that this rep by the 15th of the month follow	ort, together with	n any fee, must be transmitte			
New York State Domestic Relationship with any of the above mand shall pay a fine not exceeding	nentioned reportin	ng or filing requirements, shall	l be deemed	guilty of a misdemeanor	

ALLEGANY COUNTY DPW 7 COURT STREET, ROOM 210 BELMONT, NY 14813-1078

TRANSFER STATION TICKET MONTHLY REPORT

\$ 20.00 Tickets Sold:		
No	to and including No.	Quantity
No		124
No		Quantity
40.00 Tickets Sold:		
No. 000052	to and including No. 000052	Quantity1_
No	to and including No.	Quantity
No	to and including No.	Quantity
60.00 Tickets Sold:		
No.	to and including No.	Quantity
No	to and including No.	Quantity
No		
10.00 Tickets Sold:		
No	to and including No.	Quantity
No		
No		Quantity
20.00 Tickets Sold:		
No	to and including No.	Quantity
No		0
No		Quantity
30.00 Tickets Sold:		
No.	to and including No.	Quantity
No	to and including No.	Quantity
No	X X	
FEES COLLECTED:	Quantity	Service
Ticket Amount	(from above) Base Fee	Total % Fees
20.00 Tickets	0 X \$ 20.00	= \$ 5
, zoros Tronoto		
40.00 Tickets	1 X \$ 40.00	= \$
CES DUE ALLEGANY CO	UNTY:	
TOTAL AMOUNT COLLE	CTED	\$\$
	AINED BY MUNICIPALITY)	-\$2.00
AMOUNT DUE & SUBMIT	TTED TO ALLEGANY COUNTY	\$38.00

ALLEGANY COUNTY DPW 7 COURT STREET, ROOM 210 BELMONT, NY 14813-1078

TRANSFER STATION TICKET MONTHLY REPORT

4.				
\$ 60.00	Tickets	0 x \$ 60.00	= \$	5
\$ 10.00	Tickets	0 x \$ 10.00	= \$	5
\$ 20.00	Tickets	0 x \$ 20.00	= \$	5
\$ 30.00	Tickets	0 x \$ 30.00	= \$	5
		TOTAL =	\$40.00	2.00

MEMO Dec 2521 920033902 Landhuly 5 m

FEES DUE ALLEGANY COUNTY:

TOTAL AMOUNT COLLECTED	\$	40.00
LESS SERVICE FEE (RETAINED BY MUNICIPALITY)	-\$	2.00
AMOUNT DUE & SUBMITTED TO ALLEGANY COUNTY	\$	38.00

NYS Department of Agriculture and Markets Spay and Neuter PO Box 975 Albany, NY 12201-0975

Month of Submission: DECEMBER, 2021

County: Allegany

Town of Almond

TCV Code: 0204

Allegany Almond

Prepared by: Julie Phillips, Town Clerk / Tax Collector

Date Prepared: JANUARY 5, 2022

State of New York

Department of Agriculture and Markets

Spay and Neuter

PO Box 975, Albany, NY 12201-0975

ANIMAL POPULATION CONTROL PROGRAM SUBMISSION

Submit by the 5th of the month covering activities of the preceding month.

LICENSE TYPES AND FEES COLLECTED	Unspayed/U	Unspayed/Unneutered - Four months of age or older		
Spayed and Neutered Dogs	\$1.00 ea =	\$3.00		
Unspayed and Unneutered Dogs	\$3.50 ea =	\$0.00		
TOTAL AMOUNT REMITTED		\$3.00		
Check Number: /686				

Month Reported: DECEMBER, 2021

County: Allegany

Code: 02

Dog License Monthly Report

Town of Almond

Code: 04

Prepared by: Julie Phillips, TOWN CLERK / TAX COLLECTOR

Date Prepared: JANUARY 5, 2022

Original ID Dog Licenses sold		1	
Original Purebred License sold		0	
Dog License Renewals sold		3	
Purebred License Renewals sold		0	
	Total sold	4	

LICENSE TYPES AND FEES COLLECTED	Quantity	Local Fees	Surcharge Fees	
Spayed and Neutered Dogs Unspayed and Unneutered Dogs Exempt - Seeing Eye, War, Police Purebred License (1-10 dogs) Spayed & Neutered Purebred License (1-10 dogs) Unspayed & Unneutered Purebred License (11-25 dogs) Spayed & Neutered Purebred License (11-25 dogs) Unspayed & Unneutered Purebred License (26+ dogs) Spayed & Neutered Purebred License (26+ dogs) Unspayed & Unneutered Purebred License (26+ dogs) Unspayed & Unneutered	0	27.00	\$1.00 ea 3.00 \$3.50 ea 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	
Total licenses sold	3	27.00	3.00	
REPLACEMENT AND PUREBRED TAG ORDERS				
Replacement Tags Purebred Tags Total tags sold	<u>0</u> 0	0.00 0.00 0.00		

DISBURSEMENTS

Paid to Supervisor \$27.00

Paid to NYS Animal Population Control Program \$3.00