## TOWN CLERK'S MONTHLY REPORT TOWN OF ANDES

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## ... THE SUPERVISOR:

Pursuant to Section 27, Subd. 1 of the Town Law, I hereby make the following statement of all fees and money received by me during the month of March 2003, in connection with my office, excepting only such fees and moneys the application and payment of which are otherwise provided for by law:

QUANTITY	DECALS		COMMISSION
		***************************************	\$3.78

	TOTAL CONSERVATION	\$3.78
A2544 A1255 A1255	Dog Licenses Marriage Licenses Clerk Fees (Other)	\$21.20 0.00
90 L55 A2770	Other Permits  Building Permits & Renewals  Other Unclassified Revenues	300.00
	TOTAL FEES TO TOWN SUPERVISOR	\$324.98

	100
Paid to Supervisor Paid to County Treasurer (Dog Licenses) paid to Ag. & Markets (Spay/Neuter program) Paid to State Health Dept. (Marriage Licenses)	\$324.98 18.80 0.00
	0.00
Paid to Conservation Dept.	64.22
TOTAL DISBURSED	\$408.00
2003	Supervisor
STATE OF NEW YORK COUNTY OF THE AWARE TOWN OF ANDES	

## STATE OF NEW YORK, COUNTY OF DELAWARE, TOWN OF ANDES

Janis Lynn Jacques, being duly sworn, says that she is the Clerk of the Town of Andes, that the foregoing is a full and true statement of all Fees and Moneys recieved and disbursed by her during the month above stated.

Subscribed and S sworn this

day of 2 April 2003

Town Clerk

Money Received:

\$408.00

Money Dispensed:

\$408.00

Balance:

\$0.00

Town Seal

Month Reported	Year			Ctata of No. V. 1	DL-4 (Rev. 6/97)	
March	2003	State of New York  DEPARTMENT OF AGRICULTURE AND MARKETS				
County	Co. Code	DOG LICENSING UNIT				
Delavace	13	I Winners Circle				
Tity, Village	T.C.V. Code		1	Albany, New York 1223	35	
Andes .	01		DOG TIORN	INC MONTE	ILY REPORT	
Prepared By Title	le	-				
	in Clark		To county financial officer		activities of preceding month.	
Date Month Submitted	Day Year		7: To Department of Agricu			
04 0	1 63	PINK: Y	our file copy for audit.			
Check box if no licenses issued and s	submit as directed.	7	heck box if corrected rep	ort. Date original subm	nitted	
1. Original I.D. Dog License Numbers Use	ed. List below numbers	used during n	norm ported (if additional s	nace is required please us	e back ) (Include void numbers )	
1 120			UI	QUANTITY USED		
			. = 9.			
No.	10		1831	(inc.)		
THE RESERVE AND ADDRESS OF THE PARTY OF THE		7 3	1 8 E			
No.	- 0	BO P	-	(inc.)		
2. Original Purebred License Numbers C	Only Used: (Include voi	d numbers )			Line 1	
	Only Cook. (Inches Vol	d Italiocis.)				
No. PB	to PB	(i	nc.)		Line 2	
3. Renewals and Transfer To New Owner	License Numbers Used	List below n	mbers used for dog license	and Drumband License anno	avale	
and transfer to new owners of dogs hav	ving Permanent I. D. Nos.	. (If additional	space required, please use b	ack.) (Include void number	s.)	
	7/40		B <sub>co</sub>	QUANTITY		
No. R		VIII 6	, 101			
		1 88		(inc.)		
0. R		1 30	OZZ T	7		
	10			(inc.)	Line 3	
					Lanc 3	
4. Total of Lines 1, 2 and 3: (Total Line 4 should count Line 13A) Line 4						
4. Total of Lines 1, 2 and 3:			(Total Line	4 should equal Line 13A.	) Line 4	
4. Total of Lines 1, 2 and 3:		7	(Total Line	4 should equal Line 13A.	) Line 4	
		olumn A			Column F	
LICENSE TYPES AND FEES COLLEC	CTED No. o	f Each Type	Column B	Column C	Column F Unspayed/Unneutered	
LICENSE TYPES AND FEES COLLEC	No. o. Total		Column B Statutory Base Fees		Column F Unspayed/Unneutered	
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LICENSE TYPES AND FEES COLLECTION OF Spayed and Neutered Dogs	No. o Total	f Each Type	Column B Statutory Base Fees \$2.50 ea. = \$ 40,55	Column C Local Additional F \$ ea. = \$	Column F Unspayed/Unneutered Six months of age or older NO FEE	
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New York 12237-0016 Section - Revenue Section

## Monthly Report of

Report for the month of		Marriag S AT BOTTOM OF PAGE	Monthly Reported Licenses Iss
City or Town of Delawa	122003	DEP. NO.	
Division		DO NOT WRITE	IN ABOVE SPACE
I herewith transmit to the State Corlinsued by me during the month cov		₩ E	3- iidelise
Make remittance by CHECK or MONEY ORDER payable to the State Department of Health	Name of Ci-	(If NO 1:	inclusive. "NONE" in above space.)
DO NOT SEND CASH  Amount of remittance with this report	Source Cle	erk gegnes	Date
	Mailing Address	St. POB	1-1-0-3
IS MOVE	INSTRUCTION	VS Zip	13731

IS MONTHLY REPORT OF MARRIAGE LICENSES ISSUED MUST BE TRANSMITTED TO THE STATE PARTMENT OF HEALTH AT THE ABOVE ADDRESS FOR EACH MONTH regardless of whether or not any nses were issued. If no licenses were issued, indicate NONE in the space provided for license numbers.

issuance of a marriage license makes you responsible for the remittance fee of \$11.25, regardless of

age licenses must be numbered and reported consecutively throughout the year starting with number 1 at

ant to the authority of Section 19 of the New York State Domestic Relations Law, the Commissioner of has directed that this report, together with any fee, must be transmitted to the State Department of Health

ork State Domestic Relations Law Section 22 provides that any Town or City Clerk who violates or fails to with any of the above mentioned reporting or filing requirements, shall be deemed guilty of a misdemeanor

