TOWN CLERK MONTHLY REPORT TOWN OF ANDES

DECALS: \$ Total for 2004 **DECALS** swipe Ck.# To Supv. .00 **Balance** \$5.30 Dog licenses Marriage licenses Clerk fees { other } .00 Other permits { NONE HANDED IN } **Building permits & renewals** .00 Other unclassified revenues **Total to Supervisor** \$5.30 \$5.30 Ck.#145 To Supv. To Co. Trea. { Dog licenses } 4.70 Ck.#144 To Ag & Markets { Spay/neuter program } Ck.# To State Health Dept. { Marriage licenses } Ck.# TOTAL \$10.00 **Total in Town Clerk checking** \$10.00 Total paid out for Dec. 2005 10.00 Balance .00

DATE: Dec. 29, 2005

Janis L. Jacques Town Clerk

DL-4 (Rev. 12/04)					
Month Reported Year	State of New York				
December 2005	Department of Agriculture and Markets				
County Co. Code	Dog Licensing Unit				
Dela wave 12 12	10 B Airline Drive, Albany, NY 12235				
Tow ity, Village T.C.V. Code					
Prepared By Title	DOG LICENSING MONTHLY REPORT				
Prepared By Title	Submit by the 5fh of the month covering ONLY activities of preceding month.				
Date Month Day Year	A STATE OF THE STA				
Submitted: 12 29 2005	WHITE: To county financial officer with check				
612 97 19 20 7 2	YELLOW: To Department of Agriculture and Markets				
Sapa A Sept A	PINK: Your file copy for audit				
Check box if no licenses issued & submit as directed.	1 2 3 5 5 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Crieck box if no licenses issued a subtrit as directed.	Check box if corrected report. Date original submitted				
	Check box il collected report. Date original submitted				
1 1 M 2 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1	# 16 8 8 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
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自己的 · · · · · · · · · · · · · · · · · · ·					
Original Dog Licenses issued this month:					
a a company to the second this was the					
2. Original Purebred Licenses issued this month:					
Number of Renewals AND					
Transfer to New Owner Licenses AND					
Purebred License Renewals issued this month:					
Turbina Elocito Tarionalo locada uno monur.					
4. Total of Lines 1, 2 and 3: (Total of Line 4 should equal Line 13A below)					
3 10 11 11 11					
Column A					
No of Each T	Column F				

7 7 8	The state of the s	umn A ach Type	6 60		Column F
LICE E TYPES AND FEES COLLECTED	TOTAL	Unspay/ Unneuter	Column B Statutory Base Fees	Column C Local Additional Fees	Unspayed/Unneutered Six months of age or older
	14				
5. Spayed and Neutered Dogs	the	\rightarrow	\$2.50 ea.= \$ 10.4	\$ ea. = \$	NO FEE
6. Unspayed & Unneutered Dogs		1	\$7.50 ea = \$	\$ ea. = \$	\$3.00 ea. = \$
7. Exempt - Seeing Eye, War,	1		NO FEE	NO FEE	NO FEE
Police Work Dogs	7				
8. Voided Tags	PET Tradition and		NO FEE	NO FEE	NO FEE
9. Purebred License (1-10 dogs)			\$25. ea. = \$	\$ ea. = \$	\$3.00 per dog = \$
10. Purebred License (11-25 dogs)			\$50. ea. = \$	\$ ea. = \$	\$3.00 PER DOG = \$
11. Purebred License (26+ dogs)			\$100. ea. = \$	\$ ea. = \$	\$3.00 per dog = \$
12. Voided Purebred Licenses		><	NO FEE	NO FEE	NO FEE
13. TOTALS (Line 13, Col. A should			\$	\$	\$
equal Line 4 above)					

REPLACEMENT AND PUREBRED TAG ORDERS PROCESSED	Column D No. of Each Type	Column E Tag Fees
14. Replacement Tags		
15. Purebred Tags		
16 TOTALS		

DISBURSEMENTS

23. 100% of Line 13, Col. F (Send this amount to NYS Dept. of Ag. & Mkts.)

NEW YORK STATE DEPARTMENT OF HEALTH Bureau of Accounts Management - Revenue Section Albany, New York 12237-0016

Monthly Report of Marriage Licenses Issued

SEE INSTRUCTIONS AT BOTTOM OF PAGE

SEE INSTRUCTIONS AT BOTTOM OF PAGE						
Report for the month of	2005	DEP. NO				
City or Town of		CHECK#				
County of Delivere		DO NOT WRITE IN ABOVE SPACE				
Pursuant to the provisions of Section 15 of the Domestic Relations Law, as last amended by Chapter 61 of the Laws of 1989, I herewith transmit to the State Commissioner of Health a fee of eleven dollars and twenty-five cents for each marriage license issued by me during the month covered by this report.						
Licenses were numbered from inclusive.						
(If ONE license was issued place number in first space only!) (If NO licenses were issued write "NONE" in above space.)						
Make remittance by CHECK or MONEY ORDER payable to the State Department of Health Name of City or Town Clerk (Please print)						
DO NOT SEND CASH	Signature of City or Town Clerk Date 12/29/10					
Amount of remittance with this report P.O.Box 125						
$\frac{1}{n}$	Ande		Zip 1393[
INSTRUCTIONS .						

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

The issuance of a marriage license makes you responsible for the remittance fee of \$11.25, 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 Section 19 of the New York State Domestic Relations Law, the Commissioner of Health has directed that this report, together with any fee, must be transmitted to the State Department of Health by the 15th of the month following the month which the report covers.

New York State Domestic Relations Law Section 22 provides that any Town or City Clerk who violates or fails to comply with any of the above mentioned reporting or filing requirements, shall be deemed guilty of a misdemeanor and shall pay a fine not exceeding the sum of one hundred dollars on a conviction thereof.