

# TOWN OF HARTFORD SELECTBOARD SPECIAL MEETING

Thursday, July 2, 2020, 6:00 pm Hartford Town Hall 171 Bridge Street White River Junction, VT 05001

- I. Call to Order the Selectboard Meeting
- II. Order of Agenda
- III. Selectboard
  - 1. Set the Fiscal Year 2021 Municipal Tax Rate.
  - 2. Approve Payment Manifest of 7/1/2020
- V. Adjourn the Selectboard Meeting (Motion Required)

All Meetings of the Hartford Selectboard are open to the public. Persons who are seeking action by the Selectboard are asked to submit their request and/or materials to the Selectboard Chair or Town Manager's office no later than noon on the Wednesday preceding the scheduled meeting date. Requests received after that date will be addressed at the discretion of the Chair. Citizens wishing to address the board should do so during the Citizen Comments period.

## TAX RATE 2020-2021 TOWN OF HARTFORD

	<u>APPROPRIAT</u>	<u> ION</u>	GRAND LIST	RATE	REVENUE
General Highway Fund	13,814,337	7	13,990,371	\$0.9874	\$13,814,337
County Tax Restricted Appropriations	107,614 231,727		13,990,371 13,990,371	\$0.0077 \$0.0166	
Local Agreement Rate	28,895		13,990,371	\$0.0100	
Total Town Tax Rate	14,182,573	3		1.0137	14,182,573
Education Homestead Tax Rate Education Non-Residential Tax				TBD TBD	
Total Town & Education Hor Total Town & Education Non				TBD TBD	
Total Appropriation 2020-2021	Fiscal Year				TBD
OVERLAY					\$0
	<u>APPROPR</u>	<u>IATIONS</u>			
Article 3	Advance Tra	ansit, Inc.			\$81,750
Article 4	Community	Access Tele	vision, Inc.		\$5,000
Article 5	The Family	Place			\$9,500
Article 6	Good Begin	nings of the	Upper Valley		\$4,550
Article 7	Good Neigh	ibor Health C	linic and The Red Loga	n Dental Clinic	\$7,500
Article 8	Green Mour	ntain Retired	Senior Volunteer Progr	am (RSVP)	\$800
Article 9	Hartford Co	mmunity Co	alition		\$25,000
Article 10	Hartford His	storical Socie	ety		\$10,000
Article 11	Headrest				\$7,000
Article 12	Public Healt	th Council of	the Upper Valley		\$977
Article 13	Southeastern	n Vermont C	ommunity Action (SEV	CA)	\$9,000
Article 14	Special Nee	ds Supports (	Center of the Upper Val	ley	\$4,530
Article 15	Stagecoach	Transportatio	on Services		\$6,800
Article 16	Vermont As	ssociation for	the Blind and Visually	Impaired	\$975
Article 17	Vermont Ce	enter for Inde	pendent Living (VABV	I)	\$845
Article 18	Visiting Nu	rse and Hosp	ice of Vermont and Nev	v Hampshire, Inc.	\$51,000
Article 19		ounty Mentors			\$4,500
Article 20	Women's In	formation Se	rvice, Inc. (WISE)		\$2,000
			TO	TAL	\$231,727
Dated this 2nd day of July, 202	20				
		Dan Fraser	, Chair		
		Simon Den	nis, Vice Chair		
		Alicia Barr	ow	<del></del>	
Town of Hartford		Emma Beh	rens		
County of Windson State of Vermont	r	Alan Johns	on		
		Joe Major			
All in accordance with 17 V.S	A. 2664 Budget	Kim Souza	l Selectboard		

All in accordance with 17 V.S.A. 2664 Budget Hartford Selectboard





# Setting the FY 2020 – 2021 Tax Rate

July 2, 2020



# Background



- FY20 Tax Rate: \$0.9915 per \$100.00 of Value.
- Proposed FY21 Tax Rate: \$1.0137 per \$100.00 of Value.
  - 2.22 Cents Increase Over Last Year.



# FY 2021 Budget Brief



- FY 2021 Budget: \$17,609,830
  - \$2,713,680 from non-tax revenue
  - \$742,472 from unassigned fund balance
  - Leaves \$14,153,678 to be raised by taxes
- Tax Rate: \$1.0137 per \$100.00 of Value
  - Includes Local Agreement Rate: \$0.0021 per \$100.00 of Value
    - for veteran's exemptions



# Recent Tax Rate History



YEAR	TAX RATE	RATE CHANGE	TAX INCREASE ON \$250,000 HOME
FY 2014	.7873		
FY 2015	.8520	+6.47 Cents	\$161.75
FY 2016	.9111	+5.91 Cents	\$147.75
FY 2017	.9465	+3.54 Cents	\$88.50
FY 2018	.9579	+1.14 Cents	\$28.50
FY 2019	.9726	+1.47 Cents	\$36.75
FY 2020	.9915	+1.89 Cents	\$47.27
FY2021	1.0137	+2.22 Cents	\$55.50



## Recommended Motion



## That the Selectboard approve:

- The General Highway Fund with:
  - \$13,814,337 for Appropriation,
  - \$13,990,371 for Grand List,
  - \$0.9874 for Rate,
  - and \$13,814,337 for Revenue;
- The County Tax with:
  - \$107,614 for Appropriation,
  - \$13,990,371 for Grand List,
  - \$0.0077 for Rate,
  - and \$107,614 for Revenue;
- The Restricted Appropriations with:
  - \$231,727 for Appropriation,
  - \$13,990,371 for Grand List,
  - \$0.0166 for Rate,
  - and \$231,727 for Revenue;

- The Local Agreement Rate with:
  - \$28,895 for Expense,
  - \$13,990,371 for Grand List,
  - \$0.0021 for Rate,
  - and \$28,895 for Revenue;
- Total Town Tax:
  - \$14,182,573 for Appropriation,
  - \$1.0137 for Rate,
  - and \$14,182,573 for Revenue;
- Education Homestead Tax Rate of \$1.XXXX;
- Education Non-Homestead Tax Rate: \$1.XXXX;
- Total Town and Education Homestead Tax Rate: \$2.XXXX;
- Total Town and Education Non-Homestead Tax Rate: \$2.XXXX;
- Total Appropriation 2020-2021 Fiscal Year: \$XX,XXX,XXX





# Questions??

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Payment Manifest by Vendor ID Town of Hartford

Check Date: 7/01/2020 - 7/01/2020

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	Bank Name Vendor Name	Payee N	lame		Check Date	Check No.
ice No.	Invoice Description		Cross Fund	Invoice Amt	Disc. Amt	Net Amt.
	FLEET VEHICLE SOURCE, INC				7/01/2020	100
0031220	2020 NISSAN LEA	F PLUS S - WHITE	0.00	\$30,884.00	0.00	30,884.00
Desc:	FIRE PREVENTION VEHICLE	Acct:	25-985-100-0221	Fire & A	mbulance	
		Vendor Total:		30,884.00	0.00	30,884.00
	PARKS - REC RESTRICTED		E	Bank Total:		30,884.00
	PARKS - REC RESTRICTED					
	LANDER JUSTIN				7/01/2020	102
10 2020		formanco	0.00	¢500.00		500.00
				·		
Desc:	Summer Camp Performance	ACCI:	25-985-514-0001	State of	VI COVID Restar	t Stipena
		Vendor Total:		500.00	0.00	500.00
	GENERAL FUND - MASCOMA		E	Bank Total:		500.00
	GENERAL FUND - MASCOMA					
	BENISTAR/HARTFORD				7/01/2020	6979
.'20	RETIREES HEALT	H INS - JULY 2020	0.00	\$2,032.95	0.00	2,032.95
Desc:	Retirees Insurance	Acct:	10-211-418-0100	RETIRE	E HEALTH INSUF	RANCE
Desc:	Retirees Insurance	Acct:	10-271-418-0100	RETIRE	E HEALTH INSUF	RANCE
Desc:	Retirees Insurance	Acct:	10-325-418-0100			
		Vendor Total:		2,032.95	0.00	2,032.95
	BLUE CROSS BLUE SHIELD VT	BC/BS (	OF VERMONT		7/01/2020	6979
.'20	HEALTH INSURAN	ICE JULY 2020	20,510.03	\$119,371.18	0.00	119,371.18
Desc:	Health Insurance for July 2020	Acct:	10-121-220-0000	BC/BS		
	•	Acct:	10-121-418-0100	RETIRE	E HEALTH INSUR	RANCE
Desc:	Health Insurance for July 2020	Acct:	10-151-220-0000	BC/BS		
Desc:	Health Insurance for July 2020	Acct:	10-171-220-0000	BC/BS		
Desc:	Health Insurance for July 2020	Acct:	10-171-418-0100	RETIRE	E HEALTH INSUF	RANCE
Desc:	Health Insurance for July 2020	Acct:	10-174-220-0000	BC/BS		
Desc:	Health Insurance for July 2020	Acct:	10-175-220-0000	BC/BS		
Desc:	Health Insurance for July 2020	Acct:	10-181-220-0000	BC/BS		
Desc:	Health Insurance for July 2020	Acct:	10-211-220-0000	BC/BS		
Desc:	Health Insurance for July 2020	Acct:	10-211-418-0100	RETIRE	E HEALTH INSUF	RANCE
Desc:	Health Insurance for July 2020	Acct:	10-221-220-0000	BC/BS		
Desc:	Health Insurance for July 2020	Acct:	10-221-418-0100	RETIRE	E HEALTH INSUF	RANCE
Desc:	Health Insurance for July 2020	Acct:	10-271-220-0000	BC/BS		
	•	Acct:	10-311-220-0000			
	•					
	•					
					E HEALTH INSUR	RANCE
	Health Insurance for July 2020		10-511-220-0000	BC/BS		
	Health Insurance for July 2020	Acct:	10-521-220-0000	BC/BS		
	•		40 504 445 515	<b>~</b>		
Desc:	Health Insurance for July 2020	Acct:	10-521-418-0100		E HEALTH INSUF	RANCE
Desc:	•	Acct:	10-521-418-0100 10-622-220-0000 30-971-220-0000	RETIRE BC/BS BC/BS	E HEALTH INSUF	RANCE
	0.2020 Desc:  0.2020 Desc:	Fire & Ambulance FLEET VEHICLE SOURCE, INC  2020 2020 NISSAN LEAD Desc: FIRE PREVENTION VEHICLE  PARKS - REC RESTRICTED PARKS - REC RESTRICTED LANDER, JUSTIN  0.2020 Summer Camp Per Desc: Summer Camp Performance  GENERAL FUND - MASCOMA GENERAL FUND - MASCOMA BENISTAR/HARTFORD  '20 RETIREES HEALT Desc: Retirees Insurance Desc: Retirees Insurance Desc: Retirees Insurance Desc: Retirees Insurance	Fire & Ambulance FLEET VEHICLE SOURCE, INC  2020 NISSAN LEAF PLUS S - WHITE Desc: FIRE PREVENTION VEHICLE PARKS - REC RESTRICTED LANDER, JUSTIN  0.2020 Summer Camp Performance Desc: Summer Camp Performance Desc: Summer Camp Performance  Desc: Summer Camp Performance  Acct: Vendor Total:  GENERAL FUND - MASCOMA GENERAL FUND - MASCOMA BENISTAR/HARTFORD  20 RETIREES HEALTH INS - JULY 2020 Desc: Retirees Insurance Desc: Retirees Insurance Desc: Retirees Insurance Desc: Retirees Insurance Desc: Health Insurance for July 2020 Des		Invoice Description   Cross Fund   Invoice Amt	Fire & Ambulance

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## Payment Manifest by Vendor ID Town of Hartford

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Bank ID	Bank Name					
Vendor ID	Vendor Name	Payee N	lame		Check Date	Check No.
Detail: Invoice No.	. Invoice Description		Cross Fund	Invoice Amt	Disc. Amt	Net Amt.
Desc:	Health Insurance for July 2020	Acct:	30-975-418-0100	RETIRE	E HEALTH INSUR	RANCE
	Health Insurance for July 2020		50-954-220-0000	BC/BS		
	Health Insurance for July 2020		50-955-220-0000	BC/BS		
	Health Insurance for July 2020		50-955-418-0100		E HEALTH INSUR	RANCE
	Health Insurance for July 2020		55-955-220-0000	BC/BS		
	Health Insurance for July 2020		55-955-418-0100		E HEALTH INSUR	RANCE
	Health Insurance for July 2020	Acct:	60-961-220-0000	BC/BS		
	Health Insurance for July 2020	Acct:	60-961-418-0100	RETIRE	E HEALTH INSUR	RANCE
	Health Insurance for July 2020	Acct:	60-965-220-0000	BC/BS		
	Health Insurance for July 2020		60-965-418-0100		E HEALTH INSUR	RANCE
	Health Insurance for July 2020		65-963-220-0000	BC/BS		
	Health Insurance for July 2020		65-965-220-0000	BC/BS		
	Health Insurance for July 2020	Acct:	65-965-418-0100		HEALTH INSUR	RANCE
	Vend	or Total:		119,371.18	0.00	119,371.18
026580	LACKARD, JOHN M.	JOHN IV	I. LACKARD		7/01/2020	6979
07.08.2020	2020 SUMMER CONCER	T SERIES	0.00	\$400.00	0.00	400.00
Desc:	2020 SUMMER CONCERT SERIES	Acct:	10-516-318-0000	CONTRA	CTED SERVICE	S
	Vend	or Total:		400.00	0.00	400.00
027700	DE LAGE LANDEN	DE LAG	E LANDEN		7/01/2020	698
68436364	LEASE - COPIER JUL'20	- TM	0.00	\$200.02	0.00	200.02
Desc:	LEASE - COPIER JUL'20 - TM	Acct:	10-121-320-0000	EQUIP C	PERATION/MAIN	NT-OFFICE
68436367	LEASE-COPIER JUL'20-F	IN	0.00	\$173.42	0.00	173.42
Desc:	LEASE-COPIER JUL'20-FIN	Acct:	10-171-318-0000	CONTRA	CTED SERVICE	S
	Vend	or Total:		373.44	0.00	373.44
028026	LINCOLN NATIONAL LIFE INSURANCE	CO LINCOL	N NATIONAL LIFE I	INSURANCE CO	7/01/2020	6980
JUL'20	LIFE INS - JULY 2020		324.46	\$2,182.27	0.00	2,182.27
Desc:	Life Insurance	Acct:	10-121-240-0000	LIFE INS	URANCE	
Desc:	Life Insurance	Acct:	10-121-270-0000	AD&D		
Desc:	Life Insurance	Acct:	10-151-240-0000	LIFE INS	URANCE	
Desc:	Life Insurance		10-151-270-0000	AD&D		
Desc:	Life Insurance	Acct:	10-171-240-0000	LIFE INS	URANCE	
Desc:	Life Insurance	Acct:	10-171-270-0000	AD&D		
Desc:	Life Insurance	Acct:	10-174-240-0000	LIFE INS	URANCE	
Desc:	Life Insurance	Acct:	10-174-270-0000	AD&D		
Desc:	Life Insurance	Acct:	10-175-240-0000	LIFE INS	URANCE	
Desc:	Life Insurance	Acct:	10-175-270-0000	AD&D		
Desc:	Life Insurance	Acct:	10-181-240-0000	LIFE INS	URANCE	
Desc:	Life Insurance	Acct:	10-181-270-0000	AD&D		
Desc:	Life Insurance	Acct:	10-211-240-0000	LIFE INS	URANCE	
Desc:	Life Insurance	Acct:	10-211-270-0000	AD&D		
Desc:	Life Insurance	Acct:	10-221-240-0000	LIFE INS	URANCE	
Desc:	Life Insurance	Acct:	10-221-270-0000	AD&D		
Desc:	Life Insurance	Acct:	10-271-240-0000	LIFE INS	URANCE	
	Life Insurance	Acct:	10-271-270-0000	AD&D		
Desc:						
	Life Insurance		10-312-240-0000	LIFE INS	URANCE	
Desc:	Life Insurance Life Insurance	Acct:	10-312-240-0000 10-312-270-0000	LIFE INS AD&D	URANCE	

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Payment Manifest by Vendor ID Town of Hartford

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Bank ID Vendor ID	Bank Name Vendor Name	Davies A	lamo		Chook Data	Chook Na
Detail: Invoice No		Payee N	Cross Fund	Invoice Amt	Check Date Disc. Amt	Check No. Net Amt.
Detail: Invoice 140	invoice Description		01033 1 0110	IIIVOICE AIII	Disc. Aint	NOUAIII
Desc:	Life Insurance	Acct:	10-321-270-0000	AD&D		
	Life Insurance		10-325-240-0000		SURANCE	
	Life Insurance		10-325-270-0000	AD&D	JOIVANOL	
	Life Insurance		10-511-240-0000		SURANCE	
	Life Insurance		10-511-270-0000	AD&D	JOIVANOL	
	Life Insurance		10-514-240-0000		SURANCE	
	Life Insurance		10-514-270-0000	AD&D	DONANGE	
	Life Insurance		10-530-240-0000		SURANCE	
	Life Insurance		10-530-270-0000	AD&D	JOIVANOL	
	Life Insurance		10-621-240-0000		SURANCE	
	Life Insurance		10-621-270-0000	AD&D	DONANCE	
					SUBANCE	
	Life Insurance		10-622-240-0000		SURANCE	
	Life Insurance		10-622-270-0000	AD&D	NIDANOE	
	Life Insurance		30-971-240-0000		SURANCE	
	Life Insurance		30-971-270-0000	AD&D	NUDANOE	
	Life Insurance		30-975-240-0000		SURANCE	
	Life Insurance		30-975-270-0000	AD&D		
	Life Insurance		50-954-240-0000		SURANCE	
	Life Insurance		50-954-270-0000	AD&D		
	Life Insurance		50-955-240-0000		SURANCE	
	Life Insurance		50-955-270-0000	AD&D		
	Life Insurance		55-955-240-0000		SURANCE	
Desc:	Life Insurance	Acct:	55-955-270-0000	AD&D		
Desc:	Life Insurance	Acct:	60-961-240-0000		SURANCE	
Desc:	Life Insurance	Acct:	60-961-270-0000	AD&D		
Desc:	Life Insurance	Acct:	60-965-240-0000	LIFE INS	SURANCE	
Desc:	Life Insurance	Acct:	60-965-270-0000	AD&D		
Desc:	Life Insurance	Acct:	65-963-240-0000	LIFE INS	SURANCE	
Desc:	Life Insurance	Acct:	65-963-270-0000	AD&D		
Desc:	Life Insurance	Acct:	65-965-240-0000	LIFE INS	SURANCE	
Desc:	Life Insurance	Acct:	65-965-270-0000	AD&D		
	V	endor Total:		2,182.27	0.00	2,182.27
028345	LOVEJOY, JOHN	JOHN L	OVEJOY		7/01/2020	6980
07.01.2020	2020 SUMMER CONC	CERT SERIES	0.00	\$400.00	0.00	400.00
Desc:	2020 SUMMER CONCERT SERIES	Acct:	10-516-318-0000	CONTRA	ACTED SERVICES	
	V	endor Total:		400.00	0.00	400.00
)28850	MAGEE OFFICE EQUIPMENT INC.				7/01/2020	6980
C-0107146	8 - 2 WIDE COPIER - LEAS	SE JUL-AUG'20	0.00	\$144.00	0.00	144.00
Desc:	WIDE COPIER - LEASE JUL-AUG'20	Acct:	10-151-318-0000	CONTRA	ACTED SERVICES	
	V	endor Total:		144.00	0.00	144.00
031920	MUDGETT, JENNETT & KROGH-W			177.00	7/01/2020	6980
	<u> </u>	<u> </u>				
110250	FYE 2020 Audit - MAY		0.00	\$8,500.00	0.00	8,500.00
Desc:	FYE 2020 Audit - MAY 22, 2020	Acct:	10-173-318-0000		ACTED SERVICES	
	V	endor Total:		8,500.00	0.00	8,500.00
032101	MVP HEALTH CARE, INC	MVP HE	EALTH CARE, INC		7/01/2020	6980
JUL'20	RETIREES HEALTH I	NS JULY 2020	3,443.60	\$10,330.80	0.00	10,330.80

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Payment Manifest by Vendor ID **Town of Hartford** 

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Bank ID		Bank Name					
Vendor ID		Vendor Name	Payee N	lame		Check Date	Check No.
Detail: Invoice	ce No.	Invoice Description		Cross Fund	Invoice Amt	Disc. Amt	Net Amt
г	Jecc.	Retirees Health Insurance	Acct:	10-121-418-0100	DETIDE	E HEALTH INSUR	ANCE
		Retirees Health Insurance		10-171-418-0100		E HEALTH INSUR	
		Retirees Health Insurance		10-174-418-0100		E HEALTH INSUR	
		Retirees Health Insurance		10-211-418-0100		E HEALTH INSUR	
		Retirees Health Insurance		10-221-418-0100		E HEALTH INSUR	
		Retirees Health Insurance		50-954-418-0100		E HEALTH INSUR	
		Retirees Health Insurance		60-961-418-0100		E HEALTH INSUR	
		Retirees Health Insurance		50-954-418-0100		E HEALTH INSUR	
		Vendo	r Total:		10,330.80	0.00	10,330.80
034800		NORTHEAST DELTA DENTAL				7/01/2020	6980
JUL'2	20	DENTAL INSURANCE JUL	Y 2020	-44.93	\$51.83	0.00	51.83
С	Desc:	Dental	Acct:	10-121-230-0000	DENTAL	_	
		Dental		10-121-230-0000	DENTAL		
		Dental		10-151-230-0000	DENTAL		
		Dental		10-151-230-0000	DENTAL		
		Dental		10-171-230-0000	DENTAL		
		Dental		10-171-230-0000	DENTAL		
		Dental		10-174-230-0000	DENTAL		
		Dental		10-174-230-0000	DENTAL		
		Dental		10-175-230-0000	DENTAL		
		Dental		10-175-230-0000	DENTAL		
		Dental		10-181-230-0000	DENTAL		
		Dental		10-181-230-0000	DENTAL		
		Dental		10-211-230-0000	DENTAL		
		Dental		10-211-230-0000	DENTAL		
		Dental		10-221-230-0000	DENTAL		
		Dental		10-221-230-0000	DENTAL		
		Dental		10-271-230-0000	DENTAL		
	Desc:	Dental		10-271-230-0000	DENTAL		
		Dental		10-311-230-0000	DENTAL		
		Dental		10-311-230-0000	DENTAL		
		Dental		10-311-230-0000	DENTAL		
_		Dental		10-311-230-0000	DENTAL		
_		Dental		10-321-230-0000	DENTAL		
_		Dental		10-321-230-0000	DENTAL		
		Dental		10-325-230-0000	DENTAL		
		Dental		10-325-230-0000	DENTAL		
		Dental		10-325-418-0100		E HEALTH INSUR	ANCE
	Desc:	Dental		10-325-418-0100	RETIRE	E HEALTH INSUR	ANCE
	Desc:	Dental		10-511-230-0000	DENTAL	_	
	Desc:	Dental		10-511-230-0000	DENTAL	_	
	Desc:	Dental	Acct:	10-514-230-0000	DENTAL	_	
		Dental		10-514-230-0000	DENTAL		
		Dental		10-521-230-0000	DENTAL		
		Dental		10-521-230-0000	DENTAL		
		Dental		10-621-230-0000	DENTAL		
		Dental		10-621-230-0000	DENTAL		
		Dental		10-622-230-0000	DENTAL		
		Dental		10-622-230-0000	DENTAL		
_		Dental		30-971-230-0000	DENTAL		

Bank ID

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Bank Name

### Payment Manifest by Vendor ID Town of Hartford

Check Date: 7/01/2020 - 7/01/2020

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Bank ID	Bank Name						
Vendor ID	Vendor Name		Payee N	lame		Check Date	Check No.
Detail: Invoice No.		Invoice Description		Cross Fund	Invoice Amt	Disc. Amt	Net Amt.
Desc:	Dental		Acct:	30-971-230-0000	DENTAL		
Desc:	Dental		Acct:	30-975-230-0000	DENTAL		
Desc:	Dental		Acct:	30-975-230-0000	DENTAL		
Desc:	Dental		Acct:	50-954-230-0000	DENTAL		
Desc:	Dental		Acct:	50-954-230-0000	DENTAL		
Desc:	Dental		Acct:	50-955-230-0000	DENTAL		
Desc:	Dental		Acct:	50-955-230-0000	DENTAL		
Desc:	Dental		Acct:	55-955-230-0000	DENTAL		
Desc:	Dental		Acct:	55-955-230-0000	DENTAL		
Desc:	Dental		Acct:	60-961-230-0000	DENTAL		
	Dental			60-961-230-0000	DENTAL		
	Dental			60-965-230-0000	DENTAL		
	Dental			60-965-230-0000	DENTAL		
	Dental			65-963-230-0000	DENTAL		
	Dental			65-963-230-0000	DENTAL		
	Dental			65-965-230-0000	DENTAL		
	Dental			65-965-230-0000	DENTAL		
		Vo	endor Total:		51.83	0.00	51.83
	=:DO=: 101: I						
43426	FIRSTLIGHT I			NET COMMUNICAT		7/01/2020	6980
7358040-2		TELEPHONES JULY 2		129.42	\$1,215.10	0.00	1,215.10
	telephone			10-211-324-0000	TELEPHO		
	telephone			10-221-324-0000	TELEPHO		
	telephone			10-271-324-0000	TELEPHO		
	telephone			10-121-324-0000	TELEPHO		
	telephone			10-151-324-0000	TELEPHO		
	telephone			10-171-324-0000	TELEPHO		
	telephone			10-174-324-0000	TELEPHO		
	telephone			10-181-324-0000	TELEPHO		
Desc:	telephone		Acct:	10-511-324-0000	TELEPHO	NE	
Desc:	telephone		Acct:	10-622-324-0000	TELEPHO	DNE	
Desc:	telephone		Acct:	10-530-324-0000	Telephone	9	
Desc:	telephone		Acct:	50-952-324-0000	TELEPHO	DNE	
Desc:	telephone		Acct:	60-961-324-0000	TELEPHO	NE	
	telephone		Acct:	30-971-324-0000	TELEPHO	NE	
Desc:	telephone		Acct:	65-963-324-0000	TELEPHO	NE	
Desc:	telephone		Acct:	60-962-324-0000	TELEPHO	NE	
Desc:	telephone		Acct:	10-321-324-0000	TELEPHO	NE	
Desc:	telephone		Acct:	10-325-324-0000	TELEPHO	NE	
		Ve	endor Total:		1,215.10	0.00	1,215.10
45520	TEXAS CAPIT	TAL BANK	TEXAS	CAPITAL BANK		7/01/2020	6980
144029		JULY'20 PMNT 2020NI	ISSAN LEAF	0.00	\$663.79	0.00	663.79
	JULY'20 PMN	T 2020NISSAN LEAF		10-161-331-0000	•	MENT EQUIPMENT	2000
		Ve	endor Total:		663.79	0.00	663.79
)48600	VERMONT AC	SENCY OF TRANSPOR	RTATION			7/01/2020	ନ୍ଦେନ୍ଧୀ
)48600 B2009447	VERMONT AC	GENCY OF TRANSPOR		0.00	\$1,307.43	7/01/2020	1,307.43

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Bank ID	Bank Name					
Vendor ID	Vendor Name	Payee N	lame		Check Date	Check No.
Detail: Invoice No	. Invoice Description		Cross Fund	Invoice Amt	Disc. Amt	Net Amt.
	Vendor Total:			1,307.43	0.00	1,307.43
050100	VERMONT LEAGUE OF CITIES AND TOWNS				7/01/2020	69810
21-RD089	FY'21 REGULAR MEMBERSHIP [	DUES	0.00	\$13,500.00	0.00	13,500.00
Desc:	FY'21 REGULAR MEMBERSHIP DUES	Acct:	10-121-313-0000	MEMBE	RSHIP DUES	
	Vendor Total:			13,500.00	0.00	13,500.00
050250	VERMONT LEAGUE OF CITIES AND TOWNS				7/01/2020	69811
2020 Q3	W/C & LIABILITY INS Q1 FY 2021	1	45,101.42	\$242,291.00	0.00	242,291.00
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-121-250-0000	WORKE	RS COMP	
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-121-250-0000	WORKE	RS COMP	
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-151-250-0000	WORKE	RS COMP	
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-171-250-0000		RS COMP	
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-174-250-0000	WORKE	RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		10-175-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		10-181-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		10-211-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		10-221-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		10-271-250-0000	_	RS COMP	
	·					
	1st qtr FYE 2021 Work Comp - 3rd qt		10-311-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		10-312-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		10-321-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		10-325-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		10-511-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-514-250-0000		RS COMP	
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-521-250-0000	WORKE	RS COMP	
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-527-250-0000	Work Co	omp	
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-530-250-0000	WORKE	RS COMP	
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-621-250-0000	WORKE	RS COMP	
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-622-250-0000	WORKE	RS COMP	
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	10-712-316-0500	APPRO	P - W. HARTFORI	D LIBRARY
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	30-971-250-0000	WORKE	RS COMP	
Desc:	1st qtr FYE 2021 Work Comp - 3rd qt	Acct:	30-974-250-0000	WORKE	RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		30-975-250-0000	WORKE	RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		50-954-250-0000	WORKE	RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		50-955-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		55-955-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		60-961-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		60-965-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		65-963-250-0000		RS COMP	
	1st qtr FYE 2021 Work Comp - 3rd qt		65-965-250-0000		RS COMP	
	1st qtr FYE 2021 P & L - 3rd qtr Ca		10-111-418-0000	_	RTY & LIABILITY	INICLIDANICE
	·					
	1st qtr FYE 2021 P & L - 3rd qtr Ca		10-115-418-0000	_	RTY & LIABILITY	
	1st qtr FYE 2021 P & L - 3rd qtr Ca		10-121-418-0000		RTY & LIABILITY	
	1st qtr FYE 2021 P & L - 3rd qtr Ca		10-131-418-0000		RTY & LIABILITY	
	1st qtr FYE 2021 P & L - 3rd qtr Ca		10-151-418-0000		RTY & LIABILITY	
	1st qtr FYE 2021 P & L - 3rd qtr Ca		10-161-418-0000		RTY & LIABILITY	
	1st qtr FYE 2021 P & L - 3rd qtr Ca		10-171-418-0000		RTY & LIABILITY	
	1st qtr FYE 2021 P & L - 3rd qtr Ca	Acct:	10-174-418-0000	PROPE	RTY & LIABILITY	INSURANCE
	1st qtr FYE 2021 P & L - 3rd qtr Ca		10-175-418-0000	PROPE	RTY & LIABILITY	INSURANCE
Desc:	1st qtr FYE 2021 P & L - 3rd qtr Ca	Acct:	10-271-418-0000	PROPE	RTY & LIABILITY	INSURANCE

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Bank ID		Bank Name					
Vendor ID		Vendor Name	Payee N	Name		Check Date	Check No.
Detail: Invo	ice No.	Invoice Description		Cross Fund	Invoice Amt	Disc. Amt	Net Amt.
	Dagas	1st qtr FYE 2021 P & L - 3rd qtr Ca	A o atu	10 211 419 0000	DDODE	RTY & LIABILITY I	NOUDANCE
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-211-418-0000 10-221-418-0000	_	RTY & LIABILITY II RTY & LIABILITY II	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-325-418-0000 10-421-418-0000		RTY & LIABILITY II RTY & LIABILITY II	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-511-418-0000		RTY & LIABILITY II RTY & LIABILITY II	
		1st qtr FYE 2021 P & L - 3rd qtr Ca 1st qtr FYE 2021 P & L - 3rd qtr Ca		10-511-418-0000		RTY & LIABILITY I	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-521-418-0000		RTY & LIABILITY I	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-521-418-0000		Liability Insurance	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-516-418-0000		RTY & LIABILITY	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-514-418-0000		RTY & LIABILITY II	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-621-418-0000		RTY & LIABILITY I	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-622-418-0000		RTY & LIABILITY I	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-623-418-0000		& Liability Ins	NSUKANCE
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-524-418-0000		RTY & LIABILITY II	NSTIDANCE
		1st qtr FYE 2021 P & L - 3rd qtr Ca		50-955-418-0000		RTY & LIABILITY I	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		60-961-418-0000	_	RTY & LIABILITY I	_
		1st qtr FYE 2021 P & L - 3rd qtr Ca		55-955-418-0000		RTY & LIABILITY I	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		65-963-418-0000		RTY & LIABILITY I	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		30-975-418-0000	_	RTY & LIABILITY I	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-181-418-0000		RTY & LIABILITY I	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-013-100-0000		NGES PAYABLE	NOONANCE
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-527-418-0000		NGLS FATABLE RTY & LIABILITY II	NSUBANCE
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-528-418-0000		RTY & LIABILITY I	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-530-418-0000		RTY & LIABILITY I	
		1st qtr FYE 2021 P & L - 3rd qtr Ca		10-313-418-0000		RTY & LIABILITY I	
		·	r Total:		242,291.00	0.00	242,291.00
051943		VISION SERVICE PLAN	VISION	SERVICE PLAN	·	7/01/2020	69812
JUL	'20	VISION INSURANCE JULY		0.00	\$1,976.60	0.00	1,976.60
301							
	Desc:	VISION INSURANCE JULY 2020		10-012-300-0225		ED VISION INSUR	ANCE PAYAI
		Vendo	r Total:		1,976.60	0.00	1,976.60
053000		WHITE RIVER COUNCIL ON AGING				7/01/2020	69813
202	1 - APP	ROP 1 1/2 APPROPRIATION FY'2	21	0.00	\$41,825.00	0.00	41,825.00
	Desc:	1/2 APPROPRIATION FY'21	Acct:	10-421-318-0100	CONTR	ACT SERV WR CO	OUNCIL/AGIN
'21	Q1	CONTRACTED SERVICES	S JUL-SEP 202	0.00	\$6,132.50	0.00	6,132.50
	Desc:	CONTRACTED SERVICES JUL-SEP 202	0 Acct:	10-421-318-0200	CONTR	ACT SERV SENIO	R CTR ADM
		Vendo	r Total:		47,957.50	0.00	47,957.50
053950		WINDSOR COUNTY TREASURER				7/01/2020	69814
'20/	21	FY'21 WINDSOR COUNTY	/ TAX&BOND	0.00	\$107,614.00	0.00	107,614.00
	Desc:	FY'21 WINDSOR COUNTY TAX&BOND F	PMT Acct:	10-831-318-0000	CONTR	ACTED SERVICES	3
		Vendo	r Total:		107,614.00	0.00	107,614.00
500387		EXECUSUITE, LLC				7/01/2020	69815
111	86	RENT - JULY 2020		0.00	\$400.00	0.00	400.00
		RENT - JULY 2020	Acct:	10-121-318-0600	·	ACT SERVICES - I	
		Vendo	r Total:		400.00	0.00	400.00

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Check Date: 7/01/2020 - 7/01/2020

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Bank ID Vendor ID	Bank Name Vendor Name		Payee	Nama		Check Date	Check No.
Detail: Invoice		e Description	Tayoo	Cross Fund	Invoice Amt	Disc. Amt	Net Amt.
FUND 1 0				В	ank Total:		560,711.89
		Holdback To	otal				592,095.89
	Batch Totals:		0.00	69,464.00		0.00	661,559.89
						DAN FRASER	
						SIMON DENNI	S
						ALICIA BARRO	W
					·	ALAN JOHNSC	DN
					·	JOSEPH MAJO	)R
						KIM SOUZA	
					·	J. BRANNON (	ODFREY JF
						GAIL OSTROU	Т
						JOHN J. CLER	KIN