	ACCOUNT NO.	RESOLUTION DESCRIPTION	INCREASE		DECF	DECREASE		COST	DEPARTMENT NAME
NH6020	19916	NYS HC & MH Worker Bonus Prg	\$	49,500			\$	103,500	Shaker Place Rehabilitation and Nursing Center
NH6020	19949	Experience Differential	\$	2,500			\$	10,000	<b>Shaker Place Rehabilitation and Nursing Center</b>
NH6020	19980	Clothing Allowance	\$	5,000			\$	6,997	<b>Shaker Place Rehabilitation and Nursing Center</b>
NH6020	44022	MAINTENANCE SUPPLIES	\$	15,000			\$	141,469	<b>Shaker Place Rehabilitation and Nursing Center</b>
NH6020	44023	MEDICAL SUPPLIES	\$	25,000			\$	515,000	<b>Shaker Place Rehabilitation and Nursing Center</b>
NH6020	44037	Insurance	\$	50,000			\$	634,013	<b>Shaker Place Rehabilitation and Nursing Center</b>
NH6020	44042	Printing and Duplication	\$	5,000			\$	25,000	<b>Shaker Place Rehabilitation and Nursing Center</b>
NH6020	44101	Electric	\$	50,000			\$	380,000	<b>Shaker Place Rehabilitation and Nursing Center</b>
NH6020	44105	WATER	\$	15,000			\$	65,000	<b>Shaker Place Rehabilitation and Nursing Center</b>
NH6020	44250	DRUGS	\$	75,000			\$	389,801	<b>Shaker Place Rehabilitation and Nursing Center</b>
NH6020	44903	Shared Service Charge	\$	95,000			\$	665,057	<b>Shaker Place Rehabilitation and Nursing Center</b>
NH6020	89060	Hospital and Medical			\$	387,000			Shaker Place Rehabilitation and Nursing Center
		TOTAL APPROPRIATIONS	_\$	387,000	\$	387,000			
				ESTIMATED REVENUES					
	ACCOUNT NO.	RESOLUTION DESCRIPTION	DEC	REASE	INCR	EASE	UNIT (	UNIT COST	DEPARTMENT NAME
		TOTAL ESTIMATED REVENUES	\$	-	\$				

387,000 \$

**GRAND TOTAL** 

387,000