Town of Alden

Supplemental Submission

for Conversion of its Municipal Declaration to a Permanent Operating Certificate

Following Initial

Systems Committee Review

of its Application

July 23, 2018

Town of Alden - Supplement Submission Table of Exhibits

Exhibit P:

Kevin P. Mahoney, Esq. correspondence dated July 19, 2018 with DOH Policy Statement 06-06 Checklist Appendix 2 (pages 22 and 23)

Exhibit Q:

Affirmation of Fitness and Competency - LVAC Director of Operations Marrocco (Redacted as to date of birth and social security number: original being presented in sealed attached envelope)

Exhibit R:

2018 Town of Alden Budget Town of Alden Moody's Investor Services Rating dated February 7, 2018 Town of Alden Financial Statement dated February 28, 2018 DOH-5131 "Funding Document for EMS Agencies" executed June 29, 2018

Exhibit S:

Lancaster Police Department Dispatch Summary Records

Exhibit T:

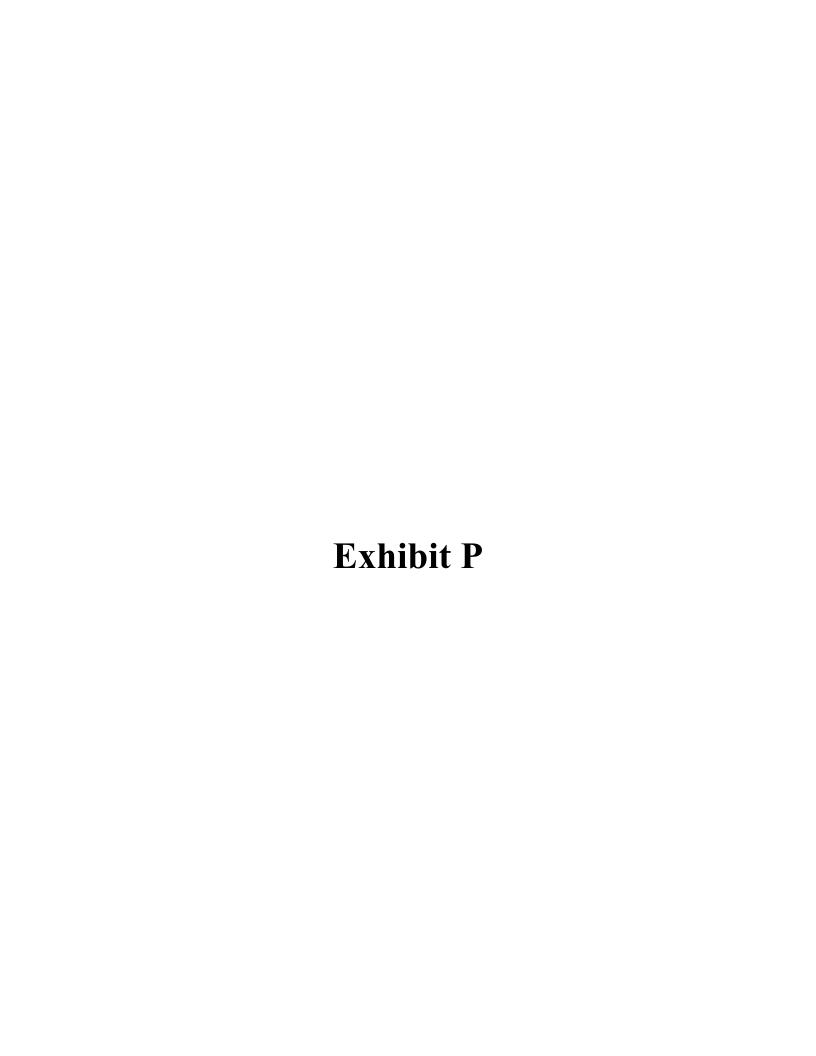
DOH Policy Statement 12-06
Erie County Fire Mutual Aid Plan dated May 27, 2010
Erie County Mutual Aid Plan adopted 2016
Western New York Regional Mutual Aid Plan dated February 2017
Mutual Aid Agreement between AMR and LVAC dated March 1, 2015
Letter of Agreement between Twin City Ambulance and LVAC

Exhibit U:

DOH-4362 Medical Director Verification of Dr. Joseph Bart, DO dated May 11, 2018 QA/QI SOG Standard Operating Guidelines

Exhibit V:

Transmittal correspondence of Mark C. Butler, Esq. dated June 29, 2018



KEVİN S. MAHONEY

DIRECT LINE: 716.932.6598 DIRECT FAX: 716.932.6698 KMAHONEY@HOGANWILLIG.COM



ADDITIONAL OFFICES: 155 SUMMER STREET BUFFALO, NY 14222

6133 ROUTE 219 S SUITE 1005 ELLICOTTVILLE, NY 14731

> 43 CENTRAL AVENUE LANCASTER, NY 14086

770 DAVISON ROAD LOCKPORT, NY 14094

MAIN OFFICE:

2410 North Forest Road | Suite 301 | Amherst, New York 14068 Phone: 716.636.7600 | Toll Free: 800.636.5255 | Fax: 716.636.7606

WWW.HOGANWILLIG.COM
SERVICE BY FAX AND EMAIL NOT ACCEPTED

July 19, 2018

Via Hand Delivery & Email (without attachments)

Mark C. Butler, Esq. The Law Offices of Mark C. Butler, PLLC 5166 Main Street, Suite 302 Williamsville, NY 14221

Re: Town of Alden EMS

Dear Mark:

On Wednesday, July 18, 2018, the Systems Committee met to discuss their review of the application, as well as some feedback that has been received from the Bureau of EMS. In that regard, we need to return the application as it was deemed incomplete.

The Committee focused in particular on the Application for Public Need Worksheet attached as Appendix 2 to Policy 06-06. I have included a copy of the pages for which the Committee was unable to check "yes" for. In that regard:

- 1. The DOH Form 3778 Affirmation of Fitness and Competency for David Marrocco does not contain any of the required attachments (Resume/CV, copies of licenses/certifications and residential address).
- 2. Please add documentation to support that the Alden has financial resources capable of supporting the proposed service.
- 3. Please add documentation of call volume of the last twelve (12) months/first twelve (12) months of operation.
- 4. Please add documentation regarding mutual aid (the narrative references a contract/mutual aid planning).
- 5. If you your client have documentation regarding Medical Direction, QA/QI and/or protocols, submission of that material will only strengthen the application.

In anticipation of your further submission, another Systems Committee Meeting was scheduled for 3:00 p.m. on August 13, 2018 with the hopes that the application could be reviewed again and deemed complete at that time.

Again, the Committee is hopeful that you and your client will be able to garner the necessary materials to submit the application again so that this process can move forward on their behalf.

Should you have any questions, please do not hesitate to contact me.

Thank you.

Very truly yours?

KEVIN S MAHONEY, ESQ.

KSMI

cc: Systems Committee

(H1999910.1)

APPENDIX 2

APPLICATION FOR PUBLIC NEED WORK SHEET

To be completed and a made part of the record.

1. Required DOH Applications

YES NO	
	DOH Form 3777, Application for New EMS Service, Expansion
	of Primary Operating Territory or Transfer of Ownership,
	completed and notarized.
	DOH Form 3778, Affirmation of Fitness and Competency,
	competed and notarized for each person identified as an officer,
	director holder of greater than 10% of companies stock.

2. Narrative which includes the following operational aspects of the proposed service:

YES	
	Proposed Area of Service
	Proposed level of care of the service
	Proposed hours of operation
	Proposed physical location(s) of the service
	Proposed number of employees/members.
	Number of ambulances/ALS FR vehicles.

3. The applicant has included financial information including:

YES	NO NO
	Source of initial funds
	First/next year's proposed operating budget.
	Proof of adequacy of funding sources/future revenue.
	Documentation to support that the applicant has financial resources
	capable of support proposed service/expansion.

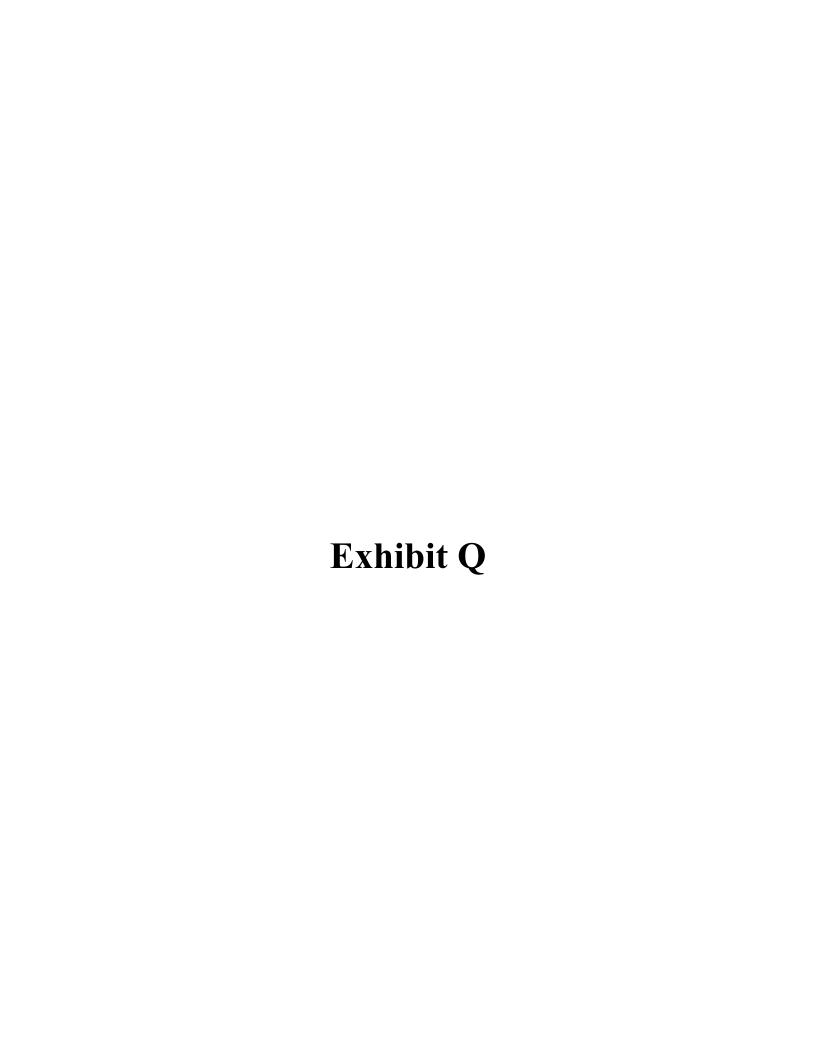
4. The narrative shall include documentation of the positive and negative impact of the proposed new/expanded service to include (but not be limited to):

Impact on all existing ambulance/EMS relating to:

YES	NO	
		Response times
		Staffing
		Level of service
		Call volume of last 12 month/proposed first 12 months of operation
		Mutual Aid
		Medical direction
		Quality assurance
		Financial impact on any existing service(s)
		Any adverse impact the proposed service will have on any existing
		service(s).
		Prehospital care protocols

5. Narrative addendum of the application lists all segments of the EMS system in the proposed new/expanded operating territory including:

YES	NO:
	All existing EMS agencies
	All hospitals and other institutions generating calls (nursing homes, adult homes, centers for independent living, community residences for the disabled. etc)
	Any/ all mutual aid agreements
	Actual & projected response times for past and next 12 months
	Communications system and the impact additional/expanded service will have on the existing communications system.
	Medical direction/control of system and impact additional/expanded service will have on existing system.
	Any anticipated improvements the new/expanded service intends to make in the communications system if approved.



Affirmation of Fitness and Competency

By completing this form, you are aware that the NYS Department of Health will be conducting a detailed background review in order to determine fitness and competency in accordance with Article 30 of the NYS Public Health Law.

La	ncast	er Volunteer Ambulance Corps, Inc.	1484
Na	me of	EMS Agency	NYS EMS Agency Code
То	wn of	Alden EMS	
Fu	ll Nam	e of Corporate Entity requiring F&C review as a new owner/operator	
Da	avid V	. Marrocco	LVAC Director of Operations
Fu	ll Nam	e of Individual	Title
65	St. J	ohns Place, Lackawanna, NY 14218	
Ad	dress (of the Individual or Corporate Entity requiring F&C review as a new owner/ope	rator
So	cial Se	curity Number (this is not releasable under the provisions of FOIL)	Date of Birth
	ek ho	oposedinew.owner/operator.of an EMS agency. Litereby certify that Lam or ha der, operator or operations manager of one or more of the following in the par	
YES	NO —		
1		Emergency Medical Service certified by the NYS Department of Health, or equ	uivalent in any other state.
	Z.	Hospital, long term care facility or other Article 28 facility licensed by the NY other state.	S Department of Health, or equivalent in any
	1	Invalid coach (Ambulette) Service authorized by the NYS Department of Trans	sportation or equivalent in any other state.
	7	Home or residence licensed by NYS or equivalent in any other state.	
	V	Halfway house, hostel or residential facility or institution licensed by, or subj Health (OMH) or Office of Mental Retardation and Developmental Disabilities	
	L,	If NO has been marked for all of the above, it indicates that there is no history Public Health Law; signing this affirmation is informational only and a testim provided.	, ,

■ If YES has been marked for any of the above, on an attached page, please provide the following information for each:

- · Name of agency or facility
- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFTIRMATION

- o Current resume or curriculum vitae
- Copies of any related licenses and certifications
- Listing of address of residence, on it less than 2 years, addresses of prior residence

Certification of Competency

By completing and signing this affirmation, I certify that I have operated all of the agencies indicated, in compliance with all applicable statutes, rules, regulations and policies, specifically 10 NYCRR800.

Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

David V. Marrocco	
Full Name	7/20/18
Signature	Date
Certification of Fitness	
By completing and signing this affirmation, I certify that I have not been convicted of any crimanslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs, nor have I charge relating to any of these offenses.	
Further, I certify that, I am not, or was not subject to a state or federal administrative order repatient harm, including, but not limited to actions involving Medicare and or Medicaid.	elating to fraud, embezzlement or
If you are unable to sign this affirmation, attach copies of all background information, Department in the review and determination of fitness.	artment orders and/or justification to
David V. Marrocco	
Full Name Manoro	7/20/18
Signature	Date
Notary Public Affirmation and Acknowledgement	
Debra Stelianou	
Notary Public Name Libres Jehann	7/21/18
Signature	Date
DEBRA STELIANOU Notary Public, State of New York No. 01ST4989344 Qualified in Erie County Commission Expires December 2, Please affix Notary Public Stamp or equivalent.	

I am the Director of Operations for the Lancaster Volunteer Ambulance Corps, Inc., the contractor engaged by the Town of Alden to provide ambulance service within the Town's operating area, since its inception thorough a municipal declaration and the ambulance service certificate issued by the NYS Department of Health on September 16, 2016.

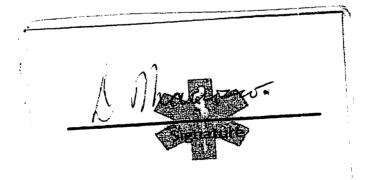
The Town of Alden EMS operates under certificate number 33586.

The address of the Town of Alden EMS is Alden Town Hall, 3311 Wende Road, Alden, New York 14004.

The agency code for Town of Alden EMS is 6259.

The daily operations of the Town of Alden EMS are conducted by contract with Lancaster Volunteer Ambulance Corps, Inc., pursuant to General Municipal Law 122-b. I have no other involvement with the Town of Alden other than as Director of Operations of Lancaster Volunteer Ambulance Corps, Inc. under such contract.

A copy of the ambulance service certificate for the Town of Alden EMS is attached, as is a copy of my EMT certificate and my personal resume.



DOH - 3815 (5/2014)

DAVID V. MARROCCO

65 St. Johns Pl, Lackawanna, NY | (716)-523-0950 | davidmarrocco@gmail.com

SKILLS & ABILITIES

Software:

- · SoftLab
- · SoftPath
- · Cerner
- · Microsoft Office
- Windows
- · Mac
- · Databases
- · Microscopic Imaging Software

Licensure:

- · NY Licensed ASCP Certified Clinical Laboratory Technician
- NY License number: 002862

Certification:

NYS EMT-B (Cert#:447961)

Basic Life Support

CPR and AED

2008-2011

Patient Service Technician, Catholic Health of Buffalo

- · Draw blood from in-patients, outpatients, and nursing homes
- · Process specimens from blood draws and all hospital specimens
- · Organize laboratory and keep laboratory neat
- · Send specimens to required locations
- · Assist in laboratory cleanliness
- Assist in customer service
- Draw blood at patient's homes
- · Perform maintenance on equipment
- · Perform quality control on certain specimens

2011-2013

Histotechnician, Roswell Park Cancer Institute

- Procedures included: accessioning all specimens, embedding, cutting, frozen sections, identification of origin and type, grossing specimens, preparing reagents and dyes, routine and special staining, cover slipping, labeling, recording and graphing, and notating variant results.
- Created and maintained lab procedures; trained new personnel and provided technical assistance to new employees and students; ensured strict adherence to safety protocols.
- Utilized various hospital information systems and provided administrative support including typing reports, ordering supplies, and maintaining records.

2014-2016

Anatomic Pathology Assistant, Kaleida Health

- Gross dissect anatomical organs.
- · Frozen Sections
- Preparation of Histological cassettes
- · Teach Students and other staff.
- · Dictation of gross summary.
- · Tissue and waste disposal.
- · Computerized entry of tracking of specimens.
- · Fixation of anatomical specimens.
- · Assist Pathologists in Autopsy dissection (Pathological Dissection) and all other aspects or anatomical dissection.

2016-Present

Histotechnician, Catholic Health System of Buffalo

- Procedures included: accessioning all specimens, embedding, cutting, frozen sections, identification of origin and type, grossing specimens, preparing reagents and dyes, routine and special staining, cover slipping, labeling, recording and graphing, and notating variant results.
- Created and maintained lab procedures; trained new personnel and provided technical assistance to new employees and students; ensured strict adherence to safety protocols.
- Utilized various hospital information systems and provided administrative support including typing reports, ordering supplies, and maintaining records.

2016- Present

EMT-B, Lancaster Volunteer Ambulance Corps

Offices Held:

Director Of Maintainence (2016-2017)

Director of Operations (2017- Present)

Duties:

- Patient advocacy
- Supervision of communication and field staff to ensure smooth operability
- Maintenance and revision of internal/external compliance programs
- Attendance at meetings/conferences as requested by superiors
- Disciplinary Action as needed
- Customer and team member satisfaction
- Delivery of patient care as needed
- Adherence to the mission, vision and SOPs of the organization
- Additional responsibilities as needed

2013-2017 Firefighter, Depew Fire Dept. Hose Co. #1

Offices Held:

1st Lieutenant, 2nd Lieutenant, Captain

Duties:

- Performs duties serving as a confidential staff advisor to the Fire Chief in researching, recommending, crafting, implementing and enforcing policies, directives and procedures.
- Implements department goals and objectives through a comprehensive administration program and coordinates department operations, inspections, maintenance and training under the direction of the Fire Chief.
- Performs the role of officer-in-charge of all fire, rescue and medical operations. Assume the role of incident commander and determine an overall plan to resolve incidents until command is transferred. Direct subordinate company officers and fire crews to appropriate assignments to ensure the plan of action is followed in a safe and efficient manner.
- Determine how to deploy personnel during periods requiring special fire department response and assigned activities. Using independent judgment, initiative and skills makes recommendation to the Fire Chief regarding all matters concerning fire protection, rescue procedures, and emergency medical systems.
- Supervises and develops the scheduling and coordination of shift staffing levels, changes, and activities. Responsible for ensuring proper staffing levels. Supervises Fire Lieutenants and subordinate staff in their assigned duties as directed.
- Assists in long-range planning and implementation of departmental budgets. Assists the Fire Chief in the planning process for capital projects and the drawing of specifications for new equipment
- Assists in the development of minimum standards of training and technical competence for all fire department personnel; delivers training as scheduled. Responsible for specific training programs for new employees and officer development. Ensures the readiness of personnel and equipment under their supervision. Becomes knowledgeable and ensures the utilization of the National Incident Management System (NIMS) and the National Response Plan (NRP).
- Maintains discipline and insures that personnel follow department rules and regulations. Evaluates work performance of subordinates, prepares employee evaluations and effectively recommends and participates in hiring, transfers, promotions, suspensions and other disciplinary matters of subordinates.
- Assists in the development and maintenance of an effective system of records and reports of alarm responses, fire and casualty reports, personnel actions, quarters, training, apparatus, and equipment.

- Supervises the completion, maintenance and/or quality assurance of incident reports, personnel records on disciplinary actions, accident and injury reports, training and such other departmental forms as needed.
- Establishes and maintains the highest level of customer service by providing a positive working relationship with all stakeholders.

2017-Present

Firefighter/EMT-B, Newton Abbott Fire Company

- Perform firefighting work, including preventing, combating and extinguishing fires to protect lives, property and the environment
- Operate fire equipment and tools appropriately
- Provide emergency medical care within scope of practice
- Quickly and effectively analyze hazardous situations and take appropriate course of action
- Participate in training, classes and drills in firefighting, emergency medical care, disaster response and specialized rescue
- Perform general maintenance work of fire equipment and facilities

EDUCATION

2007-2010

AAS in Medical Laboratory Technology, Erie Community College North Campus

Courses taken:

Biology with lab

Chemistry

Pathology/Physiology

Clinical Analysis I, II, III, IV with labs

Clinical Hematology with lab and Advanced Hematology with lab

Clinical Immunology

Clinical Serology with lab

Clinical Immunohematology and Advanced Immunohematology with labs

Urinalysis with lab

Microbiology I, II with labs

Medical seminar

Bio-Organic Chemistry

Medical Law and Ethics

Parasitology

2013-present

Courses taken with Erie County Fire/EMS:

EMT-B, AWR-160

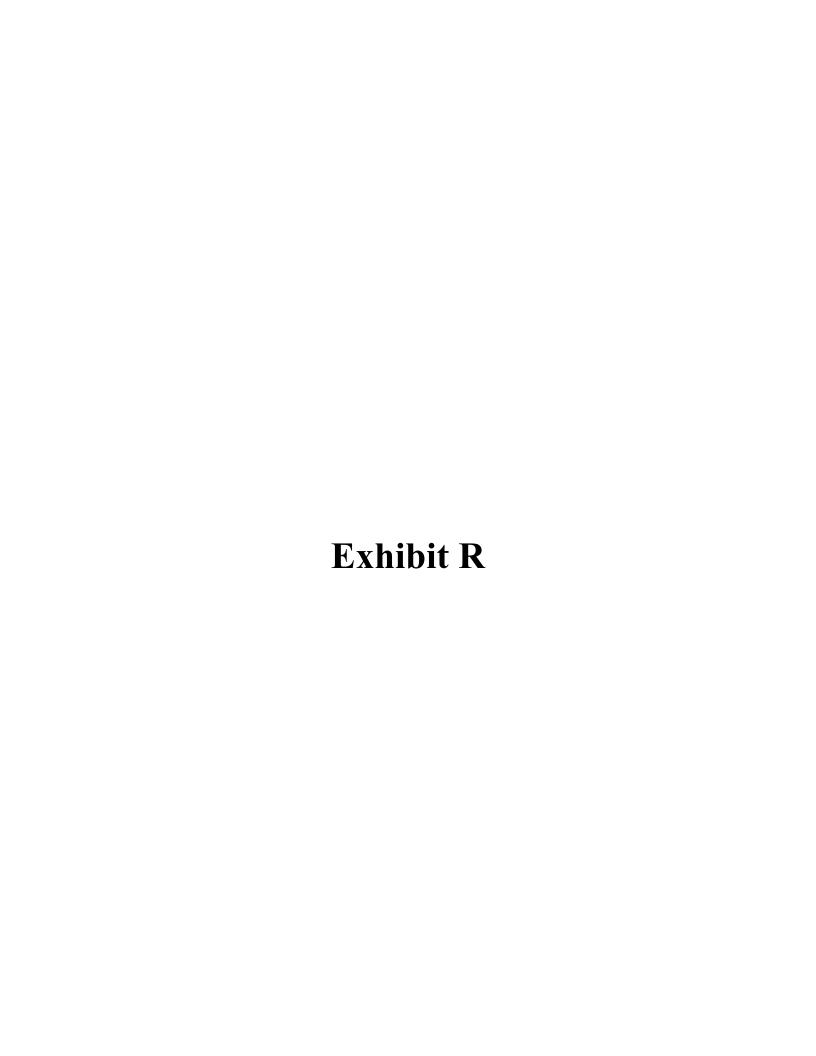
Courses taken with NYS Fire:

Firefighter I w/ Hazmat, Fire Officer I, Apparatus Operator EVOC, Apparatus Operator Pumps, School Bus Rescue, Courage to Be Safe, Radio Policies and Procedures, Flashover Survival

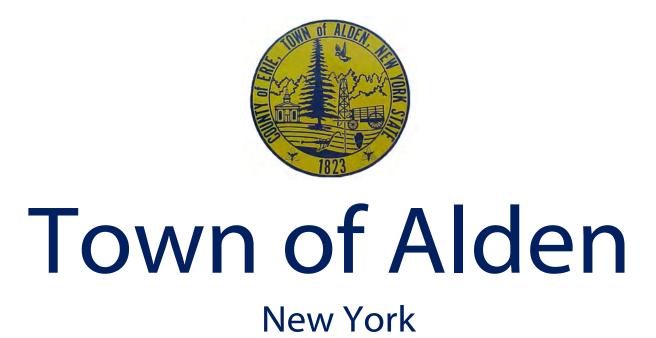
Courses taken with Dept. Homeland Security and FEMA:

ICS 100, 200, 300, 400, 700, 800

IS 00005.a, 00240.b, 00241.b, 00405



2018 PRELIMINARY BUDGET



Prepared by: Richard Savage, Supervisor

Updated: 10.2.2017

TOWN OF ALDEN 2018 PRELIMINARY BUDGET TABLE OF CONTENTS

	<u>Page</u>
Summary & Tax Levies	1
General Fund—Townwide:	
Budget Summary	3
Estimated Revenue	4
Appropriations	6
General Fund—Town Outside Village:	
Budget Summary	22
Estimated Revenues	23
Appropriations	24
Highway Fund—Town Outside Village:	
Budget Summary	31
Estimated Revenues	32
Appropriations	33
Special Districts	36
2016 Debt Statement	47
Estimated Fund Balance	48
Schedule of Salaries of Elected Town Officials	49

Appendix A - Assessor's Exemption Impact Report

TOWN OF ALDEN, NEW YORK 2018 PRELIMINARY BUDGET ALL FUNDS AND ALL DISTRICTS

	Appropriations		Estimated Revenues		Appropriated Fund Balance		Amount to be Raised by Taxation	
General Fund	\$	1,579,511	\$	664,647	\$	227,000	\$	687,864
General Fund Town Outside Village		266,393		237,309		29,084		-
Highway Fund—Town Outside Village		965,460		642,397		80,000		243,063
Fire Protection District		776,220		125		10,000		766,095
Consolidated Lighting District		80,519		250		5,000		75,269
Periwinkle Lighting District		600		-		-		600
Refuse Collection District		449,000		1,000		15,000		433,000
Sewer District No. 1		6,384		50		3,000		3,334
Sewer District No. 2		44,836		50		-		44,786
Water District No. 1		8,700		50		2,000		6,650
Water District Zoeller Road		21,867		-		-		21,867
Water District Exchange Street		27,901		-		-		27,901
Out-of-District - Water No.5		4,900		-		-		4,900
Out-of-District - Water No.9		130		-		-		130
Consolidated Water District		115,879		-		23,700		92,179
Grand Total	al <u>\$</u>	4,348,300	\$	1,545,878	\$	394,784	\$	2,407,638

TOWN OF ALDEN, NEW YORK 2018 PRELIMINARY BUDGET ALL FUNDS AND ALL DISTRICTS

	Tax Levy					
		<u>2017</u>		2018		
General Fund—Outside Village	\$	424,469	\$	438,835		
General Fund—Village		239,231		249,029		
General Fund Town Outside Village		-		-		
Highway Fund—Town Outside Village		234,914		243,063		
Fire Protection District		757,413		766,095		
Consolidated Lighting District		74,750		75,269		
Periwinkle Lighting District		600		600		
Refuse Collection District		430,500		433,000		
Sewer District No. 1		4,550		3,334		
Sewer District No. 2		48,441		44,786		
Water District No. 1		6,650		6,650		
Water District Zoeller Road		23,359		21,867		
Water District Exchange Street		33,241		27,901		
Out-of-District - Water No.5		5,083		4,900		
Out-of-District - Water No.9		135		130		
Consolidated Water District		93,186		92,179		
	\$	2,376,522	\$	2,407,638		
	\$	Difference	\$	31,116		
	%	Difference		0.013093		
	Ta	ах Сар		0.018400		

TOWN OF ALDEN, NEW YORK 2018 PRELIMINARY BUDGET GENERAL FUND BUDGET SUMMARY

		,	Village of Alden		Town Outside Village
Budget appropriations	\$ 1,579,511				
Less: Estimated revenues other than					
Erie County sales tax	(382,769)				
	1,196,742	\$	307,323	\$	889,419
Less: Nonproperty tax distribution by			•		,
County (Erie County sales tax)			-		(281,878)
Appropriated fund balance			(58,294)		(168,706)
Amount to be raised in taxation		\$	249,029	<u>\$</u>	438,835
Assessed valuations		\$ 15	50,839,525	\$	436,494,437
Tax rate per \$1,000 assessed valuation		\$	1.650953		\$ 1.005362
Allocable percentage based on taxable valuation		2	25.68%		74.32%

ESTIMATED REVENUE—DETAIL BY SOURCE

		Preliminary
Account Code	Description	Budget 2018
	TAX ITEMS	
	Real Property Tax Items:	
A1081	Other Payments in Lieu of Taxes	\$ 3,000
A1090	Interest and Penalties on Real	17,000
	Total Real Property Tax Items	20,000
	Non-Property Tax Items:	
A1120	Nonproperty tax distribution by County	281,878
A1170	Cable Franchise	42,000
	Total Non Property Tax Items	323,878
	DEPARTMENTAL INCOME	
	General Government:	
A1255	Clerk Fees	3,500
	Total General Government	3,500
	Public Safety:	
A1550	Dog Control Fees	400
	Total Public Safety	400
	Public Health:	
A1601	Public Health Fees	1,000
	Total Public Health	1,000
	Culture and Recreation:	
A2001	Park and Recreation Charges	8,500
	Total Culture and Recreation	8,500
		(continued)

TOWN OF ALDEN, NEW YORK 2018 PRELIMINARY BUDGET

GENERAL FUND

ESTIMATED REVENUE—DETAIL BY SOURCE

		Preliminary
Account Code	Description	Budget 2018
		(concluded)
	Due From Other Governements	
A2210	Newstead Shared Assessor	37,929
		37,929
	Use of Money and Property	
A2401	Interest and Earnings	4,500
A2410	Rental of Property	1,500
A2440	Rental Gas Lease	100
	Total Use of Money and Property	6,100
	Licenses and Permits	
A2530	Games of Chance	40
A2540	Bingo Licenses	1,000
A2544	Dog Licenses	12,000
	Total Licenses and Permits	13,040
	Fines and Forfeitures	
A2610	Fines and Forfeited Bail	60,000
	Total Fines and Forfeitures	60,000
	State Aid	
A3001	Per Capita	80,000
A3005	Mortgage Tax	110,000
A3389	Stop DWI Programs	300
	Total State Aid	190,300
	TOTAL GENERAL FUND REVENUES	<u>\$ 664,647</u>
	Appropriated Fund Balance	
A2799	Appropriated Fund Balance	227,000
	Total Appropriated Fund Balance	227,000
	Total Revenues and	
	Appropriated Fund Balance	\$ 891,647
	Type optimical and building	Ψ 071,04

		Preliminary
Account		Appropriations
Code	Description	2018
	GENERAL GOVERNMENT SUPPOR	Т
	Legislative Board	
A1010		
	Personal services:	
.10		\$ 26,922
	Total personal services	26,922
	Contractual expenses:	
.40		250
.40:	* *	150
.479	- · · · · · · · · · · · · · · · · · · ·	250
	Total contractual expenses	650
	Total Legislative Board	<u>\$</u> 27,572
	Justices	
A1110		
	Personal services:	
.10	Town Justices (2)	\$ 50,582
.103	Court Officer	4,200
.104	Clerk to Town Justice	34,000
.10:	PT Court Clerk	15,000
	Total personal services	103,782
	Contractual expenses:	
.40	Office Supplies	1,850
.40.	3 Contractual	500
.40	*	400
.408	1	500
.41		500
.412	8	750
.420	ε	1,500
.422	8 J	250
	Total contractual expenses	6,250
	Total Justices	\$ 110,032

		<u>Preliminary</u>
Account		Appropriations
Code	Description	2018
A 1220	Supervisor	
A1220	n	
.100	Personal services: Supervisor	\$ 24,000
.100	Assistant to the Supervisor	\$ 24,000 38,159
.103	Part-time Clerk	15,906
.101		78,065
	Total personal services	
	Equipment:	
.201	Computer Software and Insurance	1,500
.202	Office Furniture	500
	Total equipment	
	Contractual expenses:	
.401	Office Supplies	1,500
.412	Training and Education	700
.415	Computer Supplies/ADP Fees	3,500
	Total contractual expenses	5,700
	Total Supervisor	\$ 85,765
	Auditor	
A1320		
	Personal services:	
.115	Budget Officer	\$ 6,000
	Total personal services	6,000
	Contractual expenses:	
.434	Annual Audit and Budget Assistance	27,918
	Total contractual expenses	27,918
	Total Auditor	\$ 33,918

		Prelimir	nary
Account Code	Description	Appropris	
	•		
	Assessments		
A1355			
	Personal services:		
.100	Assessor	\$	58,295
.104	Part Time Receptionist		5,200
	Total personal services		63,495
	Equipment:		
.225	Computer Software and Insurance		900
	Total equipment		900
	Contractual expenses:		
.401	Office Supplies		600
.405	Mileage		300
.408	Dues and Subscriptions		500
.450	Reassessment Litigation		5,000
.452	NYS Real Property System Fees & TLS CO. Inc		1,750
.455	Training/Education		1,325
	Total contractual expenses		9,475
	Total Assessments	\$	73,870
	Assessment Review Board		
A1360			
	Contractual expenses:		
.401	Board Members	\$	1,000
.405	Secretary	_	220
	Total personal services		1,220
	Total Assessment Review Board	\$	1,220

	<u>Preliminary</u>
	Appropriations
Description	2018
T. O. I.	
Town Clerk	
Parsanal sarvicas	
	\$ 47,288
	13,832
_ ·	14,326
	500
	2,600
Total personal services	78,546
Equipment:	
Computer Software and Insurance	3,000
Total equipment	3,000
Contractual expenses:	
	1,500
Mileage	300
Training and Education	500
P.M. Agreements	200
Dues and Subscriptions	150
Total contractual expenses	2,650
Total Town Clerk	\$ 84,196
Law	
Personal services:	
Town Attorney	\$ 35,976
Town Prosecutor	11,206
Total personal services	47,182
Contractual expenses:	
Administrative fee	4,000
Total contractual expenses	4,000
Total Law	\$ 51,182
	Personal services: Town Clerk Deputy Town Clerk Deputy Town Clerk FOIL Officer Tax Clerk Total personal services Equipment: Computer Software and Insurance Total equipment Contractual expenses: Office Supplies Mileage Training and Education P.M. Agreements Dues and Subscriptions Total contractual expenses Total Town Clerk Law Personal services: Town Attorney Town Prosecutor Total personal services Contractual expenses: Administrative fee Total contractual expenses

			<u>Preliminary</u>
Account Code		Description	Appropriations 2018
		Engineering	
A1440			
		Contractual expenses:	
	.415	Engineering Fees	\$ 500
		Total contractual expenses	500
		Total Engineering	<u>\$</u> 500
		Internet	
A1610			
		Equipment:	
	.200	Computer Software and Insurance	4,000
		Total equipment	4,000
		Contractual expenses:	
	.400	Internet Service	2,500
		Total contractual expenses	2,500
		Total Internet	\$ 6,500

		Preliminary
Account Code	Description	Appropriations 2018
	Operation of Buildings	
A1620	operation of Banango	
711020	Personal services	
.100	Maintenance	\$ 9,205
.103	Part-time Maintenance	4,868
.105	Part-time Help	13,832
.106	Building Maintenance	4,000
	Total personal services	31,905
	Contractual expenses:	
.401	Office Supplies	200
.406	Telephone	10,000
.407	Light	20,000
.408	Heat	16,000
.409	Water	5,000
.438	Materials and Supplies	4,500
.439	Janitorial Supplies	2,500
.440	Alarm System	1,000
.444	Building Maintenance	30,000
	Total contractual expenses	89,200
	Total Operation of Buildings	\$ 121,105

		Pr	eliminary
Account Code	Description	Арр	ropriations 2018
	Central Printing and Mailing		
A1670			
	Contractual expenses:		
.401	Office Supplies	\$	200
.402	Postage		8,000
.403	Printing and Advertising		4,000
.410	Office Equipment Rental		2,700
.415	Copier Supplies		1,300
	Total contractual expenses		16,200
	Total Central Printing and Mailing	\$	16,200
	Special Items		
A1910.400	Unallocated Insurance	\$	65,000
A1920.400	Municipal Association Dues		1,500
A1930.400	Judgments and Claims		5,000
A1935.400	Tax Cancellations and Refunds		115
A1950.400	Taxes on Town Property		400
A1990.400	Contingent Account		50,000
A1991.400	North East/Southtowns Solid Waste Board		700
	Total Special Items	<u>\$</u>	122,715
TOTAL GENERAL	GOVERNMENT SUPPORT	<u>\$</u>	734,775

		<u>Preliminary</u>
Account Code	Description	Appropriations 2018
Couc	Description	
	PUBLIC SAFETY	
	Safety	
A3120		
	Personal services:	
.100	Crossing Guard	\$ 7,000
	Total personal services	7,000
	Contractual expenses:	
.402	Disaster Plan - Code RED	5,000
.403	Background Checks	300
	Total contractual expenses	5,300
	Total Safety	<u>\$</u> 12,300
	Traffic Control	
A3310		
	Equipment:	
.245	Signs	\$ 3,000
	Total equipment:	3,000
	Total Traffic Control	\$ 3,000
	Fire Protection	
A3410		
	Contractual expenses:	
.401	Fire Dispatch Services	\$ 32,000
	Total contractual expenses:	32,000
	Total Fire Protection	\$ 32,000

		<u>Preliminary</u>
Account Code	Description	Appropriations 2018
	Control of Dogs	
A3510		
	Personal services:	
.10	Dog Control Officer	\$ 14,523
	Total personal services	14,523
	Contractual expenses:	
.40	E	200
.40	ϵ	500
.40	1	200
.42	T	550
.43		500
.44	ε	1,500
.44	Triaverials and Supplies	
	Total contractual expenses	3,650
	Total Control of Dogs	\$ 18,173
	Bingo	
A3989		
	Contractual expenses:	
.40	5 Bingo Inspector	\$ 550
	Total contractual expenses	550
	Total Bingo	<u>\$ 550</u>
TOTAL PUBLI	C SAFETY	\$ 66,023

		Preliminary	
Account		Appropriations	
Code	Description	2018	
	HEALTH		
	Registrar of Vital Statistics		
A4020			
	Contractual expenses:		
.401	Certification Fees	\$ 1,000	
	Total contractual expenses	1,000	
	Total Registrar of Vital Statistics	\$ 1,000	
TOTAL HEALTH		\$ 1,000	

		Preliminary
Account		Appropriations
Code	Description	2018
	TRANSPORTATION	
	Highway Administration	
A5010		
	Personal services:	
.100	Highway Superintendent	\$ 57,253
.102	PT Clerk	13,000
	Total personal services	70,253
	Equipment:	
.201	Office Equipment	1,500
.202	Pick-up Truck	
	Total equipment	1,500
	Contractual expenses:	
.401	Office Supplies	1,600
.408	Dues and Subscriptions	375
.412	Training and Education	700
	Total contractual expenses	2,675
	Total Highway Administration	\$ 74,428
	Garage	
A5132		
	Contractual expenses:	
.406	Telephone	\$ 1,500
.407	Light	5,500
.408	Heat	6,000
.438	Repairs & Maintenance	5,000
.439	Janitorial Supplies	500
.440	Fire Alarm Central Station	
	Total contractual expenses	18,700
	Total Garage	\$ 18,700
TOTAL TRANSPO	ORTATION	<u>\$ 93,128</u>

			Prelin	ninary
	count		Approp	riations
	Code Description			18
		ECONOMIC ASSISTANCE AND OPPO	PRTUNITY	
A 6510		Veterans Services		
A6510				
	410	Contractual expenses:	Ф	1 000
	.419	Veterans Celebrations	\$	1,000
		Total contractual expenses		1,000
		Total Veterans Services	\$	1,000
		Programs for the Aging		
A6772				
		Personal services:		
	.105	Part-time Van Driver	\$	16,322
	.110	Part-time Help		2,500
	.112	Nutrition Program		5,584
		Total personal services		24,406
		Contractual expenses:		
	.401	Nutrition Program		300
	.411	Rentals - Buses		5,000
	.440	Recreation Supplies		5,000
	.441	School Bus Trips		700
	.442	Special Programs		400
	.443	Meals on Wheels		1,001
	.444	Gas and Repairs - Senior Van	-	3,500
		Total contractual expenses		15,901
		Total Programs For the Aging	<u>\$</u>	40,307
TOTAL I	ECONOM	IIC ASSISTANCE AND OPPORTUNITY	<u>\$</u>	41,307

		Preliminary
Account		Appropriations
Code	Description	2018
	CULTURE AND RECREATION	
	CULTURE AND RECREATION	
	Parks	
A7110		
	Personal services:	
.100	Park Maintenance	\$ 35,330
.106	Park Supervision	6,000
.110	Maintenance Part-time Seasonal	32,000
.112	Maintenance Part-time	13,338
	Total personal services	86,668
	Equipment:	
.224	Maintenance Equipment	20,000
.250	Playground Equipment	16,000
.279	Hand Tools	500
,,	Total equipment	36,500
	Control	
.412	Contractual expenses:	500
.412	Training and Education Resurface Park Roads	
.413 .429		10,000
.429	Repairs and Maintenance of Recreation Equipment Gasoline and Oil	1,200
.431		5,000
.432	Auto Parts and Accessories	6,000 100
.433	Petty Cash	6,500
.435	Landscaping Materials	2,200
	Chemicals and Pool Supplies	
.436	Park Shelter	50,000
.437	Permits	700
.438	Building Maintenance	10,000
.439	Janitorial Supplies	2,000
.450	Materials and Supplies	11,500
.456	Marking Paint	4,000
.471	Uniforms	400
	Total contractual expenses	110,100
	Total Parks	\$ 233,268

unt le	Description	App	ropriations
le	Description	• •	
			2018
	Dlaygrounds and Pagreetion Centers		
	Flaygrounds and Recreation Centers		
	Dougonal convices		
100		\$	23,000
		Φ	2,500
			45,000
			19,000
.100	•	-	
	Total personal services		89,500
	Contractual expenses:		
.401	Office Supplies		400
.403	Printing and Advertising		1,500
.404	Expense and Travel		750
.405	Bus Drivers		300
.413	Concerts in the Park		5,500
.417	Adult Programs		2,000
.420	Youth Baseball		2,400
.421	Youth Soccer		2,400
.424	Youth Programs		2,400
.425	Youth Basketball		2,400
.426	Bandshell		2,700
.432	Dues and Subscriptions		150
.434	<u>-</u>		5,000
.437	Portable Toilets		2,500
	Total contractual expenses		30,400
	Total Playgrounds and Recreation Centers	\$	119,900
	Library		
	Lioimy		
	Contractual expenses:		
.411	Ewell Free Library	\$	20,000
	Total contractual expenses		20,000
	Total Library	\$	20,000
	.403 .404 .405 .413 .417 .420 .421 .424 .425 .426 .432 .434 .437	.102 Assistant Director .104 Senior Recreation Attendants .106 Supervisors Total personal services Contractual expenses: .401 Office Supplies .403 Printing and Advertising .404 Expense and Travel .405 Bus Drivers .413 Concerts in the Park .417 Adult Programs .420 Youth Baseball .421 Youth Soccer .424 Youth Programs .425 Youth Basketball .426 Bandshell .432 Dues and Subscriptions .434 Recreation Supplies .437 Portable Toilets Total contractual expenses Total Playgrounds and Recreation Centers Library Contractual expenses: .411 Ewell Free Library	Personal services: .100 Recreation Director \$.102 Assistant Director .104 Senior Recreation Attendants .106 Supervisors Total personal services Contractual expenses: .401 Office Supplies .403 Printing and Advertising .404 Expense and Travel .405 Bus Drivers .413 Concerts in the Park .417 Adult Programs .420 Youth Baseball .421 Youth Soccer .424 Youth Programs .425 Youth Basketball .432 Dues and Subscriptions .434 Recreation Supplies .437 Portable Toilets Total contractual expenses Total Playgrounds and Recreation Centers \$ Contractual expenses: .411 Ewell Free Library .5 Total contractual expenses

		Preliminary
Account		Appropriations
Code	Description	2018
	Historian	
A7510		
	Contractual expenses:	
.404	Mileage	\$ 75
.408	Dues and Subscriptions	35
.410	Other Expenses	500
.459	Repairs Historical Museum	4,000
	Total contractual expenses	4,610
	Total Historian	\$ 4,610
TOTAL CULTUR	E AND RECREATION	<u>\$ 377,778</u>

		<u>Preliminary</u>
Account		Appropriations
Code	Description	2018
	HOME AND COMMUNITY SERVIC	ES
	HOME AND COMMENT I SERVICE	
	Environmental Control	
A8090		
	Contractual expenses:	
.419	Nature Trails	\$ 1,00
.440	Landscaping Materials	1,00
	Total contractual expenses	2,00
	Total Environmental Control	\$ 2,00
TOTAL HOME AND	COMMUNITY SERVICES	<u>\$</u> 2,00
	EMPLOYEE BENEFITS	
A9010.800	State Retirement	\$ 70,00
A9030.800	Social Security	58,50
A9040.800	Workers' Compensation	36,50
A9050.800	Unemployment Insurance	5,00
A9060.800	Hospital and Medical Insurance	38,50
	Total contractual expenses	208,50
	Total Employee Benefits	\$ 208,50
	TRANSFERS OUT	
A9950	Transfers to Capital Projects Fund	
.900	Equipment	\$ 55,00
	Total transfers to Capital Projects Fund	55,00
	Total Interfund Transfers	\$ 55,00
TOTAL GENERAL	FUND APPROPRIATIONS	\$ 1,579,5



TOWN OF ALDEN, NEW YORK 2018 PRELIMINARY BUDGET GENERAL FUND - TOWN OUTSIDE THE VILLAGE BUDGET SUMMARY

Budget appropriations		266,393
Less: Estimated revenues Appropriated fund balance		(237,309) (29,084)
Amount to be raised in taxation	<u>\$</u>	
Assessed valuation	\$	436,494,437
Tax rate per \$1,000 assessed valuation	9	\$ 0.000000

TOWN OF ALDEN, NEW YORK 2018 PRELIMINARY BUDGET TOWN OUTSIDE VILLAGE FUND

ESTIMATED REVENUE—DETAIL BY SOURCE

		Preliminary
Account		Budget
Code	Description	2018
	Non-Property Taxes	
B1120	Non-property Tax Distribution by County	\$ 210,059
	Total Real Property Taxes	210,059
	Departmental Income	
B1601	Public Health Fees	1,000
	Total Departmental Income	1,000
	Home and Community Services	
B2110	Zoning Fees	500
	Total Home and Community Services	500
	Use of Money and Property	
B2401	Interest and Earnings	750
	Total Use of Money and Property	750
	Licenses	
B2555	Building and Alteration Permits	25,000
	Total Licenses	25,000
	TOTAL TOWN OUTSIDE VILLAGE	
	FUND REVENUES	<u>\$ 237,309</u>
	Appropriated Fund Balance	
B2799	Appropriated Fund Balance	29,084
	Total Appropriated Fund Balance	29,084
	Total Revenue, Other Financing Sources	
	and Appropriated Fund Balance	\$ 266,393

		Preliminary	
Account		Appropriations	
Code	Description	2018	
	GENERAL GOVERNMENT SUPPORT		
	Law		
B1420			
	Contractual expenses:		
.400	Contractual Services	\$ 3,500	
	Total contractual expenses	3,500	
	Total Law	\$ 3,500	
TOTAL GOVERN	EMENT SUPPORT	<u>\$ 3,500</u>	

		Preliminary
Account		Appropriations
Code	Description	2018
	PUBLIC SAFETY	
	Safety Inspection	
B3620		
20020	Personal services:	
.100	Code Enforcement Officer	\$ 55,853
.106	Clerk/Typist Part-time	14,326
	Total personal services	70,179
	Contractual expenses:	
.401	Office Supplies	700
.403	Printing and Advertising	150
.408	Dues and Subscriptions	100
.412	Training and Education	350
.457	Repairs and Maintenance	1,500
	Total contractual expenses	2,800
	Total Safety Inspection	\$ 72,979
	Hydrants	
B3630		
	Contractual expenses:	
.411	Contractual Services	\$ 14,900
	Total contractual expenses	14,900
	Total Hydrants	\$ 14,900
TOTAL PUBLIC	SAFETY	\$ 87,879

		Preliminary
Account		Appropriations
Code	Description	2018
	HEALTH	
	Ambulance	
B4650		
	Contractual expenses:	
.440	Professional Ambulance Billing	\$ 10,000
.460	Ambulance Certificate	7,500
	Total contractual expenses	17,500
	Total Ambulance - Rescue Squad	\$ 17,500
TOTAL HEALTH		\$ 17,500

		Pro	eliminary
Account		Appı	opriations
Code	Description		2018
	ECONOMIC ASSISTANCE AND OPPORTUNITY		
	Economic Opportunity and Development		
B6989			
	Contractual expenses:		
.411	Contractual Services	\$	21,000
.412	Administrative Fees		3,000
	Total contractual expenses		24,000
	Total Economic Opportunity and Development	\$	24,000
TOTAL ECONOM	IC ASSISTANCE AND OPPORTUNITY	\$	24,000

		<u>Preliminary</u>
Account Code	Description	Appropriations 2018
	HOME AND COMMUNITY SERVICE	CES
	Zoning	
B8010		
	Personal services	
.100	Chairman	\$ 528
.105	Members	1,827
.106	Secretary	528
	Total personal services	2,883
	Contractual expenses:	
.400	Training & Education	250
.401	Office Supplies	200
.403	Printing and Advertising	300
	Total contractual services	750
	Total Zoning	\$ 3,633

		<u>Preliminary</u>
Account Code	Description	Appropriations 2018
	NI	
	Planning	
B8020		
	Personal services	
.120	Chairman	\$ 1,898
.122	Members	6,020
.123	Secretary	1,163
	Total personal services	9,081
	Contractual expenses	
.401	Office Supplies	100
.404	Training and Education	750
.405	Mileage	150
.408	Dues and Subscriptions	300
.409	Engineering	23,750
.411	Updating Zoning Law	2,500
.416	Planning Consultation	1,000
.417	Update Local Law	12,000
	Total contractual services	40,550
	Total Planning	\$ 49,631

		Pr	eliminary
Account Code	Description	Appropriations 2018	
	Drainage		
B8540			
20010	Contractual expenses		
.419	Contractual Services	\$	25,000
.420	Storm Water P.M. Agreements		1,250
	Total contractual services		26,250
	Total Drainage	\$	26,250
TOTAL HOME AND	COMMUNITY SERVICES	\$	79,514
	EMPLOYEE BENEFITS		
	Contractual expenses:		
B9010.800	State Retirement	\$	18,000
B9030.800	Social Security		7,500
B9040.800	Workers' Compensation		10,000
B9060.800	Hospital and Medical Insurance		18,500
	Total contractual expenses		54,000
	Total Employee Benefits	<u>\$</u>	54,000
TOTAL TOWN OUT	SIDE VILLAGE FUND APPROPRIATIONS	\$	266,393



TOWN OF ALDEN, NEW YORK 2018 PRELIMINARY BUDGET HIGHWAY FUND - TOWN OUTSIDE THE VILLAGE BUDGET SUMMARY

Budget appropriations	\$	965,460
Less: Estimated revenues Appropriated fund balance	_	(642,397) (80,000)
Amount to be raised in taxation	<u>\$</u>	243,063
Assessed valuation	\$	436,494,437
Tax rate per \$1,000 assessed valuation		\$ 0.556852

ESTIMATED REVENUE—DETAIL BY SOURCE

		Preliminary
Account Code	Description	Budget 2018
DD1120	Non-Property Tax Items	Φ 450.500
DB1120	Nonproperty Tax Distribution by County	\$ 450,500
	Total Non-Property Tax Items	450,500
	Intergovernmental Charges	
DB2300	Services to Other Governments	100,000
	Total Intergovernmental Charges	100,000
	Use of Money & Property:	
DB2401	Interest and Earnings	1,000
	Total Use of Money & Property	1,000
	Licenses and Permits:	
DB2555	Driveway Repair Permits	500
	Total Licenses and Permits	500
	Sale of Property and Compensated for Loss:	
	Insurance Recoveries	
DB2650	Sale of Scrap	400
	Total Sale of Property and Comp. for Loss	400
	State Aid:	
DB3501	Consolidated Highway Aid	89,997
	Total State Aid	89,997
	TOTAL HIGHWAY FUND REVENUES	\$ 642,397
	Appropriated Fund Balance	
DB2799	Appropriated Fund Balance	80,000
	Total Appropriated Fund Balance	80,000
	Total Revenues and	
	Appropriated Fund Balance	\$ 722,397

			Preliminary
	ount		Appropriations
Co	ode	Description	2018
		TRANSPORTATION	
		General Repairs	
DB5110		•	
		Personal services:	
	.100	Personal services	\$ 84,442
	.105	Longevity	300
		Total personal services	84,742
		Contractual expenses:	
	.431	Gasoline and Oil	12,500
	.433	Resurfacing Materials	88,000
		Total contractual expenses	100,500
		Total General Repairs	\$ 185,242
		Permanent Improvements	
DB5112			
		Personal services	
	.100	Personal services	\$ 28,861
		Total personal services	28,861
		Contractual expenses:	
	.433	Materials and Supplies	46,500
	.449	Materials and Supplies (CHIPS)	63,563
2	449.1000	Materials and Supplies (CHIPS)	26,434
		Total contractual expenses	136,497
		Total Permanent Improvements	\$ 165,358

			Preliminary
Account Code		Description	Appropriations 2018
		M 1:	
		Machinery	
DB5130			4 22 10 5
	.100	Personal services	\$ 33,485
		Total personal services	33,485
		Equipment	
	.225	Equipment	65,000
		Total equipment	65,000
		Contractual expenses:	
	.409	Communication System	2,600
	.424	Repairs and Maintenance	32,640
		Total contractual expenses	35,240
		Total Machinery	\$ 133,725
		Miscellaneous (Brush and Leaves)	
DB5140			
		Personal services	
	.100	Personal services	\$ 23,508
		Total personal services	23,508
		Contractual Expenses:	
	.431	Gasoline and Oil	4,300
	.449	Materials and Supplies	3,800
		Total contractual expenses	8,100
		Total Miscellaneous (Brush and Leaves)	\$ 31,608

		Pr	eliminary
Account Code	Description	App	ropriations 2018
	Snow Removal		
DB5142			
	Personal services		
.100	Personal services	\$	98,970
	Total personal services		98,970
	Contractual Expenses:		
.431	Gasoline and Oil		20,000
.449	Materials and Supplies (Salt, Plows, Chains)		158,000
	Total contractual expenses		178,000
	Total Snow Removal	\$	276,970
TOTAL TRANSPOR	TATION	<u>\$</u>	792,903
	EMPLOYEE BENEFITS		
DB1930.400	Judgments & Claims	\$	5,000
DB1935.400	Tax Cancellations		57
DB9010.800	State Retirement		45,000
DB9030.800	Social Security		20,500
DB9040.800	Workers' Compensation		42,000
DB9050.800	Unemployment Insurance		4,000
DB9060.800	Hospital and Medical Insurance		56,000
	Total Employee Benefits	<u>\$</u>	172,557
TOTAL HIGHWAY	FUND APPROPRIATIONS	\$	965,460



		Preliminary
Account		Appropriations
Code	Description	2018
	Fire Protection District	
Appropriation	ns:	
SF3410		
	Contractual Expenses:	
.400	Liability Insurance	\$ 40,000
.401	Village of Alden Fire Co.	147,260
.402	Millgrove Fire Co.	147,260
.403	Crittenden Fire Co.	147,260
.404	Townline Fire Co.	147,260
.417	Tax Cancellations and Refunds	180
.418	Fireman Training	5,000
	Total contractual expenses	634,220
	Miscellaneous Contractual Expenses:	
9010.800	Service Award Program	130,000
9010.801	Service Award Program Village of Alden	12,000
	Total miscellaneous contractual expenses	142,000
Total Fire Pro	otection District Appropriations	776,220
Estimated Re	venues:	
SF2401	Interest and Earnings	125
Total Fire Pro	otection District Estimated Revenues	125
Appropriated	fund balance	10,000
Amount to be	e raised by taxation	<u>\$ 766,095</u>
Taxable valua	ation	\$ 464,297,891
Tax rate per \$1,000 taxable valuation \$1.6500		\$ 1.650007

		1	Preliminary	
Account		$\overline{\mathbf{A_{l}}}$	Appropriations 2018	
Code	Description			
	Consolidated Lighting Distri	ict		
Appropriation	ns:			
SL5182				
	Contractual Expenses:			
.411	Lighting Contracts	\$	80,500	
.413	Tax Cancellations		19	
	Total contractual expenses		80,519	
Total Consoli	dated Lighting District Appropriations		80,519	
Estimated Re	venues:			
SL2401	Interest and Earnings		250	
Total Consol	idated Lighting District Estimated Revenues		250	
Appropriated	fund balance		5,000	
Amount to b	e raised by taxation	<u>\$</u>	75,269	
Taxable valua	ation	\$	457,575,564	
Tax rate per \$	51,000 taxable valuation		\$ 0.164495	

		Pı	eliminary
Account		Арр	ropriations
Code	Description		2018
	Periwinkle Lighting Distric	et	
Appropriation	18:		
SL15182			
	Contractual Expenses:		
.410	Periwinkle	\$	600
	Total contractual expenses		600
Total Periwin	kle Lighting District Appropriations		600
Total Consol	idated Lighting District Estimated Revenues		
Appropriated	fund balance		
Amount to be	e raised by taxation	<u>\$</u>	600
Taxable valua	tion	\$	9,519,500
Tax rate per \$	1,000 taxable valuation	\$	0.063029

		Pr	eliminary
Account		App	ropriations
Code	Description	2018	
	Refuse Collection District		
Appropriation	is:		
SR8160			
	Contractual Expenses:		
.400	Refuse Collection	\$	448,000
.435	Tax Cancellations and Refunds		1,000
	Total contractual expenses		449,000
Total Refuse (Collection District Appropriations		449,000
Estimated Rev	venues:		
SR2130	Refuse & Garage Charges		500
SR2401	Interest and Earnings		500
Total Refuse (Collection District Estimated Revenues		1,000
Appropriated	fund balance		15,000
Amount to be	e raised by taxation	\$	433,000
Number of un	its		2,517
Rate per unit		\$ 1	72.030195

		Prel	iminary
Account		Appro	opriations
Code	Description	2018	
	Sewer District No. 1 Alden Industrial Park		
Appropriatio	ns:		
SI8130			
	Contractual Expenses:		
.402	ECSD No. 4 Charges	\$	6,384
	Total contractual expenses		6,384
Total Sewer	District No. 1 Appropriations		6,384
Estimated Re	venues:		
SI2401	Interest and Earnings		50
Total Sewer I	District No. 1 Estimated Revenues		50
Appropriated	fund balance		3,000
Amount to b	e raised by taxation	\$	3,334

		Preliminary
Account		Appropriations
Code	Description	2018
	Sewer District No. 2	
Appropriation	ns:	
SA8130		
	Contractual Expenses:	
.400	Long Term Maintenance	5,000
.401	Administrative	1,000
.407	Gas	750
.408	Electric	3,800
.409	Water	300
.411	Plant Operation	23,461
.419	Other Unclassified Supplies	1,000
.429	Repairs	4,000
.440	SPEDES	425
.442	Sludge Hauling	5,100
	Total contractual expenses	44,836
Total Sewer I	District No. 2 Appropriations	44,836
Estimated Rev	venues:	
SA2401	Interest and Earnings	50
Total Sewer I	District No. 2 Estimated Revenues	50
Appropriated:	fund balance	
Amount to be	e raised by taxation	<u>\$ 44,786</u>
Number of lot	S	59
Rate per lot		\$ 759.084746

		Preli	minary	
Account		Appropriations		
Code	Description	2	2018	
	Water District No. 1			
Appropriation	18:			
WA8389				
	Contractual Expenses:			
.411	Water Transmission	\$	4,700	
.414	Hydrant Rentals		4,000	
	Total contractual expenses		8,700	
Total Water	District No. 1 Appropriations		8,700	
Estimated Rev	venues:			
WA2401	Interest and Earnings		50	
Total Water	District No. 1 Estimated Revenues		50	
Appropriated	fund balance		2,000	
Amount to be	e raised by taxation	\$	6,650	

		Preliminary
Account		Appropriations
Code	Description	2018
	Water District Zoeller Road	
Appropriation	as:	
WZ8389		
	Contractual Expenses:	
.414	Hydrant Rentals	\$ 1,126
	Total contractual expenses	1,126
	Indebtedness	
WZ9730.6	Principal on Indebtedness	6,498
WZ9730.7	Interest on Indebtedness	14,243
		20,741
Total Water	District Zoeller Road Appropriations	21,867
Total Water	District Zoeller Road Estimated Revenues	
Appropriated	fund balance	
Amount to be	e raised by taxation	\$ 21,867

		Pre	liminary
Account		Appr	opriations
Code	Description	2018	
	Water District Exchange Street		
Appropriation	ıs:		
WX8389			
	Contractual Expenses:		
.414	Hydrant Rentals	\$	1,930
	Total contractual expenses		1,930
	Indebtedness		
WX9730.6	Principal on Indebtedness		6,953
WX9730.7	Interest on Indebtedness		19,018
			25,971
Total Water	District Exchange Street Appropriations		27,901
Total Water	District Exchange Street Estimated Revenues		
Appropriated :	fund balance		
Amount to be	e raised by taxation	\$	27,901

		Preliminary
Account		Appropriations
Code	Description	2018
	Out-of-District	
Appropriatio	ons:	
WO8389		
	Contractual Expenses:	
.401	Town of Newstead (Water District No.5)	\$ 4,900
.402	Town of Newstead (Water District No.9)	130
	Total contractual expenses	5,030
Total Out-of	f-District - Water Appropriations	5,030
Total Out-of	f-District - Water Estimated Revenues	
Appropriated	fund balance	
Amount to b	e raised by taxation	<u>\$ 5,030</u>
Out-of-Distric	et:	
Town of Ne	wstead Water District No. 5	4,900
Town of Ne	wstead Water District No. 9	130
		\$ 5,030

		Pre	eliminary	
Account		Appi	ropriations	
Code	Description		2018	
	Consolidated Water District (Formerly 2,3,4)			
Appropriation WR8389	s:			
W K0309	Contractual Expenses:			
.414	Hydrant Rentals	\$	63,685	
	Total contractual expenses		63,685	
	Interfund Transfers			
WR9710.600	Debt Service - Serial Bond Principal		35,000	
WR9710.700	Debt Service - Serial Bond Interest		17,194	
	Total Interfund Transfers		52,194	
Total Consolid	lated Water District Appropriations	\$	115,879	
Total Consolid	lated Water District Estimated Revenues			
Appropriated f	und balance		23,700	
Amount to be	raised by taxation	\$	92,179	



TOWN OF ALDEN, NEW YORK 2018 PRELIMINARY BUDGET DEBT STATEMENT

	Year of Issue	Interest Rate	Original Issue Amount	Final Maturity	Interest Due 2018	Outstanding 01/01/2017	Issued	Projected Redemption 2017	Projected Outstanding 12/31/2017	Projected Redemption 2018
Water District Bonds:										
Water District No. 4	2010	2.50%	720,000	2030	\$ 18,201	\$ 490,000	\$ -	\$ 35,000	\$ 455,000	\$ 35,000
Water District Zoeller Road	2017	3.39%	286,498	2045	14,242	-	286,498	-	286,498	6,498
Water District Exchange Street	2017	3.39%	381,953	2045	19,017		381,953		381,953	6,953
Total BAN's & Bonds						\$ 490,000	\$668,451	\$ 35,000	\$1,123,451	



TOWN OF ALDEN, NEW YORK
2018 PRELIMINARY BUDGET
ESTIMATED FUND BALANCE AT DECEMBER 31, 2017

	Av Funo <u>Janu</u>	Available Fund Balance January 1, 2017	Pr Func <u>Activ</u>	Projected Fund Balance Activity - 2017	<u>De</u>	Estimated Fund Balance December 31, 2017	Ap Fu	Appropriated Fund Balance <u>for 2018</u>
General Fund	⇔	1,290,438	\$	212,000	\$	1,078,438	⇔	227,000
General Fund—Town Outside Village		261,169		13,935		247,234		29,084
Highway Fund—Town Outside Village		370,727		95,000		275,727		80,000
Fire Protection District		105,404		10,000		95,404		10,000
Consolidated Lighting District		40,902		5,000		35,902		5,000
Periwinkle Lighting District		3,002		ı		3,002		ı
Refuse Collection District		100,335		10,000		90,335		15,000
Sewer District No. 1		30,951		3,000		27,951		3,000
Sewer District No. 2		57,774		ı		57,774		ı
Water District No. 1		22,779		2,000		20,779		2,000
Consolidated Water District (formerly 2,3,4)		62,877		23,700		39,177		23,700
Water District No. 5		29		ı		29		ı



TOWN OF ALDEN, NEW YORK 2018 PRELIMINARY BUDGET SCHEDULE OF SALARIES OF ELECTED TOWN OFFICIALS

Councilman	\$ 13,461
Councilman	13,461
Town Justice	25,291
Town Justice	25,291
Supervisor	24,000
Town Clerk	47,288
Superintendent of Highways	57,253



APPENDIX A ASSESSOR'S EXEMPTION IMPACT REPORT

NYS - Real Property System County of Erie Town of Alden - 1420

Assessor's Report - 2017 - Current Year File S495 Exemption Impact Report Town Summary

RPS221/V04/L001

Date/Time - 9/19/2017 08:54:07

Total Assessed Value 873,926,110

Uniform Percentage 100.00

Equalized Total Assessed Value 873,926,110

Percent of Value 90.0 0.03 0.05 0.00 0.01 0.05 0.30 2.90 0.07 0.04 0.91 0.21 0.11 0.62 0.67 0.01 0.40 0.00 0.00 0.03 8.56 0.01 Exempted 0.01 Total Equalized Value of Exemptions 960,400 220,000 65,800 340,000 248,000 1,725 87,450 88,250 97,750 1,500 12,000 600,000 7,991,000 482,600 1,814,300 400,000 3,000,000 74,783,000 3,166,300 2,632,600 25,322,600 5,380,737 5,897,826 6,447,300 3,479,789 130,640,000 414,185 Number of Exemptions 14 10 256 7 167 67 RPTL 466-c, d, e, & g MC K UCON L 7421 **REPTL 404(1)** RPTL 406(1) RPTL 464(2) RPTL 458(1) **RATL 458(5) RETL 406(1)** RPTL 406(2) RPTL 406(1) RPTL 412-a RPTL 420-a RPTL 420-a RPTL 458-a RPTL 458-a RPTL 458-a RPTL 458-a RPTL 458-a **RPTL 420-a** RPTL 458-a RPTL 408 **3PTL 412** RPTL 446 **3PTL 446 RPTL 422** RPTL 462 RPTL 460 Statutory Authority NONPROF CORP - EDUCL(CONST PR RES OF CLERGY - RELIG CORP OWN NONPROF CORP - RELIGICONST PR NONPROF CORP - CHAR (CONST PR NOT-FOR-PROFIT HOUS CO - HOSTE ALT VET EX-WAR PERIOD-NON-COMI ALT VET EX-WAR PERIOD-NON-COMI MUNICIPAL INDUSTRIAL DEV AGENC PRIVATELY OWNED CEMETERY LANI VOLUNTEER FIREFIGHTERS AND AM VETS EX BASED ON ELIGIBLE FUND NYS MED CARE FACILITY FIN AGEN NC VOLUNTEER FIRE CO OR DEPT VET PRO RATA: FULL VALUE ASSMT ALT VET EX-WAR PERIOD-COMBAT ALT VET EX-WAR PERIOD-COMBAT ALT VET EX-WAR PERIOD-DISABILI ALT VET EX-WAR PERIOD-DISABILI **FOWN O/S LIMITS - SPECIFIED US** PUBLIC AUTHORITY - STATE **FOWN - CEMETERY LAND FOWN - GENERALLY** SCHOOL DISTRICT NYS - GENERALLY **VG - GENERALLY** CO - GENERALLY Exemption Name Exemption 12100 25110 25120 12450 13510 13573 3650 3800 18020 21600 25130 26400 27350 28540 12350 13100 13500 41101 41120 41130 41140 41111 41121 41131 41141 41400 41683

NYS - Real Property System County of Erie Town of Alden - 1420

Assessor's Report - 2017 - Current Year File S495 Exemption Impact Report Town Summary

RPS221/V04/L001

Date/Time - 9/19/2017 08:54:07

Total Assessed Value 873,926,110

Uniform Percentage 100.00

Equalized Total Assessed Value 873,926,110

Exemption	Exemption	Statutory	Nimbor of	Total Equalizad Value	
Code	Name	Authority	Exemptions	of Exemptions	Fercent or value Exempted
41700	AGRICULTURAL BUILDING	RPTL 483	4	512,669	0.06
41720	AGRICULTURAL DISTRICT	AG-MKTS L 305	78	2,577,236	0.29
41730	AGRIC LAND-INDIV NOT IN AG DIS	AG MKTS L 306	2	103,613	0.01
41800	PERSONS AGE 65 OR OVER	RPTL 467	88	5,738,377	0.66
41801	PERSONS AGE 65 OR OVER	RPTL 467	-	6,755	0.00
41803	PERSONS AGE 65 OR OVER	RPTL 467	158	6,890,553	0.79
41930	DISABILITIES AND LIMITED INCOM	RPTL 459-c	œ	415,750	0.05
41931	DISABILITIES AND LIMITED INCOM	RPTL 459-c	4	295,000	0.03
41933	DISABILITIES AND LIMITED INCOM	RPTL 459-c	က	292,286	0.03
47611	BUSINESS INVESTMENT PROPERTY	RPTL 485-b	2	312,680	0.04
Total Evennet	Total Examplians Evolusius of				
System Exemptions:	notions:		1,015	291.720.031	33.38
Total System	Total System Exemptions:		0	0	0.00
Totals:			1,015	291,720,031	33.38

Values have been equalized using the Uniform Percentage of Value. The Exempt amounts do not take into consideration, payments in lieu of taxes or other payments for municipal services.

Amount, if any, attributable to payments in lieu of taxes:



Rating Action: Moody's upgrades Alden NY GO to Aa3

Global Credit Research - 07 Feb 2018

New York, February 07, 2018 -- Moody's Investors Service has upgraded the rating of Alden, New York's outstanding general obligation (GOLT) debt as well as the town's Issuer Rating to Aa3 from A1. The Issuer Rating is equivalent to the General Obligation Unlimited Tax (GOULT) rating we would assign to GOULT debt of the issue; the limited tax rating is at the same level. This concludes the review that was initiated on January 2, 2018 due to lack of audited fiscal 2016 financial information. Audited financial information for fiscal 2016 has since been received. The bonds are secured by the town's ad valorem tax pledge as limited by the Property Tax Cap - Legislation (Chapter 97 (Part A) of the Laws of the State of New York, 2011).

RATINGS RATIONALE

The upgrade to Aa3 reflects the town's multi-year trend of strong operating performance which supports strong liquidity and reserve levels. The Aa3 rating additionally reflects the town's modest tax base average resident wealth and incomes and low debt and pension burdens.

RATING OUTLOOK

Moody's does not usually assign outlooks to local government credits with this amount of debt outstanding.

FACTORS THAT COULD LEAD TO AN UPGRADE

Material growth and diversification of the taxable base

Diversification of revenue streams

FACTORS THAT COULD LEAD TO A DOWNGRADE

Deterioration of financial position

Tax base contraction

LEGAL SECURITY

The bonds are secured by the town's ad valorem tax pledge as limited by the Property Tax Cap - Legislation (Chapter 97 (Part A) of the Laws of the State of New York, 2011)

PROFILE

Alden is located in northeastern Erie County (A2 stable) in western New York, approximately 20 miles east of City of Buffalo (A1 positive). Alden has a population of 10,382.

RATING METHODOLOGY

The principal methodology used in this rating was US Local Government General Obligation Debt published in December 2016. Please see the Rating Methodologies page on www.moodys.com for a copy of this methodology.

REGULATORY DISCLOSURES

For ratings issued on a program, series or category/class of debt, this announcement provides certain regulatory disclosures in relation to each rating of a subsequently issued bond or note of the same series or category/class of debt or pursuant to a program for which the ratings are derived exclusively from existing ratings in accordance with Moody's rating practices. For ratings issued on a support provider, this announcement provides certain regulatory disclosures in relation to the credit rating action on the support provider and in relation to each particular credit rating action for securities that derive their credit ratings from the support provider's credit rating. For provisional ratings, this announcement provides certain regulatory disclosures in relation to the provisional rating assigned, and in relation to a definitive rating that may be

TOWN OF ALDEN, NEW YORK

Basic Financial Statements, Required Supplementary Information and Supplementary Information for the Year Ended December 31, 2017 and Independent Auditors' Reports

TOWN OF ALDEN, NEW YORK Table of Contents

Year Ended December 31, 2017

<u>F</u>	Page
Independent Auditors' Report	1
Management's Discussion and Analysis	4
Basic Financial Statements:	
Government-wide Financial Statements:	
Statement of Net Position	12
Statement of Activities	13
Fund Financial Statements:	
Balance Sheet—Governmental Funds	14
Reconciliation of the Balance Sheet—Governmental Funds to the Government-wide Statement of Net Position	15
Statement of Revenues, Expenditures, and Changes in Fund Balances (Deficit)—Governmental Funds	16
Reconciliation of the Statement of Revenues, Expenditures, and Changes in Fund Balances—Governmental Funds to the Government-wide Statement of Activities	17
Statement of Net Position—Agency Fund	18
Notes to the Financial Statements	19
Required Supplementary Information:	
Schedule of the Town's Proportionate Share of the Net Pension Liability— Employees' Retirement System	43
Schedule of Town's Contributions—Employees' Retirement System	44
Schedule of Revenues, Expenditures, and Changes in Fund Balances— Budget and Actual—General Fund	45
Schedule of Revenues, Expenditures, and Changes in Fund Balances— Budget and Actual—General—Part-Town Fund	46
(continu	ued)

TOWN OF ALDEN, NEW YORK Table of Contents

Year Ended December 31, 2017

(concluded)
Schedule of Revenues, Expenditures, and Changes in Fund Balances— Budget and Actual—Highway—Part-Town Fund
Schedule of Revenues, Expenditures, and Changes in Fund Balances— Budget and Actual—Fire Protection Fund
Schedule of Revenues, Expenditures, and Changes in Fund Balances— Budget and Actual—Refuse Collection Fund
Note to the Required Supplementary Information
Supplementary Information:
Combining Balance Sheet—Nonmajor Governmental Funds
Combining Statement of Revenues, Expenditures, and Changes in Fund Balances—Nonmajor Governmental Funds
Independent Auditors' Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with Government Auditing Standards
Schedule of Findings

Drescher & Malecki LLP

3083 William Street, Suite 5 Buffalo, New York 14227 Telephone: 716.565.2299

Fax: 716.565.2201



Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

The Honorable Town Board of the Town of Alden, New York:

Report on the Financial Statements

We have audited the accompanying financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of the Town of Alden, New York (the "Town"), as of and for the year ended December 31, 2017, and the related notes to the financial statements, which collectively comprise the Town's basic financial statements as listed in the table of contents.

Management's Responsibility for the Financial Statements

The Town's management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express opinions on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

Opinions

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the governmental activities, each major fund, and the aggregate remaining fund information of the Town, as of December 31, 2017, and the respective changes in financial position thereof for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Required Supplementary Information

Accounting principles generally accepted in the United States of America require that the Management's Discussion and Analysis and other Required Supplementary Information, as listed in the table of contents, be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

Other Information

Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the Town's basic financial statements. The Supplementary Information, as listed in the table of contents, is presented for the purpose of additional analysis and is not a required part of the basic financial statements.

The Supplementary Information, as listed in the table of contents, is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the Supplementary Information, as listed in the table of contents, is fairly stated, in all material respects, in relation to the basic financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued our report dated February 28, 2018 on our consideration of the Town's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering the Town's internal control over financial reporting and compliance.

AND INCH BULL

February 28, 2018

TOWN OF ALDEN, NEW YORK Management's Discussion and Analysis Year Ended December 31, 2017

As management of the Town of Alden, New York (the "Town"), we offer readers of the Town's financial statements this narrative overview and analysis of the financial activities for the fiscal year ended December 31, 2017. This document should be read in conjunction with additional information that we have furnished in the Town's financial statements, which follow this narrative. For comparative purposes, certain items from the prior year have been reclassified to conform with the current year presentation.

Financial Highlights

- The assets and deferred outflows of resources of the Town exceeded its liabilities and deferred inflows of resources at the close of the most recent fiscal year by \$6,044,734 (net position). This consists of \$4,691,926 net investment in capital assets and an unrestricted net position of \$1,352,808.
- The Town's net position increased \$219,130 during the year ended December 31, 2017.
- At the close of the current fiscal year, the Town's governmental funds reported a combined ending fund balance of \$3,421,405, an increase of \$1,015,365 in comparison with the prior year's fund balance of \$2,406,040. A large part of the increase, \$668,451, is attributed to proceeds from the issuance of bonds.
- At the end of the current fiscal year, unassigned fund balance for the General Fund was \$960,574, or approximately 69.3 percent of General Fund expenditures and transfers out. This total amount is available for spending at the Town's discretion and constitutes approximately 54.5 percent of the General Fund's total fund balance of \$1,763,309 at December 31, 2017.
- The Town's total bonded indebtedness increased \$633,451 as a result of the issuance of public improvement serial bonds of \$668,451 offset by scheduled principal payments of \$35,000.

Overview of the Financial Statements

The discussion and analysis provided here are intended to serve as an introduction to the Town's basic financial statements. The Town's basic financial statements comprise three components: 1) government-wide financial statements, 2) fund financial statements, and 3) notes to the financial statements. This report also contains other supplementary information in addition to the basic financial statements themselves.

Government-wide financial statements—The government-wide financial statements are designed to provide readers with a broad overview of the Town's finances, in a manner similar to a private-sector business.

The statement of net position presents information on all of the Town's assets, liabilities, and deferred inflows/outflows of resources, with the difference reported as net position. Over time, increases or decreases in net position may serve as a useful indicator of whether the financial position of the Town is improving or deteriorating.

The statement of activities presents information showing how the Town's net position changed during the most recent fiscal year. All changes in net position are reported as soon as the underlying event giving rise to the change occurs, regardless of the timing of related cash flows. Thus, revenues and expenses are reported in this statement for some items that will only result in cash flows in future fiscal periods (e.g., earned but unused vacation leave).

Both of the government-wide financial statements distinguish functions of the Town that are principally supported by taxes and intergovernmental revenues (governmental activities) from other functions that are intended to recover all, or a significant portion, of their costs through user fees and charges (business-type activities). The governmental activities of the Town include general government support, public safety, health, transportation, economic assistance and opportunity, culture and recreation, home and community services, and interest and other fiscal charges. The Town does not engage in any business-type activities.

The government-wide financial statements can be found on pages 12-13 of this report.

Fund financial statements—A fund is a grouping of related accounts that is used to maintain control over resources that have been segregated for specific activities or objectives. The Town, like other state and local governments, uses fund accounting to ensure and demonstrate compliance with finance-related legal requirements. All of the funds of the Town can be divided into two categories: governmental funds and fiduciary funds.

Governmental funds—Governmental funds are used to account for essentially the same functions reported as governmental activities in the government-wide financial statements. However, unlike the government-wide financial statements focus on near-term inflows and outflows of spendable resources, as well as on balances of spendable resources available at the end of the fiscal year. Such information may be useful in evaluating a government's near-term financing requirements.

Because the focus of governmental funds is narrower than that of the government-wide financial statements, it is useful to compare the information presented for *governmental funds* with similar information presented for *governmental activities* in the government-wide financial statements. By doing so, readers may better understand the long-term impact of the government's near-term financing decisions. Both the governmental funds' balance sheet and the governmental funds' statement of revenues, expenditures, and changes in fund balances provide a reconciliation to facilitate this comparison between *governmental funds* and *governmental activities*.

The Town maintains sixteen individual governmental funds. Information is presented separately in the governmental funds' balance sheet and in the governmental funds' statement of revenues, expenditures, and changes in fund balances for the General Fund, General—Part-Town Fund, Highway—Part-Town Fund, Grant Fund, Fire Protection Fund, Refuse Collection Fund, and Capital Projects Fund, which are considered to be major funds. Data from the other nine funds are combined into a single aggregated presentation. Individual fund data for each of these nonmajor governmental funds is provided in the form of combining statements in the Supplementary Information section of this report.

The basic governmental fund financial statements can be found on pages 14-17 of this report.

Fiduciary funds—Fiduciary funds are used to account for resources held for the benefit of parties outside the Town. Fiduciary funds are *not* reflected in the government-wide financial statements because the resources of those funds are *not* available to support the Town's own programs. The Town maintains one type of fiduciary fund, the Agency Fund. The Agency Fund reports resources held by the Town in custodial capacity for individuals, private organizations and other governments.

The fiduciary fund financial statement can be found on page 18 of this report.

Notes to the financial statements—The notes provide additional information that is essential to a full understanding of the data provided in the government-wide and fund financial statements. The notes to the financial statements can be found on pages 19-42 of this report.

Other information—In addition to the basic financial statements and accompanying notes, this report also presents certain *required supplementary information* concerning the Town's net pension liability and budgetary comparison for the General Fund, General—Part-Town Fund, Highway—Part-Town Fund, Fire Protection Fund, and Refuse Collection Fund. Required Supplementary Information and a related note to the required supplementary information can be found on pages 43-50 of this report.

Other supplementary information is presented immediately following the Required Supplementary Information in the Supplementary Information of this report on pages 51-52 of this report.

Government-wide Financial Analysis

As noted earlier, net position over time may serve as a useful indicator of a government's financial position. In the case of the Town's primary government, assets and deferred outflows of resources exceeded liabilities and deferred inflows of resources by \$6,044,734 at the close of the most recent fiscal year, as compared to \$5,825,604 (as restated) at the close of the fiscal year ended December 31, 2016.

Table 1, shown below, presents a condensed statement of net position compared to the prior year.

Table 1—Condensed Statements of Net Position—Primary Government

	 Governmen	tal A	Activities
	 Decem	ber	31,
			2016
	 2017	_(a	s restated)
Current assets	\$ 3,584,546	\$	3,270,892
Capital assets	 5,815,377		5,820,408
Total assets	 9,399,923		9,091,300
Deferred outflows of resources	 213,180		343,087
Current liabilities	187,511		871,079
Noncurrent liabilities	 3,344,150		2,695,102
Total liabilities	 3,531,661		3,566,181
Deferred inflows of resources	 36,708		42,602
Net position:			
Net investment in capital assets	4,691,926		4,580,408
Unrestricted	 1,352,808		1,245,196
Total net position	\$ 6,044,734	\$	5,825,604

The largest portion of the Town's net position, \$4,691,926, reflects its investment in capital assets (e.g. land, buildings, improvements and equipment), less any related outstanding debt used to acquire those assets. The Town uses these capital assets to provide a variety of services to citizens; consequently, these assets are not available for future spending. Although the Town's investment in capital assets is reported net of related debt, it should be noted that the resources to repay this debt must be provided from other sources, since the capital assets themselves cannot be used to liquidate these liabilities.

Unrestricted net position of \$1,352,808 represents resources that may be used to meet the Town's ongoing operations.

Table 2, as presented below, shows the changes in net position for the years ended December 31, 2017 and December 31, 2016.

Table 2—Condensed Statements of Changes in Net Position—Primary Government

		Governmen	tal A	Activities
		Year Ended	Dec	ember 31,
				2016
		2017	(2	as restated)
Program revenues:				
Charges for services	\$	324,243	\$	320,483
Operating grants and contributions		116,665		94,492
General revenues		3,745,447	_	3,693,787
Total revenues	_	4,186,355		4,108,762
Program expenses	_	3,967,225		3,675,797
Change in net position		219,130		432,965
Net position—beginning		5,825,604		7,262,831
Restatement				(1,870,192)
Net position—ending	\$	6,044,734	<u>\$</u>	5,825,604

Overall revenues increased 1.9 percent from the prior year, due primarily to an increase in miscellaneous revenue related to refunds of prior year expenditures, taxes, and operating grants and contributions revenue received during the year ended December 31, 2017. Total expenses increased 7.3 percent from the prior year, which is primarily attributed to the increase in costs related to transportation, general governmental support, and culture and recreation expenses.

A summary of sources of revenues for the years ended December 31, 2017 and 2016 is presented in Table 3 below.

Table 3—Summary of Sources of Revenues—Primary Government

	Y	ear Ended l	Dec	ember 31,	Increase/(Decrease)		
		2017		2016		Dollars	Percent (%)
Charges for services	\$	324,243	\$	320,483	\$	3,760	1.2
Operating grants and contributions		116,665		94,492		22,173	23.5
Property taxes and other tax items		3,457,066		3,409,915		47,151	1.4
Use of money and property		20,960		13,177		7,783	59.1
Miscellaneous		43,117		108		43,009	n/a
Federal aid		85		-		85	n/a
Unrestricted state aid		224,219		270,587		(46,368)	(17.1)
Total revenues	\$	4,186,355	\$	4,108,762	\$	77,593	1.9

The most significant sources of revenues for the year ended December 31, 2017 were property taxes and other tax items of \$3,457,066, or 82.6 percent of total revenues, charges for services of \$324,243, or 7.7 percent of total revenues, and unrestricted state aid of \$224,219, or 5.4 percent of total revenues.

Similarly, for the year ended December 31, 2016, the most significant sources of revenues were property taxes and other tax items of \$3,409,915, or 83.0 percent of total revenues, charges for services of \$320,483, or 7.8 percent of total revenues, and unrestricted state aid of \$270,587, or 6.6 percent of total revenues

A summary of program expenses for the years ended December 31, 2017 and 2016 is presented below in Table 4.

Table 4—Summary of Program Expenses—Primary Government

	Y	ear Ended	Dec	ember 31,	 Increase/(Decrease)		
		2017		2016	 Dollars	Percent (%)	
General government support	\$	795,033	\$	713,048	\$ 81,985	11.5	
Public safety		908,300		969,232	(60,932)	(6.3)	
Health		1,188		1,108	80	7.2	
Transportation		972,155		879,257	92,898	10.6	
Economic assistance and opportunity		77,353		59,497	17,856	30.0	
Culture and recreation		381,654		307,100	74,554	24.3	
Home and community services		774,116		717,643	56,473	7.9	
Interest and other fiscal charges		57,426		30,300	 27,126	89.5	
Total program expenses	\$	3,967,225	\$	3,677,185	\$ 290,040	7.9	

The Town's most significant expense items for the year ended December 31, 2017 were transportation of \$972,155, or 24.5 percent of total expenses, public safety of \$972,155, or 22.9 percent of total expenses, general governmental support of \$795,033, or 20.0 percent of total expenses, and home and community services of \$774,116, or 19.5 percent of total expenses. For the year ended December 31, 2016, the most significant expense items were public safety of \$969,232, or 26.4 percent of total expenses, transportation of \$879,257, or 23.9 percent of total expenses, home and community support of \$717,643, or 19.5 percent of total expenses, and general government support of \$713,048, or 19.4 percent of total expenses.

Financial Analysis of Governmental Funds

As noted earlier, the Town uses fund accounting to ensure and demonstrate compliance with finance-related legal requirements.

Governmental funds—The focus of the Town's governmental funds is to provide information on near-term inflows, outflows, and balances of spendable resources. Such information is useful in assessing the Town's financing requirements. In particular, unassigned fund balance may serve as a useful measure of a government's net resources available for discretionary use as they represent the portion of fund balance which has not yet been limited to use for a particular purpose by an external party, the Town itself, or a group of individuals that has been delegated authority to assign resources for use for particular purposes by the Town Board.

At December 31, 2017, the Town's governmental funds reported combined ending fund balances of \$3,421,405, an increase of \$1,015,365 from the prior year fund balance of \$2,406,040. Approximately 28.1 percent, \$960,574 of this amount constitutes *unassigned fund balance* which is available for spending at the Town's discretion. The remainder of fund balance is either *nonspendable* or *assigned* to indicate that it is: (1) not in spendable form, \$25,299, or (2) assigned for particular purposes, \$2,425,532.

The General Fund is the chief operating fund of the Town. At the end of the current fiscal year, unassigned fund balance of the General Fund was \$960,574, while total fund balance increased to

\$1,763,309. As a measure of the General Fund's liquidity, it may be useful to compare both the unassigned fund balance and the total fund balance to total General Fund expenditures and transfers out. Unassigned fund balance represents approximately 69.3 percent of total General Fund expenditures and transfers out, while total fund balance represents approximately 127.2 percent of that same amount.

The Town's General—Part-Town Fund ending fund balance was \$381,281. Approximately 99.4 percent, or \$378,948, of this amount is reported as fund balance assigned for subsequent year's expenditures, encumbrances, capital projects, and specific (General—Part-Town Fund) use. During the year ended December 31, 2017, the General—Part-Town Fund fund balance increased \$117,373 primarily due to an increase in non-property tax revenue allocated to the fund, coupled with less than anticipated home and community services expenditures.

The Town's Highway—Part-Town Fund ending fund balance was \$777,911. Approximately 99.0 percent, or \$769,983, of this amount is reported as fund balance assigned for subsequent year's expenditures, capital projects, and specific (Highway—Part-Town Fund) use. During the year ended December 31, 2017, the Highway—Part-Town Fund fund balance increased \$123,399 mainly due to less than anticipated transportation expenditures.

The Town's Grant Fund reported no ending fund balance. During the year ended December 31, 2017, the Grant Fund fund balance did not change from the prior year as qualifying expenditures are funded through corresponding State and Federal aid revenue.

The Town's Fire Protection Fund ending fund balance was \$120,020. This total amount is reported as fund balance assigned for subsequent year's expenditures and specific (Fire Protection Fund) use. During the year ended December 31, 2017, the Fire Protection Fund fund balance increased \$10,579 as a result of less than anticipated public safety and employee benefits expenditures.

The Town's Refuse Collection Fund ending fund balance was \$138,638. This total amount is reported as fund balance assigned for subsequent year's expenditures and specific (Refuse Collection Fund) use. During the year ended December 31, 2017, the Refuse Collection Fund fund balance increased by \$13,554.

The Town's Capital Projects Fund ending fund balance increased \$813,561 from the prior year, eliminating the prior year fund balance deficit. The increase was primarily due to the conversion of bond anticipation notes to long-term debt.

General Fund Budgetary Highlights

The Town's General Fund budget generally contains budget amendments during the year. The budget is allowed to be amended upward (increased) for prior year's encumbrances since the funds were allocated under the previous year's budget, and the Town has appropriately assigned an equal amount of fund balance at year-end for this purpose. Furthermore, the budget is allowed to be amended upward (increased) for additional current year appropriations supported by an increase in budgeted revenues. A budgetary comparison schedule within the required supplementary information section of this report has been provided to demonstrate compliance with their budget.

A summary of the General Fund results of operations for the year ended December 31, 2017 is presented on the following page in Table 5.

Table 5—General Fund Budget

	Budgeted	Amounts		Variance with
	Original	Final	Actual	Final Budget
Revenues	\$ 1,319,426	\$ 1,319,426	\$ 1,411,337	\$ 91,911
Expenditures and other financing uses	1,540,976	1,568,736	1,386,381	182,355
Excess (deficiency) of revenues over				
expenditures and other financing uses	<u>\$ (221,550)</u>	\$ (249,310)	\$ 24,956	\$ 274,266

Original budget compared to final budget—During the year, the budget is modified, primarily to reflect changes in anticipated revenues and expenditures.

Final budget compared to actual results—A review of actual revenues and expenditures compared to the estimated revenues and appropriations in the final budget yields positive variances. Actual amounts exceeded estimated revenues by \$91,911 which is attributed primarily to higher than anticipated state aid as well as fines and forfeitures. The \$182,355 favorable variance in actual expenditures and other financing uses compared to budgeted appropriations is primarily due to positive variances of \$73,426 in general government support expenditures, \$55,000 in transfers out, and \$31,563 in employee benefit expenditures offset by a negative variance of \$27,760 in culture and recreation.

Capital Asset and Debt Administration

Capital assets—The Town's investment in capital assets for its governmental activities as of December 31, 2017, amounted to \$5,815,377 (net of accumulated depreciation). This investment in capital assets includes land, vehicles, buildings and improvements, machinery and equipment, roads, and infrastructure. All depreciable capital assets were depreciated from acquisition date to the end of the current year, as outlined in the Town's capital asset policy.

Capital assets, net of depreciation for the governmental activities at the years ended December 31, 2017 and December 31, 2016 are presented in Table 6 below.

Table 6—Summary of Capital Assets (Net of Depreciation)

		Governmen	tal A	Activities
		Decem	ber	31,
		2017		2016
Land	\$	132,481	\$	132,481
Vehicles		171,901		206,939
Building and improvements		1,843,918		1,805,593
Machinery and equipment		302,213		308,046
Roads		829,435		777,883
Infrastructure		2,535,429		2,589,466
Total	<u>\$</u>	5,815,377	\$	5,820,408

The Town's infrastructure assets are recorded at historical cost or estimated historical cost in the government-wide financial statements. The Town has elected to depreciate its infrastructure assets. Additional information on the Town's capital assets can be found in Note 5 to the financial statements.

Long-term debt—At December 31, 2017, the Town had long term liabilities outstanding of \$3,344,150 for governmental activities, as compared to \$2,695,102 (as restated) in the prior year. Of the long term liabilities outstanding at December 31, 2017, \$1,123,451 represent serial bonds issued by the Town for governmental activities.

A summary of the Town's long-term liabilities at December 31, 2017 and December 31, 2016 is presented in Table 7 below.

Table 7—Summary of Long-Term Liabilities

	 Governmen	tal A	ctivities
	 Decem	ber 3	31,
			2016
	 2017	(z	ns restated)
Serial bonds	\$ 1,123,451	\$	490,000
Compensated absences	22,829		24,210
Net pension liability	213,211		310,700
Net pension liability-LOSAP	1,984,659		1,870,192
Total	\$ 3,344,150	\$	2,695,102

Total outstanding long-term liabilities increased by \$534,581 from prior year primarily due to the issuance of general obligation serial bonds amounting to \$668,451.

Additional information on the Town's long-term liabilities can be found in Note 11 to the financial statements.

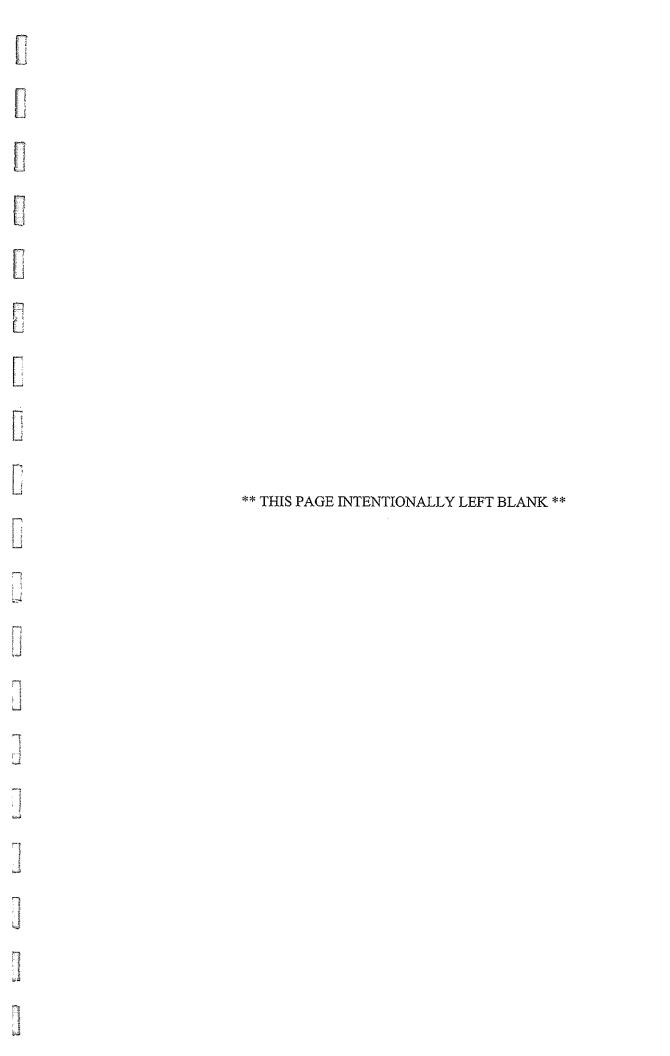
Economic Factors

The unemployment rate, not seasonally adjusted, for Erie County during December 2017 was 5.5 percent. This is unfavorable to New York State's unemployment rate of 4.6 and to the national unemployment rate of 4.1 percent. These factors are considered in preparing the Town's budget.

Requests for Information

This financial report is designed to provide a general overview of the Town's finances for all those with an interest in the Town's finances. Questions concerning any of the information provided in this report or requests for additional financial information should be addressed to the Supervisor's Office, 3311 Wende Road, Alden, NY 14004.

BASIC FINANCIAL STATEMENTS



TOWN OF ALDEN, NEW YORK Statement of Net Position December 31, 2017

	Primary Government Governmental Activities
ASSETS	**************************************
Cash and cash equivalents	\$ 3,070,783
Restricted cash and cash equivalents	68,051
Receivables	4,500
Intergovernmental receivables	415,913
Prepaid items	25,299
Capital assets not being depreciated	132,481
Capital assets, net of accumulated depreciation	5,682,896
Total assets	9,399,923
DEFERRED OUTFLOWS OF RESOURCES	
Deferred outflow—relating to pensions	213,180
Total deferred outflows of resources	213,180
LIABILITIES	
Accounts payable	64,780
Accrued liabilities	48,296
Intergovernmental payables	6,384
Unearned revenue	68,051
Noncurrent liabilities:	
Due within one year	49,592
Due within more than one year	3,294,558
Total liabilities	3,531,661
DEFERRED INFLOWS OF RESOURCES	
Deferred inflow—relating to pensions	36,708
Total deferred inflows of resources	36,708
NET POSITION	
Net investment in capital assets	4,691,926
Unrestricted	1,352,808
Total net position	\$ 6,044,734

The notes to the financial statements are an integral part of this statement.

TOWN OF ALDEN, NEW YORK Statement of Activities

Statement of Activities
Year Ended December 31, 2017

				Net (Expense)
				Revenue and
				Changes in
				Net Position
		Progran	n Revenues	Primary
			Operating	Government
		Charges for	Grants and	Governmental
Function/Program	Expenses	Services	Contributions	Activities
Primary government:				
Governmental activities:				
General government support	\$ 795,033	\$ 143,380	\$ 2,000	\$ (649,653)
Public safety	908,300	33,279	420	(874,601)
Health	1,188	-	-	(1,188)
Transportation	972,155	132,137	105,460	(734,558)
Economic assistance and opportunity	77,353	-	-	(77,353)
Culture and recreation	381,654	11,600	-	(370,054)
Home and community services	774,116	3,847	8,785	(761,484)
Interest and other fiscal charges	57,426	-		(57,426)
Total primary government	\$ 3,967,225	\$ 324,243	\$ 116,665	(3,526,317)
	General reven	ies:		
	Property tax	es and tax items		2,405,172
	Non-propert	y taxes		1,051,894
	Use of mone	ey and property		20,960
	Miscellaneo	us		43,117
	Federal aid			85
	Unrestricted	state aid		224,219
	Total gene	ral revenues		3,745,447
	Change in	net position		219,130
	Net position—	beginning (as re	stated)	5,825,604
	Net position—	ending		\$ 6,044,734

The notes to the financial statements are an integral part of this statement.

TOWN OF ALDEN, NEW YORK Balance Sheet—Governmental Funds December 31, 2017

							Specis	Special Revenue							E	Total	Ĭ	Total
			9	General—	Ξ	Highway—				Fire	Ŗ	Refuse	Cal	Capital	Nor	Nonmajor	Govern	Governmental
		General	라 	Part-Town	<u>ا</u> ت	Part-Town		Grant	Pro	Protection	[S	Collection	Pro	Projects	1	Funds	표	Funds
ASSETS																		
Cash and cash equivalents	69	1,577,042	€ 3	319,713	€⁄9	628,142	69	•	6/3	120,166	6/3	172,683	€-9	1	69	253,037	e3 €3	3,070,783
Restricted cash and cash equivalents		•		1		68,051		•				1		ı		ı		68,051
Receivables		1,728	∞	2,623		66		1		15		5		1		30		4,500
Intergovernmental receivables		168,494	4	62,334		166,621		18,464		1		ı		ı		ı		415,913
Due from other funds		18,464	4	1		1		•				,		ı				18,464
Prepaid items	ĺ	15,038	∞ l	2,333		7,928		•		,		6		ı				25,299
Total assets	5/3	1,780,766	\$ 9	387,003	6-9	870,841	6/3	18,464	⇔	120,181	60	172,688	€9	ı	6/3	253,067	3	3,603,010
LIABILITIES				:														
Accounts payable	6-9	11,359	69 69	5,149	69	7,624	69	r	6/3	161	6/)	34,050	6/9	1	6∕9	6,437	€-9	64,780
Accrued liabilities		6,098	∞	573		17,255		. 1		1		ı		•		1		23,926
Intergovernmental payables		1		•		1		1		r		•		1		6,384		6,384
Due to other funds		•				•		18,464		1		,		t				18,464
Unearned revenue		1		•		68,051		t		•		,		1		-		68,051
Total liabilities		17,457	7	5,722		92,930		18,464		161		34,050		-		12,821		181,605
BITIND BAT ANCES																		
Nonspendable		15,038	∞	2,333		7,928		•		,		ı		1		1		25,299
Assigned		787,697	7	378,948		769,983	,	•		120,020		138,638		ı		240,246	6 1	2,435,532
Unassigned		960,574	41	L				1		,		1		1		-		960,574
Total fund balances		1,763,309	6	381,281		777,911				120,020		138,638		-	-	240,246	3	3,421,405
Total liabilities and																		
fund balances	S	1,780,766	8	387,003	es l	870,841	اعد	18,464	↔	120,181	69	172,688	69	•	65	253,067	\$ 3	3,603,010
					J		\											

The notes to the financial statements are an integral part of this statement.

Notice Control

a salas

podrama analysis of

TOWN OF ALDEN, NEW YORK Reconciliation of the Balance Sheet—Governmental Funds to the Government-wide Statement of Net Position December 31, 2017

Amounts reported for governmental activities in the statement of net position (page	ge 12) are	e different beca	ause:
Total fund balances—governmental funds (page 14)			\$ 3,421,405
Capital assets used in governmental activities are not financial resources a reported in the funds. The cost of the assets is \$11,857,642 and the accum \$6,042,265. Deferred outflows and inflows of resources related to pensions are applicated, therefore, are not reported in the fund statements:	ulated de	epreciation is	5,815,377
Deferred outflows related to employer contributions	\$	75,903	
Deferred outflows related to experience, changes of	,		
assumptions, investment earnings, and			
changes in proportion		137,277	
Deferred inflows related to pension plans		(36,708)	176,472
Net accrued interest expense for serial bonds is not reported in the funds.			(24,370)
Long-term liabilities are not due and payable in the current period and, there in the funds. The effects of these items are:	efore, are	not reported	
Serial bonds	\$	(1,123,451)	
Compensated absences		(22,829)	
Net pension liability		(213,211)	
Net pension liability-LOSAP		(1,984,659)	(3,344,150)
Net position of governmental activities			\$ 6,044,734

The notes to the financial statements are an integral part of this statement.

TOWN OF ALDEN, NEW YORK

Statement of Revenues, Expenditures, and Changes in Fund Balances (Deficit)—Governmental Funds Year Ended December 31, 2017

				Specia	Special Revenue				Total	Total
	General	General—	Highway—		Grant	Fire Protection	Refuse	Capital Projects	Nonmajor Funde	Governmental Funds
REVENUES						***************************************		enafor v	Salin T	CDVID. Y
Real property taxes	\$ 667,739	·	\$ 234,914	914 \$	ı	\$ 757,413	\$ 430,500	69	\$ 289,995	\$ 2,380,561
Other property tax items	24,611	1		,	1	1	i	•	1	24,611
Non-property tax items	329,001	272,393	450,500	200	ŧ	1	ı	1	1	1,051,894
Departmental income	53,761	1,150		,	1	1	207	1	1	55,118
Intergovernmental charges	727	200	132,137	137		1	•	1	•	133,364
Use of money and property	10,142	2,086		3,085	1,000	593	2,842	1	1,212	20,960
Licenses and permits	16,350	32,899		2,250	,	•	í	•	. 1	51,499
Fines and forfeitures	84,262	1	·		,	•	1	1	1	84,262
Sale of property and										
compensation for loss	1	ı		788		,	ì	1	i	788
Miscellaneous	1,289	•	·			1	•	•	41,040	42,329
State aid	223,455	ı	95,866	998	11,870	ı	1,184	ı	t	332,375
Federal aid		ı			8,594	-	•	•	•	8,594
Total revenues	1,411,337	309,028	919,540	240	21,464	758,006	434,733	1	332,247	4,186,355
EXPENDITURES										
Current:										
General government support	623,683	1,050		92	2,000	•	1	•	1	626,825
Public safety	58,700	85,370			r	620,540	ı	1	•	764,610
Health	1,000	•	·			•	İ	•	•	1,000
Transportation	101,244	Ē	662,186	981	ı	ı	1	•	74,680	838,110
Economic assistance and opportunity	35,066	20,500	·		9,594	1	ı	•		65,160
Culture and recreation	391,671	ı	ŕ			1	t	•	i	391,671
Home and community services	1,080	43,557	·		9,870	•	421,179	•	126,231	601,917
Employee benefits	173,937	41,178	133,863	363	•	126,887	r	1	1	475,865
Debt service:										
Principal	•	r	•		1	1	ſ	·	35,000	35,000
Interest and other fiscal charges	t	1	1	\		3	t	1	39,283	39,283
Total expenditures	1,386,381	191,655		796,141 0	21,464	747,427	421,179	1	275,194	3,839,441
Excess of revenues over expenditures	24,956	117,373	123,399	399	· 	10,579	13,554	ı	57,053	346,914
OTHER FINANCING SOURCES (USES)										
Transfers in	1	•			1	ı	ı	145,110	ı	145,110
Transfers out	•	ı			,	,	1	1	(145,110)	(145,110)
Proceeds of serial bonds		•			· -	1	1	668,451		668,451
Total other financing sources (uses)				.]		-	1	813,561	(145,110)	668,451
Net change in fund balances	24,956	117,373	123,399	399	r	10,579	13,554	813,561	(88,057)	1,015,365
Fund balances (deficit)—beginning	1,738,353	263,908	654,512	512		109,441	125,084	(813,561)	328,303	2,406,040
Fund balances—ending	\$ 1,763,309	\$ 381,281	\$ (777,911	\$ 116	ŧ	120,020	\$ 138,638	6 9	\$ 240,246	\$ 3,421,405
Tribute to the color of the first of the color of the col	+	10000	f.th. 0.44.9	\	* Constitution and the second	CONTRACTOR OF THE PROPERTY OF				

The notes to the financial statements are an integral part of this statement.

Commence of the Commence of th

Table 1

- Control of Control

TOWN OF ALDEN, NEW YORK

Reconciliation of the Statement of Revenues, Expenditures, and Changes in Fund Balances—Governmental Funds to the Government-wide Statement of Activities

Year Ended December 31, 2017

1 ear Ended December 31, 2017	
Amounts reported for governmental activities in the statement of activities (page 13) as	re different because:
Net change in fund balances (deficit)—total governmental funds (page 16)	\$ 1,015,365
Governmental funds report capital outlays as expenditures. However, in the statement of activities, the cost of these assets is allocated over their estimated useful lives a reported as depreciation expense. This is the amount by which depreciation expense exceeded capital outlays in the current period.	nd
Capital asset additions \$ 323,22	26
Depreciation expense (328,25	
Net differences between pension contributions recognized on the fund financ statements and the government-wide financial statements are as follows:	ial
Town pension contributions \$ 208,93	5
Cost of benefits earned net of employee contributions (349,92	
In the statement of activities, interest expense is recognized as it accrues, regardless when it is paid.	of (18,143)
The issuance of long-term debt provides current financial resources to government funds, while the repayment of the principal of long-term debt consumes the curre financial resources of governmental funds. Neither transaction, however, has at effect on net position. Also, governmental funds report the effect of premium discounts and similar items when debt is first issued, whereas these amounts a deferred and amortized in the statement of activities. Additionally, in the statement activities, certain operating expenses are measured by the amounts earned during the year. In the governmental funds, however, expenditures for these items are measured by the amount of financial resources used (essentially, the amounts actually paid). The net effect of these differences in the treatment of long-term debt and the related item is as follows:	ent ny os, are of he ed he
Issuance of serial bonds \$ (668,45	51)
Repayment of serial bonds 35,00	•
Change in compensated absences 1,38	
Change in net position of governmental activities	\$ 219,130

The notes to the financial statements are an integral part of this statement.

TOWN OF ALDEN, NEW YORK Statement of Net Position—Agency Fund December 31, 2017

	Agency Fund
ASSETS	
Restricted cash and cash equivalents	\$ 2,457
LOSAP assets	 1,069,443
Total assets	\$ 1,071,900
LIABILITIES	
Agency liabilities	\$ 2,457
Amounts held for LOSAP	 1,069,443
Total liabilities	\$ 1,071,900

The notes to the financial statements are an integral part of this statement.

TOWN OF ALDEN, NEW YORK

Notes to the Financial Statements Year Ended December 31, 2017

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The basic financial statements of the Town of Alden, New York (the "Town") have been prepared in conformity with accounting principles generally accepted in the United States of America as applied to governmental units. The Governmental Accounting Standards Board (the "GASB") is the accepted standard setting body for establishing governmental accounting and financial reporting principles. The more significant of the Town's accounting policies are described below.

Description of Government-wide Financial Statements

The government-wide financial statements (i.e., the statement of net position and the statement of activities) report information on all of the nonfiduciary activities of the Town. All fiduciary activities are reported only in the fund financial statements. *Governmental activities*, which are normally supported by taxes, intergovernmental revenues, and other nonexchange transactions, are reported separately from *business-type activities*, which rely to a significant extent on fees and charges to external customers for support. Likewise, the primary government is reported separately from the legally separate component units for which the primary government is financially accountable. The Town reports no business-type activities or component units.

Reporting Entity

The Town, which was established in 1823, is located within the County of Erie, New York. The Town is governed by Town law and other general laws of the State of New York and various local laws. The Town Board is the legislative body responsible for overall operations and the Supervisor serves as both Chief Executive Officer and Chief Fiscal Officer.

The following basic services are provided: fire protection through contracts with local volunteer companies, highway, refuse collection, recreation, sewer, street lighting, water transmission and general administration.

Independently elected officials of the Town consist of the following:

Supervisor Town Clerk
Councilmembers (2) Town Justices (2)
Superintendent of Highways

All governmental activities and functions performed for the Town are its direct responsibility. No other governmental organizations have been included or excluded from the reporting entity.

Units of local government which operate within the boundaries of the Town consist of the County of Erie and the Village of Alden. Public education is provided by two independent school districts.

Basis of Presentation - Government-wide Financial Statements

While separate government-wide and fund financial statements are presented, they are interrelated. The governmental activities column incorporates data from governmental funds. Separate financial statements are provided for governmental funds and fiduciary funds, even though the latter are excluded from the government-wide financial statements.

As a general rule, the effect of interfund activity has been eliminated from the government-wide financial statements. Exceptions to this general rule are payments and charges between the Town's various functions. Elimination of these charges would distort the direct costs and program revenues reported for the various functions concerned.

Basis of Presentation - Fund Financial Statements

The fund financial statements provide information about the Town's funds. Separate statements for each fund category—governmental and fiduciary—are presented. The emphasis of fund financial statements is on major governmental funds, each displayed in a separate column. All remaining governmental funds are aggregated and reported as nonmajor funds.

The Town reports the following major governmental funds:

- General Fund—The General Fund constitutes the primary operating fund of the Town and
 includes all operations not required to be recorded in other funds. The principal source of
 revenue for the General Fund is real property taxes.
- General—Part-Town Fund—The General—Part-Town Fund represents activity for the part of Town located outside the Village of Alden, New York, which is an independent governmental entity. This fund accounts for selected services which cannot be charged to taxable properties located in the Village. The principal source of revenue for the General Fund—Part Town Fund is sales tax.
- Highway—Part-Town Fund—The Highway Fund is used to record all revenues and
 expenditures related to road maintenance and construction in the area of the Town outside of
 the Village of Alden, New York. The principal source of revenue for the Highway—PartTown Fund is sales tax.
- Grant Fund—The Grant Fund is used to record all revenues and expenditures related to grant
 activity in the Town. The principal source of revenue for the Grant Fund is State and Federal
 funding.
- Fire Protection Fund—The Fire Protection Fund is used to record all revenues and expenditures related to fire protection in the Town. The principal source of revenue for the Fire Protection Fund is real property taxes.
- Refuse Collection Fund—The Refuse Collection Fund is used to the record all revenues and expenditures related to garbage collection in the Town. The principal source of revenue for the Refuse Collection Fund is real property taxes.
- Capital Projects Fund—The Capital Projects Fund is used to account for financial resources
 to be used for the acquisition, construction or renovation of major capital facilities or
 equipment.

Additionally, the Town reports the following fund type:

Fiduciary Funds—These funds are used to account for assets held by the Town in a trustee capacity or as an agent for individuals, private organizations, other governmental units, and/or other funds. Trust funds account for resources received and disbursements made in accordance with trust agreements or applicable legislative enactments for each particular fund. Fiduciary

funds include the *Agency Fund*. Activities reported in the fiduciary funds include monies held in trust, deposits that are to be returned, and payroll withholdings due to other entities.

During the course of operations the Town has activity between funds for various purposes. Any residual balances outstanding at year-end are reported as due from/to other funds. While these balances are reported in fund financial statements, certain eliminations are made in the preparation of the government-wide financial statements. Balances between the funds included in governmental activities are eliminated so that only the net amount is included as internal balances in the governmental activities column.

Further, certain activity occurs during the year involving transfers of resources between funds. In fund financial statements these amounts are reported at gross amounts as transfers in/out. While reported in fund financial statements, certain eliminations are made in the preparation of the government-wide financial statements. Transfers between the funds included in governmental activities are eliminated so that only the net amount is included as transfers in the governmental activities column.

Measurement Focus and Basis of Accounting

The accounting and financial reporting treatment is determined by the applicable measurement focus and basis of accounting. Measurement focus indicates the type of resources being measured such as current financial resources or economic resources. The basis of accounting indicates the timing of transactions or events for recognition in the financial statements.

The government-wide financial statements are reported using the economic resources measurement focus and the accrual basis of accounting. Revenues are recorded when earned and expenses are recorded when a liability is incurred, regardless of the timing of related cash flows. Property taxes are recognized as revenue in the year for which they are levied. Grants and similar items are recognized as revenue as soon as all eligibility requirements imposed by the provider have been met.

The governmental fund financial statements are reported using the current financial resources measurement focus and the modified accrual basis of accounting. Revenues are recognized as soon as they are both measurable and available. Revenues are considered to be available when they are collectible within the current period or soon enough thereafter to pay liabilities of the current period. For this purpose, the Town considers revenues to be available if they are collected within 60 days of the end of the current fiscal period. The Town records amounts received from Eric County for snow removal services in the ensuing year to match when the majority of snow removal services have historically occurred. Expenditures generally are recorded when a liability is incurred, as under accrual accounting. However, debt service expenditures, as well as expenditures related to compensated absences, claims and judgments, and pensions are recorded only when payment is due. General capital asset acquisitions are reported as expenditures in governmental funds. Issuance of long-term debt and acquisitions under capital leases are reported as other financing sources.

Property taxes, sales taxes, franchise taxes, licenses, and interest associated with the current fiscal period are all considered susceptible to accrual and have been recognized as revenues of the current fiscal period. Entitlements are recorded as revenues when all eligibility requirements are met and the amount is received during the period or within the period of availability. Expenditure-driven grants are recognized as revenue when the qualifying expenditures have been incurred and all other eligibility requirements are met and amount is received during the period of availability. All other revenue items are considered to be measurable and available only when cash is received by the Town.

The Agency Fund has no measurement focus, but utilizes the accrual basis of accounting for reporting its assets and liabilities.

Assets, Liabilities, Deferred Outflows/Inflows of Resources, and Net Position/Fund Balance

Cash, Cash Equivalents and Investments—The Town's cash, cash equivalents and investments consist of cash on hand, demand deposits, time deposits and short-term, highly liquid investments with original maturities of three months or less from the date of acquisition. The Town had no investments at December 31, 2017; however, when the Town does have investments they are recorded at fair value based on quoted market value.

Restricted Cash and Cash Equivalents—Restricted cash and cash equivalents represent amounts to support restricted fund balance, future disbursements associated with unearned revenue, and unspent proceeds from debt issuances. The Town reported restricted cash or cash equivalents balances of \$68,051 at December 31, 2017.

Receivables—Receivables include amounts due from state and federal governments represent amounts owed to the Town to reimburse it for expenditures incurred pursuant to state and federally funded programs. Receivables are recorded and revenues recognized as earned. Allowances are recorded when appropriate.

Prepaid Items—Certain payments to vendors reflect costs applicable to future accounting periods and are recorded as prepaid items in both the government-wide and fund financial statements. The cost of prepaid items is recorded as expenses/expenditures when consumed rather than when purchased.

Capital Assets—Capital assets, which include land, vehicles, building and improvements, machinery and equipment, roads, and infrastructure assets, are reported in the government-wide financial statements. Capital assets are defined by the Town as assets with an initial individual cost ranging in excess of \$2,000 - \$20,000, based on the class of asset, and an estimated useful life in excess of two years. Such assets are recorded at historical cost or estimated historical cost. The reported value excludes normal maintenance and repairs, which are essentially amounts spent in relation to capital assets that do not increase the capacity or efficiency of the item or increase its estimated useful life. Donated capital assets are recorded at estimated fair market value of the item at the date of its donation. Major outlays for capital assets and improvements are capitalized as projects are completed.

Land and construction in progress are not depreciated. The other capital assets of the Town are depreciated using the straight line method over the following estimated useful lives:

Class of Asset	Years
Vehicles	5-8
Buildings and improvements	20-75
Machinery and equipment	5-25
Roads	15
Infastructure	75

The capital outlays character classification is employed only for expenditures reported in the Capital Projects Fund. Routine capital expenditures in the General Fund and other governmental funds are included in the appropriate functional category (for example, the purchase of a new highway vehicle included as part of expenditures—transportation). The amount reported as capital outlays in the

Capital Projects Fund will also include non-capitalized, project-related costs (for example, furnishings).

Deferred Outflows/Inflows of Resources—In addition to assets, the statement of financial position will sometimes report a separate section for deferred outflows of resources. This separate financial statement element, deferred outflows of resources, represents a consumption of net position that applies to a future period(s) and so will not be recognized as an outflow of resources (expense/expenditure) until then. At December 31, 2017, the Town has one item that qualifies for reporting in this category. This item represents the effect of the net change in the Town's proportion of the collective net pension liability, and the difference during the measurement period between the Town's contributions and its proportionate share of the total contribution to the pension systems not included in the pension expense, and any contributions to the pension systems made subsequent to the measurement date and is reported on the government-wide statements.

In addition to liabilities, the statement of financial position will sometimes report a separate section for deferred inflows of resources. This separate financial statement element, deferred inflows of resources, represents an acquisition of net position that applies to a future period(s) and so will not be recognized as an inflow of resources (revenue) until that time. At December 31, 2017, the Town has one item that qualifies for reporting in this category. The item represents the effect of the net change in the Town's proportion of the collective net pension liability and the difference during the measurement periods between the Town's contributions and its proportionate share of total contributions to the pension system not included in pension expense and is reported on the government-wide statements.

Net Position Flow Assumption—Sometimes the Town will fund outlays for a particular purpose from both restricted (e.g., restricted bond or grant proceeds) and unrestricted resources. In order to calculate the amounts to report as restricted-net position and unrestricted-net position in the government-wide financial statements, a flow assumption must be made about the order in which the resources are considered to be applied. It is the Town's policy to consider restricted-net position to have been depleted before unrestricted-net position is applied.

Fund Balance Flow Assumptions—Sometimes the Town will fund outlays for a particular purpose from both restricted and unrestricted resources (the total of committed, assigned, and unassigned fund balance). In order to calculate the amounts to report as restricted, committed, assigned, and unassigned fund balance in the governmental fund financial statements, a flow assumption must be made about the order in which the resources are considered to be applied. It is the Town's policy to consider restricted fund balance to have been depleted before using any of the components of unrestricted fund balance. Further, when the components of unrestricted fund balance can be used for the same purpose, committed fund balance is depleted first, followed by assigned fund balance. Unassigned fund balance is applied last.

Fund Balance Policies—Fund balance of governmental funds is reported in various categories based on the nature of any limitations requiring the use of resources for specific purposes. The Town itself can establish limitations on the use of resources through either a commitment (committed fund balance) or an assignment (assigned fund balance).

The committed fund balance classification includes amounts that can be used only for the specific purposes determined by a formal action of the Town's highest level of decision-making authority. The Town Board is the highest level of decision-making authority for the Town that can, by adoption of an ordinance prior to the end of the fiscal year, commit fund balance. Once adopted, the limitation imposed by the ordinance remains in place until a similar action is taken (the adoption of another ordinance) to remove or revise the limitation.

Amounts in the assigned fund balance classification are intended to be used by the Town for specific purposes, but do not meet the criteria to be classified as committed. The Town Board has authorized the Supervisor to assign fund balance. The Town Board may also assign fund balance as it does when appropriating fund balance to cover a gap between estimated revenues and appropriations in the subsequent year's appropriated budget. Unlike commitments, assignments generally only exist temporarily. In other words, an additional action does not normally have to be taken for the removal of an assignment. Conversely, as discussed above, an additional action is essential to either remove or revise a commitment.

Revenues and Expenses/Expenditures

Program Revenues—Amounts reported as *program revenues* include 1) charges to customers or applicants who purchase, use, or directly benefit from goods, services, or privileges provided by a given function or segment and 2) grants and contributions (including special assessments) that are restricted to meeting the operational or capital requirements of a particular function or segment. All taxes, including those dedicated for specific purposes, and other internally dedicated resources are reported as general revenues rather than as program revenues.

Property Taxes—The Erie County Legislature prepares the levy in late December of each year and jointly bills the Town levy and Erie County real property taxes. Property taxes are levied and become a lien as of January 1st based on assessed property values as of that date.

Tax payments are due January 1st to February 15th without penalty; February 16th to 28th a 1.5% penalty; March 1st to 15th a 3.0% penalty; March 16th to 31st a 4.5% penalty; April 18th to May 1st a 7.5% penalty; and 1.5% added each month thereafter.

The tax roll is returned to the Erie County Commissioner of Finance after June 30th, at which time all unpaid taxes and penalties are payable to that office. The Town retains their full tax levies for all unpaid items that are returned to the County. Thus, the Town is assured of receiving 100% of its tax levy. The County enforces all liens.

The Town also bills and collects taxes for various school districts within Town limits. Collections of the school district taxes and remittances of them are accounted for by the Town Clerk and Receiver of Taxes, independent of Town operations.

Unearned Revenue—Certain revenues have not met the revenue recognition criteria for government-wide or fund financial purposes. At December 31, 2017, the Town reported unearned revenues of \$68,051 within the Highway—Part-Town Fund. The Town received fees related to winter snow removal in advance but have not performed the associated services and therefore recognizes a liability.

Compensated Absences—Certain Town employees are granted vacation and sick leave and earn compensatory absences in varying amounts. Vacations and compensatory absences must be used by the end of the fiscal year in which they are earned. Employees may accumulate sick leave, but they are not entitled to receive compensation for unused sick leave in the event of termination or upon retirement.

Rayment of compensated absences recorded in the government-wide financial statements is dependent on many factors; therefore, the timing of future payments is not readily determinable. However, management believes that sufficient resources will be available for the payment of compensated absences when such payments become due.

Pensions—The Town is mandated by New York State law to participate in the New York State Local Employees' Retirement System ("ERS"). For purposes of measuring the net pension liability, deferred outflows of resources and deferred inflows of resources related to pensions, and pension expense, information about the fiduciary net position of the defined benefit pension plans, and changes thereof, have been determined on the same basis as they are reported by the respective defined benefit pension plans. For this purpose, benefit payments (including refunds of employee contributions) are recognized when due and payable in accordance with benefit terms. Investments are reported at fair value. More information regarding pensions is included in Note 6.

Service Awards—The Town has adopted a Length of Service Award Program for firefighters that serve on a volunteer basis. The program is administered by an outside agency, with the Town as trustee. More information regarding service awards is included in Note 7.

Other

Estimates—The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of revenues, expenditures, assets, liabilities, deferred outflows/inflows of resources, and disclosure of contingent assets and liabilities at the date of the financial statements during the reported period. Actual results could differ from those estimates.

Adoption of New Accounting Pronouncements—During the year ended December 31, 2017, the Town implemented certain elements of GASB Statements No. 73, Accounting and Financial Reporting for Pensions and Related Assets That Are Not within the Scope of GASB Statement 68, and Amendments to Certain Provisions of GASB Statements 67 and 68. GASB statement No. 73 will improve the usefulness of information about pensions included in the general purpose external financial reports of state and local governments for making decisions and assessing accountability. GASB Statement No. 73 requires the Town to begin reporting this long-term liability within the government-wide financial statements. As a result, the pension liability related to LOSAP was restated from \$0 to \$1,870,192, and net position was reduced by \$1,870,192 at December 31, 2016. Certain elements of Statement No. 73, including deferred assets and deferred liabilities, were not implemented as of December 31, 2017. However, the Town does not believe these elements will have a material impact on the Towns financial position.

The Town implemented GASB Statements No. 74, Financial Reporting for Postemployment Benefit Plans Other Than Pension Plans; No. 80, Blending Requirements for Certain Component Units — an amendment of GASB Statement No. 14; No. 81, Irrevocable Split-Interest Agreements; and No. 82, Pension Issues — an amendment of GASB Statements No. 67, No. 68, and No. 73, effective for the year ending December 31, 2017. GASB statement No. 74 improves the usefulness of information about postemployment benefits other than pensions (other postemployment benefits or OPEB) included in the general purpose external financial reports of state and local governmental OPEB plans for making decisions and assessing accountability. GASB statement No. 80 improves financial reporting by clarifying the financial statement presentation requirements for certain component units. GASB statement No. 81 improves accounting and financial reporting for irrevocable split-interest agreements by providing recognition and measurement guidance for situations in which a government is a beneficiary of the agreement. GASB statement No. 82 addresses certain issues that have been raised with respect to Statements No. 67, Financial Reporting for Pension Plans, and No. 68, Accounting and Financial Reporting for Pensions. GASB Statement Nos. 74, 80, 81, and 82 did not have a material impact on the Town's financial position or results from operations.

Future Impacts of Accounting Pronouncements—The Town has not completed the process of evaluating the impact that will result from adopting GASB Statements No. 75, Accounting and Financial Reporting for Postemployment Benefit Plans Other Than Pensions; No. 85, Omnibus 2017; and No. 86, Certain Debt Extinguishment Issues, effective for the year ending December 31, 2018, No. 83, Certain Asset Retirement Obligations; and No. 84, Fiduciary Activities, effective for the year ending December 31, 2019, and No. 87, Leases, effective for the year ending December 31, 2020. The Town is, therefore, unable to disclose the impact that adopting GASB Statements No. 75, 83, 84, 85, 86, and 87 will have on its financial position and results of operations.

Stewardship, Compliance and Accountability

Legal Compliance—Budgets—The Town follows these procedures in establishing the budgetary data reflected in the financial statements:

- Prior to September 30, the Town Supervisor files a "tentative" budget with the Town Clerk for the following fiscal year to commence on January 1st. This budget, which includes appropriations and estimated revenues, is then presented to the full Town Board by October 5th.
- The full Town Board reviews the tentative budget and may adjust same before approving a "preliminary" budget and calling for a public hearing, which is generally held in October.
- Following the public hearing, revisions may again be made by the Town Board before filing an adopted budget with Erie County by November 20th.
- During the fiscal year, the Town Board can legally amend the operating budgets and is empowered to implement supplemental appropriations. Budget amendments are required for the departmental budgetary control. All budget amendments and budget transfers in excess of \$1,000 require Town Board approval.

2. RESTATEMENT OF NET POSITION

The Town implemented certain elements of GASB Statement No. 73, Accounting and Financial Reporting for Pensions and Related Assets That Are Not Within the Scope of GASB Statement 68, and Amendments to Certain Provisions of GASB Statements 67 and 68 for the fiscal year ended December 31, 2017. The implementation of GASB Statement No. 73 requires the Town's net pension liability related to the LOSAP to be measured as the portion of the present value of projected benefit payments to be provided to current active and inactive employees that is attributed to those employees' past periods of service (total pension liability), less the amount of the LOSAP plan's fiduciary net positon. As a result, the pension liability related to LOSAP was restated from \$0 to \$1,870,192 and net position was reduced by \$1,870,192 at December 31, 2016. The effect of the restatements to the Town's governmental activities is summarized as follows:

	overnmental Activities let Position
Net position—December 31, 2016,	
as previously stated	\$ 7,695,796
GASB Statement No. 73:	
Beginning system liability—LOSAP	 (1,870,192)
Net position—December 31, 2016, as restated	\$ 5,825,604

3. CASH, CASH EQUIVALENTS AND INVESTMENTS

The Town's investment policies are governed by State statutes. In addition, the Town has its own written investment policy. Town monies must be deposited in FDIC-insured commercial banks or trust companies located within New York State. The Supervisor is authorized to use demand accounts and certificates of deposit. Permissible investments include obligations of the U.S. Treasury and U.S. Agencies, repurchase agreements, and obligations of New York State or its localities.

Collateral is required for demand deposit accounts, time deposit accounts and certificates of deposit at 100% of all deposits not covered by Federal deposit insurance. The Town has entered into custodial agreements with the various banks which hold their deposits. These agreements authorize the obligation that may be pledged as collateral. Obligations that may be pledged as collateral are outlined in Chapter 623 of the laws of the State of New York.

Cash and cash equivalents at December 31, 2017, are as follows:

	Governmental		Fiduciary		
	Funds		Funds		Total
Petty cash (uncollateralized)	\$	700	\$ \$ -		700
Deposits		3,138,134	 2,457		3,140,591
Total	\$	3,138,834	\$ 2,457	\$	3,141,291

Deposits—All deposits are carried at fair value and are classified by custodial credit risk at December 31, 2017 as follows:

	Bank			Carrying
		Balance		Amount
FDIC insured	\$	\$ 362,994		362,994
Uninsured:				
Collateral held by pledging bank's				
agent in the Town's name		2,889,345		2,777,597
Total	\$	\$ 3,252,339		3,140,591

Custodial Credit Risk—Deposits—Custodial credit risk is the risk that in the event of a bank failure, the Town's deposits may not be returned to it. As noted above, by New York State statute all deposits in excess of FDIC insurance coverage must be collateralized. At December 31, 2017, the Town's deposits were either FDIC insured or collateralized with securities held by the pledging bank's agent in the Town's name.

Restricted Cash and Cash Equivalents—The Town reports amounts to support unearned revenue as restricted cash and cash equivalents. At December 31, 2017, the Town reported \$68,051 of restricted cash within its governmental funds.

Investments—The Town had no investments at December 31, 2017.

Interest Rate Risk—In accordance with its investment policy, the Town manages exposures by limiting investments to low risk type investments governed by New York State statute.

4. RECEIVABLES

Major revenues accrued by the Town at December 31, 2017 consisted of the following:

Receivables— Represents amounts due from various sources. The Town's significant accounts receivable at December 31, 2017 are presented as follows:

\$ 1,409		
52		
 267	\$	1,728
575		
1,962		
 86		2,623
		99
		5
		45
	\$	4,500
\$	52 267 575 1,962 86	52 267 \$ 575 1,962 86

Intergovernmental Receivables—Represents amounts due from other units of government, such as Federal, New York State, County of Erie or other local governments. Intergovernmental receivables at December 31, 2017 are presented as follows:

General Fund:		
Erie County - sales tax	\$ 161,520	
Other	6,974	\$ 168,494
General—Part-Town Fund:		
Erie County - sales tax		62,334
Highway—Part-Town Fund:		
Erie County - sales tax		166,621
Grant Fund:		
State aid	9,870	
Federal aid	 8,509	 18,464
Total governmental funds		\$ 415,913

5. CAPITAL ASSETS

Capital asset activity for the Town's governmental activities for the year ended December 31, 2017 was as follows:

	Balance 1/1/2017			Balance 12/31/2017	
Capital assets, not being depreciated:					
Land	\$ 132,481	\$ -	<u>\$</u>	\$ 132,481	
Total capital assets, not being depreciated	132,481	-		132,481	
Capital assets, being depreciated:					
Vehicles	1,090,232	36,203	_	1,126,435	
Buildings and improvements	2,609,335	116,949	-	2,726,284	
Machinery and equipment	925,909	25,882	_	951,791	
Roads	3,435,237	144,192	-	3,579,429	
Infrastructure	3,341,222			3,341,222	
Total capital assets, being depreciated	11,401,935	323,226		11,725,161	
Less accumulated depreciation for:					
Vehicles	883,293	71,241	-	954,534	
Buildings and improvements	803,742	78,624	-	882,366	
Machinery and equipment	617,863	31,715	-	649,578	
Roads	2,657,354	92,640	_	2,749,994	
Infrastructure	751,756	54,037		805,793	
Total accumulated depreciation	5,714,008	328,257		6,042,265	
Total capital assets, being depreciated, net	5,687,927	(5,031)		5,682,896	
Governmental activities capital assets, net	\$ 5,820,408	\$ (5,031)	\$ -	\$ 5,815,377	

Depreciation expense was charged to the functions and programs of governmental activities as follows:

General government support	\$ 50,920
Public safety	620
Transportation	174,864
Culture and recreation	42,281
Home and community services	59,572
Total governmental activities	\$ 328,257

6. ACCRUED LIABILITIES

Accrued liabilities reported by governmental funds at December 31, 2017 were as follows:

		General—			Hi	ghway—		Total
	(General		Part-Town		rt-Town	Gov	ernmental
		Fund	Fund			Fund		Funds
Salary and employee benefits	\$	6,098	\$	573	\$	17,255	\$	23,926

7. PENSION PLANS

Plan Description and Benefits Provided

Employees' Retirement System ("ERS")—The Town participates in the ERS. This cost-sharing multiple-employer public employee retirement system computes contribution retirements based on the New York State Retirement and Social Security Law ("NYSRSSL"). The ERS provides retirement benefits as well as death and disability benefits. The net position of the ERS is held in the New York State Common Retirement Fund (the "Fund"), which was established to hold all net assets and record changes in plan net position allocated to the ERS. The Comptroller of the State of New York serves as the trustee of the Fund and is the administrative head of the ERS. The ERS benefits are established under the provisions of the New York State Retirement and Social Security Law ("NYSRSSL"). Once a public employer elects to participate in the ERS, the election is irrevocable. The New York State Constitution provides that pension membership is a contractual relationship and plan benefits cannot be diminished or impaired. Benefits can be changed for future members only by enactment of a State statute. The Town also participates in the Public Employees' Group Life Insurance Plan ("GLIP"), which provides death benefits in the form of life insurance. The ERS is included in the State's financial report as a pension trust fund. That report, including information with regard to benefits provided, may be found at www.osc.state.ny.us/retire/publications/index.php or obtained by writing to the New York State and Local Retirement System, 110 State Street, Albany, NY 12244.

The ERS is noncontributory, except for employees who joined after July 27, 1976, who contribute three percent (3%) of their salary for the first ten years of membership, and employees who joined on or after January 1, 2010 who generally contribute three percent (3%) to three and one half percent (3.5%) of their salary for their entire length of service. In addition, employee contribution rates under ERS tier VI vary based on a sliding salary scale. The Comptroller annually certifies the actuarially determined rates expressly used in computing the employers' contributions based on salaries paid during the Systems' fiscal year ending March 31.

Pension Liabilities, Pension Expense, Deferred Outflows of Resources and Deferred Inflows of Resources Related to Pensions—At December 31, 2017, the Town reported the liability presented on the following page for its proportionate share of the net pension liability for the ERS. The net pension liability was measured as of March 31, 2017. The total pension liability used to calculate the net pension liability was determined by an actuarial valuation as of April 1, 2016, with update procedures used to roll forward the total pension liability to the measurement date. The Town's proportion of the net pension liability was based on a projection of the Town's long-term share of contributions to the ERS relative to the projected contributions of all participating members, actuarially determined. This information was provided by the ERS in reports provided to the Town.

	ERS		
Measurement date	Mar	ch 31, 2017	
Net pension liability	\$ 213,21		
Town's portion of the Plan's total			
net pension liability	0.0022691%		

For the year ended December 31, 2017, the Town recognized ERS pension expense of \$125,273. At December 31, 2017, the Town reported deferred outflows of resources and deferred inflows of resources related to pensions from the following sources:

	ERS			
	Ι	Deferred		Deferred
	Οι	ıtflows of	In	flows of
	R	Resources Re		esources
Differences between expected and				
actual experiences	\$	5,343	\$	32,377
Changes of assumptions		72,841		-
Net difference between projected and				
actual earnings on pension plan investments		42,587		-
Changes in proportion and differences				
between the Town's contributions and				
proportionate share of contributions		16,506		4,331
Town contributions subsequent				
to the measurement date		75,903		
Total	\$	213,180	\$	36,708

The Town's contributions subsequent to the measurement date will be recognized as a reduction of the net pension liability in the year ending December 31, 2018. Other amounts reported as deferred outflows of resources and deferred inflows of resources related to pensions will be recognized in pension expense as follows:

Year Ending December 31,	ERS		
2018	\$	43,497	
2019		43,497	
2020		39,139	
2021		(25.564)	

Actuarial Assumptions—The total pension liability as of the measurement date was determined by using an actuarial valuation as noted in the table below, with update procedures used to roll forward the total pension liability to the measurement date. The actuarial valuations used the following actuarial assumptions:

	ERS
Measurement date	March 31, 2017
Actuarial valuation date	April 1, 2016
Interest rate	7.00%
Salary scale	3.80%
Decrement tables	April 1, 2010-
	March 31, 2015
Inflation rate	2.5%
Cost-of-living adjustments	1.3%

Annuitant mortality rates are based on April 1, 2010 – March 31, 2015 System's experience with adjustments—for mortality_improvements_based_on_Society_of_Actuaries'_Scale_MP-2014.—The actuarial assumptions used in the April 1, 2016 valuation are based on the results of an actuarial experience study for the period April 1, 2010 – March 31, 2015.

The long-term rate of return on pension plan investments was determined using a building block method in which best estimate ranges of expected future real rates of return (expected returns net of investment expense and inflation) are developed for each major asset class. These ranges are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by each the target asset allocation percentage and by adding expected inflation. Best estimates of the arithmetic real rates of return for each major asset class included in the target asset allocation are summarized below.

	ERS						
	Target Long-Term Expecte						
	Allocation	Real Rate of Return					
Measurement date	March 31, 2017						
Asset class:							
Domestic equities	36.0	% 4.6 %					
International equities	14.0	6.4					
Private equity	10.0	7.8					
Real estate	10.0	5.8					
Absolute return strategies	2.0	4.0					
Opportunistic portfolio	3.0	5.9					
Real assets	3.0	5.5					
Bonds and mortgages	17.0	1.3					
Cash	1.0	(0.3)					
Inflation-indexed bonds	4.0	1.5					
Total	100.0	%					

Discount Rate—The discount rate used to calculate the total pension liability was 7.0%. The projection of cash flows used to determine the discount rate assumes that contributions from plan members will be made at the current contribution rates and that contributions from employers will be made at statutorily required rates, actuarially. Based upon the assumptions, the ERS' fiduciary net position was projected to be available to make all projected future benefit payments of current plan members. Therefore, the long-term expected rate of return on pension plan investments was applied to all periods of projected benefit payments to determine the total pension liability.

Sensitivity of the Proportionate Share of the Net Pension Liability to the Discount Rate Assumption—The chart below presents the Town's proportionate share of the net pension liability/(asset) calculated using the discount rate of 7.0%, as well as what the Town's proportionate share of the net pension liability/(asset) would be if it were calculated using a discount rate that is one percentage-point lower (6.0%) or one percentage-point higher (8.0%) than the current assumption.

		1%		Current		1%	
]	Decrease	Α	ssumption		Increase	
ERS		(6.0%)		(7.0%)		(8.0%)	
Employer's proportionate share							
of the net pension liability/(asset)	\$	680,955	\$	213,211	\$	(182, 265)	

Pension Plan Fiduciary Net Position—The components of the current-year net pension liability of the employers as of the valuation dates, were as follows:

	(Dollars in Thousands)				
	***************************************	ERS			
Valuation date	A	April 1, 2016			
Employers' total pension liability	\$	177,400,586			
Plan fiduciary net position	<u> </u>	168,004,363			
Employers' net pension liability	\$	9,396,223			
System fiduciary net position as a percentage of total pension liability		94.7%			

8. PENSION OBLIGATIONS—LOSAP

Plan Description—The Town established a defined benefit LOSAP for the active volunteer firefighters of the Crittenden Volunteer Fire Company and Millgrove Volunteer Fire Department. The program took effect on January 1, 1993. The program was established pursuant to Article 11-A of the General Municipal Law. The program provides municipally-funded pension like benefits to facilitate the recruitment and retention of active volunteer firefighters. The Town is the sponsor of the program.

The Town's financial statements are for the year ended December 31, 2017. However, the information contained in this note is based on information for the Length of Service Award Program ("LOSAP") as of January 1, 2017, which is the most recent plan year for which complete information is available.

Program Description

Participation, Vesting and Service Credit—Active volunteer firefighters in the Crittenden Volunteer Fire Company and Millgrove Volunteer Fire Department who have reached the age of eighteen and who have completed one year of firefighting service are eligible to participate in the program. Participants acquire a nonforfeitable right to a service award after being credited with five years of firefighting service, upon attaining the program's entitlement age or, becoming totally and permanently disabled or dying while an active member. The program's entitlement age is age 65. In general, an active volunteer firefighter is credited with a year of firefighting service for each calendar year after the establishment of the program in which he or she accumulates fifty points. Points are granted for the performance of certain activities in accordance with a system established by the sponsor on the basis of a statutory list of activities and point values. A participant may also receive credit for five years of firefighting service rendered prior to the establishment of the program.

Benefits—A participant's benefit under the program is the actuarial equivalent of a monthly payment for life equal to \$20 multiplied by the person's total number of years of firefighting service. The number of years of firefighting service used to compute the benefit cannot exceed twenty. Benefits are not payable until the first day of the month if the participant attained the entitlement age on that date or the first date of the next month, except in the case of disability or death. In the case of total and permanent disability before attaining entitlement age, payment commences on the first day of the first month following the establishment of such disability. The participant shall be entitled to receive an amount equal to the present value of accrued benefit at a minimum of five year service as of the time of such determination of disability payable monthly and continuing for his or her life and with a ten year certain period. In the case of death during the course of service before attaining entitlement age, active members shall be entitled to receive death benefits under this plan. Such benefits shall be payable in a lump-sum amount designated by the sponsor as payable at death. The beneficiaries or the estate would receive the greater of the present value of accrued benefits or face amount of any life insurance. In the case of death after attaining eligibility, the beneficiary or estate would be entitled to the remaining certain period monthly payments, if any.

Fiduciary Investment and Control—Service credit is determined by the Board of the sponsor, based on information certified to the Board by each fire company having members who participate in the program. Each fire company must maintain all required records on forms prescribed by the governing board.

The governing board the sponsor has retained and designated Benefit Plans Administrative Services, Inc. ("BPAS") to assist in the administration of the program. The designated program administrator's functions include general administration in questions of eligibility, as well as, to compute, certify, and direct the Trustee with respect to entitlement and payment of benefits. Disbursements of program assets for the payment of benefits or administrative expenses must be approved by BPAS who calculates and certifies monthly and other lump sum amounts to be paid.

Program assets are required to be held in trust by LOSAP legislation, for the exclusive purpose of providing benefits to participants and their beneficiaries or for the purpose of defraying the reasonable expenses of the operation and administration of the program. The current trustee is BPAS.

Authority to invest program assets is vested in the Board of Trustees, which consists of one sponsor-appointed member from each fire company, and one Town representative. Subject to restrictions in the program document, program assets are invested in accordance with a statutory "prudent person" standard and the Investment Policy Statement for the LOSAP, as approved by the Board of Trustees.

The sponsor is required to retain an actuary to determine the amount of the sponsor's contributions to the plan. The actuary retained by the sponsor for this purpose is BPAS. Portions of the following information are derived from the most recent report prepared by the actuary with the valuation date of January 1, 2017.

Participants Covered by the Benefit Terms—At the January 1, 2017 measurement date, the following participants were covered by the benefit terms:

Inactive participants with deferred vested benefit	37
Entitled participants	36
Active participants	36
Total	109

Contributions—New York State General Municipal Law §219(d) requires the Town to contribute an actuarially determined contribution on an annual basis. The actuarially determined contribution shall be appropriated annually by the Town.

Trust Assets—Although assets have been accumulated in an irrevocable trust such that the assets are dedicated to providing pensions to plan members in accordance with benefit terms, the trust assets are not legally protected from creditors of the Town. As such, the trust assets do not meet the criteria in paragraph 4 of GASB Statement No. 73.

Measurement of Total Pension Liability

The total pension liability at the January 1, 2017 measurement date was determined using an actuarial valuation as of that date.

Actuarial Valuation Methodology—The total pension liability in the January 1, 2017 actuarial valuation was determined using the following actuarial assumptions, applied to all periods included in the measurement:

Pre-Entitlement

Assumed Rate of Return:	5.00%
Mortality, Withdrawal, Disability:	None

Post-Entitlement

Assumed Rate of Return:	5.00%
Mortality:	RP 2 - RP 2000 Mortality Table

Discount Rate—The discount rate used to measure the total pension liability was 6.00%.

Total Pension Liability—The total pension liability reported at December 31, 2017, based on the January 1, 2017 measurement date is \$1,984,659.

Prior Service Costs—Prior service costs are being amortized over a range of 10 to 16 years at a discount rate of 5.00%.

Contributions—BPAS recommends that the Town contributes \$112,783 to \$148,870 annually. During the fiscal year ended December 31, 2017, the Town contributed \$115,100 to the Program and paid \$4,500 of administrative fees.

Program Financial Condition

Assets and Liabilities

Total unfunded benefits

Actuarial present value of benefits at January 1, 2017

\$ 1,984,659

964,973

Less: assets available for benefits

	70 01 total		
Empire Bank	2.0%	\$ 20,785	
First Security Benefit Annuity	70.8%	721,552	
First Symetra Annutiy	27.2%	 277,349	
Total net assets available for benefits			1,019,686

% of total

During the year ended December 31, 2017, the Town accounted for Amounts Held for LOSAP within its Agency Fund. Information regarding the program assets at December 31, 2017 is presented in the following table:

Empire Bank	\$ 38,900
First Security Benefit	750,414
First Symetra	 280,129
Total	\$ 1,069,443

9. RISK MANAGEMENT

The Town is exposed to various risks of loss related to damage and destruction of assets, vehicle liability, injuries to employees, health insurance, workers' compensation and unemployment insurance. The Town purchases commercial insurance to cover such potential risks. There have not been any significant changes in any type of insurance coverage from the prior year, nor have there been any settlements which have exceeded commercial insurance coverage in the past three fiscal years.

The Town purchases insurance for: municipal general liability, building and personal property, automobile liability, inland marine, public officials, municipal excess catastrophe, and municipal crime. Municipal general liability coverage is limited to \$1,000,000 each occurrence, \$2,000,000 general aggregate, \$1,000,000 products-completed operations aggregate, \$1,000,000 personal injury and advertising aggregate, \$50,000 fire damage legal liability, \$5,000 any one person medical expense, and \$10,000 each occurrence medical expense. Building and personal property coverage is limited to \$8,262,738. Municipal crime coverage is limited to \$2,500 - \$5,000 each occurrence, with additional coverage in the Assistant to the Town Supervisor, Town Supervisor, Deputy Town Clerk/Receiver, and Second Deputy Clerk positions limited to \$500,000 each occurrence, and the Town Clerk/Receiver position limited to \$600,000 each occurrence. Employee benefits coverage is

limited to \$1,000,000 per occurrence with a \$1,000,000 aggregate. Owner's and contractor's coverage is limited to \$1,000,000 per occurrence with a \$2,000,000 aggregate. Automobile liability coverage is limited to \$1,000,000. Inland marine coverage is limited to \$740,516 for auto physical damage, \$873,668 for contractor equipment, and \$10,000 for miscellaneous equipment. Public officials' liability coverage is limited to \$1,000,000 each occurrence, \$2,000,000 annual aggregate, and \$1,000,000 land use liability each occurrence and annual aggregate. Municipal excess catastrophe liability coverage is limited to \$8,000,000 each occurrence, \$16,000,000 general aggregate, \$8,000,000 personal and advertising injury aggregate, \$8,000,000 products/completed operations aggregate, and \$8,000,000 public officials aggregate.

10. SHORT-TERM DEBT

Liabilities for bond anticipation notes ("BANs") are generally accounted for in the Capital Projects Fund. State law requires that BANs issued for capital purposes be converted to long-term obligations within five years after the original issue date. However BANs issued for assessable improvement projects may be renewed for periods equivalent to the life of the permanent financing, provided that annual reductions of principal are made. The following is a summary of the Town's short-term debt for the year ended December 31, 2017:

	Maturity	Interest	Balance			Balance
Description	Date	Rate	1/1/2017	Additions	Reductions	12/31/2017
Capital Projects Fund:						
Various capital projects	2/10/2017	1.15%	\$ 750,000	\$	\$ 750,000	\$ -

11. LONG-TERM LIABILITIES

In the government-wide financial statements, long-term debt and other long-term obligations are reported as noncurrent liabilities in the statement of net position.

In the fund financial statements, governmental funds recognize bond premiums and discounts during the current period. The face amount of debt issued is reported as other financing sources. Premiums received on debt issuances are reported as other financing sources, while discounts on debt issuances are reported as other financing uses. Further, the unmatured principal of general long-term debt does not require current appropriation and expenditure of governmental fund financial resources.

The Town's outstanding long-term liabilities include bonds payable, compensated absences, and net pension liability. The bonds payable of the Town are secured by its general credit and revenue raising powers, as per State statute.

A summary of changes in the Town's long-term liabilities at December 31, 2017 is presented below.

	Balance 1/1/2017							dditions	Re	eductions	Balance 12/31/2017	e Within ne Year
Serial bonds	\$	490,000	\$	668,451	\$	35,000	\$ 1,123,451	\$ 48,451				
Compensated absences		24,210		9,116		10,497	22,829	1,141				
Net pension liability*		310,700		-		97,489	213,211	-				
Net pension liability-LOSAP*		1,870,192		114,467			1,984,659					
Total	\$	2,695,102	\$	792,034	\$	142,986	\$ 3,344,150	\$ 49,592				

(*Additions/reductions to the net pension liability are shown net.)

Serial Bonds—The Town issues general obligation bonds to provide funds for the acquisition, construction, and renovation of major capital facilities. General obligation bonds have been issued for governmental activities. General obligation bonds are direct obligations and pledge the full faith and credit of the Town. These bonds generally are issued as serial bonds with equal amounts of principal maturing each year with maturities that range from 13 to 20 years.

On February 9, 2017, the Town issued \$668,451 in public improvement serial bonds for governmental activities. The bond proceeds were utilized to redeem outstanding BANs related to the establishment of Water Districts within the Town. The serial bonds hold an interest rate of 3.39%. Principal payments on the bonds begin February 1, 2018 and mature February 1, 2037.

Principal is paid annually, interest is paid semi-annually; these payments are recorded in various funds for governmental activities. A summary of additions and payments for the year ended December 31, 2017 is shown below.

		Year of					
	Original	Issue/	Interest	Balance			Balance
Description	Issue	Maturity	Rate (%)	1/1/2017	Additions	Reductions	12/31/2017
Consolidated Water District Fund:							
Water District No. 4	\$ 720,000	2010-2030	2.00-4.25	\$ 490,000	\$ -	\$ 35,000	\$ 455,000
Exchange Street Water District Fund	381,953	2017-2037	3.39	-	381,953	-	381,953
Zoeller Road Water District Fund	286,498	2017-2037	3.39		286,498		286,498
Total governmental activities				\$ 490,000	\$ 668,451	\$ 35,000	\$1,123,451

Compensated Absences—As described in Note 1, the Town records the value of compensated absences in the government-wide financial statements. The annual budgets of the operating funds provide for these benefits as they become due. The liability for compensated absences at December 31, 2017 for governmental activities amounts to \$22,829.

Net Pension Liability—The Town reports a liability for its proportionate share of the net pension liability for the Employees' Retirement System and LOSAP. The net pension liability is estimated to be \$2,197,870. Refer to Notes 7 and 8 for additional information related to the Town's net pension liability.

A maturity schedule of the Town's indebtedness is shown below.

Year ending	Serial	-	pensated			e 1
December 31,	 Bonds	Ab	sences	 iability		Total
2018	\$ 48,451	\$	1,141	\$ -	\$	49,592
2019	60,000		-	-		60,000
2020	60,000		-	-		60,000
2021	60,000		-	-		60,000
2022	60,000		-	-		60,000
2023-2027	325,000		-	-		325,000
2028-2032	285,000		-	-		285,000
2033 2037	225,000					225,000
Thereafter	 -		21,688	 213,211		234,899
	\$ 1,123,451	\$	22,829	\$ 213,211	\$:	1,359,491

Interest requirements on serial bonds payable are as follows:

Year ending December 31,	overnmental Activities
2018	\$ 50,453
2019	37,881
2020	35,852
2021	33,736
2022	31,532
2023-2027	122,736
2028-2032	60,425
2033-2037	19,069
Total	\$ 391,684

12. NET POSITION AND FUND BALANCE

The government-wide financial statements utilize a net position presentation. Net position is categorized as net investment in capital assets, restricted and unrestricted.

• Net Investment in Capital Assets—This category groups all capital assets, including infrastructure, into one component of net position. Accumulated depreciation and the outstanding balances of debt that are attributable to the acquisition, construction or improvement of these assets reduce the balance in this category. A reconciliation of the Town's governmental activities net investment in capital assets is presented on the following page.

Capital assets, net of accumulated depreciation	\$ 5,815,377
Less: related debt	
Serial bonds	 (1,123,451)
Net investment in capital assets	\$ 4,691,926

- Restricted Net Position—This category represents external restrictions imposed by creditors, grantors, contributors, or laws and regulations of other governments and restrictions imposed by law through constitutional provisions or enabling legislation. The Town reported no restricted net position at December 31, 2017.
- *Unrestricted Net Position*—This category represents net position of the Town not restricted for any project or other purpose.

In the fund financial statements, nonspendable amounts represent net current financial resources that cannot be spent because they are either not in spendable form or legally or contractually required to be maintained intact. Nonspendable fund balance maintained by the Town at December 31, 2017 includes:

• Prepaid Items—Represents the portion of fund balance, \$15,038, \$2,333, and \$7,928, composed of prepaid items related to retirement for the General Fund, General—Part-Town Fund, and Highway—Part-Town Fund, respectively. This balance is nonspendable as the balance does not represent an available resource.

In the fund financial statements, restricted fund balances are amounts constrained to specific purposes (such as creditors, grantors, contributors, or laws and regulations of other governments) through constitutional provisions or enabling legislation. At December 31, 2017, the Town reported no restricted fund balance.

In the fund financial statements, commitments are amounts that are subject to a purpose constraint imposed by a formal action of the Town's highest level of decision-making authority. At December 31, 2017, the Town reported no committed fund balance.

In the fund financial statements, assignments are not legally required segregations but are segregated for a specific purpose by the Town at December 31, 2017 and include the following:

-	Su	bsequent Year's				Capital	Specific	Total
	Exp	enditures_	Enci	umbrances		Projects	 Use	 Assigned
General Fund	\$	227,000	\$	17,587	\$	543,110	\$ -	\$ 787,697
General—Part-Town Fund		29,084		45,342		100,000	204,522	378,948
Highway—Part-Town Fund		80,000		-		180,373	509,610	769,983
Fire Protection Fund		10,000		-		-	110,020	120,020
Refuse Collection Fund		15,000		-		-	123,638	138,638
Nonmajor governmental funds		33,700					 206,546	240,246
Total	\$	394,784	\$	62,929	<u>\$</u>	823,483	\$ 1,154,336	\$ 2,435,532

- Assigned to Subsequent Year's Expenditures—Represents available fund balance being appropriated to meet expenditure requirements in the 2018 fiscal year.
- Assigned to Encumbrances—Represents amounts related to unperformed (executory) contracts for goods and services.
- Assigned to Capital Projects—Represents amounts related to future capital expenditures.
- Assigned to Specific Use— Represents funds related to the special revenue funds. The assignment's purpose relates to the fund's operations and represents the remaining amounts within the fund that are not restricted or committed.

If the Town must use funds for emergency expenditures, the Board shall authorize the Supervisor to expend funds first from funds classified under GASB as nonspendable (if funds become available) then restricted funds. The use of committed and assigned funds as classified by GASB will occur after the exhaustion of available restricted funds. Finally, if no other fund balances are available, the Town will use unassigned fund balance.

13. INTERFUND BALANCES AND ACTIVITY

Interfund receivables and payables are short-term in nature and exist because of temporary advances or payments made on behalf of other funds. The composition of interfund balances as of December 31, 2017 is shown on the following page.

	Interfund									
Fund	Re	ceivable	F	Payable						
General Fund	\$	18,464	\$	_						
Grant Fund		<u></u>		18,464						
Total governmental funds	\$	18,464	\$	18,464						

The outstanding balances between funds result from payments made on behalf of other funds or temporary advances. All of these balances are expected to be collected/paid within the subsequent year.

The Town made the following transfers during the year ended December 31, 2017:

	Tra	nsfers out:
	N	Ionmajor
Transfers in:		Funds
Capital Projects Fund	\$	145,110

Transfers are used primarily to move amounts to fulfill commitments, to finance various capital projects, or to pay down on outstanding debt.

14. AGENCY FUND

The Agency Fund exists for temporary deposit funds. The following is a summary of changes in assets and liabilities for the fiscal year ended December 31, 2017:

	Ba	alance						Balance
	1/1	1/2017	A	dditions	<u>r</u>	eletions	_12	2/31/2017
ASSETS								
Restricted cash and cash equivalents	\$	57,197	\$	146,294	\$	201,034	\$	2,457
LOSAP assets	1,0	019,693		148,313		98,563		1,069,443
Total assets	\$ 1,	076,890	<u>\$</u>	294,607	\$	299,597	<u>\$</u>	1,071,900
LIABILITIES								
Agency liabilities	\$	57,197	\$	252,455	\$	307,195	\$	2,457
Amounts held for LOSAP	1,	019,693		148,313		98,563		1,069,443
Total liabilities	\$ 1,	076,890	\$	400,768	\$	405,758	\$	1,071,900

15. LABOR CONTRACTS

Town employees are represented by one bargaining unit and Town Board rules and regulations. A settled contract is in place through December 31, 2018 for the Teamsters Local 264.

16. COMMITMENTS

Encumbrances—Encumbrances are commitments related to unperformed (executory) contracts for goods or services (i.e., purchase orders, contracts, and commitments). Encumbrance accounting is utilized to the extent necessary to assure effective budgetary control and accountability and to facilitate effective cash planning and control. While all appropriations and encumbrances lapse at

year end, valid outstanding encumbrances (those for which performance under the executory contract is expended in the next year) are re-appropriated and become part of the subsequent year's budget pursuant to state regulations.

The Town considers encumbrances to be significant for amounts that are encumbered in excess of \$50,000. As of December 31, 2017, the Town did not have any significant encumbrances

17. TAX ABATEMENTS

The Town is subject to tax abatements granted by either the Town or the Erie County Industrial Development Agency ("ECIDA"). These programs have the stated purpose of increasing business activity and employment in the region. Economic development agreements entered into by the ECIDA and the Town includes the abatement of state, county, local and school district taxes, in addition to other assistance. In the case of the Town the abatements have resulted in reduction in the assessed value of the property involved. The abatement agreements stipulate a percentage reduction of property taxes, which can be as much as 100 percent. Under the agreements entered into by ECIDA and the Town of Alden, the Town collected \$3,159 during the year ended December 31, 2017 in payments in lieu of taxes ("PILOT"), these collections were made in lieu of \$5,506 of property taxes.

18. CONTINGENCIES

Litigation—Various legal actions are pending against the Town. The outcome of these matters is not presently determinable, but in the opinion of management, the ultimate liability will not have a material adverse effect on the financial condition or results of operation of the Town.

Assessments—The Town is a defendant in litigation under Article 7 of the Real Property Tax Law of the State of New York to review tax assessments. While the Town vigorously defends assessments, the likelihood of success is on a case by case basis, and is dependent upon various factors including market values and appraised amounts. No potential amount or potential range of loss is determinable. However, management believes that level of such potential loss, if any, would be immaterial and no provisions have been made within the financial statements.

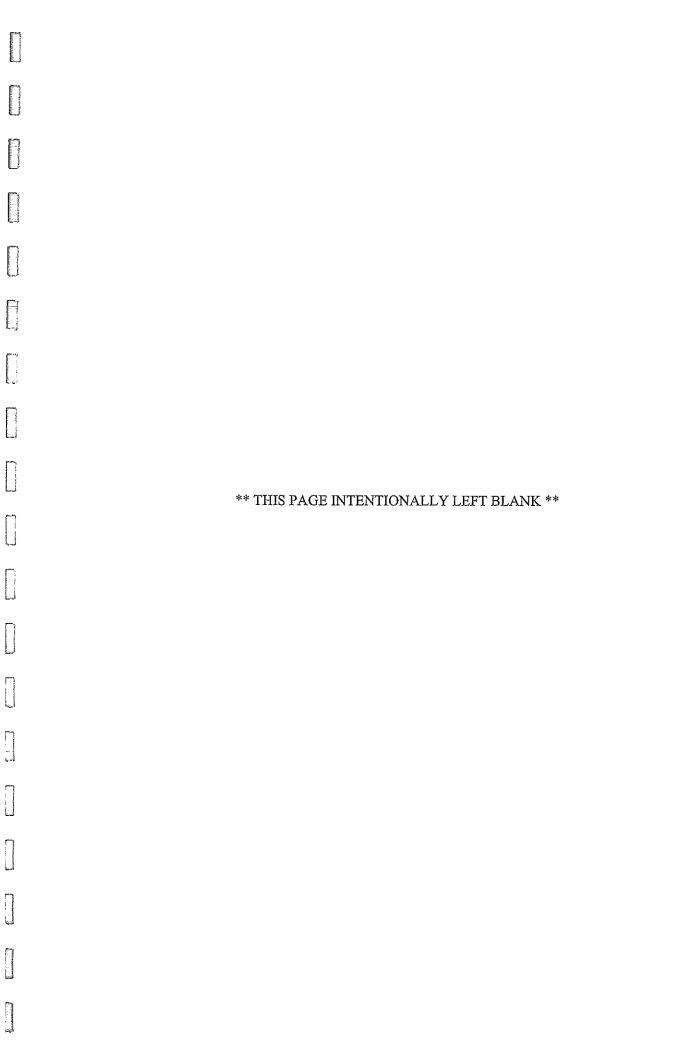
Grants—In the normal course of operations, the Town receives grant funds from various Federal and State agencies. These grant programs are subject to audit by agents of the granting authority, the purpose of which is to ensure compliance with conditions precedent to the granting of funds. Any disallowed expenditures resulting from such audits could become a liability of the governmental and proprietary funds. While the amount of expenditures, if any, which may be disallowed cannot be determined at this time, management expects any amounts to be immaterial.

19. SUBSEQUENT EVENTS

Management has evaluated subsequent events through February 28, 2018, which is the date the financial statements are available for issuance, and have determined there are no subsequent events that require disclosure under generally accepted accounting principles.

* * * * *

·	
REQUIRED SUPPLEMENTARY INFORMATION	



TOWN OF ALDEN, NEW YORK Schedule of the Town's Proportionate Share of the Net Pension Liability— Employees' Retirement System Last Four Fiscal Years*

	Year Ended December 31,								
		2017	2016			2015	2014		
Measurement date	M	arch 31, 2017	M	March 31, 2016	M	arch 31, 2015	I	March 31, 2014	
Town's proportion of the net pension liability		0.0022691%		0.0019358%	(0.0022048%		0.0022048%	
Town's proportionate share of the net pension liability	\$	213,211	<u>\$</u>	310,700	<u>\$</u>	74,482	\$	99,630	
Town's covered-employee payroll	\$	731,565	\$	668,465	\$	673,891	\$	646,206	
Town's proportionate share of the net pension liability as a percentage of its covered-employee payroll		29.1%		46.5%		11.1%		15.4%	
Plan fiduciary net position as a percentage of the total pension liability		94.7%		90.7%		97.9%		97.2%	

^{*} Information prior to the year ended December 31, 2014 is not available.

TOWN OF ALDEN, NEW YORK Schedule of the Town's Contribution—Employees' Retirement System Last Four Fiscal Years*

	Year Ended December 31,									
		2017		2016		2015		2014		
Contractually required contribution	\$	93,835	\$	90,239	\$	104,929	\$	133,198		
Contributions in relation to the contractually required contribution		(98,748)		(90,239)		(104,929)		(133,198)		
Contribution deficiency (excess)	\$	_	\$	-	<u>\$</u>	***	\$			
Town's covered-employee payroll	\$	718,748	\$	701,241	\$	688,081	\$	1,131,532		
Contributions as a percentage of covered-employee payroll		13.1%		12.9%		15.2%		11.8%		

^{*} Information prior to the year ended December 31, 2014 is not available.

Schedule of Revenues, Expenditures, and Changes in Fund Balances— Budget and Actual—General Fund Year Ended December 31, 2017

	Budgeted .	Amounts	Actual	Variance with		
	Original	Final	Amounts	Final Budget		
REVENUES						
Real property taxes	663,700	663,700	667,739	\$ 4,039		
Other property tax items	21,300	21,300	24,611	3,311		
Non-property tax items	323,878	323,878	329,001	5,123		
Departmental income	48,458	48,458	53,761	5,303		
Intergovernmental charges	-	-	727	727		
Use of money and property	4,100	4,100	10,142	6,042		
Licenses and permits	12,790	12,790	16,350	3,560		
Fines and forfeitures	55,000	55,000	84,262	29,262		
Miscellaneous	-	-	1,289	1,289		
State aid	190,200	190,200	223,455	33,255		
Total revenues	1,319,426	1,319,426	1,411,337	91,911		
EXPENDITURES						
Current:						
General government support	720,615	697,108	623,683	73,425		
Public safety	64,588	64,588	58,700	5,888		
Health	1,000	1,000	1,000	<u></u>		
Transportation	90,716	109,123	101,244	7,879		
Economic assistance and opportunity	42,696	42,696	35,066	7,630		
Culture and recreation	358,811	391,671	391,671	-		
Home and community services	2,050	2,050	1,080	970		
Employee benefits	205,500	205,500	173,937	31,563		
Total expenditures	1,485,976	1,513,736	1,386,381	127,355		
OTHER FINANCING USES						
Transfers out	(55,000)	(55,000)		55,000		
Total other financing uses	(55,000)	(55,000)		55,000		
Net change in fund balances*	(221,550)	(249,310)	24,956	274,266		
Fund balances—beginning	1,738,353	1,738,353	1,738,353			
Fund balances—ending	\$ 1,516,803	\$ 1,489,043	\$ 1,763,309	\$ 274,266		

^{*} The net change in fund balances was included in the budget as an appropriation (i.e., spenddown) of fund balance and reappropriation of prior year encumbrances.

Schedule of Revenues, Expenditures, and Changes in Fund Balances— Budget and Actual—General—Part-Town Fund Year Ended December 31, 2017

		Budgeted Amounts				Actual	Variance with	
		Original	<u>Final</u>		Amounts		Final Budget	
REVENUES								
Non-property tax items	\$	210,059	\$	210,059	\$	272,393	\$	62,334
Departmental income		1,000		1,000		1,150		150
Intergovernmental charges		500		500		500		_
Use of money and property		300		300		2,086		1,786
Licenses and permits		22,000		22,000		32,899		10,899
Total revenues	-	233,859		233,859		309,028		75,169
EXPENDITURES								
Current:								
General government support		2,500		2,500		1,050		1,450
Public safety		86,559		86,559		85,370		1,189
Economic assistance and opportunity		28,500		28,500		20,500		8,000
Home and community services		68,557		103,557		43,557		60,000
Employee benefits		51,500		51,500		41,178		10,322
Total expenditures		237,616	_	272,616		191,655		80,961
Net change in fund balances*		(3,757)		(38,757)		117,373		156,130
Fund balances—beginning		263,908		263,908		263,908		
Fund balances—ending	\$	260,151	\$	225,151	\$	381,281	\$	156,130

^{*} The net change in fund balances was included in the budget as a reappropriation of prior year encumbrances.

Schedule of Revenues, Expenditures, and Changes in Fund Balances— Budget and Actual—Highway—Part-Town Fund Year Ended December 31, 2017

	Budgeted Amounts				Actual		Variance with	
	Original		Final		Amounts		Final Budget	
REVENUES								
Real property taxes	\$	234,914	\$	234,914	\$	234,914	\$ -	
Non-property tax items		450,500		450,500		450,500	-	
Intergovernmental charges		100,000		100,000		132,137	32,137	
Use of money and property		1,000		1,000		3,085	2,085	
Licenses and permits		-		-		2,250	2,250	
Sale of property and insurance recoveries		400		400		788	388	
State aid		78,078		94,390		95,866	1,476	
Total revenues		864,892		881,204		919,540	38,336	
EXPENDITURES								
Current:								
General governmental support		5,000		3,424		92	3,332	
Transportation		775,392		793,279		662,186	131,093	
Employee benefits	_	164,500		164,500		133,863	30,637	
Total expenditures		944,892		961,203		796,141	165,062	
Excess (deficiency) of revenues								
over expenditures		(80,000)		(79,999)		123,399	203,398	
Fund balances—beginning		654,512		654,512		654,512		
Fund balances—ending	<u>\$</u>	574,512	\$	574,513	\$	777,911	\$ 203,398	

^{*} The net change in fund balances was included in the budget as an appropriation (i.e., spenddown) of fund balance.

Schedule of Revenues, Expenditures, and Changes in Fund Balances— Budget and Actual—Fire Protection Fund

Year Ended December 31, 2017

	Budgeted	Amounts	Actual	Variance with Final Budget	
	Original	Final	Amounts		
REVENUES					
Real property taxes	757,413	757,413	757,413	\$ -	
Use of money and property	125	125	<u>593</u>	468	
Total revenues	757,538	757,538	758,006	468	
EXPENDITURES					
Current:					
Public safety	630,638	630,638	620,540	10,098	
Employee benefits	136,900	136,900	126,887	10,013	
Total expenditures	767,538	767,538	747,427	20,111	
Net change in fund balances*	(10,000)	(10,000)	10,579	20,579	
Fund balances—beginning	109,441	109,441	109,441		
Fund balances—ending	\$ 99,441	\$ 99,441	\$ 120,020	\$ 20,579	

^{*} The net change in fund balances was included in the budget as an appropriation (i.e., spenddown) of fund balance.

Schedule of Revenues, Expenditures, and Changes in Fund Balances— Budget and Actual—Refuse Collection Fund Year Ended December 31, 2017

	Budgeted Amounts					Actual		Variance with	
	_ (Original Final			Amounts		Final Budget		
REVENUES									
Real property taxes		430,500		430,500		430,500	\$	-	
Departmental income		500		500		207		(293)	
Use of money and property		2,000		2,000		2,842		842	
State aid				_		1,184		1,184	
Total revenues		433,000	_	433,000		434,733		1,733	
EXPENDITURES									
Current:									
Home and community services		448,000		448,000		421,179		26,821	
Total expenditures		448,000		448,000		421,179		26,821	
Net change in fund balances*		(15,000)		(15,000)		13,554		28,554	
Fund balances—beginning		125,084		125,084		125,084			
Fund balances—ending	\$	110,084	\$	110,084	\$	138,638	\$	28,554	

^{*} The net change in fund balances was included in the budget as an appropriation (i.e., spenddown) of fund balance.

TOWN OF ALDEN, NEW YORK Note to the Required Supplementary Information Year Ended December 31, 2017

1. BUDGETARY INFORMATION

Budgetary Basis of Accounting—Annual budgets are adopted on a basis consistent with generally accepted accounting principles in the United States of America for all governmental funds, with the exception of the Grant Fund and Capital Projects Fund. The Grant Fund and Capital Projects Fund are appropriated on a project-length basis; appropriations are approved through Town Board resolution at the project's inception and lapse upon termination of the project.

The appropriated budget is prepared by fund, function, and department. Transfers of appropriations require the approval of the Town Board. The legal level of budgetary control (i.e., the level at which expenditures may not legally exceed appropriations) is the departmental level.

Appropriations in all budgeted funds lapse at the end of the fiscal year even if they have related encumbrances. Encumbrances are commitments related to unperformed (executory) contracts for goods or services (i.e., purchase orders, contracts, and commitments). Encumbrance accounting is utilized to the extent necessary to assure effective budgetary control and accountability and to facilitate effective cash planning and control. While all appropriations and encumbrances lapse at year end, valid outstanding encumbrances (those for which performance under the executory contract is expended in the next year) are re-appropriated and become part of the subsequent year's budget pursuant to state regulations.

** THIS PAGE INTENTIONALLY LEFT BLANK **

SUPPLEMENTARY INFORMATION



TOWN OF ALDEN, NEW YORK
Combining Balance Sheet—Nonmajor Governmental Funds
December 31, 2017

Total Nonmajor Funds	253,037 30 253,067	6,437 6,384 12,821	240,246 240,246	253,067
T Non	8 8	€9		8
Water District Exchange Street	22,635	1 1	22,635	22,635
	e e	69		ام
Water District Zoeller Road	\$ 25,504		25,504	\$ 25,504
Water District No. 5	32		32	32
W ₂ Dist	es es	€9		es l
Consolidated Water District	21,839	1 1 1	21,839	21,839
ŭ l	e e	6		-S
Water District No. 1	\$ 20,012 5 \$ 20,017	ı ı ı ı ı	20,017	\$ 20,017
Sewer District No. 2	72,272	706	71,566	\$ 72,272
Ser Disi	\$ 8	€9	7	\$
Sewer District No. 1	37,047 10 37,057	6,384	30,673	37,057
ا د ا	& & \	31 \$	୍ଥା ଛା ଛାଛା	\$ 02
Periwinkle Lighting District	3,320	1	3,289	3,320
1	↔ ↔	↔		60
Consolidated Lighting District	\$0,376 \$ 15 50,391 \$	5,700 \$	44,691	50,391 \$
Con	es es	69		69
	ASSETS Cash and cash equivalents Receivables Total assets	LIABILITIES Accounts payable Intergovernmental payables Total liabilities	FUND BALANCES Assigned Total fund balances	Total liabilities and fund balances
	A!		¥ '	

The second second

Employee Trans

Combining Statement of Revenues, Expenditures, and Changes in Fund Balances—Nonmajor Governmental Funds
Year Ended December 31, 2017 TOWN OF ALDEN, NEW YORK

	Consolidated	Periwinkle	Sewer	Sewer	Water	Consolidated	Water	Water District	Water District	Total
	Lighting	Lighting	District	District	District	Water	District	Zoeller	Exchange	Nonmajor
	District	District	1.00.1	No. 2	No. I	District	No. 5	Road	Street	Funds
REVENUES Real property taxes	\$ 74,750	\$	\$ 4,550	\$ 48,441	\$ 6,650	\$ 93,186	\$ 5,218	\$ 23,359	\$ 33,241	\$ 289,995
Use of money and property	404	8	234	201	135	105	1	. 65	09	1,212
Miscellaneous		1		ı	-	1	4	19,440	21,600	41,040
Total revenues	75,154	809	4,784	48,642	6,785	93,291	5,218	42,864	54,901	332,247
EXPENDITURES										
Current:										
Transportation	74,204	476	ı	t .	•	ı	1	r	1	74,680
Home and community services	ı	1	6,384	39,786	8,093	63,685	5,228	1,126	1,929	126,231
Debt service:										
Principal	ı	1	1	1	ı	35,000	ı	1	F	35,000
Interest and other fiscal charges	ı	-	-	-	1	18,200		9,929	11,154	39,283
Total expenditures	74,204	476	6,384	39,786	8,093	116,885	5,228	11,055	13,083	275,194
Excess (deficiency) of revenues										
over expenditures	950	132	(1,600)	8,856	(1,308)	(23,594)	(10)	31,809	41,818	57,053
OTHER FINANCING USES										
Transfers out	ř	1	•	t	•	1	ı	(57,501)	(87,609)	(145,110)
Total other financing uses		t	t	ı	1	1		(57,501)	(87,609)	(145,110)
Net change in fund balances	950	132	(1,600)	8,856	(1,308)	(23,594)	(10)	(25,692)	(45,791)	(88,057)
Fund balancesbeginning	43,741	3,157	32,273	62,710	21,325	45,433	42	51,196	68,426	328,303
Fund balances—ending	\$ 44,691	\$ 3,289	\$ 30,673	\$ 71,566	\$ 20,017	\$ 21,839	\$ 32	\$ 25,504	\$ 22,635	\$ 240,246

** THIS PAGE INTENTIONALLY LEFT BLANK **

Drescher & Malecki LLP

3083 William Street, Suite 5 Buffalo, New York 14227 Telephone: 716.565.2299

Fax: 716.565.2201



Certified Public Accountants

INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

The Honorable Town Board of the Town of Alden, New York

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of the Town of Alden, New York (the "Town") as of and for the year ended December 31, 2017, and the related notes to the financial statements, which collectively comprise the Town's basic financial statements, and have issued our report thereon dated February 28, 2018.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Town's internal control over financial reporting ("internal control") to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Town's internal control. Accordingly, we do not express an opinion on the effectiveness of the Town's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over financial reporting that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that were not identified. Given these limitations, during our audit we did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified. We did identify certain deficiencies in internal control, as described in the accompanying schedule of findings as items 2017-001 and 2017-002, which we consider to be significant deficiencies.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Town's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

The Town's Response to Findings

The Town's response to the findings identified in our audit is described in the accompanying schedule of findings. The Town's response was not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on the response.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Auch & Maldi LLP

February 28, 2018

TOWN OF ALDEN, NEW YORK

Schedule of Findings Year Ended December 31, 2017

We consider the deficiencies presented below to be significant deficiencies in internal control.

Finding 2017-001—Information Technology ("IT") User Access, Policies and Procedures

Criteria—The Town's financial software (the "Financial System") users should not be able to create new or remove/edit existing users within the Financial System and also have access to general ledger functions. Adding and modifying accounts and users should be restricted to the Financial System administrator. Also, the Town should maintain a formalized IT policy covering such areas as: creation, modification and deletion of users; disaster recovery plan; backups; and password protection.

Condition and Context—During our review of the Town's IT environment and Financial System, we found that a user had administrative privileges, which allowed for the creation, modification and deletion of user accounts as well as access to general ledger functions within the Financial System. Additionally, we noted that the Town does not maintain a formalized IT policy which covers the aforementioned areas.

Cause—The Town does not adequately restrict administrative privileges within its Financial System. The Town does not have formalized policies for user accounts, disaster recovery, backups, or password protection.

Effect or Potential Effect—A Town Financial System user has the ability to create an account for an unapproved individual, leading to the potential for misstatement or misappropriation of assets through the Financial System. The lack of a formalized IT policy that outlines areas such as creation, modification and deletion of users, disaster recovery plan, backups, and password protection may provide the opportunity for user accounts to be improperly created or modified, loss of important data as result to a natural disaster, or access admitted to unauthorized users through the lack of password protection.

Recommendation—We recommend that the Town restrict administrative privileges to an individual that is separate from day to day general ledger functions. The administrative privileges could be assigned to another department outside of accounting. Additionally, we recommend that the Town adopt a policy to include formalized procedures surrounding the creation, modification and deletion of user accounts, backup procedures, and password protection. The Town should consider formalizing a disaster recovery plan and ascertain whether it has sufficient cybersecurity insurance.

View of Responsible Officials and Corrective Action Plan—Due to the nature and size of the Town, certain improvements to IT control activities and policies and procedures have been deemed impractical due to cost effectiveness. The Town has improved on former deficiencies within our IT environment over the past three years, including the addition of a new server and improved backup procedures to securely store backup information in different locations. The Town will continue to evaluate the feasibility of the creation and implementation of such control activities and formalized policies and procedures during 2018.

Finding 2017-002—Journal Entries

Criteria—All necessary journal entries should be made throughout the year and should be reviewed and approved for accuracy and appropriateness prior to posting to the general ledger. Journal entries should not be made to fund balance.

Condition and context—During the audit, it was noted that some manual journal entries were not reviewed or approved prior to posting to the general ledger. The part-time clerk has the capability to post entries to the general ledger without review or approval. Journal entries are submitted to the Supervisor for approval and review, as determined necessary, by the part-time clerk.

It was noted that the Town did not make appropriate entries needed to record the Town's debt issuance. In addition, the part-time clerk recorded various improper accounting adjustments directly to fund balance without the knowledge of the Board.

Cause—Lack of an adequate control system including proper segregation of duties between the preparation and posting of journal entries, and an incomplete review and approval policy encompassing the preparation and posting of all manual journal entries.

Effect or Potential Effect—The ability to post entries without review and the ability to edit/override entries creates the opportunity to conduct fraudulent activities. There is an increased potential for the misappropriation of assets, as well as the potential to materially misstate the Town's financial statements.

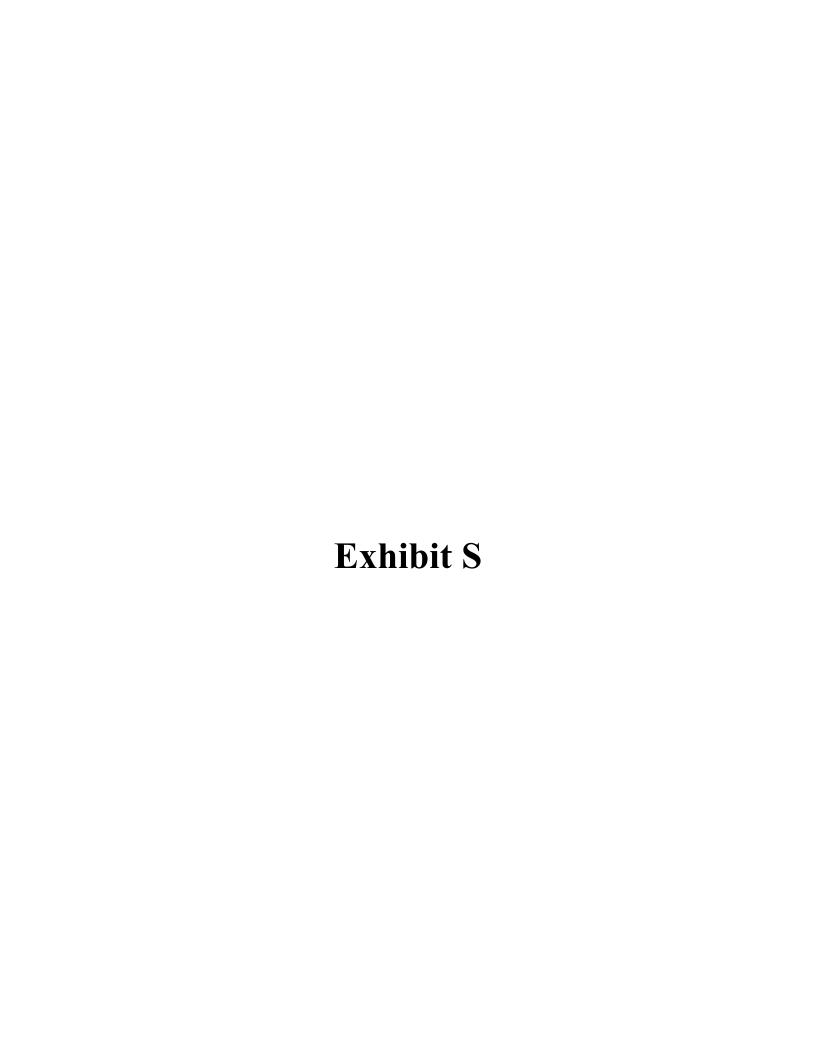
Recommendation—We recommend that the standard journal entry form, currently in use for certain types of entries, be utilized prior to the posting of the entry rather than subsequent to the posting. We recommend implementing automated journal entry controls within the Town's Financial System to restrict the posting of non-recurring entries to the general ledger prior to approval by a separate user. Additionally, all necessary entries should be made throughout the year in order to record the Town's operations. No entries should be made to fund balance, unless approved by the Town Board.

View of Responsible Officials and Corrective Action Plan— The Town understands the risk associated with posting journal entries to the general ledger prior to review by a separate user and has begun to implement posting the entry to the system as pending. The Town will ensure that going forward all journal entries will be approved prior to posting and that all necessary entries are made throughout the year in order to keep the financial records up-to-date and accurate.

Funding Document For EMS Agencies

Please complete the following information regarding the funding of your agency. MIE. Besponse is mandalogy, fallige to complete this form accurately maximized your accury, authority to collect thesi or prefospitia DOH agency code 6259 Name of EMS agency Town of Alden EMS Does your EMS agency bill (collect fees for prehospital transport/patient care)? 🕮 Yes 🛄 No If Yes, does your agency process its own billing and filings to Medicare/Medicaid/private insurance for prehospital transport/patient care fees? Yes 🗷 No If Yes, skip to Funding Sources section below. If No, indicate the name of the "Service Bureau" or contractor that processes the billing for your EMS agency EMS Agency NYS Medicaid provider ID number 03304836 Service Bureau NYS Medicaid ID number 03304836 Note: if your contractor also provides EMS, the Service Bureau is not the same ID used by that EMS agency for its own billing, or your ID this is a separate ID number issued to the contractor by Medicaid authorizing the contractor to process/submit billing for 3rd party EMS agencies. New for extre department of dealth will assume that cause to remote a valid O number the effections serves duried indicates that gourse prices dilling oractices and or contractor services are unhaving and walk report them in this New York State. **Funding Sources** Identify ALL of the funding sources received by your EMS agency. Fire District(s)[NOT fire protection districts] (If more than one district, list additional on back of this page. List Fire Protection Districts below) Ambulance District [legal name of taxing district] (If more than one district, list additional on page 2) Municipal Contracts [other than fire districts] (List all municipalities your agency holds EMS contracts with including County, City, Town, Village, and Fire Protection Districts. List additional municipalities on page 2) Donations or fund-raisers Not-for-profit status 501(c)(3) Other NFP_ Town of Alden General Fund tax revenues (Include agreements/contracts with service fees to provide ALS to other certified services, i.e., ALS assists) Service's approximate total annual EMS operating budget 7500 Is your service an operator for another service that bills? Yes No If Yes, service name Name of person completing this form Richard A. Savage, Title of person completing form Town Supervisor, Town of Alden Date completed _ Signature of person completing this form

Additional Funding Information
Designate type of funding source as defined on page 1. The Town of Alden contracts with Lancaster Volunteer Ambulance Corps, Inc. ("LVAC") for services pursuant to the
authority of General Municipal Law 122-b. The contract provides that the Town will compensate LVAC from revenues
generated from the billing, with a contractual cap. To the extent that billing revenue does not cover all Town expenses,
Town tax revenues are used for other expenses.



LANCASTER POLICE DEPARTMENT

COMPLAINT SUMMARY REPORT

LVAC / Town Alden



Report Date: 7/22/2018

Saturday 08/06/2016	16-613283 4504 - EMS 12513 NORTH RD ALDEN TOV		
Received: 14:56:43	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 14:57:55	Officer 2: LVAC7 - 701	Dispatched By:	STEWART ANGELA -
Arrived: 15:05:21	Officer 3:	Source:	E-911
Completed: 17:14:23	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Tuesday 08/09/2016	16-613469 4414 - FIRE CO-DE 12244 BLOSSOM LEA DR ALD		
Received: 22:35:49	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 22:35:51	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 22:44:20	Officer 3:	Source:	E-911
Completed: 23:22:39	"Officer 4:	Notified:	
Associated Person:			*
Friday 08/12/2016	16-613621 4902 - INJURY ACC 11660 GENESEE ST ALDEN TO		
Received: 05:22:25	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 05:23:32	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 05:28:32	Officer 3:	Source:	PHONE
Completed: 06:03:36	Officer 4:	Notified:	
Associated Persor			
Saturday 08/13/2016	16-613691 4504 - EMS 12514 W MAIN ST 4 ALDEN TO		
Received: 06:01:07	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 06:02:08	Officer 2: LVAC7 - 701	•	STEWART ANGELA -
Arrived: 06:08:06	Officer 3:	Source:	E-911
Completed: 07:08:33	Officer 4:	Notified:	
Associated Person:			
Tuesday 08/16/2016	16-613907 4504 - EMS 3595 POHL RD ALDEN TOWN		
Received: 14:32:08	Officer 1: MILLGRÖVE FIRE	Received By:	COHAN SHARON - D85
Dispatched: 14:32:09	Officer 2: LVAC7 - 701		COHAN SHARON - D85
Arrived: 14:34:27	Officer 3: RURAL METRO	Source:	E-911
Completed: 14:43:35	Officer 4:	Notified:	
Associated Person			
Saturday 08/20/2016	16-614181 4504 - EMS 12783 W MAIN ST ALDEN TO	WN	
	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Received: 20:11:29	Officer Laborations Delicity		
Received: 20:11:29 Dispatched: 20:11:29	- · · · · · · · · · · · · · · · · · · ·	Dispatched By:	
Received: 20:11:29 Dispatched: 20:11:29 Arrived: 20:16:51	Officer 2:LVAC7 - 701 Officer 3:	Dispatched By: Source:	: E-911
Dispatched: 20:11:29	Officer 2:LVAC7 - 701		

Sunday 08/28/2016	16-614638 4504 - EMS	<u> </u>	
•	11856 BROADWAY ALDEN T		
Received: 07:39:18	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 07:39:58	Officer 2:LVAC7 - 701		STEWART ANGELA -
Arrived: 07:39:59	Officer 3:	Source:	PHONE
Completed: 09:46:42	Officer 4:	Notified:	
Associated Person:			
Friday 09/02/2016	16-614944 4504 • EMS 12773 UEBELHOER RD ALDI	EN TOWN	
Received: 05:12:51	Officer 1: CRITTENDEN FIRE	Received By:	
Dispatched: 05:13:08	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	
Arrived: 05:24:57	Officer 3:LVAC7 - 701	Source:	E-911
Completed: 06:53:29	Officer 4:	Notified:	
Associated Person			
Thursday 09/08/2016	16-615335 4504 - EMS 12472 BROADWAY ALDEN I	rown	
Received: 06:37:41	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 06:37:58	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 06:42:25	Officer 3:	Source:	PHONE
Completed: 07:34:33	Officer 4:	Notified:	
Associated Person:			
Friday 09/09/2016	16-615435 4504 - EMS 3622 WENDE RD ALDEN TO	wn	
Received: 17:52:40	Officer 1: MILLGROVE FIRE	Received By:	ARMSTRONG
Dispatched: 17:53:16	Officer 2:LVAC7 - 701		ARMSTRONG
Arrived: 17:59:25	Officer 3:	Source:	PHONE
Completed: 18:53:29	Officer 4:	Notified:	
Associated Person			
Sunday 09/11/2016	16-615570 4504 - EMS 3622 WENDE RD ALDEN TO		
Received: 19:20:21	Officer 1: MILLGROVE FIRE	Received By:	SCHAEFER TAMMIE -
Dispatched: 19:20:21	Officer 2:LVAC7 - 701	Dispatched By:	SCHAEFER TAMMIE -
Arrived: 19:29:52	Officer 3:	Source:	PHONE
Completed: 20:34:37	Officer 4:	Notified:	
Associated Person:			
Monday 09/12/2016	16-615613 4504 - EMS 3040 WENDE RD ALDEN TO	WN	
Received: 12:24:25	Officer 1: MILLGROVE FIRE	Received By:	COHAN SHARON - D85
Dispatched: 12:24:26	Officer 2:LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived: 12:29:49	Officer 3:	Source:	PHONE
Completed: 13:34:36	Officer 4:	Notified:	
Associated Person:	_		
Monday 09/12/2016	16-615637 4504 - EMS 1309 VILLAGE PARK DR ALI	DEN TOWN	
Received: 20:24:03	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 20:24:10	Officer 2: LVAC7 - 701	•	SCHAEFER TAMMIE -
Arrived: 20:29:06	Officer 3:	Source:	E-911
Completed: 21:18:33	Officer 4:	Notified:	LIEUTENANT
Associated Person:			

Monday 09/19/2016	16-615994 4504 - EMS 2338 CRITTENDEN RD ALDEN	I TOWN	**
Received: 01:35:34 Dispatched: 01:36:48 Arrived: 01:44:59 Completed: 02:28:02	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person:			
Tuesday 09/20/2016	16-616059 4504 - EMS 11762 MANITOU DR ALDEN T	OWN	
Received: 08:36:27 Dispatched: 08:36:28 Arrived: 08:50:40 Completed: 09:35:59	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - PAWLIKOWSKI JEAN - E-911
Associated Person:			
Sunday 09/25/2016	16-616409 4504 - EMS 11400 BROADWAY ALDEN TO	OWN	
Received: 17:50:00 Dispatched: 17:50:03 Arrived: 17:59:23 Completed: 18:20:07 Associated Person	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Monday 09/26/2016	16-616453 4504 - EMS 11581 WALDEN AV ALDEN TO		
Received: 13:40:47 Dispatched: 13:40:55 Arrived: 13:44:28 Completed: 14:35:50	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - E-911 LIEUTENANT
Associated Person: Wednesday 09/28/2016	16-616537 4504 - EMS		
,	11301 KIEFFER RD ALDEN TO	OWN	
Received: 08:10:05 Dispatched: 08:10:33 Arrived: 08:22:14 Completed: 09:20:01 Associated Person:	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - E-911
Wednesday 09/28/2016	16-616575 4504 - EMS 785 TOWNLINE RD ALDEN TO	OWN	
Received: 20:39:58 Dispatched: 20:39:59 Arrived: 20:40:00 Completed: 20:48:54 Associated Person:	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - PHONE
Thursday 09/29/2016	16-616597 4504 - EMS 638 BAUDER PARK DR ALDE	N TOWN	·····
Received: 08:42:55 Dispatched: 08:44:34 Arrived: 08:56:17 Completed: 09:55:45	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - E-911

Thursday 09/29/2016 16-616631 4504 - EMS 12701 BROADWAY ALDEN TOWN Received: 19:55:08 Officer 1: ALDEN FIRE DEPT - 9 Received By: STEWART ANGELA -Dispatched: 19:56:35 Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Officer 3: Source: E-911 Arrived: 19:58:23 Notified: Completed: 20:18:36 Officer 4: Associated Person: Friday 09/30/2016 16-616658 4504 - EMS 3581 S NEWSTEAD RD ALDEN TOWN Officer 1: CRITTENDEN FIRE Received: 13:32:18 Received By: Dispatched By: PAWLIKOWSKI JEAN -Officer 2:LVAC7 - 701 **Dispatched: 13:32:35** Officer 3: Source: E-911 Arrived: 13:41:52 Notified: Officer 4: Completed: 14:15:03 Associated Person: Saturday 10/01/2016 16-616689 4504 - EMS 1120 E BONNIE LAKE DR ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 02:04:33 Received By: Officer 2: LVAC7 - 701 Dispatched By: Dispatched: 02:06:47 Source: Arrived: Officer 3: E-911 02:14:26 Completed: 02:57:29 Officer 4: Notified: Associated Person: Monday 10/03/2016 16-616808 4504 - EMS 1451 WEST DR ALDEN TOWN Received: 11:38:29 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 11:40:31 Officer 2:LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Officer 3: Source: Arrived: 11:55:00 E-911 Notified: Officer 4: Completed: 12:34:48 Associated Person: Tuesday 10/04/2016 16-616870 4504 - EMS 662 COUNTY LINE RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 **SCHAEFER TAMMIE -**Received: 16:07:55 Received By: Dispatched: 16:07:59 Officer 2:LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: Officer 3: Source: PHONE 16:15:00 Officer 4: Notified: Completed: 16:24:31 Associated Person: Wednesday 10/05/2016 16-616916 4504 - EMS **423 TOWNLINE RD ALDEN TOWN** Officer 1: TOWNLINE FIRE DEPT Received: 10:15:55 Received By: PAWLIKOWSKI JEAN -Dispatched: 10:15:56 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Source: Arrived: 10:25:38 Officer 3: E-911 Completed: 11:25:01 Officer 4: Notified: Associated Person: Associated Person: Wednesday 10/05/2016 16-616952 4504 - EMS 933 E BONNIE LAKE DR ALDEN TOWN Received: 19:23:30 Officer 1: TOWNLINE FIRE DEPT Received By: SCHAEFER TAMMIE -Dispatched: 19:23:30 Officer 2:LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: 19:32:35 Officer 3: Source: E-911 Completed: 19:51:48 Officer 4: Notified: Associated Person:

16-616974 4504 - EMS Thursday 10/06/2016 . . . 11731 PARKWOOD DR ALDEN TOWN Received: 07:05:37 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 07:05:42 Officer 2:LVAC7 - 701 Source: Officer 3: E-911 Arrived: 07:19:49 Notified: Officer 4: Completed: 08:24:17 Associated Persona Associated Person: R 16-616991 4504 - EMS Thursday 10/06/2016 299 EXCHANGE ST ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Received: 12:52:09 Dispatched By: PAWLIKOWSKI JEAN -Officer 2:LVAC7 - 701 Dispatched: 12:52:19 Officer 3: Source: E-911 Arrived: 12:59:36 Completed: 13:18:55 Officer 4: Notified: Associated Person: Associated Person: Thursday 10/06/2016 16-617009 4504 - EMS 11389 GENESEE ST ALDEN TOWN Received: 16:42:36 Officer 1: MILLGROVE FIRE Received By: **BALK JENNIFER - D87** Dispatched: 16:42:37 Dispatched By: BALK JENNIFER - D87 Officer 2: LVAC7 - 701 Arrived: 16:48:31 Officer 3: Source: E-911 Notified: LIEUTENANT Completed: 17:41:36 Officer 4: Associated Person: (Thursday 10/06/2016 16-617014 4504 - EMS 13493 GENESEE ST ALDEN TOWN Officer 1: CRITTENDEN FIRE Received: 17:33:18 Received By: SCHAEFER TAMMIE -Dispatched By: SCHAEFER TAMMIE -Dispatched: 17:33:19 Officer 2: LVAC7 - 701 Arrived: 17:36:17 Officer 3: Source: E-911 Completed: 19:33:38 Officer 4: Notified: LIEUTENANT Associated Person: Friday 10/07/2016 16-617053 4504 - EMS 3507 POHL RD ALDEN TOWN Received: 05:58:15 Officer 1: MILLGROVE FIRE Received By: Dispatched: 05:58:17 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 06:03:05 Officer 3: Source: E-911 Completed: 07:57:48 Officer 4: Notified: Associated Person: G Associated Person: Friday 10/07/2016 16-617067 4504 - EMS 947 E BONNIE LAKE DR ALDEN TOWN Received: 10:26:57 Officer 1: TOWNLINE FIRE DEPT Received By: PAWLIKOWSKI JEAN -Dispatched: 10:26:58 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 10:36:24 Officer 3: Source: E-911 Officer 4: Completed: 11:20:05 Notified: Associated Person: Associated Person: Friday 10/07/2016 16-617077 4504 - EMS **521 SULLIVAN RD ALDEN TOWN** Received: 13:28:07 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 13:30:32 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 13:36:02 Officer 3: Source: E-911 Completed: 14:32:33 Officer 4: Notified: Associated Person: (

16-617144 4504 · EMS Saturday 10/08/2016 11374 KIEFFER RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received By: Received: 15:59:06 Dispatched By: Officer 2: LVAC7 - 701 Dispatched: 15:59:57 Source: E-911 Officer 3: Arrived: 16:06:56 Notified: LIEUTENANT Officer 4: Completed: 16:27:42 Associated Person: Saturday 10/08/2016 16-617159 4504 - EMS 11621 GENESEE ST ALDEN TOWN Officer 1: MILLGROVE FIRE Received By: Received: 22:15:39 Dispatched By: Officer 2: LVAC7 - 701 Dispatched: 22:17:11 Source: E-911 Arrived: 22:21:47 Officer 3: Notified: Officer 4: Completed: 23:01:29 Associated Person: Monday 10/10/2016 16-617244 4504 - EMS 1451 WEST DR ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 11:21:04 Dispatched By: FIRESTONE JANE -Officer 2: LVAC7 - 701 Dispatched: 11:21:04 E-911 Source: Arrived: 11:29:33 Officer 3: Notified: Officer 4: Completed: 12:36:46 Associated Person: i 16-617289 4504 - EMS Tuesday 10/11/2016 11980 WALDEN AV ALDEN TOWN Received: 05:01:46 Officer 1: MILLGROVE FIRE Received By: Dispatched By: Dispatched: 05:02:50 Officer 2:LVAC7 - 701 Officer 3: Source: PHONE Arrived: 05:10:47 Notified: Completed: 05:47:56 Officer 4: Associated Person: § Tuesday 10/11/2016 16-617304 4504 - EMS 1254 E LARAY DR ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received By: Received: 10:43:14 Officer 2:LVAC7 - 701 Dispatched: 10:43:17 Dispatched By: Arrived: Source: E-911 10:52:41 Officer 3: Completed: 11:42:57 Officer 4: Notified: Associated Person: 16-617524 4504 - EMS Saturday 10/15/2016 1614 SANDRIDGE RD ALDEN TOWN Received: 12:37:59 Officer 1: ALDEN FIRE DEPT - 9 Received By: **COHAN SHARON - D85** Dispatched: 12:38:00 Officer 2: LVAC7 - 701 Dispatched Bv: COHAN SHARON - D85 Arrived: 12:44:05 Officer 3: Source: PHONE Notified: Completed: 13:03:00 Officer 4: Associated Person: Saturday 10/15/2016 16-617545 4504 - EMS 11581 WALDEN AV ALDEN TOWN Received: 19:42:34 Officer 1: MILLGROVE FIRE Received By: SCHAEFER TAMMIE -Dispatched: 19:42:40 Officer 2: LVAC7 - 701 Dispatched By: **SCHAEFER TAMMIE -**Arrived: 19:46:08 Officer 3: Source: PHONE Completed: 20:10:40 Officer 4: Notified: Associated Person: Q

Sunday 10/16/2016	16-617571 4504 - EMS 959 E BONNIE LAKE DR ALD	EN TOWN	
Received: 09:27:06	Officer 1: TOWNLINE FIRE DEPT		COHAN SHARON - D85
Dispatched: 09:27:09	Officer 2:LVAC7 - 701		FIRESTONE JANE -
Arrived: 09:35:55	Officer 3:	Source:	E-911
Completed: 10:38:21	Officer 4:	Notified:	<u> </u>
Associated Persor			
Tuesday 10/18/2016	16-617684 4504 - EMS 2374 CRITTENDEN RD ALDE	N TOWN	
Received: 00:18:50	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 00:19:41	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 00:26:18	Officer 3:	Source:	E-911
Completed: 01:42:03	Officer 4:	Notified:	
Associated Person: V			
Thursday 10/20/2016	16-617813 4504 - EMS 11581 WALDEN AV ALDEN T		
Received: 12:31:07	Officer 1: MILLGROVE FIRE	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 12:31:08	Officer 2:LVAC7 - 701	•	FIRESTONE JANE -
Arrived: 12:42:14	Officer 3:	Source:	PHONE
Completed: 13:33:32	Officer 4:	Notified:	
Associated Person			
Friday 10/21/2016	16-617843 4504 - EMS 11438 GENESEE ST ALDEN	TOWN	
Received: 01:49:42	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 01:49:44	Officer 2:	Dispatched By:	
Arrived: 02:05:17	Officer 3:	Source:	PHONE
Completed: 02:28:12	Officer 4:	Notified:	
Associated Person:			
Friday 10/21/2016	16-617889 4504 - EMS 12701 BROADWAY ALDEN		
Received: 17:58:31	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 17:59:41	Officer 2: LVAC7 - 701	• •	STEWART ANGELA -
Arrived: 18:05:24	Officer 3:	Source:	E-911
Completed: 19:48:41	Officer 4:	Notified:	
Associated Person:			
Saturday 10/22/2016	16-617949 4504 - EMS 288 TWO ROD RD ALDEN TO		
Received: 20:17:11	Officer 1: TOWNLINE FIRE DEPT		ARMSTRONG
Dispatched: 20:17:35	Officer 2:LVAC7 - 701		: ARMSTRONG
Arrived: 20:27:27	Officer 3:	Source:	E-911
Completed: 21:24:43	Officer 4:	Notified:	
Associated Person:		_	
Saturday 10/22/2016	16-617957 4504 - EMS 1037 THREE ROD RD ALDE	N TOWN	
Received: 23:21:49	Officer 1: ALDEN FIRE DEPT - 9	•	
Dispatched: 23:23:09	Officer 2: LVAC7 - 701	Dispatched By	
Arrived: 23:30:10	Officer 3:	Source:	E-911
Completed: 23:56:25	Officer 4:	Notified:	
Associated Person			

16-618110 4504 - EMS Tuesday 10/25/2016 11437 GENESEE ST ALDEN TOWN Received: 19:46:34 Officer 1: MILLGROVE FIRE Received By: ARMSTRONG Dispatched By: BALK JENNIFER - D87 Officer 2: LVAC7 - 701 Dispatched: 19:46:36 Source: E-911 19:52:11 Officer 3: Arrived: Notified: Officer 4: Completed: 20:32:14 Associated Person: 1 Friday 10/28/2016 16-618206 4504 · EMS 1651 SANDRIDGE RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 03:34:56 Dispatched By: Dispatched: 03:35:32 Officer 2: LVAC7 - 701 PHONE Arrived: Source: 03:42:09 Officer 3: Notified: Officer 4: Completed: 04:00:34 Associated Person: 16-618262 6101 - ATV-INJURY ACCIDENT Friday 10/28/2016 11493 BROADWAY ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 23:17:33 Received By: Dispatched: 23:18:11 Officer 2: LVAC7 - 701 Dispatched By: Source: PHONE Officer 3: Arrived: 23:27:04 Officer 4: Notified: Completed: 00:05:44 Associated Person Sunday 10/30/2016 16-618325 4504 - EMS 13970 GENESEE ST ALDEN TOWN Received: 02:52:02 Officer 1: CRITTENDEN FIRE Received By: Dispatched By: STEWART ANGELA -Dispatched: 02:52:04 Officer 2: LVAC7 - 701 **PHONE** Arrived: 03:04:03 Officer 3: Source: Notified: Completed: 03:23:18 Officer 4: Associated Person: | Monday 10/31/2016 16-618385 4504 - EMS 536 CREEKSIDE DR ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT FIRESTONE JANE -08:38:14 Received: Received By: Dispatched: 08:38:14 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 08:51:02 Officer 3: Source: E-911 Completed: 09:22:28 Officer 4: Notified: Associated Person: Monday 10/31/2016 16-618403 4504 - EMS 2539 TOWNLINE RD ALDEN TOWN Received: 15:38:36 Officer 1: MILLGROVE FIRE Received By: ARMSTRONG Dispatched: 15:40:27 Dispatched By: ARMSTRONG Officer 2: LVAC7 - 701 Arrived: 15:47:20 Officer 3: Source: E-911 Completed: 16:03:00 Officer 4: Notified: Associated Person: • Associated Person: P Friday 11/04/2016 16-618604 4504 - EMS 11250 GENESEE ST ALDEN TOWN Received: 09:03:16 Officer 1:LVAC7 - 701 Received By: **COHAN SHARON - D85** Dispatched: 09:03:20 Officer 2: Dispatched By: COHAN SHARON - D85 Arrived: 09:14:53 Officer 3: Source: PHONE Completed: 10:00:28 Officer 4: Notified:

Associated Person: 1

8

riday 11/04/2016	16-618609 4504 - EMS TWO ROD RD @ WESTWOO	DD RD ALDEN TO	WN :
eceived: 10:19:57	Officer 1: LVAC7 - 701		COHAN SHARON - D85
ispatched: 10:19:57	Officer 2:	Dispatched By:	COHAN SHARON - D85
rrived: 10:38:00	Officer 3:	Source:	PHONE
ompleted: 10:48:55	Officer 4:	Notified:	
sociated Person:			
iday 11/04/2016	16-618627 4504 - EMS NORTH RD @ RUNDEL RD	ALDEN TOWN	
teceived: 17:29:25	Officer 1: CRITTENDEN FIRE	Received By:	BALK JENNIFER - D87
ispatched: 17:29:26	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
rrived: 17:33:21	Officer 3:	Source:	PHONE
ompleted: 18:28:15	Officer 4:	Notified:	LIEUTENANT
ssociated Person:			
aturday 11/05/2016	16-618685 4504 - EMS 2539 TOWNLINE RD ALDEN	TOWN	
Received: 18:34:46	Officer 1: MILLGROVE FIRE	Received By:	SCHAEFER TAMMIE -
Dispatched: 18:34:48	Officer 2:LVAC7 - 701	, ,	SCHAEFER TAMMIE -
rrived: 18:44:05	Officer 3:	Source:	E-911
completed: 18:59:11	Officer 4:	Notified:	
ssociated Person: V			
aturday 11/05/2016	16-618696 4504 - EMS 1293 TOWNLINE RD ALDEN	TOWN	
Received: 22:41:52	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
ispatched: 22:41:55	Officer 2: TOWNLINE FIRE DEPT	, .	SCHAEFER TAMMIE -
rrived: 22:51:37	Officer 3:	Source:	E-911
ompleted: 23:20:50	Officer 4:	Notified:	
ssociated Person:			
sociated Person: Q			
turday 11/05/2016	16-618701 4504 - EMS 11301 KIEFFER RD ALDEN	TOWN	
Received: 23:56:20	Officer 1: TOWNLINE FIRE DEPT	Γ Received By:	SCHAEFER TAMMIE -
ispatched: 23:56:20	Officer 2: LVAC7 - 701	•	SCHAEFER TAMMIE -
rrived: 00:06:11	Officer 3:	Source:	E-911
completed: 01:05:26	Officer 4:	Notified:	
ssociated Person:			
iunday 11/06/2016	16-618757 4504 - EMS 2539 TOWNLINE RD ALDEN	TOWN	
Received: 23:31:53	Officer 1:LVAC7 - 701	Received By:	STEWART ANGELA -
Dispatched: 23:31:53	Officer 2: MILLGROVE FIRE	Dispatched By:	: STEWART ANGELA -
rrived: 23:41:26	Officer 3:	Source:	E-911
completed: 00:19:33	Officer 4:	Notified:	
ssociated Person: I			
Tuesday 11/08/2016	16-618863 4504 - EMS 1126 GREENFIELD DR ALD	EN TOWN	
Received: 20:41:12	Officer 1: TOWNLINE FIRE DEPT	T Received By:	STEWART ANGELA -
	Officer 2:LVAC7 - 701	Dispatched By	
Dispatched: 20:42:18	Officer 2.LVAC7 - 701	-iopatolica -j	•
Dispatched: 20:42:18 Arrived: 20:46:44 Completed: 21:32:43	Officer 3:Officer 4:	Source:	E-911

Wednesday 11/09/2016	16-618882 4504 - EMS 11515 S BONNIE LAKE DR AL	DEN TOWN	
Received: 09:54:59	Officer 1: TOWNLINE FIRE DEPT	Received By:	FIRESTONE JANE -
Dispatched: 09:55:58	Officer 2: LVAC7 - 701	, ,	FIRESTONE JANE -
Arrived: 10:04:13	Officer 3:	Source:	E-911
Completed: 11:10:37	Officer 4:	Notified:	
Associated Person:			<u> </u>
Thursday 11/10/2016	16-618915 4504 - EMS 11703 CARY RD ALDEN TOW	N	
Received: 01:08:29	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 01:09:07	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 01:20:35	Officer 3:	Source:	E-911
Completed: 02:15:04	Officer 4:	Notified:	
Associated Person:			
Tuesday 11/15/2016	16-619187 4401 - FIRE RESIL 11054 CARY RD ALDEN TOW		
Received: 15:44:05	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 15:46:53	Officer 2: TOWNLINE FIRE DEPT	Dispatched By:	
Arrived: 15:57:34	Officer 3: ALDEN FIRE DEPT - 9	Source:	PHONE
Completed: 16:57:32	Officer 4:	Notified:	
Associated Person:		<u>. </u>	
Thursday 11/17/2016	16-619282 4504 - EMS 746 FOUR ROD RD ALDEN TO	OWN	
Received: 09:26:46	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 09:27:40	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 09:38:17	Officer 3:	Source:	E-911
Completed: 10:22:15	Officer 4:	Notified:	
Associated Person: F			
Thursday 11/17/2016	16-619300 4902 - INJURY AC 12083 GENESEE ST ALDEN T		_
Received: 16:17:54	Officer 1: LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 16:17:55	Officer 2: MILLGROVE FIRE	•	SCHAEFER TAMMIE -
Arrived: 16:21:19	Officer 3:	Source:	E-911
Completed: 17:54:03	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Friday 11/18/2016	16-619339 4401 - FIRE RESI 11367 BROADWAY ALDEN T		
Received: 11:42:50	Officer 1: TOWNLINE FIRE DEPT	•	FIRESTONE JANE -
Dispatched: 11:42:57	Officer 2: ALDEN FIRE DEPT -9		PAWLIKOWSKI JEAN -
Arrived: 11:53:05	Officer 3:LVAC7 - 701	Source:	E-911
Completed: 12:11:38	Officer 4:	Notified:	
Associated Person:			
Friday 11/18/2016	16-619362 4504 - EMS GENESEE ST @ S NEWSTEA	ND RD ALDEN T	OWN
Received: 16:59:22	Officer 1: CRITTENDEN FIRE	Received By:	
Dispatched: 17:03:01	Officer 2: MILLGROVE FIRE	Dispatched By	
Arrived: 17:06:13	Officer 3: LVAC7 - 701	Source:	PHONE
Completed: 17:42:48	Officer 4:	Notified:	LIEUTENANT
Associated Person:			

16-619444 4504 · EMS Saturday 11/19/2016 3321 WENDERD ALDEN TOWN Received By: Officer 1:LVAC7 - 701 Received: 21:59:28 Dispatched By: Officer 2: MILLGROVE FIRE Dispatched: 22:01:25 **PHONE** Source: Arrived: 22:03:44 Officer 3: Notified: Officer 4: Completed: 22:46:59 Associated Person: Associated Person: 16-619601 4504 - EMS Tuesday 11/22/2016 968 THREE ROD RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 19:29:20 Dispatched By: Officer 2: LVAC7 - 701 Dispatched: 19:29:23 Arrived: 19:29:23 Officer 3: Source: PHONE Officer 4: Notified: LIEUTENANT Completed: 21:16:09 Associated Person: @ 16-619654 4902 - INJURY ACCIDENT Wednesday 11/23/2016 GENESEE ST @ S NEWSTEAD RD ALDEN TOWN Received: 17:56:38 Officer 1: CRITTENDEN FIRE Received By: Officer 2: MILLGROVE FIRE Dispatched By: Dispatched: 17:56:52 Source: E-911 Arrived: 18:00:04 Officer 3: LVAC7 - 701 Completed: 18:52:21 Notified: Officer 4: Associated Person: Thursday 11/24/2016 16-619691 4504 - EMS WALDEN AV @ WENDE RD ALDEN TOWN Officer 1: MILLGROVE FIRE Received: 17:29:47 Received By: ARMSTRONG Dispatched: 17:30:21 Officer 2:LVAC7 - 701 Dispatched By: ARMSTRONG **OTHER POLICE** Officer 3: Source: Arrived: 17:32:42 Notified: Officer 4: Completed: 17:48:15 Associated Person: (Thursday 11/24/2016 16-619706 4504 - EMS 13457 GENESEE ST ALDEN TOWN Officer 1:LVAC7 - 701 Received By: Received: 22:43:37 **BALK JENNIFER - D87** Dispatched: 22:43:38 Officer 2: Dispatched By: BALK JENNIFER - D87 Arrived: 22:56:53 Officer 3: Source: **CELL PHONE** Completed: 23:04:13 Officer 4: Notified: Associated Persona Friday 11/25/2016 16-619720 4504 - EMS 13316 GENESEE ST ALDEN TOWN Received: 07:14:41 Officer 1: CRITTENDEN FIRE Received By: PAWLIKOWSKI JEAN -Dispatched: 07:15:31 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 07:23:19 Officer 3: Source: E-911 Notified: Completed: 08:04:42 Officer 4: Associated Person: (Associated Person: R Friday 11/25/2016 16-619721 4504 - EMS 874 BONCLIFF DR ALDEN TOWN Received: 07:58:17 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 07:59:41 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: Officer 3: Source: 08:06:03 E-911 Notified: Completed: 08:25:29 Officer 4: Associated Person: | Associated Person: I

Sunday 11/27/2016	16-619823 4504 - EMS 11246 WESTWOOD RD ALDE	EN TOWN	
Received: 01:01:59	Officer 1: TOWNLINE FIRE DEPT		STEWART ANGELA -
Dispatched: 01:02:25	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 01:11:37	Officer 3:	Source:	PHONE
Completed: 01:56:36	Officer 4:	Notified:	
Associated Person:			
Sunday 11/27/2016	16-619839 4504 · EMS 2338 CRITTENDEN RD ALDE	EN TOWN	
Received: 08:42;28	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 08:42:35	Officer 2: LVAC7 - 701		COHAN SHARON - D85
Arrived: 08:56:50	Officer 3:	Source:	E-911
Completed: 09:44:00	Officer 4:	Notified:	
Associated Person:			
Sunday 11/27/2016	16-619864 4504 - EMS 271 FOUR ROD RD ALDEN T	TOWN	
Received: 18:40:12	Officer 1: ALDEN FIRE DEPT - 9		ARMSTRONG
Dispatched: 18:41:07	Officer 2: LVAC7 - 701		ARMSTRONG
Arrived: 18:48:46	Officer 3:	Source:	E-911
Completed: 20:34:19	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Wednesday 11/30/2016	16-620007 4504 - EMS 13104 GENESEE ST ALDEN	TOWN	
Received: 08:37:29	Officer 1: CRITTENDEN FIRE	Received By:	FIRESTONE JANE -
Dispatched: 08:37:30	Officer 2:LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 08:47:00	Officer 3:	Source:	E-911
Completed: 09:04:04	Officer 4:	Notified:	
Associated Person:			
Associated Person: C			<u> </u>
Thursday 12/01/2016	16-620066 4504 - EMS 11703 CARY RD ALDEN TO		,
Received: 11:38:40	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 11:39:07	Officer 2:LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 11:51:54	Officer 3:	Source:	E-911
Completed: 12:42:15	Officer 4:	Notified:	
Associated Person:	_,, -, -, -, -, -, -, -, -, -, -, -, -, -		
Associated Person:			
Friday 12/02/2016	16-620117 4504 - EMS 2021 SANDRIDGE RD ALDE	N TOWN	
Received: 10:33:30	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 10:34:59	Officer 2:LVAC7 - 701		: FIRESTONE JANE -
Arrived: 10:44:37	Officer 3:	Source:	E-911
Completed: 11:15:06	Officer 4:	Notified:	
Associated Person:	-		
Saturday 12/03/2016	16-620154 4504 - EMS 13970 GENESEE ST ALDEN	TOWN	
Received: 02:56:05	Officer 1: CRITTENDEN FIRE	Received By:	STEWART ANGELA -
Dispatched: 02:56:07	Officer 2:LVAC7 - 701	•	: STEWART ANGELA -
Arrived: 03:07:54	Officer 3:	Source:	E-911
Completed: 03:49:25	Officer 4:	Notified:	
Associated Person:	and the same of th		

Wednesday 12/07/2016	16-620384 4508 - EMS ASSIS 122 GLENDALE TE ALDEN TO	-	· · · · · · · · · · · · · · · · · · ·
Received: 19:12:13 Dispatched: 19:14:58 Arrived: 19:23:37 Completed: 19:54:45	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	BALK JENNIFER - D87 ARMSTRONG E-911
Associated Person			
Associated Person:			
Thursday 12/08/2016	16-620431 4504 - EMS		
(Muisuay 12/00/2010	500 CREEKSIDE DR ALDEN T	OWN	
Received: 18:14:52	Officer 1: TOWNLINE FIRE DEPT	•	
Dispatched: 18:15:28	Officer 2: LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 18:24:33	Officer 3:	Source:	E-911
Completed: 19:22:22	Officer 4:	Notified:	
Associated Person:			
Friday 12/09/2016	16-620469 4499 - FIRE OTHE CARY RD @ FOUR ROD RD		
Received: 15:32:17	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 15:32:31	Officer 2: LVAC7 - 701		ARMSTRONG
Arrived: 15:39:00	Officer 3:	Source:	OTHER POLICE
Completed: 17:57:06	Officer 4:	Notified:	
Associated Persor		. 10011001	
Sunday 12/11/2016	16-620573 4504 - EMS		
	3040 WENDE RD ALDEN TOV	VN	
Received: 08:54:58	Officer 1:LVAC7 - 701	Received By:	STEWART ANGELA -
Dispatched: 08:55:01	Officer 2: MILLGROVE FIRE	Dispatched By:	STEWART ANGELA -
Arrived: 09:00:28	Officer 3:	Source:	PHONE
Completed: 09:41:10	Officer 4:	Notified:	
Associated Person:			
Sunday 12/11/2016	16-620580 4504 - EMS 3040 WENDE RD ALDEN TOV	WN	-
Received: 10:28:54	Officer 1: MILLGROVE FIRE	Received By:	STEWART ANGELA -
Dispatched: 10:28:58	Officer 2: LVAC7 - 701	•	STEWART ANGELA -
Arrived: 10:33:21	Officer 3:	Source:	PHONE
Completed: 11:30:21	Officer 4:	Notified:	
Associated Person:			
Monday 12/12/2016	16-620644 4504 - EMS 11921 BROADWAY ALDEN I	TOWN	<u></u>
Received: 17:02:15	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 17:02:16	Officer 2: LVAC7 - 701	-	ARMSTRONG
Arrived: 17:10:03	Officer 3:	Source:	E-911
Completed: 18:41:30	Officer 4:	Notified:	LIEUTENANT
Associated Person:	- maring		
Monday 12/12/2016	16-620654 4504 - EMS		
	1327 VILLAGE PARK DR ALC		
Received: 20:06:20	Officer 1:LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 20:07:11	Officer 2: ALDEN FIRE DEPT - 9		ARMSTRONG
Arrived: 20:09:20	Officer 3:	Source:	E-911
Completed: 22:04:50	Officer 4:	Notified:	LIEUTENANT
Associated Person:			

Wednesday 12/14/2016 16-620744 4504 - EMS 2338 CRITTENDEN RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 11:04:05 Received By: FIRESTONE JANE -Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Dispatched: 11:04:06 Officer 3: Source: E-911 Arrived: 11:12:58 Officer 4: Notified: Completed: 12:06:59 Associated Person: 16-620763 4504 - EMS Wednesday 12/14/2016 TWO ROD RD @ BROADWAY ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT ARMSTRONG Received: 17:20:47 Received By: Officer 2:LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Dispatched: 17:20:47 Officer 3: Source: E-911 Arrived: 17:33:32 Notified: Completed: 18:28:14 Officer 4: Associated Person: (16-620806 4504 - EMS Thursday 12/15/2016 12514 W MAIN ST 4 ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 08:53:24 Received By: Dispatched: 08:53:24 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -09:04:16 Source: E-911 Arrived: Officer 3: Completed: 10:18:08 Officer 4: Notified: Associated Person: } Saturday 12/17/2016 16-620949 4504 - EMS 585 TWO ROD RD ALDEN TOWN Received: 14:31:41 Officer 1: TOWNLINE FIRE DEPT Received By: **SCHAEFER TAMMIE -**Dispatched By: Dispatched: 14:31:44 Officer 2: LVAC7 - 701 Arrived: 14:42:52 Officer 3: Source: E-911 Officer 4: Notified: Completed: 15:06:40 Associated Person: Cl Associated Person: Sunday 12/18/2016 16-621031 4508 - EMS ASSIST 13296 GENESEE ST ALDEN TOWN Received: 20:24:59 Officer 1: CRITTENDEN FIRE Received By: STEWART ANGELA -Dispatched: 20:25:00 Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Officer 3: Arrived: 20:32:47 Source: PHONE Completed: 21:01:02 Officer 4: Notified: Associated Person: Associated Person: Monday 12/19/2016 16-621039 4504 - EMS 1722 SANDRIDGE RD ALDEN TOWN Received: 01:41:58 Officer 1:LVAC7 - 701 Received By: STEWART ANGELA -Dispatched: 01:42:00 Officer 2: Dispatched By: Arrived: 01:59:50 Officer 3: Source: OTHER POLICE Completed: 02:03:38 Officer 4: Notified: Associated Person: Monday 12/19/2016 16-621055 4504 - EMS 1007 E BONNIE LAKE DR ALDEN TOWN Received: 10:32:55 Officer 1: TOWNLINE FIRE DEPT Received By: FIRESTONE JANE -Dispatched: 10:32:56 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 10:45:37 Officer 3: Source: E-911 Notified: Completed: 12:02:47 Officer 4: Associated Person:

Monday 12/19/2016 16-621080 4504 - EMS 11270 WESTWOOD RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT FIRESTONE JANE -Received: 18:38:26 Received By: Dispatched By: ARMSTRONG Dispatched: 18:38:29 Officer 2: LVAC7 - 701 Officer 3: Source: **RADIO** Arrived: 18:43:54 Notified: Officer 4: Completed: 19:37:21 Associated Person: Tuesday 12/20/2016 16-621105 4504 - EMS 1309 VILLAGE PARK DR ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Received: 07:30:12 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Dispatched: 07:31:31 Source: Officer 3: E-911 Arrived: 07:40:54 Notified: Completed: 08:54:24 Officer 4: Associated Person: Tuesday 12/20/2016 16-621112 4504 - EMS 2539 TOWNLINE RD ALDEN TOWN Received: 11:40:52 Officer 1: MILLGROVE FIRE Received By: Dispatched: 11:42:52 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Source: Arrived: Officer 3: 11:52:00 E-911 Completed: 12:32:26 Officer 4: Notified: Associated Person: Wednesday 12/21/2016 16-621158 4902 - INJURY ACCIDENT N MILLGROVE RD @ GENESEE ST ALDEN TOWN Received: 06:53:14 Officer 1: MILLGROVE FIRE Received By: Dispatched: 06:54:28 Dispatched By: Officer 2: LVAC7 - 701 Arrived: 07:00:52 Officer 3: Source: PHONE Notified: Completed: 07:26:45 Officer 4: Associated Person: Wednesday 12/21/2016 16-621173 4504 - EMS 11844 BONCLIFF DR ALDEN TOWN Received: 12:35:34 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 12:35:47 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 12:44:04 Officer 3: Source: OTHER POLICE Completed: 13:29:19 Officer 4: Notified: Associated Person: Wednesday 12/21/2016 16-621201 4504 - EMS 12250 S BLOSSOM LEA DR ALDEN TOWN Received: 22:54:32 Officer 1: ALDEN FIRE DEPT - 9 Received By: STEWART ANGELA -Dispatched: 22:54:48 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 23:07:55 Officer 3: Source: E-911 Completed: 23:49:26 Officer 4: Notified: Associated Person: Associated Person: 1 Wednesday 12/21/2016 16-621202 4504 - EMS 13800 HENSKEE RD ALDEN TOWN Received: 23:25:48 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 23:26:22 Dispatched By: Officer 2:LVAC7 - 701 Arrived: 23:32:56 Officer 3: Source: E-911 Completed: 00:49:53 Notified: Officer 4: Associated Person: 1

Thursday 12/22/2016	16-621244 4504 - EMS 11045 JANE DR ALDEN TOWN	l	-
Received: 14:15:12 Dispatched: 14:16:04 Arrived: 14:25:59 Completed: 15:26:25 Associated Person:	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	STEWART ANGELA - STEWART ANGELA - E-911
Friday 12/23/2016	16-621278 4508 - EMS ASSIS		
	1201 TOWNLINE RD ALDEN T		
Received: 02:39:24 Dispatched: 02:40:25 Arrived: 02:54:14 Completed: 03:02:46	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person:		<u>_</u> _	
Friday 12/23/2016	16-621314 4408 - FIRE ALAR! 11150 WESTWOOD RD ALDE!		•
Received: 17:56:24 Dispatched: 17:56:39 Arrived: 17:58:35 Completed: 17:58:35 Associated Person:	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - PHONE
Sunday 12/25/2016	16-621384 4504 - EMS 11762 MANITOU DR ALDEN T	OWN	
Received: 11:13:45 Dispatched: 11:13:45 Arrived: 11:29:08 Completed: 12:20:34	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - PAWLIKOWSKI JEAN - E-911
Associated Person:		<u>-</u> <u>-</u>	
Sunday 12/25/2016	16-621387 4504 - EMS WALDEN AV @ ZOELLER RD	ALDEN TOWN	
Received: 12:27:34 Dispatched: 12:27:48 Arrived: 12:33:46 Completed: 13:07:33 Associated Person:	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - PAWLIKOWSKI JEAN - E-911
Sunday 12/25/2016	16-621392 4504 - EMS 824 EXCHANGE ST ALDEN TO	OWN	 _
Received: 16:47:36 Dispatched: 16:47:36 Arrived: 16:56:19 Completed: 17:38:36	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	ARMSTRONG BALK JENNIFER - D87 PHONE
Associated Person: Associated Person: F			
Friday 12/30/2016	16-621628 4504 · EMS 11082 JOHN CT ALDEN TOW		
Received: 12:41:29 Dispatched: 12:41:29 Arrived: 12:52:37 Completed: 13:25:00	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	FIRESTONE JANE - : FIRESTONE JANE - E-911
Associated Person: R			

Friday 12/30/2016 16-621635 4504 - EMS 12681 W MAIN ST ALDEN TOWN Received: 16:14:09 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched By: FIRESTONE JANE -Dispatched: 16:14:10 Officer 2:LVAC7 - 701 Officer 3: Source: E-911 Arrived: 16:21:23 Notified: Officer 4: Completed: 17:15:04 Associated Person: 16-621670 4504 - EMS Saturday 12/31/2016 11581 WALDEN AV ALDEN TOWN Officer 1: MILLGROVE FIRE Received By: FIRESTONE JANE -Received: 11:54:31 Dispatched By: FIRESTONE JANE -Officer 2: LVAC7 - 701 Dispatched: 11:57:23 Source: PHONE Arrived: 11:58:33 Officer 3: Notified: Completed: 12:46:18 Officer 4: Associated Person: Monday 01/02/2017 17-700086 4504 - EMS 2983 CRITTENDEN RD ALDEN TOWN Received: 16:23:21 Officer 1:LVAC7 - 701 Received By: ARMSTRONG Dispatched: 16:23:31 Officer 2: CRITTENDEN FIRE Dispatched By: SCHAEFER TAMMIE -Arrived: 16:27:27 Officer 3: Source: E-911 Notified: Completed: 17:24:15 Officer 4: Associated Person: Associated Person: Tuesday 01/03/2017 17-700145 4504 - EMS 3372 ZOELLER RD ALDEN TOWN Received: 18:06:13 Officer 1: MILLGROVE FIRE Received By: **BALK JENNIFER - D87** Dispatched: 18:06:14 Officer 2: LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: Officer 3: 18:14:17 Source: E-911 Completed: 19:24:09 Officer 4: Notified: LIEUTENANT Associated Person: 0 Associated Person: Thursday 01/05/2017 17-700236 4504 - EMS 746 FOUR ROD RD ALDEN TOWN Received: 10:08:16 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 10:08:17 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Source: Arrived: 10:25:00 Officer 3: E-911 Officer 4: Completed: 10:40:57 Notified: Associated Person: Associated Person: Friday 01/06/2017 17-700275 4504 - EMS 11837 BROADWAY ALDEN TOWN Received: 06:37:12 Officer 1:LVAC7 - 701 Received By: Dispatched: 06:37:43 Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: Arrived: 06:50:59 Officer 3: Source: PHONE Completed: 07:38:50 Officer 4: Notified: Associated Person: (Associated Personi Friday 01/06/2017 17-700278 4504 - EMS 2539 TOWNLINE RD ALDEN TOWN Received: 08:08:46 Officer 1: MILLGROVE FIRE Received By: PAWLIKOWSKI JEAN -Dispatched: 08:08:46 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 08:15:37 Officer 3: Source: E-911 Completed: 08:57:37 Officer 4: Notified: Associated Person:

1 7-7003 35 4504 - EMS			
	RD ALDEN TOW	N	
Officer 1:ALDEN FIRE DEPT -9			- D85
Officer 2:LVAC7 - 701			
			
Officer 4:	Notified:		
17-700477 4504 - EMS			
	N TOWN		
Officer 1: ALDEN FIRE DEPT - 9	Received By:		
Officer 2:LVAC7 - 701	Dispatched By:		
Officer 3:	Source:	E-911	
Officer 4:	Notified:		
17-700677 4504 - EMS			
11134 JANE DR ALDEN TOW	M		
Officer 1: LVAC7 - 701	Received By:		- + -
Officer 2: TOWNLINE FIRE DEPT	Dispatched By:		D87
Officer 3:	Source:	E-911	
Officer 4:	Notified:	LIEUTENANT	
Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER -	D87
	•		
	Source:		
Officer 4:	Notified:		
	ومعاقبت عنا		
17-700701 4504 - EMS 2338 CRITTENDEN RD ALDE	N TOWN		
Officer 1: ALDEN FIRE DEPT - 9	Received By:		
Officer 2: LVAC7 - 701	Dispatched By:		
Officer 3:	Source:	E-911	
Officer 4:	Notified:		
17-700722 4504 - EMS 11994 BROADWAY ALDEN	TOWN		
Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE	! -
Officer 2: LVAC7 - 701		FIRESTONE JANE	-
Officer 3:	Source:	E-911	
Officer 4:	Notified:		
		<u> </u>	
17-700793 4504 - EMS 3040 WENDE RD ALDEN TO	 WN		
Officer 1: LVAC7 - 701	Received Bv:	ARMSTRONG	
Officer 2: MILLGROVE FIRE	-	ARMSTRONG	
Officer 3:	Source:	PHONE	
	NORTH RD @ CRITTENDEN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: CRITTENDEN FIRE Officer 4: 17-700477	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: CRITTENDEN FIRE Officer 4: 17-700477	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: CRITTENDEN RD ALDEN TOWN Officer 3: CRITTENDEN FIRE Officer 4: 17-700477 4504 - EMS 2060 CRITTENDEN RD ALDEN TOWN Officer 2: LVAC7 - 701 Officer 3: CRITTENDEN RD ALDEN TOWN Officer 3: Source: E-911 Notified: 17-700677 4504 - EMS 1134 JANE DR ALDEN TOWN Officer 1: LVAC7 - 701 Officer 2: LVAC7 - 701 Officer 3: Source: E-911 Notified: 17-700692 4508 - EMS ASSIST 11703 CARY RD ALDEN TOWN Officer 3: Source: E-911 Notified: 17-700701 4504 - EMS 2338 CRITTENDEN RD ALDEN TOWN Officer 4: Notified: 17-700701 4504 - EMS 2338 CRITTENDEN RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Source: E-911 Notified: 17-700701 4504 - EMS 2338 CRITTENDEN RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Dispatched By: BALK JENNIFER - Dispatched By: BALK JENNIFER - Dispatched By: BALK JENNIFER - Dispatched By: BALK JENNIFER - Dispatched By: BALK JENNIFER - Dispatched By: BALK JENNIFER - Dispatched By: BALK JENNIFER - Dispatched By: BALK JENNIFER - Dispatched By: BALK JENNIFER - Dispatched By: BALK JENNIFER - DIspatched By: BALK JENNIFER - DIspatched By: BALK JENNIFER - DIspatched By: BALK JENNIFER - DIspatched By: BALK JENNIFER - DIspatched By: BALK JENNIFER - DISPATCHED BY: BALK JENNIFE

Saturday 01/14/2017	17-700802 3900 - DEATH N 11874 CARY RD ALDEN TO		
Received: 22:53:26	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 22:53:30	Officer 2:LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 23:04:48	Officer 3:	Source:	E-911
Completed: 23:20:04	Officer 4:	Notified:	
Associated Person			
Associated Person:			
Monday 01/16/2017	17-700878 4504 - EMS 3413 TOWNLINE RD ALDEN	TOWN	
Received: 15:49:50	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 15:51:23	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 15:56:43	Officer 3:	Source:	E-911
Completed: 16:41:51	Officer 4:	Notified:	
Associated Person			
Monday 01/16/2017	17-700881 4504 - EMS 2561 WENDE RD ALDEN TO	OWN	
Received: 17:46:11	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 17:47:30	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 17:51:44	Officer 3:	Source:	E-911
Completed: 18:18:32	Officer 4:	Notified:	LIEUTENANT
Associated Person: P			
Monday 01/16/2017	17-700886 4504 - EMS 2186 CRITTENDEN RD ALD	EN TOWN	
Received: 20:36:28	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 20:36:30	Officer 2: LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 20:36:35	Officer 3:	Source:	PHONE
Completed: 22:14:44	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Tuesday 01/17/2017	17-700913 4504 - EMS 1159 TOWNLINE RD ALDEN	 N TOWN	· - · · · ·
Received: 11:45:07	Officer 1: TOWNLINE FIRE DEP	T Received By:	PAWLIKOWSKI JEAN -
Dispatched: 11:45:49	Officer 2:LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 11:54:41	Officer 3:	Source:	OTHER POLICE
Completed: 12:39:51	Officer 4:	Notified:	
Associated Person:			
Tuesday 01/17/2017	17-700924 4504 - EMS 12236 S BLOSSOM LEA DR	ALDEN TOWN	
Received: 15:06:46	Officer 1:LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 15:10:00	Officer 2: ALDEN FIRE DEPT - 9		FIRESTONE JANE -
Arrived: 15:19:00	Officer 3:	Source:	E-911
Completed: 16:18:04	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Saturday 01/21/2017	17-701096 4913 - VEHICLE 12833 GENESEE ST ALDEN		
Received: 02:00:41	Officer 1: CRITTENDEN FIRE	Received By:	STEWART ANGELA -
Dispatched: 02:01:23	Officer 2:LVAC7 - 701	_	STEWART ANGELA -
Arrived: 02:09:36	Officer 3:	Source:	OTHER POLICE
Completed: 04:02:40	Officer 4:	Notified:	
Completed: 04:03:10	Officer 4.	***************************************	

Sunday 01/22/2017	17-701192 4504 - EMS 13141 GENESEE ST ALDEN	TOWN	
Received: 18:51:26	Officer 1: CRITTENDEN FIRE	Received By:	SCHAEFER TAMMIE -
Dispatched: 18:53:25	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 18:57:33	Officer 3:	Source:	E-911
Completed: 19:50:50	Officer 4:	Notified:	LIEUTENANT
Associated Person:		<u> </u>	
Monday 01/23/2017	17-701241 4504 - EMS 11703 CARY RD ALDEN TO	WN	
Received: 22:09:04	Officer 1: ALDEN FIRE DEPT - 9		BALK JENNIFER - D87
Dispatched: 22:09:04	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 22:17:02	Officer 3:	Source:	E-911
Completed: 23:12:49	Officer 4:	Notified:	
Associated Person:		<u> </u>	·
Monday 01/23/2017	17-701242 4504 - EMS 12132 WALDEN AV ALDEN	TOWN	
Received: 23:01:56	Officer 1: MILLGROVE FIRE	Received By:	BALK JENNIFER - D87
Dispatched: 23:01:57	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 23:08:44	Officer 3:	Source:	E-911
Completed: 00:13:33	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Tuesday 01/24/2017	17-701251 4504 - EMS 12892 PIPER CT ALDEN TO		
Received: 08:31:40	Officer 1: CRITTENDEN FIRE	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 08:32:00	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 08:42:38	Officer 3:	Source:	E-911
Completed: 08:56:27	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Thursday 01/26/2017	17-701373 4504 - EMS 3025 PETERS CORNERS RE	ALDEN TOWN	
Received: 11:14:56	Officer 1:LVAC7 - 701	Received By:	COHAN SHARON - D85
Dispatched: 11:15:20	Officer 2: CRITTENDEN FIRE	•	FIRESTONE JANE -
Arrived: 11:20:01	Officer 3:	Source:	E-911
Completed: 12:10:01	Officer 4:	Notified:	
Associated Person:		<u> </u>	
Associated Person:			
Friday 01/27/2017	17-701445 4504 - EMS 3622 WENDE RD ALDEN TO	OWN	
Received: 20:12:25	Officer 1: MILLGROVE FIRE	Received By:	BALK JENNIFER - D87
Dispatched: 20:12:25	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 20:18:00	Officer 3:	Source:	PHONE
Completed: 21:05:00	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Friday 01/27/2017	17-701453 4902 - INJURY A GENESEE ST @ WALDEN		
Received: 22:39:13	Officer 1: MILLGROVE FIRE	Received By:	BALK JENNIFER - D87
Dispatched: 22:39:15	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 22:39:16	Officer 3:	Source:	RADIO
Completed: 22:56:33	Officer 4:	Notified:	
Associated Person:	Onicer 4.	riouneo.	

Saturday 01/28/2017 17-701481 4504 · EMS 1133 GREENFIELD DR ALDEN TOWN Received: 11:59:43 Officer 1: TOWNLINE FIRE DEPT Received By: PAWLIKOWSKI JEAN -Dispatched: 11:59:43 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Officer 3: Source: Arrived: 12:06:31 OTHER POLICE Notified: Completed: 12:46:06 Officer 4: Associated Person: Monday 01/30/2017 4400 - FIRE ALARM 17-701589 11980 WALDEN AV ALDEN TOWN Officer 1: MILLGROVE FIRE Received By: Received: 13:57:22 Dispatched: 13:58:04 Officer 2: CRITTENDEN FIRE Dispatched By: Arrived: 14:03:31 Officer 3: ALDEN FIRE DEPT - 9 Source: PHONE Notified: Completed: 14:58:12 Officer 4: LVAC7 - 701 Associated Person: 17-701624 4504 - EMS Tuesday 01/31/2017 12353 BROADWAY ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 06:47:24 Received By: Dispatched: 06:48:39 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 07:00:43 Officer 3: Source: PHONE Completed: 07:58:40 Officer 4: Notified: Associated Person: 1 Associated Person: (Tuesday 01/31/2017 17-701644 4504 - EMS 12775 BROADWAY ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 14:29:50 Received By: **COHAN SHARON - D85** Dispatched: 14:29:52 Officer 2:LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: Officer 3: RURAL METRO Source: E-911 14:35:27 Completed: 14:49:06 Officer 4: Notified: Associated Person: Thursday 02/02/2017 17-701734 4504 - EMS 2653 WENDE RD ALDEN TOWN Received: 05:53:33 Officer 1: MILLGROVE FIRE Received By: Dispatched: 05:53:36 Officer 2:LVAC7 - 701 Dispatched By: Arrived: Officer 3: Source: 06:01:50 OTHER POLICE Completed: 06:08:18 Officer 4: Notified: Associated Person: Thursday 02/02/2017 17-701761 4504 - EMS 1054 COUNTY LINE RD ALDEN TOWN Received: 16:23:30 Officer 1: ALDEN FIRE DEPT - 9 Received By: Officer 2:LVAC7 - 701 Dispatched: 16:26:12 Dispatched By: Arrived: 16:35:10 Officer 3: Source: **PHONE** Notified: Completed: 17:01:40 Officer 4: Associated Person: I Associated Person: 0 17-701867 4508 - EMS ASSIST Saturday 02/04/2017 983 E BONNIE LAKE DR ALDEN TOWN Received: 12:18:03 Officer 1: TOWNLINE FIRE DEPT Received By: Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 12:19:28 Source: Arrived: 12:24:40 Officer 3: E-911 Notified: Completed: 12:41:08 Officer 4: Associated Person:

aturday 02/04/2017	17-701891 4504 - EMS 12514 W MAIN ST 4 ALDEN TO	OWN	
eceived: 20:14:13	Officer 1: LVAC7 - 701	Received By:	ARMSTRONG
ispatched: 20:14:15	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	ARMSTRONG
rrived: 20:19:00	Officer 3:	Source:	E-911
ompleted: 22:18:30	Officer 4:	Notified:	LIEUTENANT
ssociated Person:			
ssociated Person:		·	
/ednesday 02/08/2017	17-702058 4504 - EMS 11612 GEBHARD LA ALDEN	TOWN	
eceived: 08:30:03	Officer 1: TOWNLINE FIRE DEPT	Received By:	COHAN SHARON - D85
ispatched: 08:30:04	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
rrived: 08:41:38	Officer 3:	Source:	E-911
ompleted: 09:23:28	Officer 4:	Notified:	
ssociated Person:			
riday 02/10/2017	17-702183 4508 - EMS ASSIS		
annaturado deservido	13296 GENESEE ST ALDEN T		
Received: 15:54:12	Officer 1: CRITTENDEN FIRE	Received By: Dispatched By:	
ispatched; 15:56:19 mived; 16:06:30	Officer 2: LVAC7 - 701 Officer 3:	Source:	PHONE
completed: 16:29:31	Officer 4;	Notified:	PHONE
ssociated Person:	Onicer 4.	Nouned.	
	10 700100 1001 7110		
riday 02/10/2017	17-702190 4504 - EMS 2539 TOWNLINE RD ALDEN '		
Received: 17:42:16	Officer 1: MILLGROVE FIRE	Received By:	
ispatched: 17:43:55	Officer 2:LVAC7 - 701		BALK JENNIFER - D87
rrived: 17:54:00	Officer 3:	Source:	E-911
Completed: 18:28:35	Officer 4:	Notified:	LIEUTENANT
ssociated Person: F			
riday 02/10/2017	17-702206 4504 - EMS 12212 GENESEE ST ALDEN 7	TOWN	
Received: 23:57:24	Officer 1: MILLGROVE FIRE	Received By:	STEWART ANGELA -
Dispatched: 23:57:25	Officer 2: LVAC7 - 701	, ,	STEWART ANGELA -
vrrived: 00:04:47	Officer 3:	Source:	OTHER POLICE
completed: 00:28:51	Officer 4:	Notified:	
associated Person:			
Sunday 02/12/2017	17-702309 4504 - EMS 733 FOUR ROD RD ALDEN T	OWN	
Received: 20:15:55	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 20:17:22	Officer 2:LVAC7 - 701	•	ARMSTRONG
Arrived: 20:24:04	Officer 3:	Source:	E-911
Completed: 20:27:42	Officer 4:	Notified:	
Associated Person: P			
Monday 02/13/2017	17-702363 4504 - EMS 423 TOWNLINE RD ALDEN T	OWN	
3	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Received: 20:07:05		•	CCUACCED TAXABLE
Dispatched: 20:08:08	 Officer 2: TOWNLINE FIRE DEPT 	Dispatched By:	SCHAEFER TAMMIE -
Dispatched: 20:08:08 Arrived: 20:16:39	Officer 3:	Source:	E-911
Dispatched: 20:08:08		•	

Tuesday 02/14/2017	17-702398 4504 - EMS 637 TWO ROD RD ALDEN TO	OWN	
Received: 15:45:38	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 15:45:40	Officer 2: TOWNLINE FIRE DEPT		SCHAEFER TAMMIE -
Arrived: 15:55:35	Officer 3:	Source:	E-911
Completed: 16:34:12	Officer 4:	Notified:	
Associated Person:			
Tuesday 02/14/2017	17-702425 4504 - EM\$ 12614 W MAIN ST ALDEN TO	OWN	
Received: 23:48:58	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 23:49:48	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 23:55:25	Officer 3:	Source:	E-911
Completed: 00:43:47	Officer 4:	Notified:	
Associated Person:			
Wednesday 02/15/2017	17-702454 4504 - EMS 3321 WENDE RD ALDEN TO		
Received: 16:21:01	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 16:22:22	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 16:25:14	Officer 3:	Source:	PHONE
Completed: 17:36:16	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Friday 02/17/2017	17-702543 4504 EMS 11775 GENESEE ST ALDEN	TOWN	
Received: 08:14:42	Officer 1: MILLGROVE FIRE	Received By:	FIRESTONE JANE -
Dispatched: 08:14:43	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 08:22:51	Officer 3:	Source:	E-911
Completed: 08:56:21	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Friday 02/17/2017	17-702545 4504 - EMS 3759 POHL RD ALDEN TOW	/N	
Received: 10:13:36	Officer 1: MILLGROVE FIRE	Received By:	FIRESTONE JANE -
Dispatched: 10:13:37	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 10:21:57	Officer 3:	Source:	E-911
Completed: 11:08:49	Officer 4:	Notified:	
Associated Person: F			<u></u>
Saturday 02/18/2017	17-702588 4504 - EMS 11688 BUCKWHEAT RD ALI	DEN TOWN	
Received: 00:15:14	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 00:16:08	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 00:22:28	Officer 3:	Source:	PHONE
Completed: 00:24:13	Officer 4:	Notified:	
Associated Person;			
Monday 02/20/2017	17-702696 4504 - EMS 11438 GENESEE ST ALDEN	I TOWN	
Received: 12:39:06	Officer 1:LVAC7 - 701	Received By:	•
Dispatched: 12:41:38	Officer 2: MILLGROVE FIRE	Dispatched By	:
Arrived: 12:50:56	Officer 3:	Source:	PHONE
Completed: 13:31:54	Officer 4:	Notified:	
Associated Person:			

12300 WALDEN AV ALDEN T	OWN	
Officer 1: MILLGROVE FIRE	Received By:	BALK JENNIFER - D87
Officer 2:LVAC7 - 701		BALK JENNIFER - D87
Officer 3:	Source:	PHONE
Officer 4:	Notified:	LIEUTENANT
		_
17-702719 4504 - EMS 3040 WENDE RD ALDEN TO	WN	
Officer 1: LVAC7 - 701	Received By:	STEWART ANGELA -
Officer 2:		STEWART ANGELA -
Officer 3:	Source:	RADIO
Officer 4:	Notified:	LIEUTENANT
17-702722 4504 - EMS 11607 GENESEE ST ALDEN	TOWN	
Officer 1: MILLGROVE FIRE	Received By:	
Officer 2: LVAC7 - 701	Dispatched By:	
Officer 3:	Source:	E-911
Officer 4:	Notified:	
17-702738 4504 - EMS 11581 WALDEN AV ALDEN T	OWN	
Officer 1:LVAC7 - 701	Received By:	
Officer 3:	Source:	PHONE
Officer 4:	Notified:	
17-702748 4504 · EMS 2539 TOWNLINE RD ALDEN	TOWN	
Officer 1: MILLGROVE FIRE	Received By:	
Officer 2: LVAC7 - 701	•	
Officer 3:	Source:	PHONE
Officer 4:	Notified:	
17-703037 4504 - EMS 13296 GENESEE ST ALDEN	TOWN	
Officer 1: CRITTENDEN FIRE	Received By:	BALK JENNIFER - D87
Officer 2:LVAC7 - 701	-	BALK JENNIFER - D87
Officer 3:	Source:	PHONE
Officer 4:	Notified:	
17-703087 4504 - EMS 240 COUNTYLINE RD ALDE	N TOWN	
	Received By:	COHAN SHARON - D85
Officer 1: ALDEN FIRE DEPT - 9	LACACINGA DA	001 M 01 M 01 T
Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	•	COHAN SHARON - D85
	•	
	Officer 2: LVAC7 - 701 Officer 3: Officer 4: 17-702719	Officer 2: LVAC7 - 701 Officer 3: Source: Notified: 17-702719 4504 - EMS 3040 WENDE RD ALDEN TOWN Officer 1: LVAC7 - 701 Received By: Dispatched By: Officer 3: Source: Notified: 17-702722 4504 - EMS 11607 GENESEE ST ALDEN TOWN Officer 1: MILLGROVE FIRE Received By: Dispatched By: Officer 3: Source: Notified: 17-702738 4504 - EMS 11581 WALDEN AV ALDEN TOWN Officer 1: LVAC7 - 701 Received By: Officer 3: Source: Notified: 17-702738 4504 - EMS 11581 WALDEN AV ALDEN TOWN Officer 1: LVAC7 - 701 Received By: Officer 3: Source: Notified: 17-702748 4504 - EMS 2539 TOWNLINE RD ALDEN TOWN Officer 1: MILLGROVE FIRE Received By: Officer 3: Source: Notified: 17-703037 4504 - EMS 13296 GENESEE ST ALDEN TOWN Officer 1: CRITTENDEN FIRE Received By: Officer 2: LVAC7 - 701 Dispatched By: Officer 2: LVAC7 - 701 Dispatched By: Officer 3: Source: Notified:

Monday 02/27/2017 17-703103 4504 - EMS 223 S WOODSIDE DR ALDEN TOWN Officer 1:LVAC7 - 701 Received By: Received: 19:59:06 **BALK JENNIFER - D87** Dispatched: 19:59:07 Officer 2: TOWNLINE FIRE DEPT Dispatched By: BALK JENNIFER - D87 Arrived: Officer 3: Source: 20:06:09 E-911 Notified: Completed: 21:09:52 Officer 4: Associated Person: (Tuesday 02/28/2017 17-703154 4508 - EMS ASSIST 271 SULLIVAN RD ALDEN TOWN Received: 17:47:07 Officer 1: LVAC7 - 701 Received By: **BALK JENNIFER - D87** Dispatched: 17:47:08 Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: ARMSTRONG Officer 3: Arrived: 17:55:45 Source: E-911 Notified: Completed: 18:08:00 Officer 4: Associated Person: Associated Person: Tuesday 02/28/2017 17-703166 4504 - EMS 3040 WENDE RD ALDEN TOWN Received: 22:40:59 Officer 1:LVAC7 - 701 Received By: **BALK JENNIFER - D87** Dispatched By: BALK JENNIFER - D87 Dispatched: 22:40:59 Officer 2: Arrived: 22:41:00 Officer 3: Source: PHONE Notified: Officer 4: Completed: 22:42:15 Associated Person: 1 Friday 03/03/2017 17-703311 4504 - EMS 13296 GENESEE ST ALDEN TOWN Received: 13:54:54 Officer 1: CRITTENDEN FIRE Received By: Dispatched: 13:57:19 Officer 2: LVAC7 - 701 Dispatched By: Officer 3: Arrived: 14:00:22 Source: PHONE Completed: 14:51:27 Officer 4: Notified: Associated Person Associated Person: Saturday 03/04/2017 17-703346 4504 - EMS 240 COUNTYLINE RD ALDEN TOWN Received: 09:04:24 Officer 1: ALDEN FIRE DEPT - 9 Received By: **COHAN SHARON - D85** Dispatched: 09:05:00 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: Officer 3: Source: E-911 09:13:30 Notified: Completed: 10:18:40 Officer 4: Associated Person: Saturday 03/04/2017 17-703355 4504 - EMS 12115 CARY RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 14:10:42 Received By: **COHAN SHARON - D85** Dispatched: 14:11:00 Officer 2:LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 14:20:23 Officer 3: Source: **PHONE** Completed: 16:27:38 Officer 4: Notified: Associated Person: (Sunday 03/05/2017 17-703397 4504 - EMS 11212 KIEFFER RD ALDEN TOWN Received: 08:54:35 Officer 1: TOWNLINE FIRE DEPT **COHAN SHARON - D85** Received By: Dispatched: 08:55:00 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 09:04:28 Officer 3: Source: E-911 Completed: 09:58:36 Officer 4: Notified: Associated Person: 1

17-703400 4504 - EMS Sunday 03/05/2017 527 FOUR ROD RD ALDEN TOWN **COHAN SHARON - D85** Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 09:54:24 Dispatched By: COHAN SHARON - D85 Dispatched: 09:54:25 Officer 2: LVAC7 - 701 **CELL PHONE** Officer 3: Source: Arrived: 10:02:24 Notified: Officer 4: Completed: 12:57:04 Associated Person: 17-703415 4504 - EMS Sunday 03/05/2017 11301 KIEFFER RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received By: SCHAEFER TAMMIE -Received: 16:19:59 Dispatched By: BALK JENNIFER - D87 Dispatched: 16:20:00 Officer 2:LVAC7 - 701 Source: E-911 Officer 3: Arrived: 16:30:09 Notified: Officer 4: Completed: 17:15:44 Associated Person: (Associated Person: (Wednesday 03/08/2017 17-703586 4504 - EMS 11138 FAIRVIEW DR ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT FIRESTONE JANE -Received: 13:06:26 Received By: Dispatched: 13:06:26 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Source: Officer 3: E-911 Arrived: 13:17:32 Notified: Completed: 14:09:25 Officer 4: Associated Person: 1 Wednesday 03/08/2017 17-703636 4504 - EMS 3480 WENDE RD ALDEN TOWN Officer 1: MILLGROVE FIRE Received: 20:13:40 Received By: Dispatched: 20:14:50 Officer 2: LVAC7 - 701 Dispatched By: Officer 3: Source: PHONE Arrived: 20:16:25 Completed: 20:51:33 Officer 4: Notified: Associated Person: 17-703642 4508 - EMS ASSIST Wednesday 03/08/2017 928 THREE ROD RD ALDEN TOWN Received: 22:54:44 Officer 1: ALDEN FIRE DEPT - 9 Received By: STEWART ANGELA -Dispatched: 22:56:37 Officer 2:LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 23:08:52 Officer 3: Source: E-911 Completed: 23:16:54 Officer 4: Notified: Associated Person: Associated Person: 0 Friday 03/10/2017 17-703714 4504 - EMS 12303 S BLOSSOM LEA DR ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 07:35:32 Received By: PAWLIKOWSKI JEAN -Dispatched: 07:35:32 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Source: Arrived: 07:46:38 Officer 3: E-911 Completed: 08:29:48 Officer 4: Notified: Associated Person: Associated Person: Friday 03/10/2017 17-703738 4504 - EMS 11733 WESTWOOD RD LEFT ALDEN TOWN Received: 17:38:27 Officer 1: ALDEN FIRE DEPT - 9 **BALK JENNIFER - D87** Received By: Officer 2: LVAC7 - 701 **Dispatched: 17:38:30** Dispatched By: SCHAEFER TAMMIE -Arrived: 17:41:31 Officer 3: Source: E-911 Completed: 19:44:02 Officer 4: Notified: LIEUTENANT Associated Person:

17-703772 4504 - EMS Saturday 03/11/2017 2539 TOWNLINE RD ALDEN TOWN Received: 07:57:46 Officer 1: MILLGROVE FIRE Received By: PAWLIKOWSKI JEAN -Dispatched: 07:57:48 Officer 2: LVAC7 - 701 Dispatched By: Source: Arrived: 08:11:45 Officer 3: E-911 Notified: Completed: 08:45:34 Officer 4: Associated Person: Associated Person: Saturday 03/11/2017 17-703787 4504 - EMS 3571 POHL RD ALDEN TOWN Received: 12:33:16 Officer 1: MILLGROVE FIRE Received By: PAWLIKOWSKI JEAN -Dispatched: 12:36:41 Officer 2:LVAC7 - 701 Dispatched By: Arrived: Officer 3: Source: PHONE 12:41:42 Notified: Officer 4: Completed: 14:49:37 Associated Person: 9 Associated Person: F Saturday 03/11/2017 17-703794 4504 - EMS 13296 GENESEE ST ALDEN TOWN Received: 15:40:18 Officer 1: CRITTENDEN FIRE Received By: SCHAEFER TAMMIE -Dispatched By: SCHAEFER TAMMIE -Dispatched: 15:40:20 Officer 2:LVAC7 - 701 Source: PHONE Arrived: 15:46:03 Officer 3: Notified: Completed: 16:09:15 Officer 4: Associated Person: Monday 03/13/2017 17-703907 4504 - EMS 1012 TWO ROD RD ALDEN TOWN Officer 1:LVAC7 ~ 701 Received By: **BALK JENNIFER - D87** Received: 19:48:28 Dispatched: 19:48:28 Officer 2: TOWNLINE FIRE DEPT Dispatched By: BALK JENNIFER - D87 Source: Arrived: 19:54:24 Officer 3: E-911 Completed: 21:37:45 Officer 4: Notified: Associated Persona Tuesday 03/14/2017 17-703921 4504 - EMS 487 TWO ROD RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 07:12:10 Received By: FIRESTONE JANE -Dispatched: 07:12:10 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 07:28:30 Officer 3: Source: E-911 Notified: Completed: 08:27:53 Officer 4: Associated Person: (17-703924 4504 - EMS Tuesday 03/14/2017 11301 KIEFFER RD REAR ALDEN TOWN Received: 08:00:30 Officer 1:LVAC7 - 701 Received By: FIRESTONE JANE -Dispatched: 08:00:30 Officer 2: TOWNLINE FIRE DEPT Dispatched By: FIRESTONE JANE -Arrived: Officer 3: Source: 08:12:01 PHONE Completed: 09:47:00 Officer 4: Notified: Associated Person: Tuesday 03/14/2017 17-703954 4504 - EMS 11900 WALDEN AV ALDEN TOWN Received: 19:50:16 Officer 1: MILLGROVE FIRE Received By: STEWART ANGELA -Dispatched: 19:50:17 Officer 2: LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: 19:55:51 Officer 3: Source: E-911 Notified: Completed: 20:11:40 Officer 4: Associated Person:

hursday 03/16/2017	17-704016 4504 - EMS 928 THREE ROD RD ALDEN	TOWN		
Received: 06:57:18 Dispatched: 06:57:24 Arrived: 07:06:40	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Received By:	COHAN SHARON - D85 PAWLIKOWSKI JEAN - E-911	
Completed: 07:43:00 Associated Person:	Officer 4:	Notined:		
Associated Person:				
Thursday 03/16/2017	17-704027 4504 - EMS		<u>.</u>	
	13633 NORTH RD ALDEN TO)WN		
Received: 11:49:15	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -	
Dispatched: 11:49:22	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -	
Arrived: 12:01:36	Officer 3:	Source:	E-911	
Completed: 12:45:26	Officer 4:	Notified:		
Associated Person: Associated Person:		<u> </u>		
riday 03/17/2017	17-704091 4504 - EMS		·	
	240 COUNTYLINE RD ALDEI	N TOWN		
Received: 10:50:54	Officer 1:ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85	
Dispatched: 10:50:55	Officer 2:LVAC7 - 701		COHAN SHARON - D85	
Arrived: 11:05:23	Officer 3:	Source:	E-911	
Completed: 11:18:58	Officer 4:	Notifled:		
Associated Person:				
Friday 03/17/2017	17-704102 4504 - EMS 240 COUNTYLINE RD ALDEI	N TOWN		
Received: 12:49:22	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85	
Dispatched: 12:49:22	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -	
Arrived: 12:59:51	Officer 3:	Source: Notified:	E-911	
Completed: 13:50:00 Associated Person:	Officer 4:	Nouried:	•	
Friday 03/17/2017	17-704108 4504 - EMS 3040 WENDE RD ALDEN TO	WN		
Received: 14:41:44	Officer 1: MILLGROVE FIRE	Received By:	COHAN SHARON - D85	
Dispatched: 14:41:44	Officer 2: LVAC7 - 701	•	COHAN SHARON - D85	
Arrived: 14:49:56	Officer 3:	Source:	E-911	
Completed: 15:42:22	Officer 4:	Notified:		
Associated Person:				
Saturday 03/18/2017	17-704170 4504 - EMS 1002 THREE ROD RD ALDE	N TOWN		
Received: 17:11:11	Officer 1: ALDEN FIRE DEPT - 9		ARMSTRONG	
Dispatched: 17:12:39	Officer 2:LVAC7 - 701		BALK JENNIFER - D87	
Arrived: 17:15:59	Officer 3:	Source:	OTHER POLICE	
Completed: 18:10:06	Officer 4:	Notified:		
Associated Person:		 .		
Sunday 03/19/2017	17-704222 4504 - EMS 542 THREE ROD RD ALDEN	TOWN		
Received: 16:10:27	Officer 1: ALDEN FIRE DEPT - 9		BALK JENNIFER - D87	
Dispatched: 16:10:28	Officer 2:LVAC7 - 701		: BALK JENNIFER - D87	
Arrived: 16:19:43	Officer 3:	Source:	PHONE	
Completed: 17:10:53	Officer 4:	Notified:		
Associated Person:				
Associated Person: Y				

Tuesday 03/21/2017 17-704303 4504 - EMS 12300 WALDEN AV ALDEN TOWN Received: 09:39:22 Officer 1: MILLGROVE FIRE Received By: FIRESTONE JANE -Dispatched: 09:39:22 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 09:43:14 Officer 3: Source: E-911 Completed: 10:22:02 Officer 4: Notified: Associated Person: Thursday 03/23/2017 17-704407 4504 - EMS 3040 WENDE RD ALDEN TOWN Received By: Received: 12:56:03 Officer 1: MILLGROVE FIRE PAWLIKOWSKI JEAN -Dispatched: 12:56:04 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 13:01:07 Officer 3: Source: E-911 Completed: 14:03:26 Officer 4: Notified: Associated Person: Associated Person: 17-704475 4504 - EMS Friday 03/24/2017 3552 TOWNLINE RD ALDEN TOWN Officer 1: MILLGROVE FIRE **ARMSTRONG** Received: 16:55:00 Received By: Dispatched By: ARMSTRONG Dispatched: 16:55:19 Officer 2:LVAC7 - 701 Arrived: 17:00:12 Officer 3: Source: OTHER POLICE Notified: LIEUTENANT Officer 4: Completed: 17:50:46 Associated Person: i Saturday 03/25/2017 17-704499 4504 - EMS 1913 TOWNLINE RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 04:35:17 Received By: STEWART ANGELA -Dispatched: 04:37:18 Officer 2:LVAC7 - 701 Dispatched By: Officer 3: Source: E-911 Arrived: 04:47:20 Notified: Completed: 05:22:02 Officer 4: Associated Person: (Sunday 03/26/2017 17-704567 4504 - EMS 2539 TOWNLINE RD ALDEN TOWN Received: 08:58:16 Officer 1: MILLGROVE FIRE Received By: FIRESTONE JANE -Dispatched By: COHAN SHARON - D85 Dispatched: 08:58:16 Officer 2:LVAC7 - 701 Arrived: 09:02:26 Officer 3: Source: E-911 Officer 4: Notified: Completed: 09:15:12 Associated Person: Sunday 03/26/2017 17-704578 4504 - EMS TOWNLINE RD @ WALDEN AV ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT **COHAN SHARON - D85** Received: 13:05:51 Received By: Dispatched: 13:06:00 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 13:11:40 Officer 3: MILLGROVE FIRE Source: PHONE Notified: Completed: 13:23:38 Officer 4: Associated Person: Tuesday 03/28/2017 17-704687 4504 - EMS 11301 KIEFFER RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 15:08:19 Received By: **COHAN SHARON - D85** Dispatched By: COHAN SHARON - D85 Dispatched: 15:08:20 Officer 2:LVAC7 - 701 Arrived: 15:20:53 Officer 3: Source: E-911 Completed: 17:05:51 Officer 4: Notified: Associated Person:

Friday 03/31/2017 17-704817 4504 - EMS 11580 BROADWAY ALDEN TOWN Received: 00:58:20 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 00:59:33 Officer 2:LVAC7 - 701 Dispatched By: Officer 3: Arrived: 01:11:35 Source: E-911 Completed: 01:43:01 Officer 4: Notified: Associated Person: 1 Friday 03/31/2017 17-704822 4504 - EMS 3806 CRITTENDEN RD ALDEN TOWN Received: 02:21:21 Officer 1: CRITTENDEN FIRE Received By: STEWART ANGELA -Dispatched: 02:21:23 Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 02:31:03 Officer 3: Source: OTHER POLICE Completed: 03:23:41 Officer 4: Notified: Associated Persons Friday 03/31/2017 17-704855 4504 - EMS 1304 COUNTY LINE RD ALDEN TOWN Received: Officer 1: ALDEN FIRE DEPT - 9 Received By: **BALK JENNIFER - D87** 18:53:34 Dispatched By: ARMSTRONG Officer 2:LVAC7 - 701 Dispatched: 18:53:34 PHONE Arrived: 19:02:23 Officer 3: Source: Notified: LIEUTENANT Officer 4: Completed: 20:34:39 Associated Person: 1 Associated Person: Saturday 04/01/2017 17-704891 4504 - EMS 95 TOWNLINE RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 09:12:21 Received By: **COHAN SHARON - D85** Officer 2:LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Dispatched: 09:12:22 Source: Arrived: 09:19:36 Officer 3: PHONE Notified: Officer 4: Completed: 10:08:00 Associated Person: Associated Person: Sunday 04/02/2017 17-704968 4504 - EMS 2687 WENDE RD ALDEN TOWN Received: 18:09:37 Officer 1:LVAC7 - 701 Received By: Dispatched: 18:09:37 Officer 2: MILLGROVE FIRE Dispatched By: ARMSTRONG Arrived: Source: PHONE 18:13:43 Officer 3: Completed: 19:09:03 Officer 4: Notified: Associated Person: (Tuesday 04/04/2017 17-705063 4504 - EMS 1133 GREENFIELD DR ALDEN TOWN Received: 11:00:36 Officer 1: TOWNLINE FIRE DEPT Received By: PAWLIKOWSKI JEAN -Dispatched: 11:00:36 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: Officer 3: Source: PHONE 11:12:56 Completed: 11:57:35 Officer 4: Notified: Associated Person: | 17-705097 4504 - EMS Tuesday 04/04/2017 3040 WENDE RD ALDEN TOWN Received: 21:36:48 Officer 1:LVAC7 - 701 Received By: Dispatched: 21:36:51 Officer 2: Dispatched By: Arrived: 21:45:38 Officer 3: Source: PHONE Notified: Completed: 22:42:43 Officer 4: Associated Person: 0

Tuesday 04/04/2017	17-705099 4504 - EMS 2049 SANDRIDGE RD UPP ALI	DEN TOWN	
Received: 22:34:20 Dispatched: 22:34:20 Arrived: 22:40:35 Completed: 23:24:29 Associated Persor	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	BALK JENNIFER - D87 BALK JENNIFER - D87 PHONE
Saturday 04/08/2017	17-705294 4504 - EMS 11270 WESTWOOD RD ALDE	N TOWN	
Received: 19:44:36 Dispatched: 19:46:41 Arrived: 19:52:29 Completed: 20:06:00	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: ALDEN FIRE DEPT - 9 Officer 4:		ARMSTRONG E-911
Associated Person: Associated Person:			
Sunday 04/09/2017	17-705336 4504 - EMS 874 BONCLIFF DR ALDEN TO)WN	<u> </u>
Received: 17:30:23 Dispatched: 17:30:23 Arrived: 17:43:28 Completed: 18:39:01 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	BALK JENNIFER - D87 BALK JENNIFER - D87 E-911
Monday 04/10/2017	17-705372 4504 - EMS		
Received: 09:18:58 Dispatched: 09:19:03 Arrived: 09:24:00 Completed: 10:08:48 Associated Person:	3219 TOWNLINE RD ALDEN 1 Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	PAWLIKOWSKI JEAN - COHAN SHARON - D85 E-911
Tuesday 04/11/2017	17-705451 4504 - EMS 11900 WALDEN AV ALDEN TO	OWN	
Received: 15:04:06 Dispatched: 15:04:06 Arrived: 15:08:51 Completed: 15:52:12	Officer 1: LVAC7 - 701 Officer 2: MILLGROVE FIRE Officer 3: Officer 4:	Received By:	ARMSTRONG ARMSTRONG PHONE
Associated Person: Associated Person:			
Wednesday 04/12/2017	17-705480 4508 - EMS ASSIS 983 E BONNIE LAKE DR ALD		
Received: 01:27:44 Dispatched: 01:27:58 Arrived: 01:40:06 Completed: 02:05:03 Associated Person:	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	-	STEWART ANGELA - STEWART ANGELA - E-911
Wednesday 04/12/2017	17-705491 4504 - EMS 13296 GENESEE ST ALDEN	TOWN	
Received: 06:01:25 Dispatched: 06:03:47 Arrived: 06:09:28 Completed: 06:43:13 Associated Person:	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PHONE
Associated Person:			

17-705511 4504 - EMS Wednesday 04/12/2017 12638 GENESEE ST ALDEN TOWN Officer 1: CRITTENDEN FIRE Received: 13:09:54 Received By: PAWLIKOWSKI JEAN -Dispatched By: FIRESTONE JANE -Dispatched: 13:09:56 Officer 2: LVAC7 - 701 Source: OTHER POLICE Arrived: 13:17:38 Officer 3: Notified: Completed: 13:30:45 Officer 4: Associated Person: 17-705533 4504 - EMS Wednesday 04/12/2017 1012 TWO ROD RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 19:24:53 Received By: **BALK JENNIFER - D87** Dispatched: 19:24:54 Officer 2: LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 19:29:54 Officer 3: Source: E-911 Notified: Completed: 20:20:13 Officer 4: Associated Person: V Thursday 04/13/2017 17-705569 4504 - EMS 3040 WENDE RD ALDEN TOWN Received: 11:21:43 Officer 1: MILLGROVE FIRE Received By: **COHAN SHARON - D85** Dispatched: 11:21:50 Officer 2:LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 11:25:37 Officer 3: Source: E-911 Officer 4: Notified: Completed: 12:33:42 Associated Person: [Thursday 04/13/2017 17-705593 4504 - EMS 13296 GENESEE ST ALDEN TOWN Received: 19:07:25 Officer 1: CRITTENDEN FIRE Received By: ARMSTRONG Dispatched: 19:08:55 Officer 2:LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: 19:16:07 Officer 3: Source: PHONE Notified: Completed: 19:58:06 Officer 4: Associated Person: Associated Person: " Saturday 04/15/2017 4504 - EMS 17-705697 TWO ROD RD @ BROADWAY ALDEN TOWN Received: 13:59:20 Officer 1: ALDEN FIRE DEPT - 9 Received By: **COHAN SHARON - D85** Dispatched: 13:59:21 Officer 2: TOWNLINE FIRE DEPT Dispatched By: COHAN SHARON - D85 Arrived: Officer 3: LVAC7 - 701 Source: 14:00:00 **RADIO** Completed: 14:44:00 Officer 4: Notified: Associated Person: Sunday 04/16/2017 17-705739 4504 - EMS 658 TWO ROD RD ALDEN TOWN Received: 08:52:05 Officer 1: TOWNLINE FIRE DEPT Received By: Dispatched: 08:52:59 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 09:03:00 Officer 3: Source: E-911 Completed: 09:19:03 Officer 4: Notified: Associated Person: Monday 04/17/2017 17-705813 4504 - EMS 3269 ZOELLER RD ALDEN TOWN Officer 1: MILLGROVE FIRE FIRESTONE JANE -Received: 11:23:56 Received By: Dispatched: 11:23:57 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 11:31:21 Officer 3: Source: E-911 Completed: 12:18:28 Officer 4: Notified: Associated Person:

Monday 04/17/2017 17-705838 4499 - FIRE OTHER 3219 TOWNLINE RD ALDEN TOWN Received: 22:53:43 Officer 1: MILLGROVE FIRE Received Bv: **BALK JENNIFER - D87** Dispatched: 22:53:43 Officer 2:LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 22:59:33 Officer 3: Source: PHONE Completed: 23:19:12 Officer 4: Notified: Associated Person: (Tuesday 04/18/2017 17-705874 4504 - EMS 3040 WENDE RD ALDEN TOWN Received: 17:56:31 Officer 1: MILLGROVE FIRE Received By: PAWLIKOWSKI JEAN -Dispatched: 17:56:32 Officer 2:LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: 18:03:46 Officer 3: Source: PHONE Completed: 19:03:03 Officer 4: Notified: LIEUTENANT Associated Person: | Tuesday 04/18/2017 17-705875 4504 - EMS 3040 WENDE RD ALDEN TOWN Received: 17:57:07 Officer 1:LVAC7 - 701 Received By: PAWLIKOWSKI JEAN -Dispatched: 17:57:51 Officer 2: MILLGROVE FIRE Dispatched By: ARMSTRONG Arrived: 18:03:41 Officer 3: Source: PHONE Completed: 18:54:51 Officer 4: Notified: LIEUTENANT Associated Person: 17-705937 4504 - EMS Wednesday 04/19/2017 11389 GENESEE ST ALDEN TOWN Received: 22:51:04 Officer 1: MILLGROVE FIRE Received By: **SCHAEFER TAMMIE -**Dispatched: 22:52:09 Officer 2:LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: 22:57:47 Officer 3: Source: PHONE Completed: 23:28:08 Officer 4: Notified: Associated Person: 17-706036 4504 - EMS Friday 04/21/2017 423 TOWNLINE RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 09:53:25 Received By: **COHAN SHARON - D85** Dispatched: 09:53:33 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Source: E-911 Arrived: 09:59:12 Officer 3: Completed: 10:43:20 Officer 4: Notified: Associated Person: I Friday 04/21/2017 17-706042 4504 - EMS 3040 WENDE RD ALDEN TOWN Officer 1: MILLGROVE FIRE Received: 11:03:00 Received By: COHAN SHARON - D85 Dispatched: 11:03:01 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Source: Arrived: 11:09:10 Officer 3: PHONE Notified: Officer 4: Completed: 11:52:41 Associated Person: Saturday 04/22/2017 17-706099 4504 - EMS 3040 WENDE RD ALDEN TOWN Received: 11:36:52 Officer 1: MILLGROVE FIRE PAWLIKOWSKI JEAN -Received By: Dispatched: 11:37:20 Dispatched By: PAWLIKOWSKI JEAN -Officer 2: LVAC7 - 701 Arrived: 11:52:32 Officer 3: Source: PHONE Notified: Completed: 13:18:30 Officer 4: Associated Person: (Associated Person

Saturday 04/22/2017	17-706119 4504 - EMS 2323 WENDE RD ALDEN TOW	/N	
Received: 17:41:58 Dispatched: 17:43:10 Arrived: 17:50:13 Completed: 17:55:10	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PHONE LIEUTENANT
Associated Person:	Officer 4.	Moulieu.	LICOTENANT
Associated Person:			
Associated Person: H			
Monday 04/24/2017	17-706210 4504 - EMS 3571 POHL RD ALDEN TOWN	- 1	
Received: 06:12:58	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 06:15:36	Officer 2: MILLGROVE FIRE	Dispatched By:	
Arrived: 06:23:20	Officer 3:	Source:	E-911
Completed: 06:59:49	Officer 4:	Notified:	
Associated Person: Associated Person:			
Monday 04/24/2017	17-706262 4504 - EMS 933 E BONNIE LAKE DR ALD	EN TOWN	
Received: 23:41:29	Officer 1: TOWNLINE FIRE DEPT	Received By:	BALK JENNIFER - D87
Dispatched: 23:41:30	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 23:51:17	Officer 3:	Source:	E-911
Completed: 23:59:45	Officer 4:	Notified:	
Associated Person: PA			
Tuesday 04/25/2017	17-706287 4504 - EMS 3040 WENDE RD ALDEN TOV	VN	
Received: 12:10:16	Officer 1: MILLGROVE FIRE	Received By:	COHAN SHARON - D85
Dispatched: 12:10:20	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 12:15:28	Officer 3:	Source:	E-911
Completed: 13:02:14	Officer 4:	Notified:	
Associated Person:			
Friday 04/28/2017	17-706460 4504 - EMS 1280 E LARAY DR ALDEN TO	OWN	
Received: 06:48:25	Officer 1: TOWNLINE FIRE DEPT	Received By:	B.140 (1/2) 1/2/4
Dispatched: 06:48:26	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 06:58:33	Officer 3:	Source: Notified:	E-911
Completed: 07:37:44	Officer 4:	Nouneo.	
Associated Person: Wednesday 05/03/2017	17-706834 4504 - EMS 3571 POHL RD ALDEN TOW!		
Received: 19:36:29	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 19:37:09	Officer 2:MILLGROVE FIRE	Dispatched By:	•
Arrived: 19:42:07	Officer 3:	Source:	PHONE
Completed: 20:23:07	Officer 4:	Notified:	
Associated Person: C			
Friday 05/05/2017	17-706917 4504 - EMS 3040 WENDE RD ALDEN TO	WN	
Received: 11:27:02	Officer 1: MILLGROVE FIRE	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 11:27:03	Officer 2:LVAC7 - 701	•	: PAWLIKOWSKI JEAN -
Arrived: 11:31:24	Officer 3:	Source:	PHONE
Completed: 12:17:47	Officer 4:	Notified:	
Associated Person			

Friday 05/05/2017 17-706929 4504 - EMS 3631 N MILLGROVE RD ALDEN TOWN Received: 16:04:23 Officer 1: MILLGROVE FIRE Received By: **ARMSTRONG** Dispatched By: ARMSTRONG Dispatched: 16:04:24 Officer 2: LVAC7 - 701 Arrived: Officer 3: Source: E-911 16:11:57 Notified: Completed: 17:28:18 Officer 4: Associated Person Friday 05/05/2017 17-706935 4504 - EMS 746 FOUR ROD RD ALDEN TOWN Received: 18:14:56 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 18:15:26 Officer 2:LVAC7 - 701 Dispatched By: Source: Arrived: 18:21:27 Officer 3: PHONE Officer 4: Notified: Completed: 19:56:03 LIEUTENANT Associated Person: Associated Person: Associated Person: Sunday 05/07/2017 17-707027 4504 - EMS 131 BARBERRY LA ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Received: 12:20:33 Dispatched By: ROZLER RONALD - 509 Dispatched: 12:21:53 Officer 2: LVAC7 - 701 Arrived: 12:25:19 Officer 3: Source: E-911 Notified: Completed: 14:36:30 Officer 4: Associated Person: Monday 05/08/2017 17-707054 4504 - EMS 3040 WENDE RD ALDEN TOWN Officer 1: MILLGROVE FIRE Received By: Received: 00:01:35 Dispatched By: Dispatched: 00:02:22 Officer 2:LVAC7 - 701 Source: E-911 Arrived: 00:08:42 Officer 3: Notified: Completed: 00:44:01 Officer 4: Associated Person: 0 Monday 05/08/2017 17-707068 4504 - EMS 1373 ABBY LA ALDEN TOWN Received: 06:44:05 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 06:44:16 Officer 2:LVAC7 - 701 Dispatched By: Officer 3: Source: E-911 Arrived: 06:48:54 Notified: Completed: 07:59:01 Officer 4: Associated Person: Monday 05/08/2017 17-707074 4504 - EMS 13556 NORTH RD ALDEN TOWN Received: 08:45:32 Officer 1: CRITTENDEN FIRE Received By: COHAN SHARON - D85 Dispatched By: FIRESTONE JANE -Dispatched: 08:45:32 Officer 2:LVAC7 - 701 Arrived: 08:53:35 Officer 3: Source: **RADIO** Notified: Completed: 09:52:53 Officer 4: Associated Person: Monday 05/08/2017 17-707076 4504 - EMS 3219 TOWNLINE RD ALDEN TOWN Received: 09:23:18 Officer 1: MILLGROVE FIRE Received By: FIRESTONE JANE -Dispatched: 09:23:19 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 09:31:49 Officer 3: Source: E-911 Notified: Completed: 10:12:45 Officer 4: Associated Person Associated Person: 0

Thursday 05/11/2017	17-707277 4504 - EMS		
	467 WOODSIDE CT ALDEN TO		
Received: 18:10:32	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 18:10:33	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 18:21:57	Officer 3:	Source:	E-911
Completed: 19:03:52	Officer 4:	Notified:	LIEUTENANT
Associated Person:		<u> </u>	
Thursday 05/11/2017	17-707284 4504 - EMS 1254 E LARAY DR ALDEN TO	WN	
Received: 19:17:32	Officer 1: TOWNLINE FIRE DEPT	Received By:	ARMSTRONG
Dispatched: 19:17:41	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 19:28:33	Officer 3:	Source:	E-911
Completed: 20:05:02	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Friday 05/12/2017	17-707316 4504 - EMS 467 WOODSIDE CT ALDEN TO	OWN	
Received: 08:11:41	Officer 1: TOWNLINE FIRE DEPT	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 08:11:42	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 08:25:07	Officer 3:	Source:	E-911
Completed: 08:58:56	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Saturday 05/13/2017	17-707413 4504 - EMS 13720 HENSKEE RD ALDEN 1	OWN	
Received: 17:49:26	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 17:50:38	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 18:07:53	Officer 3:	Source:	E-911
Completed: 18:55;26	Officer 4:	Notified:	
Associated Person:			
Saturday 05/13/2017	17-707414 4504 - EMS 423 TOWNLINE RD ALDEN TO	NWC	
Received: 17:58:32	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 17:59:26	Officer 2: LVAC7 - 701	Dispatched By:	SCHAEFER TAMMIE -
Arrived: 18:08:56	Officer 3:	Source:	E-911
Completed: 18:46:08	Officer 4:	Notified:	
Associated Person: P		<u></u>	
Saturday 05/13/2017	17-707416 4504 - EMS 3571 POHL RD ALDEN TOWN	 I	
Received: 18:39:55	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 18:41:35	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 18:45:22	Officer 3:	Source:	PHONE
Completed: 19:47:34	Officer 4:	Notified:	
Associated Person			
Saturday 05/13/2017	17-707418 4504 - EMS 12514 BROADWAY ALDEN T	OWN	
Received: 19:29:26	Officer 1: ALDEN FIRE DEPT -9	Received By:	
Dispatched: 19:30:25	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 19:34:37	Officer 3:	Source:	PHONE
Completed: 20:02:41	Officer 4:	Notified:	
Associated Person:			
Associated Person:			

Sunday 05/1	4/2017	17-707443 4504 - EMS 933 E BONNIE LAKE DR ALDE	EN TOWN	
Received: (04:13:53	Officer 1: TOWNLINE FIRE DEPT	Received By:	STEWART ANGELA -
Dispatched: (Officer 2: LVAC7 - 701	Dispatched By:	
	04:27:07	Officer 3:	Source:	PHONE
Completed: (Officer 4:	Notified:	
Associated P				
Vionday 05/	15/2017	17-707513 4504 - EMS 542 THREE ROD RD ALDEN T	OWN	
Received: (09:09:55	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: (09:09:56	Officer 2; LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived:	09:19:47	Officer 3:	Source:	PHONE
Completed:	10:06:56	Officer 4:	Notified:	
Associated F	Person:			
Associated F	erson:			
Tuesday 05/	16/2017	17-707580 4504 - EMS 2000 SANDRIDGE RD ALDEN	TOWN	
Received:	09:25:50	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched:		Officer 2:LVAC7 - 701		PAWLIKOWSKI JEAN -
•	09:29:28	Officer 3:	Source:	E-911
Completed:		Officer 4:	Notified:	
Associated F	Person:			
Wednesday	05/17/2017	17-707636 4504 - EMS 1879 SANDRIDGE RD ALDEN	TOWN	
Received:	06:53:40	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched:	06:53:42	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived:	07:02:16	Officer 3:	Source:	E-911
Completed:	08:04:02	Officer 4:	Notified:	
Associated F	Person: V			
Wednesday	05/17/2017	17-707658 4504 - EMS 11980 WALDEN AV ALDEN TO	OWN	
Received:	•	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched:		Officer 2: MILLGROVE FIRE		FIRESTONE JANE -
Arrived:		Officer 3:	Source:	E-911
Completed:		Officer 4:	Notified:	
Associated F				
Friday 05/19	9/2017	17-707761 4508 - EMS ASSIS 1254 E LARAY DR LEFT ALDE	•	
Received:	03:41:39	Officer 1: TOWNLINE FIRE DEPT		STEWART ANGELA -
Dispatched:		Officer 2:LVAC7 - 701		STEWART ANGELA -
	03:52:55	Officer 3:	Source:	E-911
Completed:	04:02:04	Officer 4:	Notified:	
Associated f	Person: F			
Friday 05/19	9/2017	17-707771 4504 - EMS 467 WOODSIDE CT ALDEN TO	OWN	
Received:	07:48:18	Officer 1: TOWNLINE FIRE DEPT	Received By:	FIRESTONE JANE -
Dispatched:	07:48:19	Officer 2:LVAC7 - 701		FIRESTONE JANE -
•	08:02:51	Officer 3:	Source:	E-911
Completed:		Officer 4:	Notified:	

17-707921 4504 - EMS Sunday 05/21/2017 3722 CRITTENDEN RD ALDEN TOWN Received: 17:49:48 Officer 1: CRITTENDEN FIRE Received By: PAWLIKOWSKI JEAN -Dispatched: 17:49:51 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 18:12:08 Officer 3: Source: E-911 Completed: 18:50:10 Officer 4: Notified: Associated Person: 0 Associated Person: Monday 05/22/2017 17-708001 4504 - EMS 3571 POHL RD ALDEN TOWN Officer 1: MILLGROVE FIRE Received: 22:27:37 Received By: **BALK JENNIFER - D87** Officer 2: LVAC7 - 701 Dispatched: 22:27:37 Dispatched By: BALK JENNIFER - D87 Officer 3: Source: Arrived: 22:32:33 E-911 Completed: 23:13:23 Officer 4: Notified: Associated Person: Associated Person: Wednesday 05/24/2017 17-708068 4504 - EMS 1241 SANDRIDGE RD ALDEN TOWN Received: 08:30:09 Officer 1:LVAC7 - 701 Received By: FIRESTONE JANE -Officer 2: ALDEN FIRE DEPT - 9 Dispatched: 08:30:10 Dispatched By: FIRESTONE JANE -Arrived: 08:37:56 Officer 3: Source: E-911 Officer 4: Notified: Completed: 10:51:35 Associated Personi Thursday 05/25/2017 17-708174 4504 - EMS 887 E ALAURA DR ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 22:48:59 Received By: **BALK JENNIFER - D87** Dispatched: 22:48:59 Officer 2:LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 22:52:40 Officer 3: Source: E-911 Notified: Completed: 23:31:59 Officer 4: Associated Person: Friday 05/26/2017 17-708220 4504 - EMS 11318 BROADWAY ALDEN TOWN Received: 17:21:13 Officer 1:LVAC7 - 701 Received By: ARMSTRONG Dispatched: 17:23:05 Officer 2: TOWNLINE FIRE DEPT Dispatched By: Arrived: 17:30:24 Officer 3: Source: E-911 Notified: Completed: 18:08:40 Officer 4: Associated Person: 0 Associated Person: | Sunday 05/28/2017 17-708307 4504 - EMS 12701 BROADWAY ALDEN TOWN Received: 09:18:32 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 09:19:48 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 09:23:05 Officer 3: Source: E-911 Completed: 11:32:04 Officer 4: Notified: Associated Person: Sunday 05/28/2017 17-708342 4504 - EMS 14000 HENSKEE RD ALDEN TOWN Received: 19:40:18 Officer 1:LVAC7 - 701 Received By: SCHAEFER TAMMIE -Dispatched: 19:40:20 Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: SCHAEFER TAMMIE -Arrived: 19:47:39 Officer 3: Source: E-911 Completed: 21:26:57 Officer 4: Notified: LIEUTENANT Associated Person:

Tuesday 05/30/2017	17-708482 4504 - EMS 11581 WALDEN AV ALDEN TO	OWN	
Received: 20:12:16	Officer 1: LVAC7 - 701	Received By:	BALK JENNIFER - D87
Dispatched: 20:12:20	Officer 2:	-	BALK JENNIFER - D87
Arrived: 20:29:00	Officer 3:	Source:	PHONE
Completed: 21:02:55	Officer 4:	Notified:	
Associated Person:			
Tuesday 05/30/2017	17-708487 4504 - EMS 271 SULLIVAN RD ALDEN TO	WN	
Received: 21:27:53	Officer 1: LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 21:33:05	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	ARMSTRONG
Arrived: 21:41:44	Officer 3:	Source:	E-911
Completed: 22:02:14	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Associated Person:			
Wednesday 05/31/2017	17-708511 4504 - EMS 3040 WENDE RD ALDEN TOW	VN	
Received: 10:14:29	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 10:16:39	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 10:23:34	Officer 3:	Source:	E-911
Completed: 11:09:28	Officer 4:	Notified:	
Associated Person:			
Thursday 06/01/2017	17-708585 4504 - EMS 2793 PETERS CORNERS RD	ALDEN TOWN	
Received: 14:39:00	Officer 1: CRITTENDEN FIRE	Received By:	COHAN SHARON - D85
Dispatched: 14:39:00	Officer 2:LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived: 14:44:47	Officer 3:	Source:	E-911
Completed: 15:25:52	Officer 4:	Notified:	
Associated Person: P			
Friday 06/02/2017	17-708638 4504 - EMS 361 TWO ROD RD ALDEN TO	WN	
Received: 11:53:16	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 11:55:24	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 12:08:02	Officer 3:	Source:	E-911
Completed: 12:38:57	Officer 4:	Notified:	
Associated Person:			
Friday 06/02/2017	17-708656 4508 - EMS ASSIS 13296 GENESEE ST ALDEN 1		
Received: 16:32:33	Officer 1: CRITTENDEN FIRE	Received By:	FIRESTONE JANE -
Dispatched: 16:32:34	Officer 2:LVAC7 - 701	•	: FIRESTONE JANE -
Arrived: 16:38:27	Officer 3:	Source:	PHONE
Completed: 16:55:45	Officer 4:	Notified:	
Associated Person:			
Monday 06/05/2017	17-708823 4504 - EMS 11581 WALDEN AV ALDEN T	OWN	
Received: 08:04:27	Officer 1: MILLGROVE FIRE	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 08:04:45	Officer 2: LVAC7 - 701	-	: PAWLIKOWSKI JEAN -
Arrived: 08:12:00	Officer 3:	Source:	PHONE
Completed: 08:55:51	Officer 4:	Notified:	
Associated Person			

Wednesday 06/07/2017 17-708963 4504 - EMS 1024 TWO ROD RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 10:53:06 Received By: FIRESTONE JANE -Officer 2:LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Dispatched: 10:54:09 Officer 3: Source: E-911 Arrived: 11:03:34 Notified: Completed: 11:20:22 Officer 4: Associated Person: 17-709043 4504 - EMS Thursday 06/08/2017 517 TOWNLINE RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received By: PAWLIKOWSKI JEAN -Received: 12:50:22 Dispatched: 12:51:08 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Source: E-911 Arrived: 13:09:49 Officer 3: Notified: Completed: 13:34:41 Officer 4: Associated Person: Associated Person: 17-709090 4504 - EMS Friday 06/09/2017 1279 E LARAY DR ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received By: Received: 10:56:03 Dispatched By: PAWLIKOWSKI JEAN -Officer 2:LVAC7 - 701 Dispatched: 10:56:53 Arrived: 11:08:13 Officer 3: Source: E-911 Officer 4: Notified: Completed: 11:21:19 Associated Person: Friday 06/09/2017 17-709127 4504 - EMS 3679 POHL RD ALDEN TOWN Officer 1: MILLGROVE FIRE **BALK JENNIFER - D87** Received: 22:23:27 Received By: Dispatched: 22:23:28 Officer 2: LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 22:30:32 Officer 3: Source: E-911 Completed: 23:13:44 Officer 4: Notified: Associated Person: I Saturday 06/10/2017 17-709134 4504 - EMS 11741 CARY RD ALDEN TOWN Received: 00:43:05 Officer 1: ALDEN FIRE DEPT -9 Received By: Dispatched By: Dispatched: 00:43:08 Officer 2: LVAC7 - 701 Source: Arrived: 00:52:55 Officer 3: E-911 Notified: Completed: 01:33:20 Officer 4: Associated Person: Associated Person: 17-709162 4504 - EMS Saturday 06/10/2017 12132 WALDEN AV ALDEN TOWN Received: 12:19:20 Officer 1: MILLGROVE FIRE STEWART ANGELA -Received By: Dispatched: 12:20:34 Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 12:25:15 Officer 3: Source: E-911 Completed: 13:19:07 Notified: Officer 4: Associated Person Saturday 06/10/2017 17-709165 4504 - EMS 13296 GENESEE ST ALDEN TOWN Received: 12:37:42 Officer 1: CRITTENDEN FIRE Received By: FIRESTONE JANE -Dispatched: 12:37:42 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 12:48:45 Officer 3: Source: PHONE Completed: 12:48:45 Officer 4: Notified: Associated Person:

Saturday 06/10/2017 17-709190 4504 - EMS 11347 WESTWOOD RD ALDEN TOWN Received: 19:17:23 Officer 1: TOWNLINE FIRE DEPT Received By: Dispatched By: Dispatched: 19:17:25 Officer 2:LVAC7 - 701 Arrived: 19:28:31 Officer 3: Source: E-911 Officer 4: Notified: Completed: 19:59:55 Associated Person: Saturday 06/10/2017 17-709195 4504 - EMS 12569 W MAIN ST ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 19:54:08 Dispatched: 19:54:11 Officer 2: LVAC7 - 701 Dispatched By: E-911 Arrived: 19:59:42 Officer 3: Source: Officer 4: Notified: Completed: 20:52:10 Associated Person: Saturday 06/10/2017 17-709198 4504 - EMS 3219 TOWNLINE RD ALDEN TOWN Received: 22:01:02 Officer 1: MILLGROVE FIRE Received By: STEWART ANGELA -Officer 2: LVAC7 - 701 Dispatched: 22:01:08 Dispatched By: STEWART ANGELA -Arrived: 22:09:45 Officer 3: Source: E-911 Officer 4: Notified: Completed: 22:43:24 Associated Person: Monday 06/12/2017 17-709302 4504 - EMS 1250 E LARAY DR ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 14:29:04 Received By: Dispatched: 14:30:19 Officer 2: LVAC7 - 701 Dispatched By: Source: Arrived: 14:47:01 Officer 3: E-911 Completed: 15:33:42 Officer 4: Notified: Associated Person: Tuesday 06/13/2017 17-709379 4504 - EMS NORTH RD @ PETERS CORNERS RD ALDEN TOWN Officer 1: CRITTENDEN FIRE Received: 14:15:52 Received By: Dispatched: 14:16:00 Officer 2: LVAC7 - 701 Dispatched By: Source: **PHONE** Arrived: 14:31:09 Officer 3: ALDEN FIRE DEPT - 9 Completed: 14:56:54 Officer 4: Notified: Associated Person: a Wednesday 06/14/2017 17-709448 4504 - EMS 11775 GENESEE ST ALDEN TOWN Received: 13:45:20 Officer 1: MILLGROVE FIRE Received By: **COHAN SHARON - D85** Dispatched: 13:46:00 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: Source: E-911 13:50:41 Officer 3: Notified: Completed: 14:43:29 Officer 4: Associated Person: Wednesday 06/14/2017 17-709457 4504 - EMS 12132 WALDEN AV ALDEN TOWN Received: 16:03:49 Officer 1: LVAC7 - 701 Received By: Dispatched: 16:06:11 Officer 2: MILLGROVE FIRE Dispatched By: **PHONE** Arrived: 16:10:00 Officer 3: Source: Completed: 17:22:00 Officer 4: Notified: Associated Person: Associated Person:

Thursday 06/15/2017 17-709502 .4504 - EMS 12132 WALDEN AV ALDEN TOWN Received: 05:58:54 Officer 1: MILLGROVE FIRE Received By: Dispatched: 05:58:57 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 06:11:21 Officer 3: Source: OTHER POLICE Completed: 06:27:56 Officer 4: Notified: Associated Persons Friday 06/16/2017 17-709617 4504 - EMS 2323 WENDE RD ALDEN TOWN Received: 19:57:06 Officer 1: MILLGROVE FIRE Received By: **BALK JENNIFER - D87** Dispatched: 19:57:06 Officer 2:LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 20:01:37 Officer 3: Source: E-911 Completed: 21:35:20 Officer 4: Notified: Associated Person: V 17-709639 4504 - EMS Saturday 06/17/2017 11226 BROADWAY ALDEN TOWN Received: 06:34:31 Officer 1: TOWNLINE FIRE DEPT Received By: Dispatched: 06:35:47 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 06:41:40 Officer 3: Source: E-911 Completed: 07:18:56 Officer 4: Notified: Associated Person: (17-709671 4504 - EMS Saturday 06/17/2017 862 W ALAURA DR ALDEN TOWN Officer 1:LVAC7 - 701 Received: 15:54:55 Received By: ARMSTRONG Dispatched By: ARMSTRONG Dispatched: 15:54:55 Officer 2: TOWNLINE FIRE DEPT Source: Arrived: 16:03:31 Officer 3: E-911 Completed: 16:39:28 Officer 4: Notified: Associated Person Associated Personal Sunday 06/18/2017 17-709723 4504 - EMS 12328 WESTWOOD RD GRGE ALDEN TOWN Received: 07:01:48 Officer 1: LVAC7 - 701 Received By: ARMSTRONG Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: ARMSTRONG Dispatched: 07:04:22 Arrived: 07:13:44 Officer 3: Source: E-911 Completed: 07:39:07 Officer 4: Notified: Associated Person: Associated Person: \ Sunday 06/18/2017 17-709744 4504 - EMS 1200 MAYFIELD DR ALDEN TOWN Received: 14:29:50 Officer 1: ALDEN FIRE DEPT - 9 Received By: COHAN SHARON - D85 Dispatched: 14:29:52 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 14:33:00 Officer 3: Source: E-911 Notified: Completed: 16:38:40 Officer 4: Associated Person: R Sunday 06/18/2017 17-709754 4504 - EMS 12661 W MAIN ST ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 **ARMSTRONG** Received: 18:51:12 Received By: Dispatched: 18:51:49 Officer 2: LVAC7 - 701 Dispatched By: Arrived: Source: E-911 18:54:43 Officer 3: Notified: Completed: 20:47:24 Officer 4: Associated Person: Associated Person:

Sunday 06/18/2017	17-709762 4504 - EMS 11141 GENESEE ST ALDEN T	OWN	
Received: 22:45:12	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 22:47:14	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 22:54:37	Officer 3:	Source:	E-911
Completed: 23:45:20	Officer 4:	Notified:	
Associated Person:			
Monday 06/19/2017	17-709782 4504 - EMS 3321 WENDE RD ALDEN TOW	/N	
Received: 07:15:33	Officer 1: MILLGROVE FIRE	Received By:	FIRESTONE JANE -
Dispatched: 07:15:33	Officer 2:LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 07:23:10	Officer 3:	Source:	PHONE
Completed: 08:00:24	Officer 4:	Notified:	
Associated Person:			
Tuesday 06/20/2017	17-709840 4504 - EMS 3950 N MILLGROVE RD ALDE	N TOWN	
Received: 04:49:01	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 04:49:03	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 04:56:28	Officer 3;	Source:	PHONE
Completed: 05:33:29	Officer 4:	Notified:	
Associated Person:			
Tuesday 06/20/2017	17-709860 4504 - EMS 11219 WESTWOOD RD ALDE	N TOWN	<u> </u>
Received: 13:41:55	Officer 1: TOWNLINE FIRE DEPT	Received By:	COHAN SHARON - D85
Dispatched: 13:42:38	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 13:51:55	Officer 3:	Source:	E-911
Completed: 14:51:06	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Saturday 06/24/2017	17-710113 4504 - EMS 1038 TWO ROD RD ALDEN TO	OWN	
Received: 22:22:05	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 22:22:10	Officer 2: TOWNLINE FIRE DEPT	Dispatched By:	SCHAEFER TAMMIE -
Arrived: 22:28:00	Officer 3:	Source:	E-911
Completed: 22:44:39	Officer 4:	Notified:	
Associated Person:			
Sunday 06/25/2017	17-710146 4504 - EMS 11832 BONCLIFF DR ALDEN	TOWN	
Received: 13:26:33	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 13:26:52	Officer 2:LVAC7 - 701	, ,	FIRESTONE JANE -
Arrived: 13:32:50	Officer 3:	Source:	PHONE
Completed: 14:26:02	Officer 4:	Notified:	
Associated Person:			
Wednesday 06/28/2017	17-710291 4504 - EMS 13369 HENSKEE RD ALDEN	TOWN	-
	Office A. ALDEN FIDE DECT. O	Received By:	
Received: 00:45:29	Officer 1: ALDEN FIRE DEPT - 9	110001100 01.	
Received: 00:45:29 Dispatched: 00:47:05	Officer 2: LVAC7 - 701	Dispatched By:	
		•	E-911

Friday 06/30/2017 17-710423 4504 - EMS 3219 TOWNLINE RD @ `ALDEN TOWN Received: 08:09:31 Officer 1: MILLGROVE FIRE Received By: **COHAN SHARON - D85** Dispatched: 08:10:00 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 08:21:32 Officer 3: Source: OTHER Completed: 08:25:00 Officer 4: Notified: Associated Person; Friday 06/30/2017 17-710441 4504 - EMS 3571 POHL RD ALDEN TOWN Received: 13:47:15 Officer 1: MILLGROVE FIRE Received By: **COHAN SHARON - D85** Dispatched: 13:47:15 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 13:53:19 Officer 3: Source: E-911 Completed: 14:31:37 Officer 4: Notified: Associated Person: Friday 06/30/2017 17-710448 4504 · EMS 3219 TOWNLINE RD ALDEN TOWN Received: 16:51:49 Officer 1: MILLGROVE-FIRE Received By: Dispatched: 16:53:57 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 16:57:17 Officer 3: Source: E-911 Completed: 17:41:52 Officer 4: Notified: Associated Person: I Sunday 07/02/2017 17-710563 4504 - EMS 11660 GENEŞEE ST ALDEN TOWN Received: 08:29:37 Officer 1: MILLGROVE FIRE Received By: Dispatched: 08:29:37 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 08:36:45 Source: E-911 Officer 3: Notified: Completed: 09:18:46 Officer 4: Associated Person: Sunday 07/02/2017 17-710611 4504 - EMS 737 THREE ROD RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 23:09:59 Received By: Dispatched By: Dispatched: 23:10:48 Officer 2: LVAC7 - 701 Source: E-911 Arrived: 23:23:43 Officer 3: Notified: Completed: 01:10:20 Officer 4: Associated Person: 9 Associated Person: Wednesday 07/05/2017 17-710777 4504 - EMS 3666 POHL RD ALDEN TOWN Received: 02:01:12 Officer 1: MILLGROVE FIRE Received By: Dispatched: 02:02:41 Officer 2:LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: 02:10:31 Officer 3: Source: E-911 Completed: 02:52:43 Officer 4: Notified: Associated Person: Associated Person: V Wednesday 07/05/2017 17-710783 4504 - EMS 989 CLEARVUE DR ALDEN TOWN Received: 07:24:59 Officer 1: TOWNLINE FIRE DEPT Received By: PAWLIKOWSKI JEAN -Dispatched: 07:25:00 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 07:36:33 Officer 3: Source: E-911 Completed: 08:15:02 Officer 4: Notified: Associated Person: Associated Person:

Wednesday 07/05/2017 17-710825 4504 - EMS 11475 WESTWOOD RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 18:43:23 Received By: Dispatched: 18:43:31 Dispatched By: Officer 2: LVAC7 - 701 Arrived: 18:56:27 Officer 3: Source: PHONE Notified: Completed: 19:09:01 Officer 4: Associated Person: Sunday 07/09/2017 17-711067 4504 - EMS 3986 S NEWSTEAD RD ALDEN TOWN Received: 16:40:43 Officer 1: CRITTENDEN FIRE Received By: Dispatched: 16:41:31 Officer 2: LVAC7 - 701 Dispatched By: Officer 3: Source: PHONE Arrived: 16:47:25 Completed: 17:25:31 Officer 4: Notified: Associated Person: Associated Person: I Monday 07/10/2017 17-711100 4504 - EMS 12780 W MAIN ST ALDEN TOWN Received: 08:07:01 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Dispatched: 08:07:10 Arrived: 08:12:10 Officer 3: Source: E-911 Completed: 09:00:14 Officer 4: Notified: Associated Person: R Monday 07/10/2017 17-711143 4504 - EMS 11900 WALDEN AV ALDEN TOWN Received: 21:12:05 Officer 1: LVAC7 - 701 Received By: Dispatched: 21:12:43 Officer 2: MILLGROVE FIRE Dispatched By: ARMSTRONG Officer 3: Source: E-911 Arrived: 21:15:38 Notified: Completed: 22:08:47 Officer 4: Associated Person: Associated Person: Tuesday 07/11/2017 17-711162 4504 - EMS 11212 KIEFFER RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT PAWLIKOWSKI JEAN -Received: 06:14:03 Received By: Dispatched: 06:14:21 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 06:24:25 Officer 3: Source: E-911 Notified: Completed: 07:25:33 Officer 4: Associated Person: Associated Person: Tuesday 07/11/2017 17-711168 4499 - FIRE OTHER PETERS CORNERS RD @ REINHART RD ALDEN TOWN Received: 09:58:28 Officer 1: CRITTENDEN FIRE Received By: PAWLIKOWSKI JEAN -Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 09:58:28 Officer 2:LVAC7 - 701 Arrived: 09:58:29 Officer 3: Source: PHONE Completed: 10:01:40 Officer 4: Notified: Associated Person: Tuesday 07/11/2017 17-711206 4504 - EMS 11309 BROADWAY ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 19:28:50 Received By: ARMSTRONG Dispatched: 19:29:59 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 19:38:55 E-911 Officer 3: Source: Completed: 20:18:31 Officer 4: Notified: Associated Person: Associated Person:

Wednesday 07/12/2017 17-711226 4504 - EMS 11581 WALDEN AV ALDEN TOWN Received: 04:29:19 Officer 1:LVAC7 - 701 Received By: Dispatched: 04:29:24 Officer 2: MILLGROVE FIRE Dispatched By: Arrived: 04:42:26 Officer 3: Source: E-911 Completed: 05:18:26 Officer 4: Notified: Associated Person; Q Wednesday 07/12/2017 17-711272 4414 - FIRE CO-DETECTOR 11400 GENESEE ST REAR ALDEN TOWN Received: 20:05:00 Officer 1: MILLGROVE FIRE Received By: ARMSTRONG Dispatched: 20:05:00 Officer 2:LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: 20:09:36 Officer 3: Source: PHONE Completed: 20:56:43 Officer 4: Notified: Associated Person: / Friday 07/14/2017 17-711410 4504 - EMS 11745 BROADWAY ALDEN TOWN Received: 08:31:26 Officer 1: ALDEN FIRE DEPT - 9 Received By: COHAN SHARON - D85 Dispatched: 08:32:00 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 08:38:00 Officer 3: Source: E-911 Completed: 10:48:06 Officer 4: Notified: Associated Person: Friday 07/14/2017 17-711416 4504 - EMS 3040 WENDE RD ALDEN TOWN Received: 10:13:06 Officer 1: MILLGROVE FIRE Received By: **COHAN SHARON - D85** Dispatched: 10:14:00 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 10:22:13 Officer 3: Source: E-911 Completed: 10:53:17 Officer 4: Notified: Associated Person: Saturday 07/15/2017 17-711472 4504 - EMS 13970 GENESEE ST ALDEN TOWN Received By: Received: 02:59:09 Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Dispatched By: Dispatched: 03:00:43 Arrived: 03:12:02 Officer 3: Source: E-911 Officer 4: Notified: Completed: 04:09:21 Associated Person: (17-711496 4504 - EMS Saturday 07/15/2017 2066 SANDRIDGE RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 **COHAN SHARON - D85** Received: 14:26:17 Received By: Dispatched: 14:26:18 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 E-911 Arrived: 14:31:28 Officer 3: Source: Completed: 15:19:06 Officer 4: Notified: Associated Person: I Saturday 07/15/2017 17-711498 4504 - EMS 785 TOWNLINE RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT **COHAN SHARON - D85** Received: 14:52:32 Received By: Dispatched: 14:52:33 Officer 2:LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Source: PHONE Arrived: 15:02:16 Officer 3: Completed: 16:14:47 Officer 4: Notified: Associated Person: !

y: By: PHONE PHONE Y: ARMSTRONG By: ARMSTRONG OTHER POLICE LIEUTENANT
By: PHONE PHONE ARMSTRONG By: ARMSTRONG OTHER POLICE
PHONE V: ARMSTRONG By: ARMSTRONG OTHER POLICE
y: ARMSTRONG By: ARMSTRONG OTHER POLICE
By: ARMSTRONG OTHER POLICE
By: ARMSTRONG OTHER POLICE
By: ARMSTRONG OTHER POLICE
By: ARMSTRONG OTHER POLICE
OTHER POLICE
/: STEWART ANGELA -
By: STEWART ANGELA
PHONE
r.
By:
E-911
I TOWN
y: ARMSTRONG
By: ARMSTRONG
PHONE
y: COHAN SHARON - D85
By:
PHONE
у;
By:
E-911
·

Saturday 07/22/2017	17-711937 4504 - EMS 11366 WESTWOOD RD ALDE	N TOWN	
Received: 17:20:41	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 17:20:41	Officer 2: TOWNLINE FIRE DEPT		SCHAEFER TAMMIE -
Arrived: 17:31:58	Officer 3:	Source:	E-911
Completed: 18:11:05	Officer 4:	Notified:	
Associated Person:			
Saturday 07/22/2017	17-711944 4504 - EMS 1012 TWO ROD RD ALDEN TO	OWN	
Received: 19:39:34	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 19:40:58	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 19:49:15	Officer 3:	Source:	E-911
Completed: 20:33:30	Officer 4:	Notified:	
Associated Person:			
Monday 07/24/2017	17-712048 4508 - EMS ASSIS 13296 GENESEE ST ALDEN T	•	
Received: 15:30:32	Officer 1: CRITTENDEN FIRE	Received By:	
Dispatched: 15:31:43	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 15:36:31	Officer 3:	Source:	PHONE
Completed: 15:49:33	Officer 4:	Notified:	
Associated Person:			
Wednesday 07/26/2017	17-712188 4504 - EMS 1254 E LARAY DR ALDEN TO	WN	
Received: 14:50:00	Officer 1: TOWNLINE FIRE DEPT	Received By:	COHAN SHARON - D85
Dispatched: 14:50:01	Officer 2:LVAC7 - 701		COHAN SHARON - D85
Arrived: 14:56:00	Officer 3:	Source:	PHONE
Completed: 15:07:53	Officer 4:	Notified:	
Associated Person:			
Thursday 07/27/2017	17-712249 4504 - EMS 11614 CARY RD ALDEN TOW		
Received: 11:59:20	Officer 1:TOWNLINE FIRE DEPT	Received By:	COHAN SHARON - D85
Dispatched: 11:59:22	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 12:09:36	Officer 3:	Source: Notified:	E-911
Completed: 12:49:23	Officer 4:	Nounea:	-
Associated Person:	47 740 400 400 FMO		
Sunday 07/30/2017	17-712466 4504 - EMS 11045 JANE DR ALDEN TOW!		
Received: 08:44:12	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 08:45:04	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 08:55:27 Completed: 09:31:55	Officer 3: Officer 4:	Source: Notified:	E-911
Associated Person:	Officer 4.	Nouned.	
Sunday 07/30/2017	17-712489 4504 - EMS	<u> </u>	
-	3040 WENDE RD ALDEN TOV		
Received: 15:52:59	Officer 1: MILLGROVE FIRE	Received By:	ARMSTRONG
Dispatched: 15:53:20	Officer 2:LVAC7 - 701	•	ARMSTRONG
Arrived: 16:00:26	Officer 3:	Source: Notified:	PHONE
Completed: 16:47:04	Officer 4:	raoniea:	
Associated Person:			

Monday 07/31/2017 17-712546 4504 - EMS 134 CAYUGA CREEK RD RGT ALDEN TOWN Received: 10:44:03 Officer 1: ALDEN FIRE DEPT - 9 Received By: **COHAN SHARON - D85** Dispatched: 10:45:12 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 10:54:51 Officer 3: Source: E-911 Completed: 11:42:34 Officer 4: Notified: Associated Person: Monday 07/31/2017 17-712549 4902 - INJURY ACCIDENT BROADWAY @ TWO ROD RD ALDEN TOWN Received: 11:54:13 Officer 1: TOWNLINE FIRE DEPT Received By: FIRESTONE JANE -Dispatched: 11:54:14 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 12:05:00 Officer 3: Source: E-911 Notified: Completed: 12:54:14 Officer 4: Associated Person: Tuesday 08/01/2017 17-712604 4504 - EMS 13904 BROADWAY 5 ALDEN TOWN Received: 06:44:58 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched By: Dispatched: 06:45:01 Officer 2: LVAC7 - 701 Arrived: 06:55:49 Officer 3: Source: ON VIEW Completed: 08:05:45 Officer 4: Notified: Associated Persona Thursday 08/03/2017 17-712768 4504 · EMS 1753 SANDRIDGE RD ALDEN TOWN Received: 16:28:04 Officer 1: ALDEN FIRE DEPT - 9 Received By: **BALK JENNIFER - D87** Officer 2: LVAC7 - 701 Dispatched By: Dispatched: 16:28:50 Source: Arrived: 16:33:17 Officer 3: E-911 Notified: Officer 4: Completed: 18:40:45 Associated Person: Sunday 08/06/2017 17-712922 4504 - EMS 11400 GENESEE ST REAR ALDEN TOWN Officer 1:LVAC7 - 701 Received: 04:05:52 Received By: Dispatched: 04:09:08 Officer 2: Dispatched By: Arrived: 04:19:44 Officer 3: Source: OTHER POLICE Officer 4: Notified: Completed: 04:22:51 Associated Person: Monday 08/07/2017 17-712999 4504 - EMS 13296 GENESEE ST ALDEN TOWN Received: 14:12:48 Officer 1: CRITTENDEN FIRE Received By: **COHAN SHARON - D85** Dispatched: 14:13:00 Officer 2:LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 14:16:08 Officer 3: Source: PHONE Completed: 14:37:48 -Officer 4: Notified: Associated Person: Associated Person: Monday 08/07/2017 17-713001 4504 - EMS 13296 GENESEE ST ALDEN TOWN Received: 15:43:46 Officer 1: CRITTENDEN FIRE Received By: Dispatched By: Dispatched: 15:47:07 Officer 2:LVAC7 - 701 Arrived: 15:53:58 Officer 3: Source: **PHONE** Notified: Completed: 16:47:39 Officer 4: Associated Person: Associated Person:

Tuesday 08/08/2017 17-713048 4504 - EMS 1201 TOWNLINE RD ALDEN TOWN Received: 11:02:59 Officer 1: TOWNLINE FIRE DEPT Received By: **COHAN SHARON - D85** Dispatched: 11:02:59 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 11:07:14 Officer 3: Source: E-911 Completed: 11:48:45 Notified: Officer 4: Associated Person Tuesday 08/08/2017 17-713066 4504 - EMS 12300 WALDEN AV ALDEN TOWN Received: 17:22:57 Officer 1: MILLGROVE FIRE Received By: Dispatched: 17:24:17 Officer 2: LVAC7 - 701 Dispatched By: 17:30:08 Arrived: Officer 3: Source: E-911 Completed: 17:45:45 Officer 4: Notified: Associated Person: Wednesday 08/09/2017 17-713132 4504 - EMS 12300 WALDEN AV ALDEN TOWN Received: 17:09:15 Officer 1: MILLGROVE FIRE Received By: **BALK JENNIFER - D87** Dispatched: 17:09:15 Officer 2: LVAC7 - 701 Dispatched By: ARMSTRONG 17:17:36 Arrived: Officer 3: Source: E-911 Notified: LIEUTENANT Officer 4: Completed: 17:53:59 Associated Person: Thursday 08/10/2017 17-713179 4504 - EMS 1328 VILLAGE PARK DR ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 10:07:44 FIRESTONE JANE -Dispatched By: FIRESTONE JANE -Dispatched: 10:07:44 Officer 2: LVAC7 - 701 Source: Arrived: 10:14:56 Officer 3: E-911 Completed: 10:19:17 Officer 4: Notified: Associated Person: 17-713249 4504 - EMS Friday 08/11/2017 11581 WALDEN AV ALDEN TOWN Received: 02:51:29 Officer 1:LVAC7 - 701 Received By: Dispatched By: Dispatched: 02:52:00 Officer 2: Arrived: 03:02:18 Officer 3: Source: PHONE Notified: Officer 4: Completed: 03:48:02 Associated Person: | Friday 08/11/2017 17-713267 4504 - EMS 11775 GENESEE ST ALDEN TOWN Received: 11:31:53 Officer 1: MILLGROVE FIRE Received By: FIRESTONE JANE -Dispatched: 11:31:55 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Source: Arrived: Officer 3: E-911 11:35:00 Notified: Completed: 12:18:31 Officer 4: Associated Person: R Saturday 08/12/2017 17-713324 4504 - EMS 11060 JANE DR ALDEN TOWN Received: 06:38:37 Officer 1: TOWNLINE FIRE DEPT Received By: Dispatched: 06:39:38 Officer 2:LVAC7 - 701 Dispatched By: Arrived: Source: 06:48:42 Officer 3: E-911 Notified: Completed: 07:29:00 Officer 4: Associated Person: (

Saturday 08/12/2017 17-713331 4504 - EMS 11581 WALDEN AV ALDEN TOWN Received: 09:53:55 Officer 1: LVAC7 - 701 Received By: **COHAN SHARON - D85** Dispatched: 09:53:56 Officer 2: Dispatched By: COHAN SHARON - D85 Arrived: 10:02:00 Officer 3: Source: PHONE Completed: 10:40:23 Officer 4: Notified: Associated Person Monday 08/14/2017 17-713509 4504 - EMS 2051 OLD CRITTENDEN RD ALDEN TOWN Received: 21:31:49 Officer 1: ALDEN FIRE DEPT - 9 Received By: STEWART ANGELA -Dispatched: 21:37:07 Officer 2:LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 21:41:56 Officer 3: Source: E-911 Completed: 23:53:25 Officer 4: Notified: Associated Person: Associated Person: Tuesday 08/15/2017 17-713531 4504 - EMS 1007 E BONNIE LAKE DR ALDEN TOWN Received: 12:24:58 Officer 1: TOWNLINE FIRE DEPT Received By: FIRESTONE JANE -Dispatched: 12:24:58 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: Officer 3: 12:35:59 Source: E-911 Completed: 12:50:31 Notified: Officer 4: Associated Person: a Tuesday 08/15/2017 17-713549 4508 - EMS ASSIST 3679 POHL RD ALDEN TOWN Received: 18:22:16 Officer 1: MILLGROVE FIRE Received By: FIRESTONE JANE -Dispatched: 18:22:16 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: Source: 18:39:01 Officer 3: E-911 Completed: 18:44:05 Officer 4: Notified: Associated Person: Wednesday 08/16/2017 17-713576 4504 - EMS 11045 JANE DR ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 08:28:36 Received By: FIRESTONE JANE -Dispatched: 08:28:37 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 08:39:45 Officer 3: Source: E-911 Completed: 09:23:19 Notified: Officer 4: Associated Person Friday 08/18/2017 17-713666 4504 - EMS 1241 E LARAY DR ALDEN TOWN Received: 03:47:24 Officer 1: TOWNLINE FIRE DEPT Received By: Dispatched: 03:50:37 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 04:03:24 Officer 3: Source: PHONE Completed: 04:47:22 Officer 4: Notified: Associated Person: (Associated Person; Friday 08/18/2017 17-713673 4902 - INJURY ACCIDENT 12443 BROADWAY @ SANDRIDGE RD ALDEN TOWN Received: 07:53:33 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 07:53:33 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: Source: 07:59:12 Officer 3: E-911 Completed: 09:25:10 Notified: Officer 4: Associated Person: 1

Saturday 08/19/2017	17-713789 4504 - EMS	DEN TOYAN	<u> </u>
-	1120 E BONNIE LAKE DR AL		
Received: 23:09:22	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 23:11:32 Arrived: 23:24:57	Officer 2:	Dispatched By:	DUONE
	Officer 3:	Source:	PHONE
Completed: 23:54:02	Officer 4:	Notified:	
Associated Person:			
Sunday 08/20/2017	17-713816 4504 • EMS 335 TOWNLINE RD LEFT ALG	DEN TOWN	
Received: 13:10:08	Officer 1: TOWNLINE FIRE DEPT		COHAN SHARON - D85
Dispatched: 13:10:09	Officer 2: LVAC7 - 701		COHAN SHARON - D85
Arrived: 13:23:08	Officer 3:	Source:	E-911
Completed: 14:10:00	Officer 4:	Notified:	<u></u>
Associated Person:			
Sunday 08/20/2017	17-713820 4902 - INJURY A 2506 CRITTENDEN RD ALDE	•	
Received: 16:01:43	Officer 1: CRITTENDEN FIRE	Received By:	SCHAEFER TAMMIE -
Dispatched: 16:01:50	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 16:09:49	Officer 3: ALDEN FIRE DEPT - 9		E-911
Completed: 17:19:49	Officer 4:	Notified:	
Associated Person:			
Sunday 08/20/2017	17-713830 4504 - EMS 361 TWO ROD RD ALDEN TO	OWN	
Received: 19:55:47	Officer 1: TOWNLINE FIRE DEPT	Received By:	SCHAEFER TAMMIE -
Dispatched: 19:55:50	Officer 2: LVAC7 - 701	•	SCHAEFER TAMMIE -
Arrived: 20:03:04	Officer 3:	Source:	E-911
Completed: 20:05:12	Officer 4:	Notified:	
Associated Person:			
Tuesday 08/22/2017	17-713908 4504 · EMS 12491 NORTH RD ALDEN TO	OWN	<u>-</u> .
Received: 16:23:42	Officer 1; LVAC7 - 701	Received By:	BALK JENNIFER - D87
Dispatched: 16:23:42	Officer 2: ALDEN FIRE DEPT - 9	•	ARMSTRONG
Arrived: 16:29:34	Officer 3:	Source:	E-911
Completed: 18:28:10	Officer 4:	Notified:	
Associated Person:			
Wednesday 08/23/2017	17-713940 4504 - EMS 290 FOUR ROD RD ALDEN	TOWN	
Received: 07:28:54	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 07:28:54	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 07:44:50	Officer 3:	Source:	E-911
Completed: 08:25:09	Officer 4:	Notified:	
Associated Person:	and the second s	i	
Wednesday 08/23/2017	17-713959 4504 - EMS 3635 S NEWSTEAD RD ALD	EN TOWN	
Received: 16:37:36	Officer 1: CRITTENDEN FIRE	Received By:	SCHAEFER TAMMIE -
		•	SCHAEFER TAMMIE -
	Officer 2: LVAC7 - 701	DIZDSIGNED DA	. Sunaei eix lawiiviil -
Dispatched: 16:39:04 Arrived: 16:46:25	Officer 2: LVAC7 - 701 Officer 3:	Source:	
Dispatched: 16:39:04	Officer 2: LVAC7 - 701 Officer 3: Officer 4:		E-911

Friday 08/25/2017	17-714091 4504 - EMS 12529 S LAWN CT ALDEN TO	wn	
Received: 20:56:46 Dispatched: 20:56:47 Arrived: 21:02:20 Completed: 23:13:21	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - BALK JENNIFER - D87 E-911
Associated Person:	47 T4 (400 4000 IN NIP) 40	OIDENT	
Saturday 08/26/2017	17-714100 4902 - INJURY AC 3370 PETERS CORNERS RD /		
Received: 00:50:20 Dispatched: 00:50:20 Arrived: 01:04:40 Completed: 05:43:21 Associated Person:	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3: MILLGROVE FIRE Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Sunday 08/27/2017	17-714184 4504 · EMS		
Juliuay Voiz 1120 11	13296 GENESEE ST ALDEN T	OWN	
Received: 14:04:46 Dispatched: 14:05:24 Arrived: 14:08:37 Completed: 14:56:08	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PHONE
Associated Person:			
Associated Person: Q			
Tuesday 08/29/2017	17-714309 4504 - EMS 13404 GENESEE ST LEFT ALD	DEN TOWN	
Received: 20:39:34	Officer 1: CRITTENDEN FIRE	Received By:	SCHAEFER TAMMIE -
Dispatched: 20:40:26	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 20:41:43	Officer 3:	Source:	E-911
Completed: 21:35:28	Officer 4:	Notified:	
Associated Person:			
Associated Person:	17 74 400 ACC 4 5000	<u></u>	
Wednesday 08/30/2017	17-714337 4504 - EMS WALDEN AV @ WENDE RD A	ALDEN TOWN	
Received: 12:16:52	Officer 1: MILLGROVE FIRE	Received By:	COHAN SHARON - D85
Dispatched: 12:16:53	Officer 2: LVAC7 - 701		COHAN SHARON - D85
Arrived: 12:22:36	Officer 3:	Source:	PHONE
Completed: 13:02:18	Officer 4:	Notified:	
Associated Person:	47 74 4800 4804 F110		
Thursday 08/31/2017	17-714396 4504 - EMS 11458 WESTWOOD RD ALDE	N TOWN	
Received: 12:03:58	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 12:05:22	Officer 2: TOWNLINE FIRE DEPT		PAWLIKOWSKI JEAN -
Arrived: 12:11:58	Officer 3:	Source:	ON VIEW
Completed: 12:45:54	Officer 4:	Notified:	
Associated Person:			
Thursday 08/31/2017	17-714404 4504 - EMS 3040 WENDE RD ALDEN TOV	₩N	
Received: 15:04:47	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 15:06:18	Officer 2: MILLGROVE FIRE	Dispatched By:	
Arrived: 15:17:00	Officer 3:	Source:	PHONE
Completed: 16:09:53	Officer 4:	Notified:	
Associated Person:			

Thursday 08/31/2017	17-714418 4504 - EMS 1012 TWO ROD RD ALDEN	TOWN	-
Received: 18:18:18	Officer 1: TOWNLINE FIRE DEPT	Received By:	BALK JENNIFER - D87
Dispatched: 18:18:18	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 18:26:11	Officer 3:	Source:	E-911
Completed: 19:27:26	Officer 4:	Notified:	
Associated Person:			
Thursday 08/31/2017	17-714425 4504 - EMS 12920 RUNDEL RD ALDEN	TOWN	
Received: 20:14:05	Officer 1: CRITTENDEN FIRE	Received By:	BALK JENNIFER - D87
Dispatched: 20:14:05	Officer 2:LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 20:20:14	Officer 3:	Source:	E-911
Completed: 21:42:58	Officer 4:	Notified:	
Associated Person:			
Saturday 09/02/2017	17-714512 4504 - EMS 11317 BROADWAY ALDEN	TOWN	
Received: 03:01:31	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 03:01;36	Officer 2:	Dispatched By:	
Arrived: 03:15:11	Officer 3:	Source:	PHONE
Completed: 03:21:43	Officer 4:	Notified:	
Associated Person:			
Associated Person:			<u> </u>
Monday 09/04/2017	17-714616 4504 - EMS 3147 PETERS CORNER RD	ALDEN TOWN	
Received: 08:51:21	Officer 1: CRITTENDEN FIRE	Received By:	FIRESTONE JANE -
Dispatched: 08:51:23	Officer 2: LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived: 08:59:00	Officer 3:	Source:	E-911
Completed: 09:51: <u>50</u>	Officer 4:	Notified:	
Associated Person			
Associated Person:			
Monday 09/04/2017	17-714640 4504 - EM\$ 134 CAYUGA CREEK RD LE	FT ALDEN TOWN	
Received: 18:11:44	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 18:15:45	Officer 2: LVAC7 - 701	•	ARMSTRONG
Arrived: 18:21:48	Officer 3:	Source:	E-911
Completed: 19:05:25	Officer 4:	Notified:	
Associated Person:			
Monday 09/04/2017	17-714643 4504 • EMS 541 TWO ROD RD ALDEN	rown	_
Received: 19:23:11	Officer 1: ALDEN FIRE DEPT - 9		
Dispatched: 19:25:06	Officer 2:LVAC7 - 701		ARMSTRONG
Arrived: 19:33:05	Officer 3:	Source:	E-911
O	Officer 4:	Notified:	
Completed: 20:22:52			
Associated Person: F		<u> </u>	
	17-714651 4504 - EMS 1668 SANDRIDGE RD ALD	EN TOWN	
Associated Person: P Monday 09/04/2017 Received: 20:43:17			
Associated Person: P Monday 09/04/2017 Received: 20:43:17 Dispatched: 20:44:37	1668 SANDRIDGE RD ALDI Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	9 Received By: Dispatched By:	ARMSTRONG
Associated Person: P Monday 09/04/2017 Received: 20:43:17	1668 SANDRIDGE RD ALDI Officer 1: ALDEN FIRE DEPT -	9 Received By:	: ARMSTRONG E-911

Monday 09/04/2017 17-714653 4504 - EMS 160 KRISTORIA LA ALDEN TOWN Received: 21:34:10 Officer 1: ALDEN FIRE DEPT - 9 Received By: **ARMSTRONG** Dispatched: 21:34:11 Officer 2: LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: 21:39:40 Officer 3: Source: E-911 Completed: 21:59:19 Officer 4: Notified: Associated Person: Associated Person: PA Wednesday 09/06/2017 17-714753 4504 - EMS 134 CAYUGA CREEK RD RGT ALDEN TOWN Received: 08:36:46 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 08:40:45 Officer 2:LVAC7 - 701 Dispatched By: Arrived: Officer 3: 08:50:21 Source: E-911 Completed: 09:40:20 Officer 4: Notified: Associated Person: Wednesday 09/06/2017 17-714757 4504 - EMS 746 FOUR ROD RD ALDEN TOWN Received: 09:19:47 Officer 1: ALDEN FIRE DEPT - 9 Received By: **COHAN SHARON - D85** Dispatched: 09:20:00 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 09:25:55 Officer 3: Source: PHONE Completed: 10:30:07 Officer 4: Notified: Associated Person: R Wednesday 09/06/2017 17-714785 4504 - EMS 14000 HENSKEE RD ALDEN TOWN Received: 20:08:25 Officer 1: ALDEN FIRE DEPT - 9 Received By: SCHAEFER TAMMIE -Dispatched: 20:08:25 Officer 2:LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 20:16:22 Officer 3: Source: E-911 Completed: 22:34:53 Officer 4: Notified: Associated Person: (Thursday 09/07/2017 17-714801 4504 - EMS 13369 HENSKEE RD ALDEN TOWN Received: 07:01:13 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched By: Dispatched: 07:01:17 Officer 2:LVAC7 - 701 Arrived: 07:12:00 Officer 3: Source: E-911 Completed: 08:14:10 Officer 4: Notified: Associated Person: Associated Person: Thursday 09/07/2017 17-714816 4504 - EMS 11309 BROADWAY ALDEN TOWN Received: 14:37:25 Officer 1: TOWNLINE FIRE DEPT Received By: Dispatched: 14:37:52 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 14:46:49 Officer 3: Source: E-911 Completed: 16:20:58 Officer 4: Notified: Associated Person: R Thursday 09/07/2017 17-714844 4504 - EMS 2635 PETERS CORNERS RD ALDEN TOWN Received: 22:16:50 Officer 1: CRITTENDEN FIRE Received By: **BALK JENNIFER - D87** Dispatched: 22:16:51 Officer 2: LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 22:25:54 Source: Officer 3: E-911 Notified: Completed: 23:22:55 Officer 4: Associated Person:

Friday 09/08/2017	17-714859 4504 - EMS 11513 S BONNIE LAKE DR AL	DEN TOWN	
Received: 11:35:18 Dispatched: 11:35:19 Arrived: 11:49:41 Completed: 12:33:31	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - E-911
Associated Person			
Associated Person:		<u> </u>	
Sunday 09/10/2017	17-714987 4000 - MENTAL 1120 E BONNIE LAKE DR ALI		
Received: 20:31:28	Officer 1: TOWNLINE FIRE DEPT		ARMSTRONG
Dispatched: 20:31:39	Officer 2:LVAC7 - 701	•	SCHAEFER TAMMIE -
Arrived: 20:35:19	Officer 3:	Source: Notified:	E-911
Completed: 20:50:47	Officer 4:	Nounea:	
Associated Person:			
Monday 09/11/2017	17-715028 4504 - EMS BROADWAY @ VIRGINIA DI		
Received: 15:03:09	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 15:05:50	Officer 2: LVAC7 - 701		ARMSTRONG
Arrived: 15:13:00	Officer 3: TOWNLINE FIRE DEPT	Source: Notified:	PHONE
Completed: 20:11:41	Officer 4:	NOUNEO:	
Associated Person:		<u> </u>	
Monday 09/11/2017	17-715036 4504 - EMS 831 W GEBHARD LA ALDEN	TOWN	
Received: 18:13:05	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 18:15:15	Officer 2: TOWNLINE FIRE DEPT	Dispatched By:	
Arrived: 18:19:59	Officer 3:	Source:	E-911
Completed: 19:18:18	Officer 4:	Notified:	
Associated Person:			
Monday 09/11/2017	17-715053 4000 - MENTAL 12354 BROADWAY ALDEN 1		
Received: 22:23:35	Officer 1:LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 22:23:51	Officer 2:		ARMSTRONG
Arrived: 22:36:10	Officer 3:	Source:	OTHER POLICE
Completed: 00:15:54	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Tuesday 09/12/2017	17-715055 4504 - EMS 2635 PETERS CORNERS RD	ALDEN TOWN	-
Received: 00:13:35	Officer 1: CRITTENDEN FIRE	Received By:	
Dispatched: 00:14:36	Officer 2:LVAC7 - 701		STEWART ANGELA -
Arrived: 00:24:55	Officer 3:	Source:	PHONE
Completed: 01:10:20	Officer 4:	Notified:	
Associated Person:			
Tuesday 09/12/2017	17-715069 4504 - EMS 983 E BONNIE LAKE DR ALD	DEN TOWN	
Received: 08:51:03	Officer 1: TOWNLINE FIRE DEPT		COHAN SHARON - D85
Dispatched: 08:51:04	Officer 2: LVAC7 - 701		: COHAN SHARON - D85
Arrived: 09:01:27	Officer 3:	Source:	E-911
Completed: 09:45:44	Officer 4:	Notified:	
Associated Person: P			

Tuesday 09/12/2017	17-715085 4504 - EMS 11212 KIEFFER RD ALDEN TO		
Received: 11:56:17 Dispatched: 11:56:23 Arrived: 12:07:46 Completed: 13:01:32	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	COHAN SHARON - D85 PAWLIKOWSKI JEAN - E-911
Associated Person			
Wednesday 09/13/2017	17-715151 4504 - EMS 11400 GENESEE ST REAR AL	DEN TOWN	
Received: 16:22:24 Dispatched: 16:23:36 Arrived: 16:28:34 Completed: 17:10:52	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - E-911
Associated Person:		<u> </u>	
Thursday 09/14/2017	17-715184 4504 - EMS 11980 WALDEN AV ALDEN TO	OWN	
Received: 04:56:23 Dispatched: 04:56:27 Arrived: 05:08:35 Completed: 05:42:32 Associated Person: Chill	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Thursday 09/14/2017	17-715236 4504 - EMS GENESEE ST @ PETERS CO	RNERS RD ALD	DEN TOWN
Received: 21:40:51 Dispatched: 21:40:52 Arrived: 21:44:12 Completed: 22:36:33 Associated Person: Quality Associated Person: Vision	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	ARMSTRONG BALK JENNIFER - D87 E-911
Friday 09/15/2017	17-715244 4504 - EMS 1071 THREE ROD RD ALDEN	TOWN	
Received: 03:12:06 Dispatched: 03:12:11 Arrived: 03:23:21 Completed: 04:11:43	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	STEWART ANGELA - E-911
Associated Person: C			
Friday 09/15/2017	17-715266 4504 - EMS 836 COUNTYLINE RD ALDEN	TOWN	
Received: 15:52:31 Dispatched: 15:55:37 Arrived: 16:02:02 Completed: 18:32:48 Associated Person: Associated Person: F	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	ARMSTRONG : ARMSTRONG E-911
Monday 09/18/2017	17-715417 4504 - EMS 11581 WALDEN AV ALDEN T	OWN	<u></u>
Received: 12:30:59 Dispatched: 12:31:00 Arrived: 12:36:33 Completed: 13:17:01 Associated Person:	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	PAWLIKOWSKI JEAN - : PAWLIKOWSKI JEAN - E-911

Tuesday 09/19/2017	17-715507 4504 - EMS 3645 S NEWSTEAD RD ALDE	EN TÓWN	• •
Received: 18:27:29 Dispatched: 18:27:30 Arrived: 18:31:44	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3:	Dispatched By: Source:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - E-911
Completed: 19:17:00	Officer 4:	Notified:	LIEUTENANT
Associated Person:		<u> </u>	<u> </u>
Wednesday 09/20/2017	17-715534 4504 - EMS 11400 BROADWAY ALDEN 1		
Received: 12:10:17	Officer 1: TOWNLINE FIRE DEPT		PAWLIKOWSKI JEAN -
Dispatched: 12:10:18	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 12:20:09	Officer 3:	Source:	OTHER POLICE
Completed: 12:42 <u>:47</u>	Officer 4:	Notified:	
Associated Perso			
Wednesday 09/20/2017	17-715547 4504 - EMS 35 EXCHANGE ST ALDEN TO	OWN	
Received: 17:09:15	Officer 1: ALDEN FIRE DEPT - 9	•	ARMSTRONG
Dispatched: 17:09:16	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 17:13:44	Officer 3:	Source:	E-911
Completed: 18:00:54	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Associated Person: Y			
Wednesday 09/20/2017	17-715556 4504 - EMS 11732 WESTWOOD RD ALD	EN TOWN	
Received: 19:53:27	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 19:54:03	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 19:59:17	Officer 3:	Source:	E-911
Completed: 20:45:37	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Thursday 09/21/2017	17-715601 4504 - EMS 11427 GENESEE ST ALDEN	TOWN	
Received: 15:57:33	Officer 1:LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 15:57:35	Officer 2: MILLGROVE FIRE	Dispatched By:	ARMSTRONG
Arrived: 16:03:14	Officer 3:	Source:	OTHER POLICE
Completed: 16:59:39	Officer 4:	Notified:	LIEUTENANT
Associated Person			<u></u>
Thursday 09/21/2017	17-715621 4504 - EMS 3040 WENDE RD ALDEN TO	WN	
Received: 18:53:19	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 18:55:22	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 19:12:52	Officer 3:	Source:	E-911
Completed: 20:00:35	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Monday 09/25/2017	17-715813 4504 - EMS 2605 WENDE RD ALDEN TO	WN	
Received: 12:26:23	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 12:28:00	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 12:42:00	Officer 3:	Source:	E-911
Completed: 13:10:29	Officer 4:	Notified:	
Associated Person:			

Tuesday 09/26/2017	17-715887 4508 - EMS ASSIS		
	154 THREE ROD RD ALDEN T		
Received: 16:16:31	Officer 1:ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 16:17:24	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 16:23:57	Officer 3:	Source:	E-911
Completed: 16:38:24	Officer 4:	Notified:	
Associated Person:		·	
Thursday 09/28/2017	17-715990 4504 - EMS 1120 E BONNIE LAKE DR ALI	DEN TOWN	
Received: 11:59:06	Officer 1:LVAC7 - 701	Received By:	COHAN SHARON - D85
Dispatched: 11:59:07	Officer 2:		COHAN SHARON - D85
Arrived: 12:09:00	Officer 3:	Source:	PHONE
Completed: 12:43:47	Officer 4:	Notified:	
Associated Person:			
Friday 09/29/2017	17-716063 4504 - EMS 2206 SANDRIDGE RD ALDEN	I TOWN	
Received: 18:17:56	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 18:18:20	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 18:22:54	Officer 3:	Source:	E-911
Completed: 18:40:04	Officer 4:	Notified:	
Associated Person:			
Saturday 09/30/2017	17-716095 4504 - EMS 367 S WOODSIDE DR ALDEN	TOWN	
Received: 09:27:57	Officer 1: TOWNLINE FIRE DEPT	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 09:27:58	Officer 2: LVAC7 - 701	•	COHAN SHARON - D85
Arrived: 09:37:37	Officer 3:	Source:	E-911
Completed: 10:33:00	Officer 4:	Notified:	
Associated Person:			
Associated Person:	Ç		
Saturday 09/30/2017	17-716104 4504 - EMS 1254 E LARAY DR LEFT ALDI	EN TOWN	
Received: 13:29:31	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 13:30:00	Officer 2: LVAC7 - 701	•	COHAN SHARON - D85
Arrived: 13:37:31	Officer 3:	Source:	E-911
Completed: 14:20:00	Officer 4:	Notified:	
Associated Person:			
Saturday 09/30/2017	17-716121 4504 - EMS 11659 PARKWOOD DR ALDE	EN TOWN	
Received: 21:12:43	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 21:12:44	Officer 2:LVAC7 - 701	•	BALK JENNIFER - D87
Arrived: 21:20:23	Officer 3:	Source:	E-911
Completed: 22:11:57	Officer 4:	Notified:	
Associated Persor			
Sunday 10/01/2017	17-716138 4504 - EMS 11581 WALDEN AV ALDEN T	TOWN	
Received: 10:04:39	Officer 1:LVAC7 - 701	Received By:	
IV.UT.UU			
	Officer 2:	LJISDATCHEO BY	
Dispatched: 10:07:22	Officer 2: Officer 3:	Dispatched By: Source:	
	Officer 2: Officer 3: Officer 4:	Source: Notified:	PHONE

Sunday 10/01/2017	17-716169 4504 - EMS 12083 WESTWOOD RD ALDEI	N TOWN	
Received: 22:58:48 Dispatched: 23:01:02 Arrived: 23:06:26	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Source:	BALK JENNIFER - D87 STEWART ANGELA - E-911
Completed: 23:55:16	Officer 4:	Notified:	
Associated Person:		<u></u>	
Monday 10/02/2017	17-716186 4504 - EMS 11581 WALDEN AV ALDEN TO	OWN	
Received: 08:42:01	Officer 1: LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 08:42:02	Officer 2:		FIRESTONE JANE -
Arrived: 08:55:22	Officer 3:	Source:	PHONE
Completed: 09:35:55	Officer 4:	Notified:	
Associated Person:			
Monday 10/02/2017	17-716200 4504 - EMS 1254 E LARAY DR ALDEN TO	WN	· · · · · · · · · · · · · · · · · · ·
Received: 12:00:22	Officer 1: TOWNLINE FIRE DEPT	Received By:	FIRESTONE JANE -
Dispatched: 12:01:21	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 12:14:35	Officer 3:	Source:	E-911
Completed: 12:57:44	Officer 4:	Notified:	
Associated Person:			
Wednesday 10/04/2017	17-716353 4504 - EMS 2230 COUNTY LINE RD ALDE	N TOWN	
Received: 17:23:59	Officer 1: LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 17:24:05	Officer 2: ALDEN FIRE DEPT - 9		SCHAEFER TAMMIE -
Arrived: 17:30:00	Officer 3:	Source:	E-911
Completed: 20:56:10	Officer 4:	Notified:	
Associated Person			
Associated Person:			
Thursday 10/05/2017	17-716393 4504 - EMS 11045 JANE DR ALDEN TOW	 N	
Received; 11:27:06	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 11:29:00	Officer 2: TOWNLINE FIRE DEPT	Dispatched By:	
Arrived: 11:37:53	Officer 3:	Source:	E-911
Completed: 13:40:08	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Thursday 10/05/2017	17-716397 4504 - EMS 3040 WENDE RD ALDEN TOV		
Received: 13:02:51	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 13:03:44	Officer 2:	Dispatched By:	:
Arrived: 13:19:41	Officer 3:	Source:	E-911
Completed: 14:05:03	Officer 4:	Notified:	
Associated Person:			
Thursday 10/05/2017	17-716399 4504 - EMS 1706 SANDRIDGE RD ALDEN	TOWN	
Received: 13:50:36	Officer 1:LVAC7 - 701	Received By:	COHAN SHARON - D85
Dispatched: 13:51:29	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By	
		•	
Arrived: 14:05:39	Officer 3:	Source:	E-911
-	Officer 3: Officer 4:	Source: Notified:	E-911

Thursday 10/05/2017	17-716414 4504 - EMS BROADWAY @ SANDRIDGE	RD ALDEN TOV	VN	
Received: 19:19:43 Dispatched: 19:20:51 Arrived: 19:23:50 Completed: 19:51:22	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - PHONE	
Associated Person:				
Friday 10/06/2017	17-716437 4504 - EMS TWO ROD RD @ CARY RD A	LDEN TOWN		
Received: 08:42:00 Dispatched: 08:43:00 Arrived: 08:53:34 Completed: 09:55:56	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:		COHAN SHARON - D85 PAWLIKOWSKI JEAN - E-911	
Associated Person:				
Friday 10/06/2017	17-716443 4504 - EMS 11246 WESTWOOD RD ALDE	N TOWN		
Received: 10:45:36 Dispatched: 10:46:00 Arrived: 10:57:55 Completed: 11:42:21 Associated Person: P	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:		COHAN SHARON - D85 PAWLIKOWSKI JEAN - E-911	
Friday 10/06/2017	17-716447 4504 - EMS			
illiady foromzeti	2157 TOWNLINE RD ALDEN	TOWN		
Received: 13:07:03 Dispatched: 13:07:15 Arrived: 13:26:53 Completed: 13:28:01 Associated Person:	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:		COHAN SHARON - D85 PAWLIKOWSKI JEAN - PHONE	
Saturday 10/07/2017	17-716483 4504 - EMS 3040 WENDE RD ALDEN TOV	WN		
Received: 10:29:17 Dispatched: 10:29:18 Arrived: 10:40:00 Completed: 12:39:40 Associated Person:	Officer 1: LVAC7 - 701 Officer 2: Officer 3: Officer 4:	Received By:	COHAN SHARON - D85 COHAN SHARON - D85 E-911	
Saturday 10/07/2017	17-716510 4504 - EMS 239 TWO ROD RD ALDEN TO	DWN		
Received: 19:11:14 Dispatched: 19:12:23 Arrived: 19:20:37 Completed: 20:08:31 Associated Person: F	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - E-911	
Sunday 10/08/2017	17-716559 4504 - EMS 13570 NORTH RD ALDEN TO	WN .		
Received: 15:27:16 Dispatched: 15:27:18 Arrived: 15:35:00 Completed: 16:40:09 Associated Person:	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	ARMSTRONG ARMSTRONG E-911	

Tuesday 10/10/2017	17-716659 4504 - EMS 11581 WALDEN AV ALDEN TO	DWN	
Received: 13:19:18	Officer 1:LVAC7 - 701	Received By:	COHAN SHARON - D85
Dispatched: 13:19:25	Officer 2:	Dispatched By:	COHAN SHARON - D85
Arrived: 14:18:40	Officer 3:	Source:	PHONE
Completed: 14:18:41	Officer 4:	Notified:	
Associated Person:			
Monday 10/16/2017	17-716998 4508 - EMS ASSIS 11374 GENESEE ST ALDEN T		
Received: 00:42:01	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 00:42:57	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 00:49:36	Officer 3:	Source:	OTHER POLICE
Completed: 01:04:37	Officer 4:	Notified:	
Associated Person			
Monday 10/16/2017	17-717023 4504 - EMS 111 GLENDALE TE ALDEN TO	OWN	
Received: 13:57:26	Officer 1:ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 13:57:27	Officer 2:LVAC7 - 701		BALK JENNIFER - D87
Arrived: 14:08:34	Officer 3:	Source:	PHONE
Completed: 14:59:39	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Monday 10/16/2017	17-717025 4504 - EMS 11900 WALDEN AV ALDEN T	OWN	
Received: 14:50:18	Officer 1: MILLGROVE FIRE	Received By:	BALK JENNIFER - D87
Dispatched: 14:50:19	Officer 2:LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 15:00:00	Officer 3:	Source:	E-911
Completed: 15:41:56	Officer 4:	Notified:	•
Associated Person:			
Tuesday 10/17/2017	17-717089 4504 - EMS 11696 BONCLIFF DR ALDEN	TOWN	
Received: 19:02:35	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 19:02:40	Officer 2: LVAC7 - 701	Dispatched By:	SCHAEFER TAMMIE -
Arrived: 19:05:45	Officer 3:	Source:	RADIO
Completed: 20:57:24	Officer 4:	Notified:	
Associated Person:			
Tuesday 10/17/2017	17-717097 4508 - EMS ASSIS 12231 CARY RD ALDEN TOW		
Received: 23:43:52	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 23:44:15	Officer 2:LVAC7 - 701	Dispatched By:	:
Arrived: 23:55:19	Officer 3:	Source:	PHONE
Completed: 00:19:09	Officer 4:	Notified:	
Associated Persor	·		
Wednesday 10/18/2017	17-717147 4504 - EMS GENESEE ST @ CRITTENDI	EN RD ALDEN T	OWN
Received: 18:23:04	Officer 1: CRITTENDEN FIRE	Received By:	BALK JENNIFER - D87
Dispatched: 18:23:04	Officer 2: LVAC7 - 701	•	: BALK JENNIFER - D87
Arrived: 18:23:48	Officer 3: ALDEN FIRE DEPT - 9	Source:	PHONE
Completed: 19:16:59	Officer 4: MILLGROVE FIRE	Notified:	LIEUTENANT
Associated Person			

Wednesday 10/18/2017	17-717162 4504 - EMS 12914 PIPER CT ALDEN TO		
Received: 20:57:07	Officer 1: CRITTENDEN FIRE	Received By:	BALK JENNIFER - D87
Dispatched: 20:57:08	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 21:03:49	Officer 3:	Source:	E-911
Completed: 21:50:40	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Wednesday 10/18/2017	17-717165 4504 - EMS 12231 CARY RD ALDEN TO		
Received: 21:35:03	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 21:35:04	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 21:43:11	Officer 3:	Source:	E-911
Completed: 23:44:45	Officer 4:	Notified:	
Associated Person:			1
Friday 10/20/2017	17-717288 4504 - EMS 3040 WENDE RD ALDEN TO)WN	-
Received: 19:10:01	Officer 1: MILLGROVE FIRE	Received By:	BALK JENNIFER - D87
Dispatched: 19:10:02	Officer 2: LVAC7 - 701	-	BALK JENNIFER - D87
Arrived: 19:19:53	Officer 3:	Source:	PHONE
Completed: 20:06:53	Officer 4:	Notified:	· - -
Associated Person:			
Saturday 10/21/2017	17-717372 4504 - EMS 3645 S NEWSTEAD RD ALD	EN TOWN	
Received: 21:48:10	Officer 1: CRITTENDEN FIRE	Received By:	
Dispatched: 21:49:25	Officer 2: LVAC7 - 701		ARMSTRONG
Arrived: 21:57:27	Officer 3:	Source:	E-911
Completed: 22:38:33	Officer 4:	Notified:	
Associated Person:			
Sunday 10/22/2017	17-717388 4504 - EMS 521 SULLIVAN RD ALDEN 1	rown .	
Received: 05:07:55	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 05:08:50	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 05:18:52	Officer 3:	Source:	PHONE
Completed: 07:54:36	Officer 4:	Notified:	
Associated Person: F			
Sunday 10/22/2017	17-717422 4504 - EMS 13649 NORTH RD ALDEN T	OWN	
Received: 19:51:30	Officer 1:ALDEN FIRE DEPT - 9	•	ARMSTRONG
Dispatched: 19:52:35	Officer 2:LVAC7 - 701		ARMSTRONG
Arrived: 19:58:13	Officer 3:	Source:	E-911
Completed: 22:09:38	Officer 4:	Notified:	
Associated Person:			
Associated Person:		+	
Monday 10/23/2017	17-717436 4504 - EMS 2781 TOWNLINE RD ALDE	N TOWN	
Received: 07:49:23	Officer 1: MILLGROVE FIRE	Received By:	FIRESTONE JANE -
Dispatched: 07:49:25	Officer 2:LVAC7 - 701	•	FIRESTONE JANE -
Arrived: 07:53:16	Officer 3:	Source:	PHONE
Completed: 09:05:46	Officer 4:	Notified:	

Tuesday 10/24/2017	17-717502 4504 - EMS 3645 S NEWSTEAD RD ALDE		
Received: 07:13:57	Officer 1: CRITTENDEN FIRE	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 07:13:58	Officer 2: LVAC7 - 701	•	PAWLIKOWSKI JEAN -
Arrived: 07:26:58	Officer 3:	Source:	E-911
Completed: 08:07:46	_ Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Tuesday 10/24/2017	17-717510 4504 - EMS 933 E BONNIE LAKE DR ALD	EN TOWN	· · · · · · · · · · · · · · · · · · ·
Received: 09:18:55	Officer 1: TOWNLINE FIRE DEPT	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 09:18:55	Officer 2: LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived: 09:30:45	Officer 3:	Source:	E-911
Completed: 10:19:58	Officer 4:	Notified:	
Associated Person:			
Saturday 10/28/2017	17-717757 4504 - EMS 636 TWO ROD RD ALDEN TO	WN	
Received: 23:46:43	Officer 1: TOWNLINE FIRE DEPT	Received By:	STEWART ANGELA -
Dispatched: 23:47:08	Officer 2:LVAC7 - 701		STEWART ANGELA -
Arrived: 00:01:14	Officer 3:	Source:	E-911
Completed: 00:14:50	Officer 4:	Notified:	
Associated Person:			<u></u>
Sunday 10/29/2017	17-717772 4504 - EMS BROADWAY @ TWO ROD R	D ALDEN TOWN	·
Received: 10:37:09	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 10:37:10	Officer 2: LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 10:43:54	Officer 3:	Source:	E-911
Completed: 10:57:36	Officer 4:	Notified:	
Associated Person			
Monday 10/30/2017	17-717847 4504 - EMS 95 TOWNLINE RD ALDEN TO)WN	
Received: 18:02:06	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 18:02:10	Officer 2:	•	SCHAEFER TAMMIE -
Arrived: 18:17:53	Officer 3:	Source:	PHONE
Completed: 18:51:24	Officer 4:	Notified:	
Associated Person:		<u> </u>	
Friday 11/03/2017	17-718033 4504 - EMS 12569 W MAIN ST ALDEN TO	WN	
Received: 13:06:45	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 13:06:46	Officer 2:LVAC7 - 701		: FIRESTONE JANE -
Arrived: 13:13:26	Officer 3:	Source:	E-911
Completed: 14:09:38	Officer 4:	Notified:	
Associated Person:			
Sunday 11/05/2017	17-718117 4504 - EMS 11581 WALDEN AV ALDEN T	OWN	_
Received: 07:59:51	Officer 1:LVAC7 - 701	Received By:	COHAN SHARON - D85
Dispatched: 07:59:52	Officer 2:	Dispatched By	
Arrived: 08:13:01	Officer 3:	Source:	PHONE
	_ **	4.4 .444 .	
Completed: 08:41:35	Officer 4:	Notified:	

Monday 11/06/2017	17-718181 4504 - EMS 1007 E BONNIE LAKE DR ALI	DEN TOWN		
Received: 10:28:07	Officer 1: TOWNLINE FIRE DEPT	•	PAWLIKOWSKI JEAN -	
Dispatched: 10:29:01	Officer 2: LVAC7 - 701	, ,	COHAN SHARON - D85	
Arrived: 10:41:01	Officer 3:	Source:	PHONE	
Completed: 10:44:30	Officer 4:	Notified:		
Associated Person:				
Tuesday 11/07/2017	17-718242 4504 · EMS 11732 WESTWOOD RD ALDE	N TOWN		
Received: 10:41:19	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -	
Dispatched: 10:42:17	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -	
Arrived: 10:49:17	Officer 3:	Source:	E-911	
Completed: 13:25:53	Officer 4:	Notified:		
Associated Person:				
Wednesday 11/08/2017	17-718302 4504 - EMS 3040 WENDE RD ALDEN TOV	VN		
Received: 11:56:36	Officer 1: MILLGROVE FIRE	Received By:	PAWLIKOWSKI JEAN -	
Dispatched: 11:58:29	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -	
Arrived: 12:03:19	Officer 3:	Source:	E-911	
Completed: 12:50:11	Officer 4:	Notified:		
Associated Person:				
Thursday 11/09/2017	17-718366 4504 - EMS 2157 TOWNLINE RD ALDEN	TOWN		·
Received: 12:45:09	Officer 1: TOWNLINE FIRE DEPT	Received By:	FIRESTONE JANE -	
Dispatched: 12:46:04	Officer 2:LVAC7 - 701		COHAN SHARON - D85	
Arrived: 12:53:45	Officer 3:	Source:	E-911	
Completed: 13:29:32	Officer 4:	Notified:		
Associated Person:				
Associated Person:			N	
Friday 11/10/2017	17-718422 4504 - EMS 11581 WALDEN AV ALDEN T	OWN		
Received: 14:53:40	Officer 1:LVAC7 - 701	Received By:	COHAN SHARON - D85	
Dispatched: 14:53:41	Officer 2:	Dispatched By:	COHAN SHARON - D85	
Arrived: 15:05:53	Officer 3:	Source:	PHONE	
Completed: 15:58:49	Officer 4:	Notified:		
Associated Person:				
Friday 11/10/2017	17-718432 4504 - EMS 12167 CARY RD ALDEN TOW			
Received: 17:21:32	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG	
Dispatched: 17:21:33	Officer 2:LVAC7 - 701	•	SCHAEFER TAMMIE -	
Arrived: 17:32:06	Officer 3:	Source:	E-911	
Completed: 19:34:31	Officer 4:	Notified:		
Associated Person:				
Saturday 11/11/2017	17-718459 4504 - EMS 1331 TWO ROD RD ALDEN T	OWN	-	
Received: 07:40:36	Officer 1: TOWNLINE FIRE DEPT	Received By:	PAWLIKOWSKI JEAN -	
Dispatched: 07:40:38	Officer 2:LVAC7 - 701		PAWLIKOWSKI JEAN -	
Arrived: 07:50:55	Officer 3:	Source:	OTHER POLICE	
Completed: 08:39:28	Officer 4:	Notified:		

Saturday 11/11/2017	17-718462 4504 - EMS 869 BLOSSOM LEA DR ALDE	N TOWN	
Received: 09:15:05	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 09:15:06	Officer 2: LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived: 09:23:23	Officer 3:	Source:	E-911
Completed: 11:07:32	Officer 4:	Notified:	
Associated Person			
Sunday 11/12/2017	17-718503 4504 - EMS 1007 E BONNIE LAKE DR ALI	DEN TOWN	- "
Received: 09:47:38	Officer 1: TOWNLINE FIRE DEPT	Received By:	COHAN SHARON - D85
Dispatched: 09:49:40	Officer 2:LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 09:58:05	Officer 3:	Source:	E-911
Completed: 10:54:40	Officer 4:	Notified:	
Associated Person: 8			
Monday 11/13/2017	17-718550 4504 - EMS 503 TWO ROD RD ALDEN TO	WN	
Received: 11:14:18	Officer 1: TOWNLINE FIRE DEPT	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 11:15:31	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 11:24:47	Officer 3:	Source:	E-911
Completed: 11:39:34	Officer 4:	Notified:	
Associated Person:			
Tuesday 11/14/2017	17-718582 4504 - EMS 586 CAYUGA CREEK RD ALD	EN TOWN	
Received: 06:32:00	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 06:32:00	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 06:36:50	Officer 3:	Source:	E-911
Completed: 08:59:51	Officer 4:	Notified:	
Associated Person:	_		
Friday 11/17/2017	17-718741 4504 - EMS 12113 GENESEE ST ALDEN 1	rown	
Received: 08:50:20	Officer 1: MILLGROVE FIRE	Received By:	COHAN SHARON - D85
Dispatched: 08:50:21	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 08:59:28	Officer 3:	Source:	E-911
Completed: 09:30:22	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Saturday 11/18/2017	17-718817 4902 - INJURY AC BROADWAY @ ALAURA DR		
Received: 14:37:55	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 14:38:44	Officer 2: LVAC7 - 701	Dispatched By:	:
Arrived: 14:48:37	Officer 3:	Source:	E-911
Completed: 14:49:45	Officer 4:	Notified:	
Associated Person:			
Sunday 11/19/2017	17-718871 4504 - EMS 2848 COUNTY LINE RD ALDI	EN TOWN	
Received: 16:20:17	Officer 1: CRITTENDEN FIRE	Received By:	
Dispatched: 16:20:18	Officer 2:LVAC7 - 701	Dispatched By	:
Arrived: 16:28:15	Officer 3:	Source:	E-911
Completed: 17:30:42	Officer 4:	Notified:	
Associated Person: F			

17-718907 4504 - EMS Monday 11/20/2017 11045 JANE DR ALDEN TOWN PAWLIKOWSKI JEAN -Received: 09:55:12 Officer 1: LVAC7 - 701 Received By: Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 09:55:38 Officer 2: Arrived: Source: E-911 10:05:22 Officer 3: Notified: Officer 4: Completed: 10:34:08 Associated Person: (Associated Person: F Wednesday 11/22/2017 17-719043 4504 - EMS 3235 WENDE RD ALDEN TOWN ARMSTRONG Received: 14:45:37 Officer 1:LVAC7 - 701 Received By: Dispatched By: ARMSTRONG Officer 2: MILLGROVE FIRE Dispatched: 14:45:41 Source: E-911 Officer 3: Arrived: 14:52:05 Notified: Completed: 15:40:38 Officer 4: Associated Person: . Associated Person: Friday 11/24/2017 17-719119 4504 - EMS 3645 S NEWSTEAD RD ALDEN TOWN Received: 08:48:21 Officer 1: CRITTENDEN FIRE Received By: Dispatched By: Dispatched: 08:50:32 Officer 2: LVAC7 - 701 Source: Arrived: 08:55:46 Officer 3: E-911 Notified: Completed: 09:42:56 Officer 4: Associated Person: | Sunday 11/26/2017 17-719231 4504 - EMS 3348 CRITTENDEN RD ALDEN TOWN Officer 1: CRITTENDEN FIRE Received: 11:45:05 FIRESTONE JANE -Received By: Dispatched: 11:45:05 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 11:52:49 Officer 3: Source: E-911 Notified: Completed: 12:05:14 Officer 4: Associated Person: Sunday 11/26/2017 17-719234 4504 - EMS 3040 WENDE RD ALDEN TOWN Officer 1: MILLGROVE FIRE Received: 12:38:44 Received By: PAWLIKOWSKI JEAN -Dispatched: 12:38:45 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Source: Arrived: 12:46:41 Officer 3: E-911 Completed: 13:34:43 Officer 4: Notified: Associated Person: 17-719269 4504 - EMS Monday 11/27/2017 11581 WALDEN AV ALDEN TOWN Received: 08:45:33 Officer 1:LVAC7 - 701 Received By: **COHAN SHARON - D85** Dispatched: 08:45:34 Officer 2: Dispatched By: COHAN SHARON - D85 Arrived: 08:57:08 Officer 3: Source: PHONE Completed: 09:41:00 Officer 4: Notified: Associated Person: Tuesday 11/28/2017 17-719330 4504 - EMS 11709 MANITOU DR ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 11:00:24 Received By: FIRESTONE JANE -Dispatched: 11:00:25 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 11:12:05 Officer 3: Source: E-911 Officer 4: Notified: Completed: 11:50:02 Associated Person:

Tuesday 11/28/2017 17-719340 4504 - EMS GENESEE ST @ ZOELLER RD ALDEN TOWN Received: 13:01:03 Officer 1: LVAC7 - 701 Received By: Dispatched: 13:01:44 Officer 2: MILLGROVE FIRE Dispatched By: Arrived: 13:05:50 Officer 3: Source: **PHONE** Completed: 14:00:32 Officer 4: Notified: Associated Person: Wednesday 11/29/2017 17-719381 4504 - EMS 1233 E LARAY DR ALDEN TOWN Received: 08:02:40 Officer 1: TOWNLINE FIRE DEPT Received By: **COHAN SHARON - D85** Dispatched: 08:03:59 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 08:13:57 Officer 3: Source: E-911 Notified: Completed: 08:52:58 Officer 4: Associated Person:1 Associated Person: | Wednesday 11/29/2017 17-719405 4902 - INJURY ACCIDENT 2200 COUNTY LINE RD ALDEN TOWN Received: 16:06:47 Officer 1: ALDEN FIRE DEPT - 9 Received By: Officer 2: LVAC7 - 701 Dispatched: 16:07:07 Dispatched By: Arrived: 16:15:00 Officer 3: Source: PHONE Notified: Completed: 16:58:09 Officer 4: Associated Person: Thursday 11/30/2017 17-719460 4504 - EMS 12509 S LAWN CT ALDEN TOWN Received: 15:22:50 Officer 1: ALDEN FIRE DEPT - 9 Received By: SCHAEFER TAMMIE -Dispatched: 15:22:51 Officer 2:LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Officer 3: Source: Arrived: 15:27:08 E-911 Notified: Completed: 16:34:27 Officer 4: Associated Person: 17-719503 4504 - EMS Friday 12/01/2017 12354 BROADWAY 1 BACK ALDEN TOWN Received: 12:40:36 Officer 1:LVAC7 - 701 Received By: FIRESTONE JANE -Officer 2: ALDEN FIRE DEPT - 9 Dispatched: 12:40:40 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 12:50:09 Officer 3: Source: E-911 Completed: 13:36:06 Officer 4: Notified: Associated Person: Sunday 12/03/2017 17-719608 4504 - EMS 12514 W MAIN ST 4 ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 05:52:05 Received By: Dispatched: 05:53:32 Officer 2:LVAC7 - 701 Dispatched By: Source: Arrived: 06:00:59 Officer 3: F-911 Completed: 07:04:12 Officer 4: Notified: Associated Person: Wednesday 12/06/2017 17-719819 4504 - EMS 12407 WESTWOOD RD ALDEN TOWN Received: 16:04:09 Officer 1: ALDEN FIRE DEPT - 9 Received By: **BALK JENNIFER - D87** Dispatched: 16:04:09 Officer 2: LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 16:13:27 Officer 3: Source: PHONE Completed: 16:13:28 Officer 4: Notified: Associated Person: Associated Person:

Saturday 12/09/2017	17-719925 4504 - EMS 1053 VIRGINIA DR ALDEN TO	NWC	
Received: 01:36:01 Dispatched: 01:37:59 Arrived: 01:48:21 Completed: 03:29:03 Associated Person	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
	17 TOO 100 100 1 TOO		
Nednesday 12/13/2017	17-720160 4504 - EMS 965 W ALAURA DR ALDEN T	OWN	
Received: 02:34:49	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 02:35:08	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 02:50:10	Officer 3:	Source:	E-911
Completed: 03:13:26	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Wednesday 12/13/2017	17-720172 4504 - EMS 11900 WALDEN AV ALDEN T	OWN	
Received: 09:10:11	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 09:11:10	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 09:17:40	Officer 3:	Source:	E-911
Completed: 09:59:55	Officer 4:	Notified:	
Associated Person			
Friday 12/15/2017	17-720324 4504 - EMS WALDEN AV @ ZOELLER R	D ALDEN TOWN	
Received: 19:03:53	Officer 1: MILLGROVE FIRE	Received By:	ARMSTRONG
Dispatched: 19:05:47	Officer 2: LVAC7 - 701		ARMSTRONG
Arrived: 19:13:38	Officer 3:	Source:	OTHER POLICE
Completed: 19:16:46	Officer 4:	Notified:	Ţ <u></u>
Associated Person			<u></u>
Saturday 12/16/2017	17-720347 4913 - VEHICLE I SULLIVAN RD @ HENSKEE		/N
Received: 02:25:12	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 02:26:38	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 02:38:24	Officer 3:	Source:	OTHER POLICE
Completed: 03:06:30	Officer 4:	Notified:	
Associated Person:			
Saturday 12/16/2017	17-720385 4504 - EMS 1200 MAYFIELD DR ALDEN	TOWN	
Received: 16:35:06	Officer 1: ALDEN FIRE DEPT - 9		SCHAEFER TAMMIE -
Dispatched: 16:36:38	Officer 2: LVAC7 - 701	•	SCHAEFER TAMMIE -
Arrived: 16:42:16	Officer 3:	Source:	E-911
Completed: 16:48:11	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Saturday 12/16/2017	17-720386 4504 - EMS 437 EXCHANGE ST ALDEN	TOWN	
Received: 17:47:53	Officer 1: ALDEN FIRE DEPT - 9	-	ARMSTRONG
Dispatched: 17:49:03	Officer 2:LVAC7 - 701		: SCHAEFER TAMMIE -
Arrived: 17:57:30	Officer 3:	Source:	E-911
Completed: 18:42:48	Officer 4:	Notified:	

Sunday 12/17/2017 17-720413 4504 - EMS 11246 WESTWOOD RD ALDEN TOWN Received: 06:55:32 Officer 1:LVAC7 - 701 Received By: FIRESTONE JANE -Officer 2: TOWNLINE FIRE DEPT Dispatched: 06:55:43 Dispatched By: FIRESTONE JANE -Source: Arrived: 07:16:05 Officer 3: E-911 Completed: 07:42:02 Officer 4: Notified: Associated Person: Sunday 12/17/2017 17-720435 4504 - EMS 11560 GENESEE ST ALDEN TOWN Received: 14:48:15 Officer 1:LVAC7 - 701 Received By: FIRESTONE JANE -Officer 2: MILLGROVE FIRE Dispatched: 14:48:16 Dispatched By: FIRESTONE JANE -Arrived: Source: E-911 14:54:00 Officer 3: Completed: 15:43:55 Officer 4: Notified: Associated Person: 6 17-720490 4504 - EMS Monday 12/18/2017 11267 BROADWAY ALDEN TOWN Officer 1:LVAC7 - 701 Received: 14:27:27 Received By: Dispatched: 14:28:34 Officer 2: Dispatched By: Arrived: Officer 3: Source: PHONE 14:42:14 Completed: 15:15:56 Officer 4: Notified: Associated Personal Tuesday 12/19/2017 17-720520 4504 - EMS 11965 BROADWAY ALDEN TOWN Received: 05:11:53 Officer 1: ALDEN FIRE DEPT - 9 Received By: STEWART ANGELA -Dispatched: 05:12:17 Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 05:23:35 Officer 3: Source: OTHER POLICE Completed: 06:00:46 Officer 4: Notified: Associated Person: Wednesday 12/20/2017 17-720629 4504 - EMS 239 TWO ROD RD ALDEN TOWN Received: 23:08:59 Officer 1: TOWNLINE FIRE DEPT Received By: **BALK JENNIFER - D87** Officer 2:LVAC7 - 701 Dispatched: 23:08:59 Dispatched By: BALK JENNIFER - D87 Arrived: 23:19:11 Officer 3: Source: PHONE Completed: 00:17:06 Officer 4: Notified: LIEUTENANT Associated Person: i Thursday 12/21/2017 17-720639 4504 - EMS BROADWAY @ SANDRIDGE RD ALDEN TOWN Received: 07:42:15 Officer 1: LVAC7 - 701 Received By: FIRESTONE JANE -Dispatched: 07:42:15 Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: FIRESTONE JANE -Arrived: 07:47:59 Officer 3: Source: PHONE Completed: 09:22:41 Officer 4: Notified: Associated Person: Thursday 12/21/2017 17-720684 4504 - EMS 3143 ZOELLER RD ALDEN TOWN Received: 21:20:57 Officer 1: MILLGROVE FIRE Received By: Dispatched: 21:21:44 Officer 2:LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: 21:32:24 Officer 3: Source: E-911 Completed: 22:22:58 Officer 4: Notified: Associated Person:

17-720725 4504 - EMS Friday 12/22/2017 11514 S BONNIE LAKE DR ALDEN TOWN Received: 14:54:05 Officer 1: LVAC7 - 701 Received By: Dispatched: 14:55:22 Officer 2: TOWNLINE FIRE DEPT Dispatched By: Arrived: 15:04:00 Officer 3: Source: PHONE Notified: Completed: 15:40:49 Officer 4: Associated Person: Sunday 12/24/2017 17-720804 4504 - EMS 1052 TWO ROD RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received By: PAWLIKOWSKI JEAN -Received: 07:32:44 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 07:32:53 Officer 3: Source: E-911 Arrived: 07:42:39 Notified: Completed: 08:15:40 Officer 4: Associated Person Associated Person 17-720892 4508 · EMS ASSIST Monday 12/25/2017 1032 BONCLIFF DR ALDEN TOWN Received: 20:57:40 Officer 1: ALDEN FIRE DEPT - 9 Received By: ARMSTRONG Officer 2:LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Dispatched: 20:57:40 Arrived: 21:05:32 Officer 3: Source: E-911 Completed: 21:17:07 Officer 4: Notified: Associated Person: 1 Associated Person: Tuesday 12/26/2017 17-720899 4504 - EMS 1022 CLEARVUE DR ALDEN TOWN Officer 1:LVAC7 - 701 Received: 00:41:39 Received By: Dispatched By: Dispatched: 00:42:55 Officer 2: TOWNLINE FIRE DEPT Source: Arrived: 00:53:36 E-911 Officer 3: Notified: Completed: 01:31:21 Officer-4 Associated Person: Associated Person: 17-720900 4504 - EMS Tuesday 12/26/2017 11175 WESTWOOD RD ALDEN TOWN Received: 00:57:28 Officer 1: LVAC7 - 701 Received By: Officer 2: TOWNLINE FIRE DEPT Dispatched By: ARMSTRONG Dispatched: 00:59:59 Arrived: 01:11:48 Officer 3: Source: E-911 Notified: Completed: 01:26:28 Officer 4: Associated Person: Associated Person: Tuesday 12/26/2017 17-720920 4504 - EMS 672 FOUR ROD RD ALDEN TOWN Received: 12:11:00 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 12:11:56 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -12:19:00 Arrived: Officer 3: E-911 Source: Completed: 13:11:46 Officer 4: Notified: Associated Person: 1 Tuesday 12/26/2017 17-720943 4504 - EMS 122 GLENDALE TE ALDEN TOWN Received: 20:40:13 Officer 1: ALDEN FIRE DEPT - 9 Received By: **BALK JENNIFER - D87** Dispatched: 20:40:47 Officer 2: LVAC7 - 701 Dispatched By: ARMSTRONG Source: E-911 Arrived: 20:49:32 Officer 3: Notified: Completed: 21:34:17 Officer 4: Associated Person:

Tuesday 01/02/2018	18-800056 4504 - EMS 11581 WALDEN AV ALDEN TO	OWN	
Received: 08:12:29	Officer 1: LVAC7 - 701		ARMSTRONG
Dispatched: 08:12:39	Officer 2:	Dispatched By:	
Arrived: 08:23:08	Officer 3:	Source:	PHONE
Completed: 09:09:21	Officer 4:	Notified:	THORE
Associated Person:		. 101	
Tuesday 01/02/2018	18-800072 4504 - EMS 3040 WENDE RD ALDEN TOW		
Danaharda 40.00.00			45146750446
Received: 12:23:02	Officer 1:LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 12:24:22	Officer 2: MILLGROVE FIRE		FIRESTONE JANE -
Arrived: 12:39:22	Officer 3: RURAL METRO	Source:	E-911
Completed: 14:20:19	Officer 4: ALDEN FIRE DEPT - 9	Notified:	
Associated Person			_ _
Tuesday 01/02/2018	18-800078 4504 - EMS TWO ROD RD @ CARY RD A	LDEN TOWN	
Received: 14:01:07	Officer 1: TOWNLINE FIRE DEPT	Received By:	FIRESTONE JANE -
Dispatched: 14:01:08	Officer 2:LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 14:19:58	Officer 3:	Source:	PHONE
Completed: 15:14:27	Officer 4:	Notified:	
Associated Person:			
Tuesday 01/02/2018	18-800108 4504 - EMS 13301 GENESEE ST ALDEN T	OWN	
Received: 23:47:31	Officer 1: CRITTENDEN FIRE	Received By:	
Dispatched: 23:47:34	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 23:55:21	Officer 3:	Source:	E-911
Completed: 00:42:12	Officer 4:	Notified:	2011
Associated Person:			
Associated Person:			
	40.000440 4500 140TODIST	BROKE BOWN	
Wednesday 01/03/2018	18-800110 4506 - MOTORIST WENDE RD @ WALDEN AV	ALDEN TOWN	
Received: 00:35:14	Officer 1: OFFICER ONE - 489	Received By:	
Dispatched: 00:35:34	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 00:36:18	Officer 3:	Source:	RADIO
Completed: 00:36:20	Officer 4:	Notified:	
Associated Person:			
Thursday 01/04/2018	18-800201 4504 - EMS 11621 GENESEE ST ALDEN	TOWN	
Received: 13:56:47	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 13:59:42	Officer 2: MILLGROVE FIRE	Dispatched By:	
Arrived: 14:02:21	Officer 3:	Source:	PHONE
Completed: 14:45:10	Officer 4:	Notified:	
Associated Person			
Friday 01/05/2018	18-800277 4504 - EMS 12387 WESTWOOD RD ALDE	EN TOWN	
	Officer 4: ALDEN CIDE DEDT O	Received By:	STEWART ANGELA -
Received: 23:50:46	Officer EALDEN FIRE DEEL - 4		
Received: 23:50:46 Dispatched: 23:50:50	Officer 1: ALDEN FIRE DEPT - 9 Officer 2:LVAC7 - 701		
Dispatched: 23:50:50	Officer 2:LVAC7 - 701	Dispatched By:	STEWART ANGELA -

Sunday 01/07/2018	18-800325 4504 - EMS 11267 BROADWAY ALDEN TO	OWN	
Received: 00:18:52 Dispatched: 00:21:03 Arrived: 00:29:00 Completed: 00:58:38	Officer 1: LVAC7 - 701 Officer 2: TOWNLINE FIRE DEPT Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	OTHER POLICE
Associated Person			
Monday 01/08/2018	18-800446 4414 - FIRE CO-DE 382 S WOODSIDE DR ALDEN		
Received: 20:44:46	Officer 1: TOWNLINE FIRE DEPT	Received By:	ARMSTRONG
Dispatched: 20:46:54	Officer 2: LVAC7 - 701	Dispatched By:	ARMSTRONG
Arrived: 20:54:43	Officer 3:	Source:	PHONE
Completed: 21:51:51	Officer 4:	Notified:	
Associated Person:			
Tuesday 01/09/2018	18-800462 4504 - EMS 857 FOUR ROD RD ALDEN TO	NWC	
Received: 07:53:58	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 07:54:37	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 08:04:43	Officer 3:	Source:	E-911
Completed: 09:02:37	Officer 4:	Notified:	
Associated Person:			
Wednesday 01/10/2018	18-800526 4504 - EMS 3040 WENDE RD ALDEN TOW	٧N	
Received: 11:03:47	Officer 1:LVAC7 - 701	Received By:	COHAN SHARON - D85
Dispatched: 11:03:49	Officer 2:	•	COHAN SHARON - D85
Arrived: 11:16:00	Officer 3:	Source:	PHONE
Completed: 12:15:00	Officer 4:	Notified:	
Associated Person:			
Wednesday 01/10/2018	18-800550 4504 - EMS 2848 COUNTY LINE RD ALDE		
Received: 17:04:20	Officer 1: CRITTENDEN FIRE	Received By:	SCHAEFER TAMMIE -
Dispatched: 17:04:25	Officer 2:LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 17:12:00 Completed: 18:15:44	Officer 3: Officer 4:	Source: Notified:	E-911 LIEUTENANT
Associated Person:	Officer 4.	Mouneu.	LIEU I EIVAN I
	10.000.47 1500 5100 45516		
Friday 01/12/2018	18-800647 4508 - EMS ASSIS 13369 HENSKEE RD ALDEN T	TOWN	
Friday 01/12/2018 Received: 12:47:05	13369 HENSKEE RD ALDEN T Officer 1: ALDEN FIRE DEPT - 9	TOWN Received By:	PAWLIKOWSKI JEAN -
Friday 01/12/2018 Received: 12:47:05 Dispatched: 12:47:13	13369 HENSKEE RD ALDEN 1 Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	TOWN Received By: Dispatched By:	FIRESTONE JANE -
Friday 01/12/2018 Received: 12:47:05 Dispatched: 12:47:13 Arrived: 12:53:18	13369 HENSKEE RD ALDEN TO Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	TOWN Received By: Dispatched By: Source:	
Friday 01/12/2018 Received: 12:47:05 Dispatched: 12:47:13 Arrived: 12:53:18 Completed: 12:59:59	13369 HENSKEE RD ALDEN 1 Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	TOWN Received By: Dispatched By:	FIRESTONE JANE -
Friday 01/12/2018 Received: 12:47:05 Dispatched: 12:47:13 Arrived: 12:53:18 Completed: 12:59:59 Associated Person: Page 14:47:48	13369 HENSKEE RD ALDEN TO Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	TOWN Received By: Dispatched By: Source:	FIRESTONE JANE -
Friday 01/12/2018 Received: 12:47:05 Dispatched: 12:47:13 Arrived: 12:53:18 Completed: 12:59:59 Associated Person:	13369 HENSKEE RD ALDEN 1 Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	TOWN Received By: Dispatched By: Source: Notified:	FIRESTONE JANE -
Friday 01/12/2018 Received: 12:47:05 Dispatched: 12:47:13 Arrived: 12:53:18 Completed: 12:59:59 Associated Person: Associated Person: Sunday 01/14/2018	13369 HENSKEE RD ALDEN TO Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4: 18-800720 4902 - INJURY AC 1406 TWO ROD RD ALDEN TO	TOWN Received By: Dispatched By: Source: Notified: CIDENT OWN	FIRESTONE JANE - E-911
Friday 01/12/2018 Received: 12:47:05 Dispatched: 12:47:13 Arrived: 12:53:18 Completed: 12:59:59 Associated Person: Associated Person: Sunday 01/14/2018 Received: 01:06:33	13369 HENSKEE RD ALDEN 1 Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4: 18-800720 4902 - INJURY AC 1406 TWO ROD RD ALDEN TO	Received By: Dispatched By: Source: Notified: CIDENT OWN Received By:	FIRESTONE JANE - E-911 STEWART ANGELA -
Friday 01/12/2018 Received: 12:47:05 Dispatched: 12:47:13 Arrived: 12:53:18 Completed: 12:59:59 Associated Person: Associated Person: Sunday 01/14/2018 Received: 01:06:33 Dispatched: 01:07:22	13369 HENSKEE RD ALDEN TO Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4: 18-800720 4902 - INJURY ACT 1406 TWO ROD RD ALDEN TO Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701	Received By: Dispatched By: Source: Notified: CCIDENT OWN Received By: Dispatched By:	FIRESTONE JANE - E-911 STEWART ANGELA -
Friday 01/12/2018 Received: 12:47:05 Dispatched: 12:47:13 Arrived: 12:53:18 Completed: 12:59:59 Associated Person: Sunday 01/14/2018 Received: 01:06:33 Dispatched: 01:07:22 Arrived: 01:14:17	13369 HENSKEE RD ALDEN TO Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4: 18-800720 4902 - INJURY ACT 1406 TWO ROD RD ALDEN TO Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3:	Received By: Dispatched By: Source: Notified: CIDENT OWN Received By: Dispatched By: Source:	FIRESTONE JANE - E-911 STEWART ANGELA -
Friday 01/12/2018 Received: 12:47:05 Dispatched: 12:47:13 Arrived: 12:53:18 Completed: 12:59:59 Associated Person: Associated Person: Sunday 01/14/2018 Received: 01:06:33 Dispatched: 01:07:22	13369 HENSKEE RD ALDEN TO Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4: 18-800720 4902 - INJURY ACT 1406 TWO ROD RD ALDEN TO Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701	Received By: Dispatched By: Source: Notified: CCIDENT OWN Received By: Dispatched By:	FIRESTONE JANE - E-911 STEWART ANGELA -

Tuesday 01/16/2018 18-800829 4504 - EMS 3903 POHL RD ALDEN TOWN Received By: Received: 08:58:22 Officer 1: MILLGROVE FIRE PAWLIKOWSKI JEAN -Dispatched: 09:00:00 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 09:14:23 Officer 3: Source: E-911 Completed: 09:55:14 Officer 4: Notified: Associated Persona Associated Person: (18-800844 4504 - EMS Tuesday 01/16/2018 3040 WENDE RD ALDEN TOWN Received: 13:21:21 Officer 1:LVAC7 - 701 Received By: Dispatched: 13:23:23 Officer 2: MILLGROVE FIRE Dispatched By: Arrived: 13:32:36 Officer 3: Source: OTHER Officer 4: Notified: Completed: 14:49:45 Associated Person: (Tuesday 01/16/2018 18-800859 4504 - EMS 11630 CARY RD ALDEN TOWN Received: 17:54:40 Officer 1: LVAC7 - 701 Received By: Dispatched: 17:54:40 Officer 2: TOWNLINE FIRE DEPT Dispatched By: Arrived: 18:07:43 Source: E-911 Officer 3: Completed: 20:28:40 Officer 4: Notified: Associated Person: (Thursday 01/18/2018 18-800929 4504 - EMS 11714 WESTWOOD RD ALDEN TOWN Received: 06:56:53 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 06:56:56 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 07:12:18 Officer 3: Source: E-911 Officer 4: Notified: Completed: 07:52:19 Associated Person: (Associated Person; Friday 01/19/2018 18-800977 4504 - EMS 1369 VILLAGE PARK DR ALDEN TOWN Received: 00:50:06 Officer 1: ALDEN FIRE DEPT - 9 Received By: STEWART ANGELA -Dispatched: 00:50:07 Officer 2:LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 01:02:45 Officer 3: Source: PHONE Completed: 01:17:42 Officer 4: Notified: Associated Person: Associated Person: Friday 01/19/2018 18-801001 4504 - EMS 11714 WESTWOOD RD ALDEN TOWN Received: 11:13:25 Officer 1: LVAC7 - 701 Received By: FIRESTONE JANE -Dispatched: 11:13:26 Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 11:25:45 Officer 3: Source: E-911 Completed: 12:11:05 Officer 4: Notified: Associated Person: Saturday 01/20/2018 18-801090 4504 - EMS **521 SULLIVAN RD ALDEN TOWN** Officer 1: ALDEN FIRE DEPT - 9 Received: 22:18:01 Received By: SCHAEFER TAMMIE -Dispatched: 22:18:02 Officer 2:LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -22:29:12 Source: E-911 Arrived: Officer 3: Completed: 00:55:53 Officer 4: Notified: Associated Person: Associated Person;

Monday 01/22/2018	18-801133 4504 - EMS 11900 WALDEN AV ALDEN	TOWN	
Received: 01:33:50 Dispatched: 01:35:08	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701	Received By: Dispatched By:	
Arrived: 01:44:27	Officer 3:		PHONE
Completed: 02:07:26	Officer 4:	Notified:	
Associated Person:		!	
Monday 01/22/2018	18-801150 4504 - EMS 11708 CARY RD ALDEN TO	OWN	
Received: 10:08:49	Officer 1: ALDEN FIRE DEPT - 9		PAWLIKOWSKI JEAN -
Dispatched: 10:10:47	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 10:19:14	Officer 3:	Source:	E-911
Completed: 10:55:05	Officer 4:	Notified:	
Associated Person			
Associated Perso			
Tuesday 01/23/2018	18-801241 4504 - EMS 3647 CRITTENDEN RD ALC	DEN TOWN	
Received: 23:10:59	Officer 1: CRITTENDEN FIRE		BALK JENNIFER - D87
Dispatched: 23:10:59	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 23:18:50	Officer 3:	Source:	E-911
Completed: 00:09:15	Officer 4:	Notified:	LIEUTENANT
Associated Perso			
Wednesday 01/24/2018	18-801286 4504 - EMS 13875 BROADWAY ALDEN	N TOWN	
Received: 19:49:03	Officer 1: ALDEN FIRE DEPT -		BALK JENNIFER - D87
Dispatched: 19:50:57	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 19:57:27	Officer 3:	Source:	E-911
Completed: 22:05:39	Officer 4:	Notified:	LIEUTENANT
Associated Person: F		; i	
Thursday 01/25/2018	18-801322 4504 - EMS 3040 WENDE RD ALDEN T		
Received: 13:22:44	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 13:24:06	Officer 2:	Dispatched By:	
Arrived: 13:35:39	Officer 3:	Source:	E-911
Completed: 14:28:50	Officer 4:	Notified:	
Associated Perso			
Thursday 01/25/2018	18-801344 4504 - EMS 11900 WALDEN AV ALDEN	TOWN	
Received: 23:52:53	Officer 1: MILLGROVE FIRE	Received By:	STEWART ANGELA -
Dispatched: 23:52:54	Officer 2: LVAC7 - 701	•	STEWART ANGELA -
Arrived: 00:03:26	Officer 3:	Source:	E-911
Completed: 00:43:38	Officer 4:	Notified:	
Associated Person: PAT			
Friday 01/26/2018	18-801364 4504 - EMS 11581 WALDEN AV ALDEN	TOWN	
Received: 09:09:11	Officer 1:LVAC7 - 701	Received By:	COHAN SHARON - D85
Dispatched: 09:09:12	Officer 2:		COHAN SHARON - D85
Arrived: 09:15:40	Officer 3:	Source:	PHONE
Completed: 09:16:05	Officer 4:	Notified:	•
Associated Person:			

Friday 01/26/2018	18-801409 4504 - EMS 11581 WALDEN AV ALDEN 1	OWN	
Received: 22:36:10 Dispatched: 22:36:15 Arrived: 22:42:41 Completed: 23:48:45	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - PHONE
Associated Person	Officer 4:	Nouneg.	
	40.004404 4004 5040		<u> </u>
Saturday 01/27/2018	18-801424 4504 - EMS 12115 CARY RD ALDEN TOV	VN	
Received: 04:30:23	Officer 1: ALDEN FIRE DEPT -9	Received By:	
Dispatched: 04:31:01	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 04:44:30	Officer 3:	Source:	E-911
Completed: 06:21:14	Officer 4:	Notified:	
Associated Person:			
Saturday 01/27/2018	18-801447 4504 - EMS 13820 HENSKEE RD ALDEN	TOWN	·
Received: 17:03:16	Officer 1: LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 17:03:19	Officer 2: ALDEN FIRE DEPT - 9	•	SCHAEFER TAMMIE -
Arrived: 17:12:30	Officer 3:	Source:	E-911
Completed: 18:19:02	Officer 4:	Notified:	
Associated Person:			
Associated Person			
Monday 01/29/2018	18-801543 4504 - EMS 11513 S BONNIE LAKE DR A	ALDEN TOWN	
Received: 17:15:42	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 17:17:14	Officer 2: TOWNLINE FIRE DEPT	•	
Arrived: 17:26:37	Officer 3:	Source:	OTHER POLICE
Completed: 18:31:05	Officer 4:	Notified:	
Associated Person			
Tuesday 01/30/2018	18-801574 4504 - EMS 3379 TOWNLINE RD ALDEN	TOWN	
Received: 13:32:51	Officer 1; LVAC7 - 701	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 13:32:52	Officer 2: MILLGROVE FIRE	_	PAWLIKOWSKI JEAN -
Arrived: 13:43:08	Officer 3:	Source:	PHONE
Completed: 13:47:32	Officer 4:	Notified:	
Associated Person			
Wednesday 01/31/201	18-801602 4504 - EMS 11900 WALDEN AV ALDEN	TOWN	
Received: 07:10:18	Officer 1: MILLGROVE FIRE	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 07:10:19	Officer 2:LVAC7 - 701	-	PAWLIKOWSKI JEAN -
Arrived: 07:20:54	Officer 3:	Source:	E-911
Completed: 08:00:03	Officer 4:	Notified:	
Associated Person			
Associated Person:			
Thursday 02/01/2018	18-801684 4504 - EMS 457 TWO ROD RD ALDEN T	OWN	
Received: 22:22:59	Officer 1:TOWNLINE FIRE DEPT	Received By:	STEWART ANGELA -
Dispatched: 22:23:04	Officer 2: LVAC7 - 701	•	STEWART ANGELA -
Arrived: 22:36:40	Officer 3;	Source:	E-911
Completed: 23:21:40	Officer 4:	Notified:	

Monday 02/05/2018 18-801829 4504 - EMS 662 COUNTY LINE RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 03:08:11 Received By: STEWART ANGELA -Dispatched: 03:09:06 Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: Officer 3: Source: E-911 03:25:15 Notified: Officer 4: Completed: 04:24:09 Associated Person Monday 02/05/2018 18-801832 4504 · EMS 11709 MANITOU DR ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 05:38:48 Dispatched: 05:38:52 Officer 2:LVAC7 - 701 Dispatched By: Source: E-911 Arrived: 05:53:00 Officer 3: Officer 4: Notified: Completed: 06:39:06 Associated Person: Monday 02/05/2018 18-801866 4504 - EMS 3826 POHL RD ALDEN TOWN Officer 1: MILLGROVE FIRE Received By: **BALK JENNIFER - D87** Received: 22:25:59 Dispatched: 22:25:59 Officer 2: LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Officer 3: Source: PHONE Arrived: 22:29:00 Completed: 22:39:09 Officer 4: Notified: Associated Person Tuesday 02/06/2018 18-801878 4504 - EMS 2885 COMMERCE DR ALDEN TOWN Received: 09:06:27 Officer 1: MILLGROVE FIRE Received By: PAWLIKOWSKI JEAN -Dispatched By: FIRESTONE JANE -Dispatched: 09:06:53 Officer 2: LVAC7 - 701 Officer 3: Source: E-911 Arrived: 09:15:33 Officer 4: Notified: Completed: 09:49:56 Associated Person:, Associated Person 18-801988 4504 - EMS Thursday 02/08/2018 660 CREEKSIDE DR ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 02:15:56 Received By: STEWART ANGELA -Dispatched: 02:15:57 Officer 2:LVAC7 - 701 Dispatched By: STEWART ANGELA -Source: Arrived: 02:30:29 Officer 3: E-911 Notified: Completed: 03:18:11 Officer 4: Associated Person: (Friday 02/09/2018 18-802043 4504 - EMS 12443 BROADWAY ALDEN TOWN Received: 01:07:51 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 01:07:53 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 01:19:20 Officer 3: Source: E-911 Notified: Completed: 01:50:34 Officer 4: Associated Persona Saturday 02/10/2018 18-802121 4504 - EMS 3040 WENDE RD ALDEN TOWN PAWLIKOWSKI JEAN -Received: 12:57:02 Officer 1:LVAC7 - 701 Received By: Dispatched By: Dispatched: 12:57:03 Officer 2: Source: Officer 3: E-911 Arrived: 13:08:42 Officer 4: Notified: Completed: 14:14:10 Associated Person: @

Sunday 02/11/2018 18+802166 4504 - EMS 3040 WENDE RD ALDEN TOWN Received: 07:02:40 Officer 1:LVAC7 - 701 Received By: PAWLIKOWSKI JEAN -Dispatched: 07:02:42 Officer 2: Dispatched By: Arrived: 07:17:47 Officer 3: Source: E-911 Completed: 07:53:37 Officer 4: Notified: Associated Person Associated Persol Sunday 02/11/2018 18-802169 4504 - EMS 12514 W MAIN ST 4 ALDEN TOWN Received: 09:52:31 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 09:52:32 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 09:57:30 Officer 3: Source: E-911 Completed: 11:53:22 Officer 4: Notified: Associated Person: Sunday 02/11/2018 18-802174 4504 - EMS 11269 BROADWAY ALDEN TOWN Received: 11:17:28 Officer 1: TOWNLINE FIRE DEPT Received By: PAWLIKOWSKI JEAN -Dispatched: 11:17:28 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: Officer 3: 11:26:43 Source: E-911 Completed: 12:14:59 Officer 4: Notified: Associated Person Tuesday 02/13/2018 18-802289 4504 - EMS 3040 WENDE RD ALDEN TOWN Officer 1:LVAC7 - 701 Received: 12:04:22 FIRESTONE JANE -Received By: Officer 2: Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 12:04:22 Arrived: 12:14:16 Officer 3: Source: E-911 Notified: Completed: 13:03:55 Officer 4: Associated Person: Thursday 02/15/2018 18-802385 4504 - EMS 111 GLENDALE TE ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 10:33:28 Received By: Dispatched: 10:34:52 Officer 2:LVAC7 - 701 Dispatched By: Officer 3: Source: PHONE Arrived: 10:43:08 Notified: Officer 4: Completed: 11:26:15 Associated Person: (Associated Person: 1 Thursday 02/15/2018 18-802402 4504 - EMS 11900 WALDEN AV ALDEN TOWN Officer 1: MILLGROVE FIRE Received By: **BALK JENNIFER - D87** Received: 17:11:23 Dispatched By: BALK JENNIFER - D87 Dispatched: 17:11:24 Officer 2:LVAC7 - 701 Arrived: Officer 3: Source: E-911 17:14:46 Notified: Completed: 20:25:50 Officer 4: LIEUTENANT Associated Person: Thursday 02/15/2018 18-802422 4504 - EMS 11900 WALDEN AV ALDEN TOWN Received By: Received: 22:20:35 Officer 1: MILLGROVE FIRE **BALK JENNIFER - D87** Dispatched: 22:20:35 Officer 2: LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: 22:27:06 Officer 3: Source: E-911 Completed: 22:59:04 Officer 4: Notified: LIEUTENANT Associated Person:

Saturday 02/17/2018	18-802498 4504 - EMS 1427 TOWNLINE RD ALDEN	TOWN		
Received: 14:17:23	Officer 1: TOWNLINE FIRE DEPT	Received By:	FIRESTONE JANE -	
Dispatched: 14:17:24	Officer 2:LVAC7 - 701	Dispatched By:	FIRESTONE JANE -	
Arrived: 14:25:11	Officer 3:	Source:	E-911	
Completed: 14:51:56	Officer 4:	Notified:		
Associated Person:				
Associated Person: Char				
Saturday 02/17/2018	18-802500 4504 - EMS 658 BAUDER PARK DR ALD	EN TOWN	· · · · · · · · · · · · · · · · · · ·	
Received: 14:39:59	Officer 1: LVAC7 - 701	Received By:	FIRESTONE JANE -	
Dispatched: 14:40:00	Officer 2:		FIRESTONE JANE -	
Arrived: 14:53:32	Officer 3:	Source:	PHONE	
Completed: 15:09:23	Officer 4:	Notified:		
Associated Person:				
Saturday 02/17/2018	18-802518 4504 - EMS 1427 TOWNLINE RD ALDEN	TOWN		
Received: 18:18:16	Officer 1: TOWNLINE FIRE DEPT	Received By:		
Dispatched: 18:18:16	Officer 2: LVAC7 - 701	Dispatched By:		
Arrived: 18:30:33	Officer 3:	Source:	E-911	
Completed: 19:16:44	Officer 4:	Notified:		
Associated Person:				
Saturday 02/17/2018	18-802527 4504 - EMS 11745 BROADWAY ALDEN	TOWN		•
Received: 22:06:16	Officer 1:LVAC7 - 701	Received By:		
Dispatched: 22:06:23	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:		
Arrived: 22:15:36	Officer 3:	Source:	E-911	
Completed: 23:19:38	Officer 4:	Notified:		
Associated Person				
Sunday 02/18/2018	18-802561 0002 - OVERDO 13970 GENESEE ST ALDEN			
Received: 12:55:19	Officer 1: CRITTENDEN FIRE	Received By:	FIRESTONE JANE -	
Dispatched: 12:55:20	Officer 2: LVAC7 - 701		ARMSTRONG	
Arrived: 13:02:25	Officer 3:	Source:	E-911	
Completed: 13:43:44	Officer 4:	Notified:		
Associated Person				_
Sunday 02/18/2018	18-802566 4504 - EMS 13097 NORTH RD ALDEN T	OWN		
Received: 15:10:39	Officer 1: ALDEN FIRE DEPT - 9			
Dispatched: 15:12:18	Officer 2: LVAC7 - 701		ARMSTRONG	
Arrived: 15:20:00	Officer 3:	Source:	E-911	
Completed: 15:35:27	Officer 4:	Notified:		
Associated Person:				_
Sunday 02/18/2018	18-802577 4504 - EMS 11581 WALDEN AV ALDEN	TOWN		
Received: 23:37:48	Officer 1: MILLGROVE FIRE	Received By:	STEWART ANGELA -	
Dispatched: 23:37:49	Officer 2:LVAC7 - 701		STEWART ANGELA -	
Arrived: 23:47:23	Officer 3:	Source:	PHONE	
Completed: 00:35:00	Officer 4:	Notified:	•	
oonipiotoa, oo.oo.oo	<u></u>			

Monday 02/19/2018	18-802608 4504 - EMS 11367 CARY RD ALDEN TOW	N	
Received: 13:58:01 Dispatched: 13:58:43 Arrived: 14:10:19 Completed: 15:01:58	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - ARMSTRONG E-911
Associated Person:		_	
Monday 02/19/2018	18-802626 4504 - EMS 2218 COUNTY LINE RD ALDE	N TOWN	
Received: 18:50:17 Dispatched: 18:52:17 Arrived: 18:59:47 Completed: 20:58:34	Officer 1:ALDEN FIRE DEPT - 9 Officer 2:LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person:	40.000000 4504 FMC		·· <u>··</u>
Tuesday 02/20/2018	18-802702 4504 - EMS 1066 CLEARVUE DR ALDEN 1	rown	
Received: 22:29:21 Dispatched: 22:31:18 Arrived: 22:43:16 Completed: 23:19:16 Associated Person: F	Officer 1: LVAC7 - 701 Officer 2: TOWNLINE FIRE DEPT Officer 3: Officer 4:	Received By: Dispatched By: Source: Notifled:	E-911
Associated Person:			
Wednesday 02/21/2018	18-802729 4504 - EMS 11796 BONCLIFF DR ALDEN	TOWN	
Received: 08:50:43	Officer 1:LVAC7 - 701	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 08:51:17 Arrived: 09:02:24 Completed: 09:48:37	Officer 2: ALDEN FIRE DEPT - 9 Officer 3: Officer 4:		PAWLIKOWSKI JEAN - E-911
Associated Person:	7.1100		
Associated Person:			
Thursday 02/22/2018	18-802835 4504 - EMS 11708 CARY RD ALDEN TOW	N	
Received: 22:04:12 Dispatched: 22:05:55 Arrived: 22:18:12 Completed: 22:30:53 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	BALK JENNIFER - D87 E-911
Friday 02/23/2018	18-802868 4504 - EMS 178 TWO ROD RD ALDEN TO	WN	
Received: 12:45:23 Dispatched: 12:47:37 Arrived: 12:57:46 Completed: 13:45:24	Officer 1: TOWNLINE FIRE DEPT Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - FIRESTONE JANE - E-911
Associated Person	40 000077 4704 7110		
Friday 02/23/2018	18-802877 4504 - EMS GENESEE ST @ CRITTENDE	N RD ALDEN TO	OWN
Received: 14:56:03 Dispatched: 14:57:28 Arrived: 14:57:30 Completed: 15:33:00 Associated Person:	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - E-911

unday 02/25/2018	18-802967 4504 - EMS 13501 CIRCLE DR ALDEN TO		
Received: 02:29:03 Dispatched: 02:29:50 Arrived: 02:37:16 Completed: 03:49:38 Associated Person:	Officer 1:LVAC7 - 701 Officer 2:ALDEN FIRE DEPT - 9 Officer 3: Officer 4:	Received By: Dispatched By:	PHONE
	10 000075 4504 5140		
iunday 02/25/2018	18-802975 4504 - EMS 12232 WESTWOOD RD ALD	EN TOWN	
Received: 05:46:59 Dispatched: 05:47:04 urrived: 05:55:15 Completed: 06:21:50	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	STEWART ANGELA - E-911
ssociated Person:			
ssociated Person: C			
fonday 02/26/2018	18-803025 3474 - DEAD BOI 12623 NORTH RD ALDEN TO		
Received: 07:04:06 Dispatched: 07:04:08 Arrived: 07:15:46 Completed: 07:55:53 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:		FIRESTONE JANE - FIRESTONE JANE - PHONE
Vednesday 02/28/2018	18-803147 4504 - EMS		
veunesuay 02/20/2016	632 COUNTY LINE RD ALDE	N TOWN	
Received: 11:08:21 Dispatched: 11:09:13 Arrived: 11:17:30 Completed: 12:04:40	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:		PAWLIKOWSKI JEAN - FIRESTONE JANE - E-911
Associated Person: CMP		1	
Vednesday 02/28/2018	18-803151 4504 - EMS 542 THREE ROD RD ALDEN	TOWN	
Received: 12:09:25 Dispatched: 12:09:26 Arrived: 12:19:55 Completed: 13:12:58 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	FIRESTONE JANE - PAWLIKOWSKI JEAN E-911
Thursday 03/01/2018	18-803199 4504 - EMS 1244 LAMBERT DR ALDEN	TOWN	
Received: 08:31:01 Dispatched: 08:33:10 Arrived: 08:41:14 Completed: 09:32:54	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	PAWLIKOWSKI JEAN FIRESTONE JANE - E-911
Associated Person:			
Associated Person:		<u> </u>	
Thursday 03/01/2018	18-803214 4504 - EMS 53 EXCHANGE ST ALDEN T	OWN	
Received: 11:50:22 Dispatched: 11:54:27 Arrived: 12:01:16	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:		PAWLIKOWSKI JEAN PAWLIKOWSKI JEAN E-911

Friday 03/02/2018	18-803313 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 17:25:46 Dispatched: 17:25:46 Arrived: 17:36:51 Completed: 18:53:03	Officer 1:LVAC7 - 701 Officer 2: Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	BALK JENNIFER - D87 BALK JENNIFER - D87 RADIO
Associated Person			
Friday 03/02/2018	18-803326 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 20:33:33 Dispatched: 20:33:46 Arrived: 21:31:19 Completed: 21:31:22 Associated Person:	Officer 1: LVAC7 - 701 Officer 2: Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	RADIO LIEUTENANT
Friday 03/02/2018	18-803332 4519 - UNFOUN 2950 PETERS CORNERS RI		
Received: 22:26:53 Dispatched: 22:26:54 Arrived: 22:28:17 Completed: 22:31:18 Associated Person	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	BALK JENNIFER - D87 BALK JENNIFER - D87 PHONE
Associated Person:	o april o re-	<u>.</u>	<u></u>
Sunday 03/04/2018	18-803416 4504 - EMS 2967 TOWNLINE RD ALDE		
Received: 21:09:38 Dispatched: 21:09:49 Arrived: 21:17:41 Completed: 21:57:08 Associated Person	Officer 1: LVAC7 - 701 Officer 2: MILLGROVE FIRE Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person:			
Monday 03/05/2018	18-803453 6005 - LVAC PF 3040 WENDE RD ALDEN T		
Received: 12:41:33 Dispatched: 12:41:47 Arrived: 12:49:30 Completed: 13:55:33 Associated Person:	Officer 1: LVAC7 - 701 Officer 2: Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - PAWLIKOWSKI JEAN - RADIO
Tuesday 03/06/2018	18-803490 6005 - LVAC PE 3040 WENDE RD ALDEN T		
Received: 05:51:13 Dispatched: 05:51:17 Arrived: 06:05:38 Completed: 07:21:42	Officer 1: LVAC7 - 701 Officer 2: Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PHONE
Associated Person:			
Tuesday 03/06/2018	18-803493 6005 - LVAC PI 3040 WENDE RD ALDEN T		
Received: 07:39:44 Dispatched: 07:39:44 Arrived: 07:51:33 Completed: 08:52:01 Associated Person:	Officer 1: LVAC7 - 701 Officer 2: Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - PAWLIKOWSKI JEAN - RADIO

Tuesday 03/06/2018	18-803533 4508 - EMS ASSIS 12132 WALDEN AV ALDEN TO		
Received: 16:55:20 Dispatched: 16:55:21	Officer 1: LVAC7 - 701 Officer 2: MILLGROVE FIRE	Received By: Dispatched By:	BALK JENNIFER - D87 BALK JENNIFER - D87
Arrived: 16:58:21	Officer 3:	Source:	PHONE
Completed: 17:15:37	Officer 4:	Notified:	
Associated Person:			
Tuesday 03/06/2018	18-803543 4504 - EMS 642 COUNTY LINE RD ALDEN	l TOWN	
Received: 20:32:08	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 20:32:15	Officer 2: LVAC7 - 701	Dispatched By:	SCHAEFER TAMMIE -
Arrived: 20:37:37	Officer 3:	Source:	E-911
Completed: 23:03:33	Officer 4:	Notified:	
Associated Person:			
Wednesday 03/07/2018	18-803567 4504 - EMS 367 S WOODSIDE DR ALDEN	TOWN	·····
Received: 10:35:31	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 10:35:41	Officer 2: TOWNLINE FIRE DEPT	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 10:48:54	Officer 3:	Source:	E-911
Completed: 11:33:46	Officer 4:	Notified:	
Associated Person:			
Wednesday 03/07/2018	18-803577 4504 - EMS 3040 WENDE RD ALDEN TOV	VN	
Received: 14:19:29	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 14:20:28	Officer 2:		FIRESTONE JANE -
Arrived: 14:32:32	Officer 3:	Source:	E-911
Completed: 15:13:40	Officer 4:	Notified:	
Associated Person:			
Thursday 03/08/2018	18-803611 4504 - EMS 11197 BROADWAY ALDEN T		
Received: 09:09:26	Officer 1: LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 09:09:27	Officer 2: TOWNLINE FIRE DEPT	• •	FIRESTONE JANE -
Arrived: 09:20:23	Officer 3:	Source:	E-911
Completed: 10:00:14	Officer 4:	Notified:	
Associated Person:			
Thursday 03/08/2018	18-803617 4504 - EMS 992 VIRGINIA DR ALDEN TOV	WN	
Received: 10:45:16	Officer 1: ALDEN FIRE DEPT -9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 10:45:47	Officer 2:LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 10:54:20	Officer 3:	Source:	E-911
Completed: 11:04:42	Officer 4:	Notified:	
Associated Person:			
Associated Person			
Thursday 03/08/2018	18-803626 4504 - EMS 11058 JOHN CT ALDEN TOW	/N	
Received: 13:54:23	Officer 1: TOWNLINE FIRE DEPT		PAWLIKOWSKI JEAN -
Dispatched: 13:54:24	Officer 2:LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 14:07:08	Officer 3:	Source:	E-911
Completed: 14:46:40	Officer 4:	Notified:	
Associated Person			
Associated Person:			
- - -			

Thursday 03/	08/2018	18-803640 6005 · LVAC PRIVA 3040 WENDE RD ALDEN TOW		
Received: 2	1:01:29	Officer 1:LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 2	1:01:29	Officer 2:	Dispatched By:	ARMSTRONG
Arrived: 21	1:08:57	Officer 3:	Source:	RADIO
Completed: 2:	2:07:02	Officer 4:	Notified:	
Associated Pe	erson:		<u></u>	
Thursday 03/	08/2018	18-803642 4504 - EMS 636 TWO ROD RD ALDEN TO	W N	
Received: 2	1:16:44	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 2	1:18:58	Officer 2: LVAC7 - 701	Dispatched By:	
	1:30:54	Officer 3:	Source:	E-911
Completed: 2	1:59:13	Officer 4:	Notified:	
Associated Pe	erson:			
Friday 03/09/	2018	18-803654 6005 - LVAC PRIV. 3040 WENDE RD ALDEN TOW		
Received: 0	5:34:59	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 0		Officer 2:	Dispatched By:	
Arrived: 0	5:45:04	Officer 3:	Source:	RADIO
Completed: 0	7:28:58	Officer 4:	Notified:	
Associated Pe	erson; GLA			
Friday 03/09/	2018	18-803661 4504 - EMS 11436 BROADWAY ALDEN T	OWN	
Received: 0	8:48:57	Officer 1: LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 0	8:49:22	Officer 2: TOWNLINE FIRE DEPT	•	FIRESTONE JANE -
Arrived: 0	8:58:51	Officer 3:	Source:	PHONE
Completed: 0	9:30:47	Officer 4:	Notified:	
Associated Pe	erson:			
Friday 03/09/	2018	18-803662 4504 - EMS 1977 TOWNLINE RD ALDEN 1	OWN	
Received: 0	8:51:32	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 0	8:52:23	Officer 2: LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 0	9:01:39	Officer 3:	Source:	E-911
Completed: 0		Officer 4:	Notified:	
Associated Pe				
Friday 03/09/	2018	18-803670 6005 - LVAC PRIV 3040 WENDE RD ALDEN TOW		
Received: 1	2:40:33	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 1	2:40:34	Officer 2:		FIRESTONE JANE -
	2:40:34	Officer 3:	Source:	RADIO
Completed: 1	3:37:54	Officer 4:	Notified:	
Associated Pe	erson:			
Friday 03/09/	2018	18-803678 6005 - LVAC PRIV 3040 WENDE RD ALDEN TOV		
Received: 1	5:50:41	Officer 1: LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 1		Officer 2:		ARMSTRONG
Arrived: 1	6:00:00	Officer 3:	Source:	RADIO
Completed: 1	7:09:00	Officer 4:	Notified:	
Associated Pe	00000			

Friday 03/09/2018 18-803699 4504 - EMS 960 BONCLIFF DR ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 23:58:57 Received By: STEWART ANGELA -Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Dispatched: 23:59:35 Source: PHONE Arrived: 00:04:18 Officer 3: Notified: Officer 4: Completed: 00:07:33 Associated Person: Sunday 03/11/2018 18-803797 4504 · EMS 176 CAYUGA CREEK RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 21:04:13 Dispatched By: Officer 2:LVAC7 - 701 Dispatched: 21:05:12 E-911 Source: Arrived: 21:22:47 Officer 3: Notified: Officer 4: Completed: 21:59:53 Associated Person: 18-803817 6005 - LVAC PRIVATE Monday 03/12/2018 3040 WENDE RD ALDEN TOWN Officer 1: LVAC7 - 701 Received By: Received: 09:15:38 Dispatched By: Dispatched: 09:16:07 Officer 2: Source: **RADIO** Arrived: Officer 3: 09:26:52 Completed: 10:33:55 Officer 4: Notified: Associated Person: Tuesday 03/13/2018 18-803877 4902 - INJURY ACCIDENT S NEWSTEAD RD @ GENESEE ST ALDEN TOWN Received: 05:54:22 Officer 1: CRITTENDEN FIRE Received By: Dispatched: 05:55:52 Officer 2: LVAC7 - 701 Dispatched By: Arrived: Officer 3: Source: 06:01:08 E-911 Notified: Completed: 06:17:47 Officer 4: Associated Person: Tuesday 03/13/2018 18-803889 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 08:26:05 Officer 1:LVAC7 - 701 Received By: PAWLIKOWSKI JEAN -Dispatched: 08:26:05 Officer 2: Dispatched By: PAWLIKOWSKI JEAN -Arrived: 08:35:44 Officer 3: Source: **RADIO** Completed: 09:51:49 Officer 4: -Notified: Associated Person: Tuesday 03/13/2018 18-803914 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 18:27:53 Officer 1: LVAC7 - 701 Received By: ARMSTRONG Dispatched: 18:27:54 Officer 2: Dispatched By: ARMSTRONG Arrived: 18:35:12 Officer 3: Source: RADIO Completed: 19:32:49 Officer 4: Notified: Associated Person: Tuesday 03/13/2018 18-803921 4504 - EMS 2323 WENDE RD ALDEN TOWN Received: 21:59:24 Officer 1: MILLGROVE FIRE Received By: **BALK JENNIFER - D87** Dispatched: 21:59:25 Officer 2:LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 22:04:47 Officer 3: Source: PHONE Completed: 22:07:47 Officer 4: Notified: Associated Person:

Wednesday 03/14/2018 18-803935 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 06:47:34 Officer 1:LVAC7 - 701 Received By: Dispatched: 06:47:57 Officer 2: Dispatched By: Arrived: Officer 3: 06:59:47 Source: **RADIO** Notified: Completed: 08:32:59 Officer 4: Associated Person: Wednesday 03/14/2018 18-803946 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Officer 1:LVAC7 - 701 Received: 10:18:25 Received By: PAWLIKOWSKI JEAN -Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 10:18:26 Officer 2: Arrived: 10:29:08 Officer 3: Source: **RADIO** Notified: Completed: 11:22:15 Officer 4: Associated Person: Wednesday 03/14/2018 18-803950 4504 - EMS 1425 VILLAGE PARK DR ALDEN TOWN Received: 12:02:18 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 12:03:05 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 12:11:23 Officer 3: Source: E-911 Completed: 12:53:24 Notified: Officer 4: Associated Person: (Wednesday 03/14/2018 18-803961 4504 - EMS 13301 GENESEE ST ALDEN TOWN Received: 16:32:38 Officer 1: CRITTENDEN FIRE Received By: **BALK JENNIFER - D87** Dispatched: 16:32:39 Officer 2: LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: 16:38:49 Officer 3: Source: E-911 Completed: 18:05:44 Officer 4: Notified: Associated Person: 6 Associated Person Wednesday 03/14/2018 18-803964 4504 - EMS 542 THREE ROD RD ALDEN TOWN Received: 17:08:42 Officer 1: ALDEN FIRE DEPT - 9 Received Bv: ARMSTRONG Dispatched: 17:08:49 Officer 2: LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: Officer 3: Source: 17:12:00 PHONE Completed: 18:04:44 Officer 4: Notified: Associated Person: Associated Person: Wednesday 03/14/2018 18-803977 4504 - EMS 11568 BROADWAY ALDEN TOWN Received: 19:04:03 Officer 1: TOWNLINE FIRE DEPT Received By: ARMSTRONG Dispatched: 19:04:03 Officer 2:LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 19:13:34 Officer 3: Source: E-911 Completed: 19:57:43 Natified: Officer 4: Associated Person: (Associated Person Thursday 03/15/2018 18-804003 4504 - EMS 12514 W MAIN ST 4 ALDEN TOWN Received: 08:32:22 Officer 1:LVAC7 - 701 Received By: ARMSTRONG Dispatched: 08:32:55 Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: ARMSTRONG Arrived: 08:42:07 Officer 3: Source: E-911 Completed: 09:37:57 Officer 4: Notified: Associated Person: Associated Person:

Thursday 03/15/2018	18-804011 .6005 - LVAC PRI 3040 WENDE RD ALDEN TO		
Received: 10:36:15	Officer 1: LVAC7 - 701	Received By:	BALK JENNIFER - D87
Dispatched: 10:36:15	Officer 2:	Dispatched By:	BALK JENNIFER - D87
Arrived: 10:43:25	Officer 3:	Source:	RADIO
Completed: 13:15:29	Officer 4:	Notified:	
Associated Person:			
Friday 03/16/2018	18-804061 4504 - EMS 12310 CARY RD ALDEN TOV	 VN	
Received: 08:04:26	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 08:04:26	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	ARMSTRONG
Arrived: 08:14:59	Officer 3:	Source:	E-911
Completed: 09:00:43	Officer 4:	Notifled:	
Associated Person:			
Friday 03/16/2018	18-804063 6005 - LVAC PRI 3040 WENDE RD ALDEN TO		
Received: 10:14:50	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 10:14:50	Officer 2:		FIRESTONE JANE -
Arrived: 10:21:44	Officer 3:	Source:	PHONE
Completed: 11:33:27	Officer 4:	Notified:	
Associated Person:			<u>-</u> -
Friday 03/16/2018	18-804070 4401 - FIRE RES 3235 WENDE RD ALDEN TO		-
Received: 11:59:07	Officer 1: MILLGROVE FIRE	Received By:	FIRESTONE JANE -
Dispatched: 12:00:02	Officer 2:LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 12:09:54	Officer 3:	Source:	PHONE
Completed: 13:10:41	Officer 4:	Notified:	
Associated Persor			
Monday 03/19/2018	18-804186 4504 - EMS 12569 W MAIN ST ALDEN TO	OWN	
Received: 00:12:02	Officer 1: ALDEN FIRE DEPT - 9		STEWART ANGELA -
Dispatched: 00:13:04	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 00:21:12	Officer 3:	Source:	E-911
Completed: 00:58:50	Officer 4:	Notified:	
Associated Person:			
Monday 03/19/2018	18-804187 4504 - EMS 3645 S NEWSTEAD RD ALD	EN TOWN	
Received: 00:16:03	Officer 1: CRITTENDEN FIRE	Received By:	
Dispatched: 00:17:17	Officer 2:LVAC7 - 701		STEWART ANGELA -
Arrived: 00:25:47	Officer 3:	Source:	E-911
Completed: 01:09:30	Officer 4:	Notified:	
Associated Person:		:	
Monday 03/19/2018	18-804198 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 09:39:08	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 09:39:12	Officer 2:	Dispatched By:	FIRESTONE JANE -
Arrived: 09:52:15	Officer 3:	Source:	RADIO
Completed: 11:01:34	Officer 4:	Notified:	
Associated Person:			

Monday 03/19/2018	18-804209 6005 - LVAC F 3040 WENDE RD ALDEN		
Received: 14:33:29	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 14:33:29	Officer 2:		FIRESTONE JANE -
Arrived: 14:44:06	Officer 3:	Source:	RADIO
Completed: 15:38:26	Officer 4:	Notified:	
Associated Person:			
Monday 03/19/2018	18-804233 6005 - LVAC F 3040 WENDE RD ALDEN		
Received: 20:58:16	Officer 1:LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 20:58:19	Officer 2:	Dispatched By:	
Arrived: 21:09:29	Officer 3:	Source:	RADIO
Completed: 22:04:54	Officer 4:	Notified:	LIEUTENANT
Associated Person:		<u> </u>	
Tuesday 03/20/2018	18-804251 6005 - LVAC F 3040 WENDE RD ALDEN		
Received: 10:00:33	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 10:00:33	Officer 2:		PAWLIKOWSKI JEAN -
Arrived: 10:10:44	Officer 3:	Source:	RADIO
Completed: 12:41:06	Officer 4:	Notified:	
Associated Person:			
Tuesday 03/20/2018	18-804267 4504 - EMS 527 FOUR ROD RD ALDE	N TOWN	
Received: 15:41:19	Officer 1: ALDEN FIRE DEPT	- 9 Received By:	
Dispatched: 15:42:03	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 15:49:15	Officer 3:	Source:	PHONE
Completed: 16:30:06	Officer 4:	Notified:	
Associated Person			
Tuesday 03/20/2018	18-804274 4504 - EMS 3040 WENDE RD ALDEN	TOWN	
Received: 17:09:59	Officer 1: LVAC7 - 701	Received By:	BALK JENNIFER - D87
Dispatched: 17:09:59	Officer 2:	Dispatched By:	BALK JENNIFER - D87
Arrived: 17:56:00	Officer 3:	Source:	PHONE
Completed: 18:18:12	Officer 4:	Notified:	
Associated Person:		. .	
Wednesday 03/21/2018	18-804302 6005 - LVAC 3040 WENDE RD ALDEN		
Received: 07:30:23	Officer 1: LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 07:30:26	Officer 2:	Dispatched By:	
Arrived: 07:40:15	Officer 3:	Source:	RADIO
Completed: 10:28:40	Officer 4:	Notified:	
Associated Person:	222		
Wednesday 03/21/2018	18-804312 4504 - EMS 11045 JANE DR ALDEN 1	FOWN	
Received: 11:08:05	Officer 1: TOWNLINE FIRE DE	EPT Received By:	FIRESTONE JANE -
Dispatched: 11:08:16	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 11:18:21	Officer 3:	Source:	E-911
Completed: 11:46:24	Officer 4:	Notified:	
Associated Person			

Wednesday 03/21/2018	18-804316 4504 - EMS 12734 BROADWAY ALDEN T	OWN	·
Received: 12:36:40 Dispatched: 12:36:41 Arrived: 12:46:27 Completed: 13:27:59	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - E-911
Associated Person		<u></u> _	
Wednesday 03/21/2018	18-804317 4504 - EMS 11475 WESTWOOD RD ALDE	N TOWN	
Received: 12:39:24 Dispatched: 12:40:23 Arrived: 12:49:24 Completed: 13:22:36 Associated Person:	Officer 1: LVAC7 - 701 Officer 2: TOWNLINE FIRE DEPT Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	ARMSTRONG ARMSTRONG PHONE
Associated Person:			
Saturday 03/24/2018	18-804436 4504 • EMS 3040 WENDE RD ALDEN TOV	VN	
Received: 10:42:47 Dispatched: 10:42:47 Arrived: 10:52:47 Completed: 11:31:16 Associated Person	Officer 1: LVAC7 - 701 Officer 2: Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - E-911
Sunday 03/25/2018	18-804478 6005 - LVAC PRIV 3040 WENDE RD ALDEN TOV		
Received: 07:48:52 Dispatched: 07:48:52 Arrived: 07:55:23 Completed: 08:47:51	Officer 1:LVAC7 - 701 Officer 2: Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - PAWLIKOWSKI JEAN - RADIO
Associated Person: Sunday 03/25/2018	18-804492 4504 - EMS 11581 WALDEN AV ALDEN T	Olani	
Received: 13:45:22 Dispatched: 13:45:22 Arrived: 13:56:31 Completed: 14:37:21 Associated Person:	Officer 1: LVAC7 - 701 Officer 2: Officer 3: Officer 4:	Received By:	FIRESTONE JANE - FIRESTONE JANE - PHONE
Monday 03/26/2018	18-804522 4504 - EMS 12710 REINHARDT EAST RD	ALDEN TOWN	
Received: 07:38:41 Dispatched: 07:38:42 Arrived: 07:51:46 Completed: 08:43:12	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	PAWLIKOWSKI JEAN - PAWLIKOWSKI JEAN - E-911
Associated Person:			
Associated Person: Tuesday 03/27/2018	18-804607 4504 - EMS	A (I)	
Received: 11:13:28 Dispatched: 11:16:40 Arrived: 11:18:36 Completed: 12:21:00 Associated Person:	3040 WENDE RD ALDEN TON Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	ARMSTRONG FIRESTONE JANE - E-911

18-804654 6005 - LVAC PRIVATE Wednesday 03/28/2018 3040 WENDERD ALDEN TOWN Officer 1:LVAC7 - 701 Received: 02:50:53 Received By: STEWART ANGELA -Dispatched: 02:50:54 Officer 2: Dispatched By: STEWART ANGELA -Officer 3: Source: RADIO Arrived: 02:58:33 Officer 4: Notified: Completed: 03:48:40 Associated Person: Wednesday 03/28/2018 6005 - LVAC PRIVATE 18-804673 3040 WENDE RD ALDEN TOWN Officer 1:LVAC7 - 701 Received: 11:24:28 Received By: Dispatched By: Dispatched: 11:25:03 Officer 2: **RADIO** Source: Arrived: 11:35:16 Officer 3: Notified: Completed: 13:11:25 Officer 4: Associated Person: 18-804681 4504 - EMS Wednesday 03/28/2018 441 MEADOW LA ALDEN TOWN Officer 1:LVAC7 - 701 Received: 14:21:05 Received By: Dispatched: 14:22:37 Officer 2: TOWNLINE FIRE DEPT Dispatched By: Arrived: 14:31:48 Officer 3: Source: PHONE Completed: 14:51:19 Officer 4: Notified: Associated Person: 18-804719 6005 - LVAC PRIVATE Thursday 03/29/2018 3040 WENDE RD ALDEN TOWN Received: 08:47:24 Officer 1:LVAC7 - 701 Received By: Dispatched: 08:47:24 Officer 2: Dispatched By: Arrived: Officer 3: **RADIO** 08:57:30 Source: Completed: 09:56:03 Officer 4: Notified: Associated Person: Thursday 03/29/2018 18-804727 4504 - EMS 13415 GENESEE ST ALDEN TOWN Received: 11:34:52 Officer 1:LVAC7 - 701 Received By: Dispatched: 11:37:00 Officer 2: CRITTENDEN FIRE Dispatched By: SCHAEFER TAMMIE -Arrived: 11:40:22 Officer 3: Source: E-911 Completed: 12:26:26 Officer 4: Notified: Associated Person: Thursday 03/29/2018 18-804747 4504 - EMS 13415 GENESEE ST ALDEN TOWN Received: 20:50:35 Officer 1: CRITTENDEN FIRE Received By: **BALK JENNIFER - D87** Dispatched: 20:51:40 Officer 2:LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 20:52:37 Officer 3: Source: PHONE Completed: 21:39:34 Officer 4: Notified: Associated Person: Friday 03/30/2018 18-804771 4504 - EMS 12472 NORTH RD ALDEN TOWN Received: 08:08:38 Officer 1: LVAC7 - 701 Received By: Dispatched: 08:09:52 Officer 2: MILLGROVE FIRE Dispatched By: Arrived: 08:15:14 Officer 3: Source: E-911 Completed: 09:34:07 Officer 4: Notified: Associated Person: Associated Person: C

Friday 03/30/2018	18-804785 6005 - LVAC PRIV 367 S WOODSIDE DR ALDEN		
Received: 11:40:24	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 11:40:36	Officer 2:	Dispatched By:	
Arrived: 11:49:34	Officer 3:		RADIO
Completed: 12:36:55	Officer 4:	Notified:	
Associated Person:			
Friday 03/30/2018	18-804792 6005 - LVAC PRI 3040 WENDE RD ALDEN TO		
Received: 15:09:00	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 15:09:31	Officer 2:	Dispatched By:	
Arrived: 17:32:59	Officer 3:	Source:	RADIO
Completed: 17:32:59	Officer 4:	Notified:	
Associated Person			
Saturday 03/31/2018	18-804844 4504 - EMS 12579 REINHARDT EAST RD	ALDEN TOWN	
Received: 17:21:31	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 17:24:31	Officer 2; LVAC7 - 701	Dispatched By:	
Arrived: 17:30:54	Officer 3:	Source:	E-911
Completed: 18:39:25	Officer 4:	Notified:	
Associated Person:		الا تنفعه في نستند	
Monday 04/02/2018	18-804941 6005 - LVAC PRI 3040 WENDE RD ALDEN TO		
Received: 16:55:26	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 16:55:27	Officer 2:		FIRESTONE JANE -
Arrived: 17:15:00	Officer 3:	Source:	PHONE
Completed: 18:06:34	Officer 4:	Notified:	
Associated Person:			
Monday 04/02/2018	18-804943 6005 - LVAC PRI 3040 WENDE RD ALDEN TO		
Received: 17:14:20	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 17:14:21	Officer 2:	· ·	FIRESTONE JANE -
Arrived: 17:17:49	Officer 3:	Source:	RADIO
Completed: 18:24:21	Officer 4:	Notified:	
Associated Person:			
Tuesday 04/03/2018	18-804991 4504 - EMS 11732 WESTWOOD RD ALD	EN TOWN	
Received: 18:26:38	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 18:27:11	Officer 2: ALDEN FIRE DEPT - 9		
Arrived: 18:34:06	Officer 3:	Source:	E-911
Completed: 19:52:31	Officer 4:	Notified:	_
Associated Person:			
Thursday 04/05/2018	18-805114 4504 - EMS 12220 BLOSSOM LEA DR A	LDEN TOWN	
Received: 04:01:16	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 04:01:54	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 04:13:08	Officer 3:	Source:	PHONE
Completed: 05:01:24	Officer 4:	Notified:	
· · · · · · · · · · · · · · · · · · ·			
Associated Person:		remain and the second s	

Friday 04/06/2018 18-805199 4504 - EMS 1425 VILLAGE PARK DR ALDEN TOWN Received By: Received: 16:18:33 Officer 1: ALDEN FIRE DEPT - 9 ARMSTRONG Dispatched: 16:19:53 Officer 2:LVAC7 - 701 Dispatched By: Source: Arrived: 16:27:25 Officer 3: E-911 Notified: Officer 4: Completed: 16:55:06 Associated Person: Friday 04/06/2018 18-805221 4504 - EMS TWO ROD RD @ CLEARVUE DR ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received By: **BALK JENNIFER - D87** Received: 21:18:31 Dispatched By: BALK JENNIFER - D87 Dispatched: 21:18:32 Officer 2:LVAC7 - 701 21:26:54 Source: PHONE Arrived: Officer 3: Notified: Completed: 22:27:29 Officer 4: Associated Person: Sunday 04/08/2018 18-805302 4504 - EMS 11581 WALDEN AV ALDEN TOWN Officer 1:LVAC7 - 701 Received: 14:53:37 Received By: Dispatched: 14:54:18 Officer 2: Dispatched By: Source: PHONE Arrived: Officer 3: 15:02:00 Completed: 15:44:03 Officer 4: Notified: Associated Person: Monday 04/09/2018 18-805361 4504 - EMS 11475 WESTWOOD RD ALDEN TOWN Received: 15:32:57 Officer 1: LVAC7 - 701 Received By: ARMSTRONG Dispatched: 15:35:52 Dispatched By: ARMSTRONG Officer 2: Arrived: 15:47:09 Officer 3: Source: PHONE Officer 4: Notified: Completed: 16:39:47 Associated Person: Associated Person: Tuesday 04/10/2018 18-805391 4504 - EMS 11541 CARY RD ALDEN TOWN Received: 01:36:15 Officer 1: TOWNLINE FIRE DEPT Received By: STEWART ANGELA -Dispatched: 01:36:16 Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 01:51:06 Officer 3: Source: E-911 Completed: 02:01:08 Officer 4: Notified: Associated Person: (Tuesday 04/10/2018 18-805416 4504 - EMS 11197 BROADWAY ALDEN TOWN Received: 12:57:26 Officer 1: TOWNLINE FIRE DEPT Received By: PAWLIKOWSKI JEAN -Dispatched: 12:57:41 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 13:09:05 Officer 3: Source: E-911 Completed: 13:59:50 Officer 4: Notified: Associated Person: Associated Person: Wednesday 04/11/2018 18-805487 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 13:44:09 Officer 1:LVAC7 - 701 Received By: Dispatched: 13:44:15 Officer 2: Dispatched By: **RADIO** Arrived: 13:59:08 Officer 3: Source: Completed: 15:25:36 Officer 4: Notified: Associated Person:

Thursday 04/12/2018	18-805519 4504 - EMS 11581 WALDEN AV ALDEN TO	OWN	
Received: 00:38:35 Dispatched: 00:41:16 Arrived: 00:47:39 Completed: 01:44:44	Officer 1: LVAC7 - 701 Officer 2: MILLGROVE FIRE Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person			
Thursday 04/12/2018	18-805543 4504 - EMS 1007 E BONNIE LAKE DR ALI	DEN TOWN	
Received: 12:17:42	Officer 1: TOWNLINE FIRE DEPT	Received By:	FIRESTONE JANE -
Dispatched: 12:18:44	Officer 2:LVAC7 - 701		FIRESTONE JANE -
Arrived: 12:28:00	Officer 3:	Source:	E-911
Completed: 13:09:44	Officer 4:	Notified:	
Associated Person:			
Thursday 04/12/2018	18-805554 4504 - EMS 11900 WALDEN AV ALDEN TO	OWN	
Received: 16:16:50	Officer 1: LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 16:17:26	Officer 2: MILLGROVE FIRE	Dispatched By:	
Arrived: 16:23:40	Officer 3:	Source:	PHONE
Completed: 17:21:16	Officer 4:	Notified:	
Associated Person:	<u> </u>		
Friday 04/13/2018	18-805588 6005 - LVAC PRIV 3040 WENDE RD ALDEN TOV	_	
Received: 11:24:44	Officer 1:LVAC7 - 701	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 11:24:45	Officer 2:	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 14:22:26	Officer 3:	Source:	RADIO
Completed: 14:22:26	Officer 4:	Notified:	
Associated Person:			
Saturday 04/14/2018	18-805647 4504 - EMS 11541 CARY RD ALDEN TOW	M	
Received: 11:51:09	Officer 1: TOWNLINE FIRE DEPT	Received By:	FIRESTONE JANE -
Dispatched: 11:51:10	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 11:59:21	Officer 3:	Source:	E-911
Completed: 12:13:48	Officer 4:	Notified:	
Associated Person:			-
Saturday 04/14/2018	18-805659 4504 - EMS 11541 CARY RD ALDEN TOW	/N	
Received: 16:01:58	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 16:04:01	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 16:14:07	Officer 3:	Source:	E-911
Completed: 16:24:14	Officer_4:	Notified:	
Associated Person:			
Sunday 04/15/2018	18-805709 4504 - EMS 11301 KIEFFER RD REAR ALI	DEN TOWN	
Received: 14:57:27	Officer 1: TOWNLINE FIRE DEPT	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 14:57:53	Officer 2: LVAC7 - 701		ARMSTRONG
Arrived: 15:12:01	Officer 3:	Source:	E-911
Completed: 16:03:53	Officer 4:	Notified:	
Associated Person:			
Associated Person:			

Monday 04/16/2018	18-805770 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 18:32:19	Officer 1: LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 18:32:22	Officer 2:	Dispatched By:	SCHAEFER TAMMIE -
Arrived: 18:55:00	Officer 3:	Source:	RADIO
Completed: 19:58:52	Officer 4:	Notified:	
Associated Person:			
Monday 04/16/2018	18-805778 4519 - UNFOUN 3636 CRITTENDEN RD ALD		
Received: 20:23:42	Officer 1: CRITTENDEN F!RE	Received By:	BALK JENNIFER - D87
Dispatched: 20:23:43	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 20:29:52	Officer 3:	Source:	PHONE
Completed: 20:37:14	Officer 4:	Notified:	
Associated Person: 600			
Tuesday 04/17/2018	18-805816 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 11:48:09	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 11:48:10	Officer 2:	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 11:57:18	Officer 3:	Source:	RADIO
Completed: 13:38:12	Officer 4:	Notified:	
Associated Person:			
Wednesday 04/18/2018	18-805857 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 05:46:54	Officer 1: LVAC7 - 701	Received By:	STEWART ANGELA -
Dispatched: 05:46:58	Officer 2:	•	STEWART ANGELA -
Arrived: 06:02:05	Officer 3:	Source:	RADIO
Completed: 06:55:23	Officer 4:	Notified:	
Associated Person:			
Wednesday 04/18/2018	18-805869 4504 - EMS 12892 PIPER CT ALDEN TO		
Received: 10:45:32	Officer 1: CRITTENDEN FIRE	Received By:	FIRESTONE JANE -
Dispatched: 10:45:32	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 10:55:13	Officer 3:	Source:	E-911
Completed: 11:43:09	Officer 4:	Notified:	
Associated Person:			
Friday 04/20/2018	18-805977 4504 - EMS 459 BRIARWOOD CT ALDE	N TOWN	
Received: 11:24:35	Officer 1: LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 11:24:47	Officer 2: ALDEN FIRE DEPT - 9	•	FIRESTONE JANE -
Arrived: 11:34:49	Officer 3:	Source:	PHONE
Completed: 13:46:22	Officer 4:	Notified:	
Associated Person:			1
Sunday 04/22/2018	18-806064 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 10:05:32	Officer 1:LVAC7 - 701	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 10:05:32	Officer 2:	_	PAWLIKOWSKI JEAN -
Arrived: 10:18:33	Officer 3:	Source:	RADIO
•		 	
Completed: 11:03:28 Associated Person:	Officer 4:	Notified:	IVADIO

18-806127 6005 - LVAC PRIVATE Monday 04/23/2018 3040 WENDE RD ALDEN TOWN PAWLIKOWSKI JEAN -Officer 1:LVAC7 - 701 Received By: Received: 10:19:06 Dispatched By: PAWLIKOWSKI JEAN -Officer 2: Dispatched: 10:19:08 Source: **RADIO** Officer 3: 10:28:19 Arrived: Notified: Officer 4: Completed: 11:23:36 Associated Person: 18-806136 6005 - LVAC PRIVATE Monday 04/23/2018 3040 WENDE RD ALDEN TOWN ARMSTRONG Received By: Officer 1:LVAC7 - 701 Received: 12:38:50 Dispatched By: ARMSTRONG Officer 2: Dispatched: 12:39:06 Source: RADIO Arrived: 12:52:16 Officer 3: Notified: Completed: 14:12:43 Officer 4: Associated Person: Tuesday 04/24/2018 18-806175 4504 - EMS 830 BLOSSOM LEA DR ALDEN TOWN Received: 03:16:29 Officer 1:LVAC7 - 701 Received By: Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: Dispatched: 03:17:08 Source: E-911 Arrived: 03:28:46 Officer 3: Notified: Officer 4: Completed: 04:45:21 Associated Person: 6005 - LVAC PRIVATE Tuesday 04/24/2018 18-806201 367 S WOODSIDE DR ALDEN TOWN Officer 1:LVAC7 - 701 FIRESTONE JANE -Received By: Received: 11:45:24 Dispatched: 11:45:25 Officer 2: Dispatched By: FIRESTONE JANE -Officer 3: Source: PHONE Arrived: 11:54:07 Completed: 12:30:27 Officer 4: Notified: Associated Person: Tuesday 04/24/2018 18-806213 4504 - EMS 11367 CARY RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 16:09:06 Received By: ARMSTRONG Dispatched: 16:09:07 Officer 2: LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 16:18:33 Officer 3: Source: E-911 Completed: 17:12:45 Officer 4: Notified: Associated Person: Associated Person: i Tuesday 04/24/2018 18-806216 4504 - EMS 3231 CRITTENDEN RD ALDEN TOWN Received: 16:54:21 Officer 1: LVAC7 - 701 Received By: **ARMSTRONG** Dispatched: 16:54:22 Officer 2: CRITTENDEN FIRE Dispatched By: BALK JENNIFER - D87 Arrived: 17:06:54 Source: E-911 Officer 3: Completed: 17:52:58 Officer 4: Notified: LIEUTENANT Associated Persons Associated Person: Wednesday 04/25/2018 18-806245 4504 - EMS 13875 BROADWAY ALDEN TOWN Received: 02:17:36 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 02:17:53 Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 02:27:14 Officer 3: Source: E-911 Completed: 03:19:40 Officer 4: Notified: Associated Person: I

Nednesday 04/25/2018	18-806258 4504 - EMS 13301 GENESEE ST ALDEN	TOWN		
Received: 08:17:46 Dispatched: 08:17:46 Arrived: 08:31:43 Completed: 09:06:23	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Dispatched By: Source: Notified:	FIRESTONE JANE - PAWLIKOWSKI JEAN - E-911	
Associated Person:				
Nednesday 04/25/2018	18-806265 6005 - LVAC PRI 3040 WENDE RD ALDEN TO			
Received: 11:08:40 Dispatched: 11:08:41 Arrived: 11:18:21 Completed: 12:18:22 Associated Person:	Officer 1:LVAC7 - 701 Officer 2: Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - RADIO	_
Thursday 04/26/2018	18-806335 4504 - EMS 11900 WALDEN AV ALDEN	TOWN		
Received: 11:14:04 Dispatched: 11:14:07 Arrived: 11:20:25 Completed: 11:59:51 Associated Person:	Officer 1: LVAC7 - 701 Officer 2: MILLGROVE FIRE Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - FIRESTONE JANE - E-911	
Thursday 04/26/2018	18-806337 4504 - EMS 13294 GENESEE ST ALDEN	TOWN		
Received: 11:16:56 Dispatched: 11:16:56 Arrived: 11:26:10 Completed: 12:15:00	Officer 1: LVAC7 - 701 Officer 2: CRITTENDEN FIRE Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - E-911	
Associated Person: Thursday 04/26/2018	18-806373 4504 - EMS			
-	13301 GENESEE ST ALDEN			
Received: 19:27:08 Dispatched: 19:27:36 Arrived: 19:36:49 Completed: 20:19:49	Officer 1: LVAC7 - 701 Officer 2: CRITTENDEN FIRE Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	ARMSTRONG ARMSTRONG E-911	
Associated Person:				
Associated Person: P				
Thursday 04/26/2018	18-806376 4000 - MENTAL 11268 KIEFFER RD ALDEN	TOWN		
Received: 19:32:29 Dispatched: 19:36:56 Arrived: 19:36:56 Completed: 20:39:44 Associated Person:	Officer 1:LVAC7 - 701 Officer 2: RURAL METRO Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	ARMSTRONG ARMSTRONG OTHER POLICE	
Friday 04/27/2018	18-806415 4504 - EMS 2362 CRITTENDEN RD ALD	EN TOWN		
Received: 16:41:25 Dispatched: 16:42:29	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	Received By:	ARMSTRONG : SCHAEFER TAMMIE -	

Saturday 04/28/2018	18-806454 6005 - LVAC F 3040 WENDE RD ALDEN		
Received: 11:16:31	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 11:16:31	Officer 2:	Dispatched By:	FIRESTONE JANE -
Arrived: 11:25:25	Officer 3:	Source:	IN PERSON
Completed: 12:24:29	Officer 4:	Notified:	
Associated Person:			<u> </u>
Sunday 04/29/2018	18-806498 6005 • LVAC F 3040 WENDE RD ALDEN		
Received: 12:33:51	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 12:34:08	Officer 2:	Dispatched By:	
Arrived: 12:44:24	Officer 3:	Source:	RADIO
Completed: 13:44:17	Officer 4:	Notified:	
Associated Person:			
Sunday 04/29/2018	18-806500 6005 - LVAC F 3040 WENDE RD ALDEN		
Received: 13:35:56	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 13:36:19	Officer 2:	Dispatched By:	
Arrived: 13:46:33	Officer 3:	Source:	RADIO
Completed: 14:42:35	Officer 4:	Notified:	
Associated Person:			
Sunday 04/29/2018	18-806508 6005 - LVAC I 11581 WALDEN AV ALDE		
Received: 16:37:43	Officer 1: LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 16:37:44	Officer 2:		SCHAEFER TAMMIE -
Arrived: 16:44:30	Officer 3:	Source:	RADIO
Completed: 17:25:39	Officer 4:	Notified:	
Associated Person:			
Tuesday 05/01/2018	18-806616 4504 - EMS 811 FOUR ROD RD ALDE		<u> </u>
Received: 07:15:55	Officer 1: ALDEN FIRE DEPT	- 9 Received By:	PAWLIKOWSKI JEAN -
Dispatched: 07:15:55	Officer 2: LVAC7 - 701	•	PAWLIKOWSKI JEAN -
Arrived: 07:29:30	Officer 3:	Source:	E-911
Completed: 08:10:39	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Tuesday 05/01/2018	18-806643 6005 - LVAC I 3040 WENDE RD ALDEN		
Received: 16:45:46	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 16:45:48	Officer 2:	Dispatched By:	
Arrived: 17:00:44	Officer 3:	Source:	RADIO
Completed: 18:01:16	Officer 4:	Notified:	
Associated Person:			
Tuesday 05/01/2018	18-806661 6005 - LVAC 3040 WENDE RD ALDEN		
Received: 21:03:52	Officer 1:LVAC7 - 701	Received By:	BALK JENNIFER - D87
Dispatched: 21:03:52	Officer 2:		BALK JENNIFER - D87
Arrived: 21:13:12	Officer 3:	Source:	RADIO
			I WINDLA
Completed: 22:02:19	Officer 4:	Notified:	

Wednesday 05/02/2018	18-806700 4504 - EMS 12132 WALDEN AV ALDEN	TOWN	
Received: 14:12:01	Officer 1: MILLGROVE FIRE	Received By:	SCHAEFER TAMMIE -
Dispatched: 14:12:08	Officer 2: LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 14:15:04	Officer 3:	Source:	E-911
Completed: 14:40:44	Officer 4:	Notified:	
Associated Person:		<u></u> .	
Thursday 05/03/2018	18-806753 2702 - BURGLA 2323 WENDE RD ALDEN TO		
Received: 08:24:47	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 08:25:36	Officer 2: MILLGROVE FIRE	Dispatched By:	
Arrived: 08:31:34	Officer 3:	Source:	PHONE
Completed: 09:07: <u>36</u>	Officer 4:	Notified:	
Associated Persol			
Associated Persor		!	
Thursday 05/03/2018	18-806755 6005 - LVAC PF 3040 WENDE RD ALDEN TO		
Received: 09:06:47	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 09:07:22	Officer 2:	Dispatched By:	
Arrived: 09:14:45	Officer 3:	Source:	RADIO
Completed: 10:33:09	Officer 4:	Notified:	
Associated Person:			
Thursday 05/03/2018	18-806782 4504 - EMS 2323 WENDE RD ALDEN T	OWN	
Received: 18:08:30	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 18:08:30	Officer 2: MILLGROVE FIRE	Dispatched By:	SCHAEFER TAMMIE -
Arrived: 18:10:27	Officer 3:	Source:	E-911
Completed: 18:57:04	Officer 4:	Notified:	
Associated Person:			
Monday 05/07/2018	18-806986 6005 - LVAC PI 3040 WENDE RD ALDEN T		
Received: 07:21:26	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 07:21:26	Officer 2:		PAWLIKOWSKI JEAN -
Arrived: 07:30:01	Officer 3:	Source:	RADIO
Completed: 08:30:34	Officer 4:	Notified:	
Associated Person:			
Monday 05/07/2018	18-806992 6005 - LVAC PI 3040 WENDE RD ALDEN T		
Received: 08:54:09	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 08:54:10	Officer 2:		FIRESTONE JANE -
Arrived: 09:03:38	Officer 3:	Source:	PHONE
Completed: 10:08:41	Officer 4:	Notified:	
Associated Person:			
Monday 05/07/2018	18-806994 6005 - LVAC PI 3040 WENDE RD ALDEN T		
Received: 09:42:43	Officer 1:LVAC7 - 701	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 09:42:44	Officer 2:	, ,	PAWLIKOWSKI JEAN -
Arrived: 09:52:36	Officer 3:	Source:	RADIO
Completed: 11:07:11	Officer 4:	Notified:	
Associated Person:			

Monday 05/07/2018	18-807003 6005 - LVAC PRIV 3040 WENDE RD ALDEN TOV		
Received: 12:32:43	Officer 1: LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 12:32:44	Officer 2:	Dispatched By:	FIRESTONE JANE -
Arrived: 12:44:52	Officer 3:	Source:	PHONE
Completed: 13:32:19	Officer 4:	Notified:	
Associated Person:			
Monday 05/07/2018	18-807013 6005 - LVAC PRIV 3040 WENDE RD ALDEN TOV		_
Received: 15:38:13	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 15:38:20	Officer 2:	Dispatched By:	
Arrived: 15:48:30	Officer 3:	Source:	RADIO
Completed: 17:16:33	Officer 4:	Notified:	
Associated Person			
Monday 05/07/2018	18-807022 4504 - EMS BROADWAY @ SULLIVAN F	RD ALDEN TOWI	<u> </u>
Received: 18:20:15	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 18:20:16	Officer 2:LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 18:26:27	Officer 3:	Source:	E-911
Completed: 19:57:59	Officer 4:	Notified:	
Associated Perso			
Monday 05/07/2018	18-807028 6005 - LVAC PRIV 3040 WENDE RD ALDEN TOV		
Received: 19:47:40	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 19:47:43	Officer 2:	Dispatched By:	
Arrived: 19:58:33	Officer 3:	Source:	RADIO
Completed: 20:44:22	Officer 4:	Notified:	
Associated Person:			
Tuesday 05/08/2018	18-807051 4504 - EMS 11900 WALDEN AV ALDEN T	OWN	
Received: 05:50:03	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 05:50:43	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 05:53:01	Officer 3:	Source:	PHONE
Completed: 06:32:27	Officer 4:	Notified:	
Associated Person:			
Tuesday 05/08/2018	18-807067 4504 - EMS 3655 BILLO RD ALDEN TOW	'N	
Received: 11:02:22	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 11:02:31	Officer 2: MILLGROVE FIRE	Dispatched By	: FIRESTONE JANE -
Arrived: 11:08:47	Officer 3:	Source:	PHONE
Completed: 11:35:35	Officer 4:	Notified:	
Associated Person:			
Tuesday 05/08/2018	18-807083 4504 - EMS 1244 LAMBERT DR ALDEN 1	TOWN	
Received: 14:29:00	Officer 1:ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 14:29:53	Officer 2:LVAC7 - 701	Dispatched By	• •
Arrived: 14:39:32	Officer 3:	Source:	E-911
Completed: 15:29:00	Officer 4:	Notified:	
Associated Person:			

18-807084 6005 - LVAC PRIVATE Tuesday 05/08/2018 3040 WENDE RD ALDEN TOWN Officer 1:LVAC7 - 701 **ARMSTRONG** Received: 15:11:34 Received By: Dispatched: 15:11:36 Officer 2: Dispatched By: ARMSTRONG Arrived: 15:17:42 Officer 3: Source: RADIO Completed: 18:10:18 Officer 4: Notified: Associated Person: Tuesday 05/08/2018 18-807094 4504 - EMS 3927 N MILLGROVE RD ALDEN TOWN Received By: **ARMSTRONG** Received: 18:23:55 Officer 1: MILLGROVE FIRE Dispatched By: SCHAEFER TAMMIE -Dispatched: 18:23:55 Officer 2: LVAC7 - 701 Officer 3: Source: E-911 Arrived: 18:27:00 Notified: Officer 4: Completed: 20:24:32 Associated Person: Associated Person: 18-807149 4504 - EMS Wednesday 05/09/2018 122 GLENDALE TE ALDEN TOWN Officer 1:LVAC7 - 701 Received By: Received: 14:25:26 Dispatched By: Officer 2: ALDEN FIRE DEPT - 9 Dispatched: 14:27:39 Officer 3: Source: E-911 Arrived: 14:37:55 Notified: Completed: 15:25:58 Officer 4: Associated Person: i Associated Persons Wednesday 05/09/2018 18-807155 4514 - WELFARE CHECK 12640 W MAIN ST ALDEN TOWN Received: 15:42:30 Officer 1: ALDEN FIRE DEPT - 9 Received By: Officer 2:LVAC7 - 701 Dispatched By: Dispatched: 15:43:48 Arrived: Source: PHONE 15:47:49 Officer 3: Notified: Completed: 16:33:04 Officer 4: Associated Person: 1 Associated Person 18-807216 4902 - INJURY ACCIDENT Thursday 05/10/2018 BROADWAY @ TWO ROD RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 16:27:15 Received By: SCHAEFER TAMMIE -Officer 2:LVAC7 - 701 Dispatched: 16:27:16 Dispatched By: SCHAEFER TAMMIE -Source: Arrived: 16:31:55 Officer 3: PHONE Notified: Completed: 16:45:02 Officer 4: LIEUTENANT Associated Person: 18-807241 6005 - LVAC PRIVATE Friday 05/11/2018 3040 WENDE RD ALDEN TOWN Received: 05:04:47 Officer 1:LVAC7 - 701 Received By: Dispatched By: Dispatched: 05:04:47 Officer 2: Officer 3: Source: Arrived: 05:35:55 **RADIO** Notified: Officer 4: Completed: 06:00:58 Associated Person: Saturday 05/12/2018 18-807324 4504 - EMS 1244 LAMBERT DR ALDEN TOWN Received: 10:58:24 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 10:58:25 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Source: Arrived: 11:09:16 Officer 3: E-911 Completed: 11:53:24 Officer 4: Notified: Associated Person: 4 Associated Person:

Sunday 05/13/2018	18-807350 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 01:06:25	Officer 1: LVAC7 - 701	Received By:	STEWART ANGELA -
Dispatched: 01:06:25	Officer 2:	Dispatched By:	STEWART ANGELA -
Arrived: 01:11:25	Officer 3:	Source:	RADIO
Completed: 02:11:15	Officer 4:	Notified:	
Associated Person:		<u> </u>	
Sunday 05/13/2018	18-807397 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 20:38:52	Officer 1:LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 20:38:53	Officer 2:	Dispatched By:	
Arrived: 20:46:52	Officer 3:	Source:	RADIO
Completed: 21:42:11	Officer 4:	Notified:	
Associated Person:			
Monday 05/14/2018	18-807425 4504 - EMS 12596 W MAIN ST ALDEN T	'OWN	
Received: 11:50:16	Officer 1: ALDEN FIRE DEPT - 9		FIRESTONE JANE -
Dispatched: 11:50:16	Officer 2:LVAC7 - 701	• •	FIRESTONE JANE -
Arrived: 11:58:00	Officer 3:	Source:	E-911
Completed: 12:45:45	Officer 4:	Notified:	
Associated Person:	_		
Tuesday 05/15/2018	18-807468 4504 - EMS 12486 S LAWN CT ALDEN 1	- TOWN	
Received: 05:57:53	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 05:58:59	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 06:08:01	Officer 3:	Source:	E-911
Completed: 06:59:36	Officer 4:	Notified:	
Associated Person:			
Tuesday 05/15/2018	18-807481 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 11:17:05	Officer 1: LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 11:17:05	Officer 2:	Dispatched By:	FIRESTONE JANE -
Arrived: 12:55:12	Officer 3:	Source:	RADIO
Completed: 12:55:15	Officer 4:	Notified:	
Associated Person:			
Tuesday 05/15/2018	18-807489 4504 - EMS 12701 BROADWAY ALDEN	TOWN	
Received: 14:08:19	Officer 1: ALDEN FIRE DEPT - 9	9 Received By:	
Dispatched: 14:09:01	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 14:14:40	Officer 3:	Source:	E-911
Completed: 15:17:43	Officer 4:	Notified:	
Associated Person:			
Tuesday 05/15/2018	18-807518 4504 - EMS 2362 CRITTENDEN RD ALI	DEN TOWN	
Received: 23:03:11	Officer 1: ALDEN FIRE DEPT - 9	9 Received By:	
Dispatched: 23:04:06	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 23:15:55	Officer 3:	Source:	E-911
Completed: 00:57:15	Officer 4:	Notified:	
and the same of th			

Thursday 05/17/2018	18-807618 4504 - EMS 527 FOUR ROD RD ALDEN T	OWN	
Received: 16:17:47	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 16:21:17	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 16:30:51	Officer 3:	Source:	PHONE
Completed: 18:34:48	Officer 4:	Notified:	
Associated Perso			<u> </u>
Friday 05/18/2018	18-807666 4902 - INJURY AC BROADWAY @ FOUR ROD		N
Received: 10:47:09	Officer 1: ALDEN FIRE DEPT -9	Received By:	
Dispatched: 10:48:43	Officer 2: LVAC7 - 701	Dispatched By:	DUGNE
Arrived: 10:54:50	Officer 3:	Source:	PHONE
Completed: 14:16:55	Officer 4:	Notified:	
Associated Person:	<u> </u>		
Friday 05/18/2018	18-807669 4508 - EMS ASSI 13369 HENSKEE RD ALDEN	TOWN	
Received: 12:00:56	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 12:00:56	Officer 2: LVAC7 - 701	Dispatched By:	5044
Arrived: 12:08:05	Officer 3:	Source:	E-911
Completed: 12:14:11	Officer 4:	Notified:	
Associated Person			
Associated Person:		EN	<u> </u>
Friday 05/18/2018	18-807672 4504 - EMS 3040 WENDE RD ALDEN TO	WN	
Received: 12:12:58	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 12:16:11	Officer 2:		PAWLIKOWSKI JEAN -
Arrived: 12:23:01	Officer 3:	Source:	E-911
Completed: 13:47:43	Officer 4:	Notifled:	
Associated Person:			
Sunday 05/20/2018	18-807791 6005 - LVAC PRI 3040 WENDE RD ALDEN TO	WN	
Received: 08:34:24	Officer 1: LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 08:34:25	Officer 2:	•	FIRESTONE JANE -
Arrived: 08:43:08	Officer 3:	Source:	RADIO
Completed: 09:37:22	Officer 4:	Notified:	
Associated Person:	-		
Sunday 05/20/2018	18-807801 4504 - EMS 11374 GENESEE ST ALDEN	TOWN	
Received: 11:51:06	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 11:51:07	Officer 2: MILLGROVE FIRE		FIRESTONE JANE -
Arrived: 11:58:57	Officer 3:	Source: Notified:	E-911
Completed: 12:44:48	Officer 4:	ivoatiea:	
Associated Person:	40 00700F DOOF 11/40 POL	VATE	
Sunday 05/20/2018	18-807825 6005 - LVAC PRI 3040 WENDE RD ALDEN TO	WN	
Received: 21:34:47	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 21:34:50	Officer 2:	•	: SCHAEFER TAMMIE -
Arrived: 22:34:53	Officer 3:	Source:	RADIO
Completed: 22:43:25	Officer 4:	Notified:	
Associated Person:			

Wednesday 05/23/2018	18-807963 6005 - LVAC PRIV 3040 WENDE RD ALDEN TO		
Received: 11:20:48	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 11:21:18	Officer 2:	Dispatched By:	
Arrived: 11:21:18	Officer 3:	Source:	RADIO
Completed: 12:29:33	Officer 4:	Notified:	
Associated Person:			
Wednesday 05/23/2018	18-807965 6005 - LVAC PRI' 3040 WENDE RD ALDEN TO		
Received: 12:11:22	Officer 1:LVAC7 - 701	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 12:11:22	Officer 2:	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 12:20:27	Officer 3:	Source:	RADIO
Completed: 13:18:11	Officer 4:	Notified:	
Associated Person:			
Wednesday 05/23/2018	18-807966 6005 - LVAC PRI 3040 WENDE RD ALDEN TO		
Received: 12:32:10	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 12:32:27	Officer 2:	Dispatched By:	
Arrived: 12:41:57	Officer 3:	Source:	RADIO
Completed: 13:49:13	Officer 4:	Notified:	
Associated Person:			
Friday 05/25/2018	18-808092 4504 - EMS 111 GLENDALE TE ALDEN 1	rown	
Received: 16:51:21	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 16:52:40	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 17:02:31	Officer 3:	Source:	PHONE
Completed: 17:03:45	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Saturday 05/26/2018	18-808172 4508 - EMS ASS 12132 WALDEN AV ALDEN		
Received: 16:09:49	Officer 1: MILLGROVE FIRE	Received By:	SCHAEFER TAMMIE -
Dispatched: 16:09:50	Officer 2: LVAC7 - 701	▼	SCHAEFER TAMMIE -
Arrived: 16:15:24	Officer 3:	Source:	PHONE
Completed: 16:25:16	Officer 4:	Notified:	
Associated Person:			
Saturday 05/26/2018	18-808191 4504 - EMS 923 TWO ROD RD ALDEN T	OWN	
Received: 20:14:14	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 20:14:15	Officer 2: TOWNLINE FIRE DEPT		SCHAEFER TAMMIE -
Arrived: 20:29:03	Officer 3:	Source:	E-911
Completed: 21:17:04	Officer 4:	Notified:	
Associated Person:			
Monday 05/28/2018	18-808302 6005 - LVAC PRI 3040 WENDE RD ALDEN TO		
Received: 12:30:39	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 12:31:13	Officer 2:	Dispatched By:	
Arrived: 12:38:14	Officer 3:	Source:	RADIO
Completed: 13:28:18	Officer 4:	Notified:	
Associated Person:			

Monday 05/28/2018 18-808326 4504 - EMS 13689 HENSKEE RD ALDEN TOWN Received: 19:45:04 Officer 1:LVAC7 - 701 Received By: STEWART ANGELA -Dispatched: 19:45:05 Officer 2: Dispatched By: STEWART ANGELA -Arrived: Officer 3: 20:03:37 Source: OTHER POLICE Completed: 20:52:26 Officer 4: Notified: Associated Persol Tuesday 05/29/2018 18-808341 4504 - EMS 11581 WALDEN AV ALDEN TOWN Officer 1:LVAC7 - 701 Received: 09:40:09 Received By: Dispatched: 09:40:19 Officer 2: Dispatched By: **PHONE** Arrived: 09:51:13 Officer 3: Source: Notified: Completed: 10:36:32 Officer 4: Associated Person: Associated Person Tuesday 05/29/2018 18-808370 4504 - EMS 11631 PARKWOOD DR ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 17:12:34 Received By: SCHAEFER TAMMIE -Dispatched: 17:12:50 Officer 2:LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: 17:19:16 Officer 3: Source: E-911 Completed: 18:03:54 Officer 4: Notified: Associated Person: Wednesday 05/30/2018 18-808439 4504 · EMS 11900 WALDEN AV ALDEN TOWN Received: 17:54:25 Officer 1: MILLGROVE FIRE Received By: **BALK JENNIFER - D87** Dispatched: 17:55:38 Officer 2: LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: 18:00:02 Officer 3: Source: E-911 Completed: 18:44:24 Officer 4: Notified: Associated Person: Wednesday 05/30/2018 18-808448 4504 - EMS 11580 BROADWAY ALDEN TOWN Received: 19:15:53 Officer 1:LVAC7 - 701 Received By: ARMSTRONG Dispatched: 19:15:56 Officer 2: TOWNLINE FIRE DEPT Dispatched By: ARMSTRONG Arrived: 19:25:00 Officer 3: Source: E-911 Completed: 19:40:21 Officer 4: Notified: Associated Person: Associated Person: Thursday 05/31/2018 18-808513 4504 - EMS 573 CREEKSIDE DR ALDEN TOWN Received: 15:33:04 Officer 1: TOWNLINE FIRE DEPT Received By: ARMSTRONG Dispatched: 15:33:45 Officer 2:LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: 15:49:16 Officer 3: Source: E-911 Completed: 16:55:50 Officer 4: Notified: Associated Person: I Thursday 05/31/2018 18-808534 4504 - EMS 13369 HENSKEE RD ALDEN TOWN Received: 20:12:00 Officer 1: ALDEN FIRE DEPT - 9 Received By: ARMSTRONG Dispatched: 20:12:24 Officer 2: LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: 20:27:29 Officer 3: Source: E-911 Completed: 20:37:31 Officer 4: Notified: Associated Person: Associated Person: F

RESTONE JANE - RESTONE JANE - RESTONE JANE - RESTONE JANE - PERSON
RESTONE JANE - RESTONE JANE - PERSON
RESTONE JANE - RESTONE JANE - PERSON
RESTONE JANE - PERSON
RESTONE JANE - PERSON
RESTONE JANE - PERSON
RESTONE JANE - PERSON
PERSON
911
911
911
911
911
911
RMSTRONG
RMSTRONG
ADIO
RMSTRONG
RMSTRONG
ADIO
911
<u> </u>
AWLIKOWSKI JEAN -
AWLIKOWSKI JEAN - AWLIKOWSKI JEAN -
AWLIKOWSKI JEAN -
AWLIKOWSKI JEAN - 911

Sunday 06/03/2018 18-808775 4504 - EMS 1232 MAYFIELD DR ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 22:12:36 **BALK JENNIFER - D87** Dispatched: 22:12:37 Officer 2: LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Officer 3: Source: Arrived: 22:22:00 E-911 Completed: 22:44:53 Officer 4: Notified: Associated Person: (18-808776 4499 - FIRE OTHER Sunday 06/03/2018 12418 REINHARDT WEST RD ALDEN TOWN Officer 1: MILLGROVE FIRE Received: 22:27:24 Received By: **BALK JENNIFER - D87** Dispatched: 22:27:27 Officer 2: CRITTENDEN FIRE Dispatched By: BALK JENNIFER - D87 Officer 3: BOWMANSVILLE FIRE Source: E-911 Arrived: 22:33:12 Completed: 00:30:45 Notified: LIEUTENANT Officer 4: LVAC7 - 701 Associated Persona Tuesday 06/05/2018 18-808858 4902 - INJURY ACCIDENT 887 THREE ROD RD ALDEN TOWN FIRESTONE JANE -Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 07:17:37 Dispatched By: FIRESTONE JANE -Dispatched: 07:19:29 Officer 2: LVAC7 - 701 Officer 3: Source: PHONE Arrived: 07:26:27 Completed: 10:15:50 Officer 4: Notified: Associated Person: Tuesday 06/05/2018 18-808879 6005 - LVAC PRIVATE 3040 WENDERD ALDEN TOWN Received: 14:44:24 Officer 1:LVAC7 - 701 Received By: PAWLIKÓWSKI JEAN -Dispatched: 14:44:25 Officer 2: Dispatched By: PAWLIKOWSKI JEAN -Arrived: 14:51:17 Officer 3: Source: RADIO Completed: 16:09:22 Officer 4: Notified: Associated Person: Wednesday 06/06/2018 18-808943 4504 - EMS 12083 WESTWOOD RD ALDEN TOWN Received: 14:07:43 Officer 1:LVAC7 - 701 FIRESTONE JANE -Received By: Dispatched: 14:07:56 Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: FIRESTONE JANE -Arrived: Officer 3: Source: PHONE 14:21:42 Completed: 14:56:00 Officer 4: Notified: Associated Person: Thursday 06/07/2018 18-808988 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 10:34:56 Officer 1:LVAC7 - 701 Received By: Dispatched By: Dispatched: 10:35:27 Officer 2: Source: **RADIO** Arrived: 10:48:14 Officer 3: Notified: Completed: 12:08:53 Officer 4: Associated Person Thursday 06/07/2018 18-809008 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 15:58:52 Officer 1:LVAC7 - 701 Received By: **ARMSTRONG** Dispatched: 15:58:55 Officer 2: Dispatched By: ARMSTRONG Officer 3: Source: **RADIO** Arrived: 16:15:00 Completed: 17:32:49 Officer 4: Notified: Associated Person:

Friday 06/08/2018 18-809082 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 16:54:42 Officer 1: LVAC7 - 701 Received By: ARMSTRONG Dispatched: 16:55:02 Officer 2: Dispatched By: ARMSTRONG Officer 3: Source: RADIO Arrived: 17:05:30 Notified: Officer 4: Completed: 18:04:13 Associated Person: 18-809096 6005 - LVAC PRIVATE Friday 06/08/2018 3040 WENDE RD ALDEN TOWN Officer 1: LVAC7 - 701 Received By: ARMSTRONG Received: 19:15:31 Officer 2: Dispatched By: ARMSTRONG Dispatched: 19:27:24 **PHONE** 21:39:24 Officer 3: Source: Arrived: Notified: Completed: 21:39:24 Officer 4: Associated Person: 18-809154 6005 - LVAC PRIVATE Saturday 06/09/2018 11581 WALDEN AV ALDEN TOWN Officer 1:LVAC7 - 701 Received: 17:58:49 Received By: Dispatched: 17:58:52 Officer 2: Dispatched By: Arrived: Officer 3: Source: **RADIO** 18:05:48 Completed: 19:23:37 Officer 4: Notified: Associated Person: Sunday 06/10/2018 4504 - EMS 18-809170 1722 SANDRIDGE RD ALDEN TOWN Received: 00:56:29 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 00:56:32 Dispatched By: Officer 2:LVAC7 - 701 Arrived: 01:07:55 Officer 3: Source: E-911 Completed: 01:19:07 Officer 4: Notified: Associated Person Sunday 06/10/2018 18-809175 4504 - EMS 407 CAYUGA CREEK RD ALDEN TOWN Received: 02:05:28 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 02:06:07 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 02:15:33 Officer 3: Source: PHONE Completed: 02:37:34 Officer 4: Notified: Associated Person Sunday 06/10/2018 18-809185 4504 - EMS 11045 JANE DR ALDEN TOWN Received: 06:18:31 Officer 1: TOWNLINE FIRE DEPT Received By: Dispatched: 06:18:34 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 06:30:07 Officer 3: Source: E-911 Completed: 07:13:48 Officer 4: Notified: Associated Person: i Associated Person: Sunday 06/10/2018 18-809203 4504 - EMS 1722 SANDRIDGE RD ALDEN TOWN Received: 17:02:07 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 17:03:51 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 17:07:27 Officer 3: Source: E-911 Completed: 19:08:57 Officer 4: Notified: Associated Person:

Sunday 06/10/2018	18-809218 4508 - EMS ASSIS		
	13369 HENSKEE RD ALDEN T	OWN	
Received: 20:42:39	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 20:43:43	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 20:48:41	Officer 3:	Source:	E-911
Completed: 21:05:47	Officer 4:	Notified:	
Associated Person:			
Sunday 06/10/2018	18-809222 4504 - EMS 1024 TWO ROD RD ALDEN TO	OWN	
Received: 21:52:51	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 21:54:50	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 22:02:40	Officer 3:	Source:	E-911
Completed: 22:49:14	Officer 4:	Notified:	
Associated Person:		<u></u>	
Monday 06/11/2018	18-809270 4504 - EMS 11581 WALDEN AV ALDEN TO	OWN	
Received: 20:30:58	Officer 1:LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 20:31:01	Officer 2:	Dispatched By:	
Arrived: 20:37:52	Officer 3:	Source:	PHONE
Completed: 21:08:00	Officer 4:	Notified:	
Associated Person			
Tuesday 06/12/2018	18-809282 4508 - EMS ASSIS 13369 HENSKEE RD ALDEN 1		-
Received: 01:43:39	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 01:43:40	Officer 2: LVAC7 - 701	•	BALK JENNIFER - D87
Arrived: 01:53:28	Officer 3:	Source:	E-911
Completed: 02:04:30	Officer 4:	Notified:	
Associated Person:			
Tuesday 06/12/2018	18-809330 4508 - EMS ASSIS 13369 HENSKEE RD ALDEN 1	•	
Received: 17:47:08	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 17:48:29	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 17:54:04	Officer 3:	Source:	E-911
Completed: 18:01:57	Officer 4:	Notified:	
Associated Person:			
Wednesday 06/13/2018	18-809350 4508 - EMS ASSIS 13369 HENSKEE RD ALDEN		
Received: 00:00:19	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 00:00:27	Officer 2:LVAC7 - 701		STEWART ANGELA -
Arrived: 00:13:40	Officer 3:	Source:	E-911
Completed: 00:21:52	Officer 4:	Notified:	
Associated Person: F			
Associated Person: F Wednesday 06/13/2018	18-809367 6005 - LVAC PRIV 3040 WENDE RD ALDEN TOV		
Wednesday 06/13/2018	3040 WENDE RD ALDEN TOV	VN	
Wednesday 06/13/2018 Received: 07:56:05	3040 WENDE RD ALDEN TOV Officer 1:LVAC7 - 701	VN Received By:	
Wednesday 06/13/2018	3040 WENDE RD ALDEN TOV	VN	RADIO
Wednesday 06/13/2018 Received: 07:56:05 Dispatched: 07:56:20	3040 WENDERD ALDEN TOV Officer 1:LVAC7 - 701 Officer 2:	VN Received By: Dispatched By:	

Wednesday 06/13/2018	18-809381 4508 - EMS ASSIS 13369 HENSKEE RD ALDEN T	-	
Received: 12:29:59 Dispatched: 12:30:50 Arrived: 12:39:39 Completed: 12:54:51 Associated Person	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Thursday 06/14/2018	18-809439 4504 • EMS		
marsaay va i-assis	11900 WALDEN AV ALDEN TO	OWN	
Received: 08:15:29 Dispatched: 08:15:44 Arrived: 08:20:32 Completed: 08:58:40	Officer 1: LVAC7 - 701 Officer 2: MILLGROVE FIRE Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person:			
Thursday 06/14/2018	18-809475 4504 - EMS 11301 KIEFFER RD ALDEN TO	 DWN	
Received: 20:19:32 Dispatched: 20:19:59 Arrived: 20:26:04 Completed: 22:52:01 Associated Person	Officer 1: LVAC7 - 701 Officer 2: TOWNLINE FIRE DEPT Officer 3: Officer 4:	Received By:	ARMSTRONG ARMSTRONG E-911
Associated Person	10.00000 1501 5110	l	
Friday 06/15/2018	18-809502 4504 - EMS 13294 GENESEE ST ALDEN T	OWN	
Received: 11:46:34 Dispatched: 11:47:36 Arrived: 11:53:12 Completed: 12:43:01 Associated Person:	Officer 1: LVAC7 - 701 Officer 2: CRITTENDEN FIRE Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Saturday 06/16/2018	18-809560 4504 - EMS 11775 GENESEE ST ALDEN T	OWN	<u> </u>
Received: 08:28:00 Dispatched: 08:28:18 Arrived: 08:30:52 Completed: 09:05:44	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - E-911
Associated Person Associated Person			
Saturday 06/16/2018	18-809563 4504 - EMS		
	3041 PETERS CORNERS RD	ALDEN TOWN	
Received: 09:37:11 Dispatched: 09:38:28 Arrived: 09:45:10 Completed: 10:29:43	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - PHONE
Associated Person		و المناور و المناور و المناور و المناور و المناور و المناور و المناور و المناور و المناور و المناور	
Associated Person:			
Saturday 06/16/2018	18-809592 4504 - EMS 632 COUNTY LINE RD ALDEI	N TOWN	
Received: 19:12:25 Dispatched: 19:12:26 Arrived: 19:21:48 Completed: 21:25:44 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	BALK JENNIFER - D87 BALK JENNIFER - D87 PHONE

Sunday 06/17/2018	18-809649 4504 - EMS 11631 PARKWOOD DR ALDEN	NWOT	
Received: 14:40:16 Dispatched: 14:41:59	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	Received By: Dispatched By:	
Arrived: 14:48:36	Officer 3:	Source:	E-911
Completed: 16:47:51	Officer 4:	Notified:	2-311
Associated Person:	Onice: 4.	110011001	
Monday 06/18/2018	18-809696 6005 - LVAC PRIV. 3040 WENDE RD ALDEN TOW		
	* *		PAWLIKOWSKI JEAN -
Received: 09:59:28	Officer 1: LVAC7 - 701	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 09:59:29	Officer 2:	Source:	RADIO
Arrived: 10:06:57	Officer 3:	Notified:	TOADIO
Completed: 11:56:54	Officer 4:	14041160.	
Associated Person:	10.000		
Tuesday 06/19/2018	18-809734 4504 - EMS 11114 ALAURA DR ALDEN TO		
Received: 00:00:02	Officer 1: TOWNLINE FIRE DEPT	Received By:	STEWART ANGELA -
Dispatched: 00:00:18	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 00:10:46	Officer 3:	Source:	E-911
Completed: 00:53:27	Officer 4:	Notified:	
Associated Person			
Tuesday 06/19/2018	18-809784 4504 - EMS 3040 WENDE RD ALDEN TOV	VN	_
Received: 18:15:07	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 18:16:07	Officer 2:	Dispatched By:	SCHAEFER TAMMIE -
Arrived: 18:24:30	Officer 3:	Source:	RADIO
Completed: 19:21:18	Officer 4:	Notified:	
Associated Person:			
Wednesday 06/20/2018	18-809866 4504 - EMS 1020 E BONNIE LAKE DR ALI	DEN TOWN	
Received: 23:35:36	Officer 1: TOWNLINE FIRE DEPT	Received By:	
Dispatched: 23:36:50	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 23:46:54	Officer 3:	Source:	PHONE
Completed: 00:25:56	Officer 4:	Notified:	
Associated Person:			
Friday 06/22/2018	18-809982 4902 - INJURY AC		
	3160 WENDE RD ALDEN TOV		
Received: 21:45:35			SCHAEFER TAMMIE -
Received: 21:45:35 Dispatched: 21:45:35	3160 WENDE RD ALDEN TOW Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701	Received By:	SCHAEFER TAMMIE - SCHAEFER TAMMIE -
	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 21:45;35	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701	Received By: Dispatched By:	SCHAEFER TAMMIE -
Dispatched: 21:45;35 Arrived: 21:46:16	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3:	Received By: Dispatched By: Source:	SCHAEFER TAMMIE - E-911
Dispatched: 21:45;35 Arrived: 21:46:16 Completed: 22:35:59	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - E-911 LIEUTENANT
Dispatched: 21:45;35 Arrived: 21:46:16 Completed: 22:35:59 Associated Person: Saturday 06/23/2018	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4: 18-810029 4504 - EMS WALDEN AV @ GENESEE S	Received By: Dispatched By: Source: Notified: T ALDEN TOWN	SCHAEFER TAMMIE - E-911 LIEUTENANT
Dispatched: 21:45:35 Arrived: 21:46:16 Completed: 22:35:59 Associated Person: Saturday 06/23/2018 Received: 16:38:06	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4: 18-810029 4504 - EMS WALDEN AV @ GENESEE S Officer 1: MILLGROVE FIRE	Received By: Dispatched By: Source: Notified: T ALDEN TOWN Received By:	SCHAEFER TAMMIE - E-911 LIEUTENANT ARMSTRONG
Dispatched: 21:45:35 Arrived: 21:46:16 Completed: 22:35:59 Associated Person: Saturday 06/23/2018 Received: 16:38:06 Dispatched: 16:38:08	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4: 18-810029 4504 - EMS WALDEN AV @ GENESEE S' Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701	Received By: Dispatched By: Source: Notified: T ALDEN TOWN Received By: Dispatched By:	SCHAEFER TAMMIE - E-911 LIEUTENANT ARMSTRONG ARMSTRONG
Dispatched: 21:45:35 Arrived: 21:46:16 Completed: 22:35:59 Associated Person: Saturday 06/23/2018 Received: 16:38:06	Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4: 18-810029 4504 - EMS WALDEN AV @ GENESEE S Officer 1: MILLGROVE FIRE	Received By: Dispatched By: Source: Notified: T ALDEN TOWN Received By:	SCHAEFER TAMMIE - E-911 LIEUTENANT ARMSTRONG

Sunday 06/24/2018	18-810062 4504 - EMS 3040 WENDE RD ALDEN TO	WN	
Received: 01:59:50	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 01:59:51	Officer 2:		SCHAEFER TAMMIE -
Arrived: 02:14:39	Officer 3:	Source:	RADIO
Completed: 02:52:28	Officer 4:	Notified:	
Associated Person:			<u> </u>
Sunday 06/24/2018	18-810072 6005 - LVAC PRIV 3040 WENDE RD ALDEN TO		
Received: 08:49:40	Officer 1: LVAC7 - 701	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 08:49:41	Officer 2:	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 08:56:46	Officer 3:	Source:	RADIO
Completed: 09:55:04	Officer 4:	Notified:	
Associated Person:			
Monday 06/25/2018	18-810122 4504 - EMS 11775 GENESEE ST ALDEN	TOWN	
Received: 12:11:40	Officer 1: MILLGROVE FIRE	Received By:	
Dispatched: 12:12:37	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 12:15:04	Officer 3:	Source:	E-911
Completed: 12:50:35	Officer 4:	Notified:	
Associated Person:			
Monday 06/25/2018	18-810143 4504 - EMS		
monuay vorzuzv 19	13301 GENESEE ST ALDEN	TOWN	
Received: 17:35:47	Officer 1: CRITTENDEN FIRE	Received By:	ARMSTRONG
Dispatched: 17:36:13	Officer 2:LVAC7 - 701	•	ARMSTRONG
Arrived: 17:39:53	Officer 3:	Source:	E-911
Completed: 19:06:18	Officer 4:	Notified:	
Associated Person:			
Associated Person			
Monday 06/25/2018	18-810163 6005 - LVAC PRI' 3040 WENDE RD ALDEN TO	-	
Received: 21:45:04	Officer 1:LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 21:45:14	Officer 2:		ARMSTRONG
Arrived: 21:52:12	Officer 3:	Source:	RADIO
Completed: 23:52:09	Officer 4:	Notified:	
Associated Person:	- 1		
Tuesday 06/26/2018	18-810245 6005 - LVAC PRI 3040 WENDE RD ALDEN TO		
Received: 23:39:15	Officer 1:LVAC7 - 701	- -	
Dispatched: 23:39;27	Officer 2:	Received By:	
Arrived: 00:51:42	Officer 3:	Dispatched By: Source:	
Completed: 00:51:42	Officer 4:	Source: Notified:	RADIO
Associated Person:	Onicer 4.	NOUTIBO:	
	40.040.000 4504 5145		_
Wednesday 06/27/2018	18-810260 4504 - EMS 3188 CRITTENDEN RD ALDE	EN TOWN	
Received: 06:18:20	Officer 1: CRITTENDEN FIRE	Received By:	
Dispatched: 06:19:00	Officer 2: LVAC7 - 701	Dispatched By:	!
Arrived: 06:30:17	Officer 3:	Source:	E- 9 11
Completed: 07:18:32	Officer 4:	Notified:	
Associated Person:			

18-810314 4508 - EMS ASSIST Thursday 06/28/2018 998 TWO ROD RD ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received By: PAWLIKOWSKI JEAN -Received: 07:07:20 Dispatched By: PAWLIKOWSKI JEAN -Officer 2:LVAC7 - 701 Dispatched: 07:07:21 Source: E-911 Officer 3: Arrived: 07:20:15 Notified: Completed: 07:30:50 Officer 4: Associated Person: Associated Person: 2 18-810349 4504 - EMS Thursday 06/28/2018 3041 PETERS CORNERS RD ALDEN TOWN Officer 1: CRITTENDEN FIRE Received By: Received: 17:22:18 Officer 2: LVAC7 - 701 Dispatched By: Dispatched: 17:22:26 Source: E-911 Arrived: 17:32:52 Officer 3: Completed: 18:07:16 Officer 4: Notified: Associated Person Associated Person: Saturday 06/30/2018 18-810462 4504 - EMS 11709 MANITOU DR ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Received: 09:51:57 Dispatched By: Dispatched: 09:53:06 Officer 2: LVAC7 - 701 Arrived: 10:04:18 Officer 3: Source: E-911 Officer 4: Notified: Completed: 11:58:27 Associated Person: (Associated Person: ` Saturday 06/30/2018 18-810506 4504 - EMS 3440 HOME RD ALDEN TOWN Received: 21:02:23 Officer 1: MILLGROVE FIRE Received By: ARMSTRONG Dispatched By: STEWART ANGELA -Dispatched: 21:03:44 Officer 2:LVAC7 - 701 Arrived: 21:09:06 Officer 3: Source: E-911 Completed: 21:49:03 Officer 4: Notified: Associated Person: **Associated Pers** Sunday 07/01/2018 18-810544 4504 - EMS 3577 POHL RD ALDEN TOWN Received: 08:43:23 Officer 1: MILLGROVE FIRE Received By: Dispatched: 08:43:26 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 08:49:56 Officer 3: Source: E-911 Completed: 09:34:57 Officer 4: Notified: Associated Person: Monday 07/02/2018 18-810645 4508 - EMS ASSIST 13369 HENSKEE RD ALDEN TOWN Received: 15:14:37 Officer 1: ALDEN FIRE DEPT - 9 Received By: ARMSTRONG Dispatched: 15:15:30 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 15:22:28 Officer 3: Source: E-911 Notified: Completed: 15:29:23 Officer 4: Associated Person: I Associated Person: Monday 07/02/2018 18-810653 4504 - EMS 445 BRIARWOOD CT ALDEN TOWN Received: 17:04:35 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched By: ARMSTRONG Dispatched: 17:05:24 Officer 2: LVAC7 - 701 Arrived: 17:13:41 Officer 3: Source: E-911 Notified: Completed: 18:05:44 Officer 4:

Associated Person Monday 07/02/2018 18-810667 4504 - EMS 474 CREEKSIDE DR ALDEN TOWN Officer 1: TOWNLINE FIRE DEPT Received: 20:52:38 Received By: Dispatched By: ARMSTRONG Officer 2: LVAC7 - 701 Dispatched: 20:56:08 Source: PHONE Arrived: 21:09:38 Officer 3: Notified: Completed: 21:42:09 Officer 4: Associated Person: Wednesday 07/04/2018 18-810788 4504 - EMS 11072 JANE DR ALDEN TOWN Received: 12:01:21 Officer 1: TOWNLINE FIRE DEPT Received By: PAWLIKOWSKI JEAN -Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 12:02:49 Officer 2: LVAC7 - 701 Source: OTHER POLICE Arrived: 12:07:07 Officer 3: Notified: Completed: 12:53:37 Officer 4: Associated Person: 18-811018 6005 · LVAC PRIVATE Saturday 07/07/2018 3040 WENDE RD ALDEN TOWN Officer 1:LVAC7 - 701 Received By: Received: 07:57:16 Dispatched: 07:57:22 Officer 2: Dispatched By: Source: **RADIO** Officer 3: Arrived: 08:11:38 Notified: Officer 4: Completed: 09:07:37 Associated Person: (Saturday 07/07/2018 18-811028 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 11:13:37 Officer 1: LVAC7 - 701 Received By: SCHAEFER TAMMIE -Dispatched By: SCHAEFER TAMMIE -Dispatched: 11:13:38 Officer 2: Source: Arrived: 11:22:29 Officer 3: RADIO Completed: 12:35:17 Officer 4: Notified: Associated Person: Sunday 07/08/2018 18-811117 4504 - EMS 2506 CRITTENDEN RD ALDEN TOWN Received: 13:16:49 Officer 1: CRITTENDEN FIRE Received By: PAWLIKOWSKI JEAN -Dispatched: 13:16:50 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 13:21:49 Officer 3: ALDEN FIRE DEPT - 9 Source: E-911 Completed: 14:31:09 Officer 4: Notified: Associated Person: Sunday 07/08/2018 18-811118 4504 - EMS 11771 CARY RD ALDEN TOWN Received: 13:40:22 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 13:40:23 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 13:50:45 Officer 3: Source: E-911 Notified: Completed: 14:32:32 Officer 4: Associated Person: Associated Person: Sunday 07/08/2018 18-811139 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 21:51:35 Officer 1:LVAC7 - 701 Received By: **SCHAEFER TAMMIE -**Dispatched: 21:52:32 Officer 2: Dispatched By: SCHAEFER TAMMIE -Arrived: 21:59:21 Officer 3: Source: **RADIO** Completed: 22:51:22 Officer 4: Notified:

Associated Person:

Monday 07/09/2018 18-811161 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 08:26:24 Officer 1:LVAC7 - 701 **SCHAEFER TAMMIE -**Received By: Dispatched: 08:26:25 Officer 2: Dispatched By: SCHAEFER TAMMIE -Arrived: 08:36:12 Officer 3: Source: **RADIO** Completed: 09:33:42 Officer 4: Notified: Associated Person: 8-811236 6005 - LVAC PRIVATE Tuesday 07/10/2018 3040 WENDE RD ALDEN TOWN Received: 11:17:03 Officer 1:LVAC7 - 701 **ARMSTRONG** Received By: Dispatched: 11:17:03 Officer 2: Dispatched By: ARMSTRONG Arrived: 11:27:53 Officer 3: Source: **RADIO** Completed: 12:33:38 Officer 4: Notified: Associated Person: Tuesday 07/10/2018 18-811242 6005 - LVAC PRIVATE 3040 WENDERD ALDEN TOWN Received: 12:20:14 Officer 1:LVAC7 - 701 Received By: PAWLIKOWSKI JEAN -Dispatched: 12:20:15 Officer 2: Dispatched By: PAWLIKOWSKI JEAN -Arrived: 12:33:58 Officer 3: Source: RADIO Notified: Completed: 13:31:57 Officer 4: Associated Person: 18-811273 6005 - LVAC PRIVATE Tuesday 07/10/2018 3040 WENDERD ALDEN TOWN Officer 1:LVAC7 - 701 Received: 22:23:16 Received By: Dispatched By: Dispatched: 22:23:33 Officer 2: Officer 3: Source: **RADIO** Arrived: 22:34:49 Completed: 23:17:46 Officer 4: Notified: Associated Person: (18-811301 4504 - EMS Wednesday 07/11/2018 3040 WENDE RD ALDEN TOWN Received: 10:34:19 Officer 1: LVAC7 - 701 Received By: ARMSTRONG Officer 2: MILLGROVE FIRE Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 10:34:32 Arrived: 10:43:58 Officer 3: Source: E-911 Notified: Completed: 11:42:18 Officer 4: Associated Person: Wednesday 07/11/2018 18-811304 4504 - EMS 3040 WENDE RD ALDEN TOWN Received: 10:46:42 Officer 1: MILLGROVE FIRE Received By: PAWLIKOWSKI JEAN -Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 10:46:42 Officer 2:LVAC7 - 701 Source: Arrived: Officer 3: E-911 10:51:55 Notified: Completed: 12:18:29 Officer 4: Associated Person: Wednesday 07/11/2018 18-811305 6005 - LVAC PRIVATE 3046 WENDE RD ALDEN TOWN Received: 11:16:50 Officer 1:LVAC7 - 701 Received By: ARMSTRONG Dispatched: 11:16:51 Dispatched By: PAWLIKOWSKI JEAN -Officer 2: Source: Arrived: 11:26:55 Officer 3: **RADIO** Notified: Officer 4: Completed: 12:40:03

Associated Person:

Thursday 07/12/2018	18-811363 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 10:14:45	Officer 1:LVAC7 - 701	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 10:14:47	Officer 2:		PAWLIKOWSKI JEAN -
Arrived: 10:28:50	Officer 3:	Source:	RADIO
Completed: 11:42:06	Officer 4:	Notified:	
Associated Person:			
Thursday 07/12/2018	18-811370 4504 • EMS 13294 GENESEE ST ALDEN	1 TOWN	
Received: 11:29:44	Officer 1: CRITTENDEN FIRE	Received By:	
Dispatched: 11:32:10	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 11:39:29	Officer 3:	Source:	PHONE
Completed: 11:52:55	Officer 4:	Notified:	
Associated Person:		<u></u>	
Associated Person			
Thursday 07/12/2018	18-811400 4504 - EMS 12638 GENESEE ST ALDEN	TOWN	<u></u>
Received: 19:34:02	Officer 1: CRITTENDEN FIRE	Received By:	
Dispatched: 19:36:01	Officer 2: LVAC7 - 701	Dispatched By:	ARMSTRONG
Arrived: 19:43:03	Officer 3:	Source:	E-911
Completed: 20:23:13	Officer 4:	Notified:	
Associated Person:			
Friday 07/13/2018	18-811434 6005 - LVAC PR 3040 WENDE RD ALDEN TO	—	· · · · · · · · · · · · · · · · · · ·
Received: 09:12:47	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 09:12:47	Officer 2:	Dispatched By:	
Arrived: 09:24:16	Officer 3:	Source:	RADIO
Completed: 10:36:29	Officer 4:	Notified:	
Associated Person:			
Friday 07/13/2018	18-811451 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 15:10:36	Officer 1:LVAC7 - 701	Received By:	STEWART ANGELA -
Dispatched: 15:10:36	Officer 2:		STEWART ANGELA -
		p=,.	
Arrived: 15:20:50	Officer 3:	Source:	RADIO
Arrived: 15:20:50 Completed: 16:36:12	Officer 3: Officer 4:		RADIO
		Source:	RADIO
Completed: 16:36:12		Source: Notified:	RADIO
Completed: 16:36:12 Associated Person:	Officer 4: 18-811476 4504 - EMS	Source: Notified:	STEWART ANGELA -
Completed: 16:36:12 Associated Person: Saturday 07/14/2018	Officer 4: 18-811476 4504 - EMS 12113 WALDEN AV ALDEN	Source: Notified: TOWN Received By:	
Completed: 16:36:12 Associated Person: Saturday 07/14/2018 Received: 01:29:30	Officer 4: 18-811476 4504 - EMS 12113 WALDEN AV ALDEN Officer 1: MILLGROVE FIRE	Source: Notified: TOWN Received By: Dispatched By: Source:	STEWART ANGELA -
Completed: 16:36:12 Associated Person: Saturday 07/14/2018 Received: 01:29:30 Dispatched: 01:29:30	Officer 4: 18-811476 4504 - EMS 12113 WALDEN AV ALDEN Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701	Source: Notified: TOWN Received By: Dispatched By:	STEWART ANGELA - STEWART ANGELA -
Completed: 16:36:12 Associated Person: Saturday 07/14/2018 Received: 01:29:30 Dispatched: 01:29:30 Arrived: 01:36:16	Officer 4: 18-811476 4504 - EMS 12113 WALDEN AV ALDEN Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3:	Source: Notified: TOWN Received By: Dispatched By: Source:	STEWART ANGELA - STEWART ANGELA -
Completed: 16:36:12 Associated Person: Saturday 07/14/2018 Received: 01:29:30 Dispatched: 01:29:30 Arrived: 01:36:16 Completed: 01:52:10	Officer 4: 18-811476 4504 - EMS 12113 WALDEN AV ALDEN Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3:	Source: Notified: TOWN Received By: Dispatched By: Source: Notified:	STEWART ANGELA - STEWART ANGELA -
Completed: 16:36:12 Associated Person: Saturday 07/14/2018 Received: 01:29:30 Dispatched: 01:29:30 Arrived: 01:36:16 Completed: 01:52:10 Associated Person:	Officer 4: 18-811476 4504 - EMS 12113 WALDEN AV ALDEN Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Source: Notified: TOWN Received By: Dispatched By: Source: Notified:	STEWART ANGELA - STEWART ANGELA -
Completed: 16:36:12 Associated Person: Saturday 07/14/2018 Received: 01:29:30 Dispatched: 01:29:30 Arrived: 01:36:16 Completed: 01:52:10 Associated Person: Saturday 07/14/2018	Officer 4: 18-811476 4504 - EMS 12113 WALDEN AV ALDEN Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4: 18-811485 4504 - EMS 11513 S BONNIE LAKE DR	Source: Notified: TOWN Received By: Dispatched By: Source: Notified: ALDEN TOWN T Received By:	STEWART ANGELA - STEWART ANGELA - OTHER POLICE
Completed: 16:36:12 Associated Person: Saturday 07/14/2018 Received: 01:29:30 Dispatched: 01:29:30 Arrived: 01:36:16 Completed: 01:52:10 Associated Person: Saturday 07/14/2018 Received: 04:05:28	Officer 4: 18-811476 4504 - EMS 12113 WALDEN AV ALDEN Officer 1: MILLGROVE FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4: 18-811485 4504 - EMS 11513 S BONNIE LAKE DR Officer 1: TOWNLINE FIRE DEP	Source: Notified: TOWN Received By: Dispatched By: Source: Notified: ALDEN TOWN T Received By:	STEWART ANGELA - STEWART ANGELA - OTHER POLICE STEWART ANGELA -

Saturday 07/14/2018 18-811496 4504 - EMS 11732 WESTWOOD RD ALDEN TOWN **SCHAEFER TAMMIE -**Received: 11:13:30 Officer 1:LVAC7 - 701 Received By: Dispatched: 11:13:30 Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: SCHAEFER TAMMIE -Arrived: Officer 3: Source: 11:22:37 E-911 Notified: Completed: 12:04:38 Officer 4: Associated Person: Saturday 07/14/2018 18-811521 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Officer 1:LVAC7 - 701 Received: 17:30:41 Received By: STEWART ANGELA -Officer 2: Dispatched By: STEWART ANGELA -Dispatched: 17:30:50 Officer 3: Source: **RADIO** Arrived: 17:37:54 Notified: Completed: 18:41:54 Officer 4: Associated Person: Saturday 07/14/2018 18-811525 4504 - EMS 11735 GENESEE ST ALDEN TOWN Received: 19:05:27 Officer 1: MILLGROVE FIRE Received By: PAWLIKOWSKI JEAN -Dispatched: 19:05:27 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Officer 3: Source: E-911 Arrived: 19:13:48 Completed: 20:25:26 Officer 4: Notified: Associated Person: Associated Person! Monday 07/16/2018 18-811608 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 02:40:37 Officer 1:LVAC7 - 701 Received By: Dispatched: 02:40:55 Officer 2: Dispatched By: Arrived: 02:50:25 Officer 3: Source: **RADIO** Notified: Completed: 03:50:10 Officer 4: Associated Person: Monday 07/16/2018 18-811637 4504 - EMS 2110 SANDRIDGE RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 17:38:34 Received By: Dispatched: 17:39:45 Officer 2:LVAC7 - 701 Dispatched By: Source: PHONE Arrived: 17:40:48 Officer 3: Completed: 20:06:10 Officer 4: Notified: LIEUTENANT Associated Person Tuesday 07/17/2018 18-811658 4504 - EMS 13369 HENSKEE RD ALDEN TOWN Received: 03:32:44 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 03:34:37 Officer 2:LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 03:46:23 Officer 3: Source: PHONE Completed: 03:49:01 Notified: Officer 4: Associated Person: Associated Person: (Tuesday 07/17/2018 18-811672 4504 - EMS 11133 WESTWOOD RD ALDEN TOWN Received: 10:32:56 Officer 1: TOWNLINE FIRE DEPT Received By: PAWLIKOWSKI JEAN -Dispatched: 10:33:34 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 10:42:26 Source: Officer 3: E-911 Notified: Completed: 11:19:55 Officer 4: Associated Person: Associated Person: (

Tuesday 07/17/2018 18-811675 4504 - EMS 13940 HENSKEE RD ALDEN TOWN Officer 1: ALDEN FIRE DEPT - 9 Received: 11:14:00 Received By: FIRESTONE JANE -Dispatched: 11:14:30 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 11:24:22 Officer 3: Source: E-911 Completed: 12:31:23 Officer 4: Notified: Associated Person: 18-811680 6005 - LVAC PRIVATE Tuesday 07/17/2018 3040 WENDE RD ALDEN TOWN Received: 14:12:45 Officer 1:LVAC7 - 701 Received By: FIRESTONE JANE -Dispatched: 14:12:46 Officer 2: Dispatched By: FIRESTONE JANE -Arrived: Officer 3: Source: 15:19:17 RADIO Notified: Completed: 15:21:00 Officer 4: Associated Person: Wednesday 07/18/2018 18-811747 4504 - EMS 1328 VILLAGE PARK DR ALDEN TOWN Received: 14:51:17 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 14:51:17 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Officer 3: Source: Arrived: 15:05:33 E-911 Completed: 16:09:40 Officer 4: Notified: Associated Person: Thursday 07/19/2018 18-811795 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Officer 1:LVAC7 - 701 Received: 08:17:46 Received By: PAWLIKOWSKI JEAN -Officer 2: Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 08:17:47 Arrived: 08:25:56 Officer 3: Source: RADIO Completed: 09:30:51 Officer 4: Notified: Associated Person: Thursday 07/19/2018 18-811799 6005 - LVAC PRIVATE 3040 WENDE RD ALDEN TOWN Received: 10:33:16 Officer 1:LVAC7 - 701 FIRESTONE JANE -Received By: Dispatched: 10:33:17 Officer 2: Dispatched By: FIRESTONE JANE -Officer 3: Source: Arrived: **RADIO** 10:47:05 Completed: 12:23:00 Officer 4: Notified: Associated Person: Thursday 07/19/2018 18-811812 4504 - EMS RUNDEL RD @ PETERS CORNERS RD ALDEN TOWN Received: 16:29:33 Officer 1: CRITTENDEN FIRE Received By: Dispatched: 16:30:51 Officer 2: LVAC7 - 701 Dispatched By: Arrived: Officer 3: Source: PHONE 16:44:13 Completed: 17:34:48 Officer 4: Notified: Associated Person: I Friday 07/20/2018 18-811876 4902 - INJURY ACCIDENT BROADWAY @ TWO ROD RD ALDEN TOWN Received: 16:25:53 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 16:26:17 Officer 2: LVAC7 - 701 Dispatched By: Source: Arrived: 16:32:44 Officer 3: E-911 Notified: Completed: 18:04:21 Officer 4:

Associated Person

Saturday 07/21/2018	18-811949 6005 - LVAC PR 3040 WENDE RD ALDEN TO		
Received: 15:11:49 Dispatched: 15:11:50 Arrived: 15:19:13 Completed: 16:12:20 Associated Person:	Officer 1:LVAC7 - 701 Officer 2: Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - PAWLIKOWSKI JEAN - RADIO
Saturday 07/21/2018	18-811957 4504 - EMS 13348 GENESEE ST ALDEN	I TOWN	-
Received: 19:01:54 Dispatched: 19:03:21 Arrived: 19:07:11 Completed: 19:48:24 Associated Person	Officer 1: CRITTENDEN FIRE Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - E-911

Total Complaints:820

LANCASTER POLICE DEPARTMENT

COMPLAINT SUMMARY REPORT LVAC / ALDEN VILLAGE



Report Date: 7/22/2018

Vednesday 08/03/2016	16-613108 4504 - EMS		
	13118 W MAIN ST ALDEN VIL	L	
Received: 18:39:58	Officer 1:ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 18:40:03	Officer 2:LVAC7 - 701	Dispatched By:	ARMSTRONG
Arrived: 18:40:50	Officer 3:	Source:	E-911
Completed: 19:02:52	Officer 4:	Notified:	
Associated Person			
Associated Person			
Thursday 08/04/2016	16-613145 4504 - EMS 13137 BROADWAY 4 ALDEN	VILL	
Received: 08:38:45	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 08:39:00	Officer 2:LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 08:40:00	Officer 3:	Source:	E-911
Completed: 09:15:00	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Thursday 08/04/2016	16-613147 4504 - EMS 13216 BROADWAY ALDEN V	/ill	
Received: 09:16:45	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 09:16:45	Officer 2:LVAC7 - 701	•	COHAN SHARON - D85
Arrived: 09:19:48	Officer 3:	Source:	E-911
Completed: 09:53:00	Officer 4:	Notified:	
Associated Person:			
Thursday 08/04/2016	16-613170 4504 - EMS 13409 IRVING ST ALDEN VIL		
Received: 15:51:30	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 15:51:31	Officer 2: LVAC7 - 701	Dispatched By:	ARMSTRONG
Arrived: 15:56:23	Officer 3:	Source:	E-911
Completed: 17:55:51	Officer 4:	Notified:	
Associated Person:			
Saturday 08/06/2016	16-613295 4504 - EMS 1455 EAST DR ALDEN VILL		
Received: 19:00:56	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 19:01:11	Officer 2: LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 19:08:11	Officer 3:	Source:	OTHER POLICE
Completed: 19:27:56	Officer 4:	Notified:	
Associated Person:			
Sunday 08/07/2016	16-613323 4504 - EMS 1959 CRITTENDEN RD ALDE	 :N VILL	
Received: 06:59:23	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 06:59:24	Officer 2:LVAC7 - 701		COHAN SHARON - D85
Arrived: 07:08:54	Officer 3:	Source:	E-911
Completed: 09:08:53	Officer 4:	Notified:	
Associated Person:		:	Ĭ
Sunday 08/07/2016 Received: 06:59:23 Dispatched: 06:59:24 Arrived: 07:08:54 Completed: 09:08:53	1959 CRITTENDEN RD ALDE Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Received By: Dispatched By: Source: Notified:	COHAN SHARON - D8

Sunday 08/07/2016	16-613350 4504 - EMS 1805 ARLINGTON DR ALDEN	 VILL	
Received: 18:46:05 Dispatched: 18:46:10 Arrived: 18:50:00 Completed: 18:55:39	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - PHONE
Associated Person:			
Wednesday 08/10/2016	16-613490 4504 - EMS 12845 BROADWAY 5 ALDEN \		
Received: 09:12:48 Dispatched: 09:12:49 Arrived: 09:21:46 Completed: 09:26:34 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - COHAN SHARON - D85 E-911
Sunday 08/14/2016	16-613744 4504 - EMS 13409 IRVING ST ALDEN VILL		
Received: 04:18:10 Dispatched: 04:19:33 Arrived: 04:30:38 Completed: 04:37:58 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PHONE
Sunday 08/14/2016	16-613752 4504 - EMS 13409 IRVING ST ALDEN VILL		
Received: 06:26:10 Dispatched: 06:27:27 Arrived: 06:34:33 Completed: 07:50:48 Associated Person	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PHONE
Monday 08/15/2016	16-613808 4504 - EMS 13336 BROADWAY ALDEN VI	LL	
Received: 02:30:45 Dispatched: 02:30:46 Arrived: 02:38:25 Completed: 02:59:52 Associated Person	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	STEWART ANGELA - STEWART ANGELA - OTHER POLICE
Tuesday 08/16/2016	16-613920 4504 - EMS 13155 PARK ST 4 ALDEN VILL		
Received: 18:42:26 Dispatched: 18:42:30 Arrived: 18:51:02 Completed: 19:06:31	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	ARMSTRONG ARMSTRONG E-911
Associated Person:			
Associated Person:			-
Tuesday 08/16/2016	16-613935 4504 - EMS 13395 IRVING ST ALDEN VILL		
Received: 21:55:05 Dispatched: 21:55:07 Arrived: 22:00:59 Completed: 00:19:40 Associated Person:	Officer 1:ALDEN FIRE DEPT - 9 Officer 2:LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	ARMSTRONG ARMSTRONG E-911
Associated Person:			

Wednesday 08/17/2016 16-613945 4504 - EMS 13155 PARK ST 4 ALDEN VILL Received: 00:31:25 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 00:32:56 Officer 2:LVAC7 - 701 Dispatched By: 00:42:07 Arrived: Officer 3: Source: E-911 Completed: 01:28:16 Officer 4: Notified: Associated Person: Friday 08/19/2016 16-614074 4504 - EMS 1586 EMERSON ST ALDEN VILL Received: 08:05:42 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 08:07:16 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 Arrived: 08:14:27 Officer 3: Source: E-911 Officer 4: Notified: Completed: 10:51:49 Associated Person: Sunday 08/21/2016 16-614194 4504 - EMS 1535 WESTCOTT AV LEFT ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 01:36:58 Received By: Dispatched: 01:37:22 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 01:46:56 Officer 3: Source: PHONE Notified: Completed: 03:41:57 Officer 4: Associated Person: Monday 08/22/2016 16-614255 4504 - EMS 1475 ELM ST ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 FIRESTONE JANE -Received: 10:11:38 Received By: Dispatched: 10:11:39 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Source: PHONE Arrived: 10:28:27 Officer 3: Completed: 10:41:00 Officer 4: Notified: Associated Person: Friday 08/26/2016 16-614537 4504 - EMS 1777 CRITTENDEN RD ALDEN VILL Received: 18:54:27 Officer 1: ALDEN FIRE DEPT - 9 Received By: **BALK JENNIFER - D87** Dispatched: 18:55:23 Officer 2:LVAC7 - 701 Dispatched By: ARMSTRONG Source: Arrived: 19:01:01 Officer 3: E-911 Notified: Completed: 19:54:59 Officer 4: Associated Person: Friday 08/26/2016 16-614546 4599 - MUTUAL AID 13336 BROADWAY ALDEN VILL Received: 21:41:02 Officer 1:LVAC7 - 701 Received By: **ARMSTRONG** Dispatched: 21:44:02 Officer 2: Dispatched By: ARMSTRONG Source: PHONE Arrived: 21:54:32 Officer 3: Notified: Completed: 23:49:26 Officer 4: Associated Person: Sunday 08/28/2016 16-614629 4504 - EMS 1525 RUSHER DR 10 ALDEN VILL Received: 02:16:02 Officer 1: ALDEN FIRE DEPT - 9 Received By: STEWART ANGELA -Dispatched: 02:16:07 Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 02:26:05 Officer 3: Source: E-911 Notified: Completed: 03:17:08 Officer 4: Associated Person: Associated Person: 0

Tuesday 08/30/2016	16-614783 4504 - EMS 13166 W MAIN ST ALDEN VII			_
Received: 14:19:19	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85	
Dispatched: 14:19:19	Officer 2: LVAC7 - 701	Dispatched By:	COHAN SHARON - D85	
Arrived: 14:22:56	Officer 3:	Source:	PHONE	
Completed: 14:42:33	Officer 4:	Notified:		
Associated Person			_ _	
Tuesday 08/30/2016	16-614786 4504 - EMS 1371 EXCHANGE ST FRONT	ALDEN VILL		
Received: 14:54:37	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85	
Dispatched: 14:54:39	Officer 2:LVAC7 - 701		COHAN SHARON - D85	
Arrived: 14:56:00	Officer 3:	Source:	PHONE	
Completed: 15:13:00	Officer 4:	Notified:		
Associated Person:		<u>.</u>		
Tuesday 08/30/2016	16-614808 4504 - EMS 1444 CHESTNUT ST ALDEN	VILL	_	
Received: 20:19:08	Officer 1:ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -	
Dispatched: 20:19:10	Officer 2: LVAC7 - 701		SCHAEFER TAMMIE -	
Arrived: 20:23:06	Officer 3:	Source:	E-911	
Completed: 21:16:14	Officer 4:	Notified:		
Associated Person:				
Wednesday 08/31/2016	16-614879 4504 - EMS 1604 MEADOW DR ALDEN V	IL L		
Received: 20:35:41	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -	
Dispatched: 20:35:41	Officer 2: ALDEN FIRE DEPT - 9		SCHAEFER TAMMIE -	
Arrived: 20:42:00	Officer 3:	Source:	E-911	
Completed: 21:15:48	Officer 4:	Notified:		
Associated Person:				
Wednesday 08/31/2016	16-614880 4504 - EMS 13336 BROADWAY ALDEN \			
Received: 21:26:00	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -	
Dispatched: 21:26:01	Officer 2; LVAC7 - 701	•	SCHAEFER TAMMIE -	
Arrived: 21:26:10	Officer 3:	Source:	PHONE	
Completed: 23:19:37	Officer 4:	Notified:		
Associated Person:				
Thursday 09/01/2016	16-614901 4504 - EMS 13148 W MAIN ST 4 ALDEN V			
Received: 12:18:35	Officer 1:ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85	
Dispatched: 12:18:37	Officer 2:LVAC7 - 701	•	PAWLIKOWSKI JEAN -	
Arrived: 12:25:14	Officer 3:	Source:	E-911	
Completed: 13:15:21	Officer 4:	Notified:		
Associated Person:				
Thursday 09/01/2016	16-614908 4504 - EMS 1377 EXCHANGE ST ALDEN			
Received: 15:10:21	Officer 1; ALDEN FIRE DEPT - 9	•		
Dispatched: 15:10:25	Officer 2: LVAC7 - 701	Dispatched By:		
Arrived: 15:17:48	Officer 3:	Source:	E-911	
Completed: 17:07:50	Officer 4:	Notified:		
Associated Person:				

Friday 09/02/2016	16-614977 4504 - EMS 1569 HOMECOURT ALDEN V	/ILL	
Received: 15:38:33	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 15:47:00	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 15:56;01	Officer 3:	Source:	PHONE
Completed: 17:03:03	Officer 4:	Notified:	
Associated Person:		1	
Associated Person:			
Saturday 09/03/2016	16-615024 4504 - EMS 1525 RUSHER DR 24 ALDEN \		
Received: 12:09:29	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 12:10:58	Officer 2: LVAC7 • 701	Dispatched By:	COHAN SHARON - D85
Arrived: 12:18:43	Officer 3:	Source:	E-911
Completed: 13:20:54	Officer 4:	Notified:	
Associated Person:			
Sunday 09/04/201 6	16-615079 4504 - EMS 1390 EAST DR ALDEN VILL		
Received: 07:46:36	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 07:46:37	Officer 2: LVAC7 - 701	•	FIRESTONE JANE -
Arrived: 07:57:18	Officer 3:	Source:	E-911
Completed: 09:55:50	Officer 4:	Notified:	
Associated Person:			
Tuesday 09/06/2016	16-615221 4504 - EMS 1464 EAST DR ALDEN VILL		
Received: 15:02:04	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 15:02:10	Officer 2: LVAC7 - 701	•	SCHAEFER TAMMIE -
Arrived: 15:12:58	Officer 3:	Source:	E-911
Completed: 16:05:11	Officer 4:	Notified:	
Associated Person:			
Thursday 09/08/2016	16-615322 4504 - EMS 1599 EMERSON ST ALDEN V		
Received: 01:41:04	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 01:41:04	Officer 2: LVAC7 - 701	Dispatched By:	STEWART ANGELA -
Arrived: 01:52:39	Officer 3:	Source:	E-911
Completed: 02:47:25	Officer 4:	Notified:	
Associated Person:			
Thursday 09/08/2016	16-615369 4504 - EMS 12845 BROADWAY ALDEN V	/ILL	
Received: 15:22:39	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 15:23:12	Officer 2: LVAC7 - 701	Dispatched By:	ARMSTRONG
Arrived: 15:35:39	Officer 3:	Source:	E-911
Completed; 16:41:53	Officer 4:	Notified:	
Associated Person:			
Associated Person			
Friday 09/09/2016	16-615413 4504 - EMS 1443 ELM ST ALDEN VILL		
Received: 10:02:07	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 10:02:18	Officer 2: LVAC7 - 701	▼	FIRESTONE JANE -
Arrived: 10:07:04	Officer 3:	Source:	E-911
Completed: 10:21:43	Officer 4:	Notified:	
Associated Person:			

Friday 09/09/2016	16-615414 4504 - EMS 1390 EAST DR ALDEN VILL		
Received: 10:09:38	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 10:09:39	Officer 2: LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 10:15:09	Officer 3:	Source:	E-911
Completed: 10:22:15	Officer 4:	Notified:	
Associated Person:			
Monday 09/12/2016	16-615636 4504 - EMS 1386 DUCHESS LA ALDEN VII	_L	
Received: 20:17:24	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 20:17:24	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	SCHAEFER TAMMIE -
Arrived: 20:24:19	Officer 3:	Source:	E-911
Completed: 22:40:21	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Friday 09/16/2016	16-615825 4504 - EMS 1562 EMERSON ST ALDEN VI	LL	, , , , , , , , , , , , , , , , , , ,
Received: 00:17:27	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 00:18:37	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 00:22:50	Officer 3:	Source:	OTHER POLICE
Completed: 02:04:43	Officer 4:	Notified:	
Associated Person			
Sunday 09/18/2016	16-615990 4504 - EMS 13159 PARK ST 2 ALDEN VILL		
Received: 23:46:57	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 23:47:58	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 23:57:22	Officer 3:	Source:	PHONE
Completed: 00:54:00	Officer 4:	Notified:	
Associated Person:			
Monday 09/19/2016	16-615992 4504 - EMS 1454 SEABROOK DR ALDEN	VILL	
Received: 00:57:57	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 00:58:44	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 01:03:39	Officer 3:	Source:	E-911
Completed: 02:51:26	Officer 4:	Notified:	
Associated Person:			<u> </u>
Tuesday 09/20/2016	16-616062 4504 - EMS 1599 CRITTENDEN RD REAR	ALDEN VILL	
Received: 10:01:10	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 10:02:43	Officer 2:LVAC7 - 701	, -	PAWLIKOWSKI JEAN -
Arrived: 10:07:36	Officer 3:	Source:	E-911
Completed: 11:23:11	Officer 4:	Notified:	
Associated Person			
Wednesday 09/21/2016	16-616172 4504 - EMS 13178 BROADWAY ALDEN V		_
Received: 23:38:43	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 23:38:46	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 23:49:16	Officer 3:	Source:	E-911
Completed: 00:29:44	Officer 4:	Notified:	
Associated Person:			

Thursday 09/22/2016	16-616212 4504 + EMS 13137 BROADWAY ALDEN \		
Received: 16:15:38 Dispatched: 16:15:57 Arrived: 16:33:43 Completed: 18:42:18	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - E-911
Associated Person:			
Saturday 09/24/2016	16-616352 4504 - EMS 1475 MECHANIC ST ALDEN	VILL	
Received: 14:17:23	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 14:17:56	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 14:24:20	Officer 3:	Source:	E-911
Completed: 16:06:34	Officer 4:	Notified:	
Associated Person			
Monday 09/26/2016	16-616452 4504 - EMS 1343 CHESTNUT ST ALDEN	VILL	
Received: 13:17:33	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 13:17:54	Officer 2: LVAC7 - 701	, .	FIRESTONE JANE -
Arrived: 13:36:00	Officer 3:	Source:	E-911
Completed: 15:03:38	Officer 4:	Notified:	LIEUTENANT
Associated Person:			·
Tuesday 09/27/2016	16-616494 4504 - EMS 1534 RUSHER DR 8C ALDEN	VILL	
Received: 12:23:18	Officer 1: ALDEN FIRE DEPT -9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 12:23:34	Officer 2: LVAC7 - 701	•	FIRESTONE JANE -
Arrived: 12:32:32	Officer 3:	Source:	E-911
Completed: 13:26:20	Officer 4:	Notified:	
Associated Person:		المنازين المستعدم	
Associated Person: (
Wednesday 09/28/2016	16-616540 4504 - EMS 1622 MEADOW DR ALDEN V	/ILL	
Received: 08:21:27	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 08:23:05	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 08:35:40	Officer 3:	Source:	E-911
Completed: 09:20:11	Officer 4:	Notified:	
Associated Person			
Sunday 10/02/2016	16-616784 4504 - EMS 1525 RUSHER DR 26 ALDEN		
Received: 22:07:39	Officer 1: ALDEN FIRE DEPT - 9	-	
Dispatched: 22:08:08	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 22:14:08	Officer 3:	Source:	PHONE
Completed: 22:31:59	Officer 4:	Notified:	
Associated Person:			
Tuesday 10/04/2016	16-616859 4504 - EMS 1175 SULLIVAN RD ALDEN	VILL	
Received: 11:46:52	Officer 1: ALDEN FIRE DEPT - 9	•	COHAN SHARON - D85
Dispatched: 11:46:53	Officer 2:LVAC7 - 701		: COHAN SHARON - D85
Arrived: 12:02:11	Officer 3:	Source:	E-911
Completed: 14:05:51	Officer 4:	Notified:	
Associated Person: Page			

Wednesday 10/05/2016	16-616941 4504 - EMS 1229 EXCHANGE ST ALDEN		· · · · · · · · · · · · · · · · · · ·
Received: 16:06:53 Dispatched: 16:06:54 Arrived: 16:12:17 Completed: 17:01:00 Associated Person	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	COHAN SHARON - D85 BALK JENNIFER - D87 E-911
Thursday 10/06/2016	16-616982 4504 - EMS 12865 W MAIN ST ALDEN VI	 LL	
Received: 09:34:40 Dispatched: 09:35:24 Arrived: 09:42:41 Completed: 12:38:48 Associated Person	Officer 1:ALDEN FIRE DEPT - 9 Officer 2:LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - E-911
Associated Person			
Thursday 10/06/2016	16-617003 4504 - EMS 1525 RUSHER DR 24 ALDEN	VILL	
Received: 15:23:52 Dispatched: 15:25:10 Arrived: 15:34:44 Completed: 16:31:25	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:		E-911
Associated Person			
Friday 10/07/2016	16-617078 4504 - EMS 12845 BROADWAY ALDEN	VILL	
Received: 14:11:59 Dispatched: 14:11:59 Arrived: 14:17:07 Completed: 15:16:25	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	•	FIRESTONE JANE - FIRESTONE JANE - E-911
Associated Person:			<u></u>
Saturday 10/08/2016	16-617124 4504 - EMS 13070 BROADWAY 5 ALDER	N VILL	
Received: 10:21:35 Dispatched: 10:21:35 Arrived: 10:27:25 Completed: 12:24:46 Associated Person	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:		BALK JENNIFER - D87 FIRESTONE JANE - E-911
Sunday 10/09/2016	16-617174 4414 - FIRE CO- 13260 MT VERNON DR ALD		
Received: 02:57:59 Dispatched: 02:59:13 Arrived: 03:09:18 Completed: 03:35:31 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:		PHONE
Wednesday 10/12/2016	16-617360 4504 - EMS 12845 BROADWAY ALDEN	VILL	
Received: 14:45:24 Dispatched: 14:45:24 Arrived: 14:49:22 Completed: 15:55:52	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	•	PAWLIKOWSKI JEAN - PAWLIKOWSKI JEAN - E-911
Associated Person: (Associated Person:	سمان <u>ت مور</u> يسا به ۱۹۵۵ - سند ام از ادامينه ماندي اليان اليان اليان اليان اليان اليان اليان اليان اليان اليان ال		

Thursday 10/13/2016	16-617442 4504 - EMS 1084 EXCHANGE ST ALDEN \	/ILL	
Received: 23:12:14 Dispatched: 23:13:59 Arrived: 23:22:24 Completed: 01:50:58	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	STEWART ANGELA - STEWART ANGELA - PHONE
Associated Person	Onicar 4.	Modified.	
	40.047050 4504 540		
Monday 10/17/2016	16-617656 4504 - EMS 1326 ABBY LA ALDEN VILL		
Received: 15:02:49	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 15:02:50	Officer 2: LVAC7 - 701		COHAN SHARON - D85
Arrived: 15:16:03	Officer 3:	Source:	E-911
Completed: 15:38:08	Officer 4:	Notified:	
Associated Person:			
Wednesday 10/19/2016	16-617796 4504 - EMS 13173 PARK ST 2 ALDEN VILL		
Received: 23:59:29	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 00:00:48	Officer 2:LVAC7 ~ 701	Dispatched By:	
Arrived: 00:11:22	Officer 3:	Source:	E-911
Completed: 02:06:53	Officer 4:	Notified:	
Associated Person:			
Saturday 10/22/2016	16-617958 4504 - EMS 13320 BROADWAY ALDEN V	<u></u>	
Received: 23:30:41	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 23:31:48	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 23:33:36	Officer 3:	Source:	PHONE
Completed: 23:49:57	Officer 4:	Notified:	
Associated Person:		_	
Tuesday 10/25/2016	16-618071 4504 - EMS 1805 ARLINGTON DR ALDEN	VILL	
Received: 00:16:34	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 00:16:38	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 00:25:07	Officer 3:	Source:	PHONE
Completed: 00:44:48	Officer 4:	Notified:	
Associated Person: Q			
Friday 10/28/2016	16-618207 4504 - EMS 13409 IRVING ST ALDEN VILI	L	,
Received: 03:47:21	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 03:48:36	Officer 2: LVAC7 - 701		STEWART ANGELA -
Arrived: 03:53:54	Officer 3:	Source:	PHONE
Completed: 04:42:09	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Friday 10/28/2016	16-618228 4504 - EMS 12923 BROADWAY ALDEN V	/ILL	
Received: 12:38:45	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 12:38:48	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 12:48:15	Officer 3:	Source:	PHONE
Completed: 13:57:25	Officer 4:	Notified:	
Associated Person:			

Monday 10/31/2016	.16-618395 4504 - EMS 13006 BROADWAY 5 ALDEN	VILL	
Received: 12:45:26	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 12:45:27	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 13:06:21	Officer 3:	Source:	E-911
Completed: 13:11:51	Officer 4:	Notified:	
Associated Person:	e die soni F		
Tuesday 11/01/2016	16-618485 4504 - EMS 1847 LAFAYETTE DR ALDEN	I VILL	
Received: 22:22:42	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 22:22:42	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 22:30:02	Officer 3:	Source:	E-911
Completed: 01:06:18	Officer 4:	Notified:	
Associated Person: CMP			
Wednesday 11/02/2016	16-618513 4504 - EMS 13116 W MAIN ST ALDEN VIL	LL	
Received: 16:10:08	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 16:10:15	Officer 2:LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 16:14:22	Officer 3:	Source:	E-911
Completed: 18:00:59	Officer 4:	Notified:	
Associated Person:			
Monday 11/07/2016	16-618770 4504 - EMS BROADWAY @ CRITTENDE		L
Received: 10:10:26	Officer 1: ALDEN FIRE DEPT - 9		FIRESTONE JANE -
Dispatched: 10:10:55	Officer 2:LVAC7 - 701	-	PAWLIKOWSKI JEAN -
Arrived: 10:16:19	Officer 3:	Source:	E-911
Completed: 11:55:04	Officer 4:	Notified:	
Associated Person			
Thursday 11/10/2016	16-618953 4504 - EMS 1604 MEADOW DR ALDEN V		
Received: 18:47:10	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 18:47:10	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 18:50:11	Officer 3:	Source:	E-911
Completed: 19:19:09	Officer 4:	Notified:	
Associated Person:	The second second second by the second secon		
Associated Person:			
Monday 11/14/2016	16-619100 4504 - EMS 1386 MECHANIC ST ALDEN	VILL	
Received: 06:24:14	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 06:25:53	Officer 2:LVAC7 - 701	Dispatched By:	
•	Officer 3:	Source:	E-911
Arrived: 06:33:26	C.11001 O.		
Arrived: 06:33:26 Completed: 07:23:13	Officer 4:	Notified:	
Completed: 07:23:13		Notified:	
		Notified:	
Completed: 07:23:13 Associated Person:			
Completed: 07:23:13 Associated Person Associated Person Monday 11/14/2016	Officer 4: 16-619119 4504 - EMS 1805 ARLINGTON DR ALDEI	N VILL	COHAN SHARON - D85
Completed: 07:23:13 Associated Person: Associated Person Monday 11/14/2016 Received: 13:32:51	Officer 4: 16-619119 4504 - EMS 1805 ARLINGTON DR ALDEI Officer 1: ALDEN FIRE DEPT - 9	N VILL Received By:	COHAN SHARON - D85
Completed: 07:23:13 Associated Person: Associated Person Monday 11/14/2016 Received: 13:32:51 Dispatched: 13:32:51	Officer 4: 16-619119 4504 - EMS 1805 ARLINGTON DR ALDEI Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	N VILL. Received By: Dispatched By	COHAN SHARON - D85
Completed: 07:23:13 Associated Person: Associated Person Monday 11/14/2016 Received: 13:32:51	Officer 4: 16-619119 4504 - EMS 1805 ARLINGTON DR ALDEI Officer 1: ALDEN FIRE DEPT - 9	N VILL Received By:	

Tuesday 11/15/2016	16-619200 4504 - EMS	216 A	
Desciondo 40.05.45	13500 BROADWAY ALDEN V		
Received: 18:35:45 Dispatched: 18:36:30	Officer 1:LVAC7 - 701 Officer 2:ALDEN FIRE DEPT - 9	Received By:	
Arrived: 18:41:59	Officer 3:	Dispatched By: Source:	PHONE
Completed: 20:42:48	Officer 4:	Notified:	PRONE
Associated Person	Gilloer 4.	Mouned.	
Associated Person:			
Friday 11/18/2016	16-619336 4504 - EMS		
Friday 11/10/2010	12845 BROADWAY ALDEN V	/ILL	
Received: 10:38:05	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 10:38:06	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 10:43:51	Officer 3:	Source:	E-911
Completed: 11:32:08	Officer 4:	Notified:	
Associated Person:			
Friday 11/18/2016	16-619382 4504 - EMS 1441 KELLOGG ST ALDEN V	ILL	
Received: 21:15:00	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 21:17:58	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	
Arrived: 21:34:29	Officer 3:	Source:	PHONE
Completed: 22:10:01	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Saturday 11/19/2016	16-619424 4504 - EMS 12951 W MAIN ST ALDEN VIL	T	
Received: 12:08:06	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 12:08:27	Officer 2: LVAC7 - 701		STEWART ANGELA -
Arrived: 12:19:36	Officer 3:	Source:	PHONE
Completed: 14:12:01	Officer 4:	Notified:	
Associated Person:			
Monday 11/21/2016	16-619514 4504 - EMS 13173 PARK ST 1 ALDEN VIL	L	
Received: 04:30:10	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 04:30:48	Officer 2:LVAC7 - 701		
			STEWART ANGELA -
Arrived: 04:42:19	Officer 3:	Source:	E-911
Completed: 06:28:58			
Completed: 06:28:58 Associated Person:	Officer 3: Officer 4:	Source:	
Completed: 06:28:58	Officer 3: Officer 4: 16-619755 4504 - EMS 1482 SEABROOK DR ALDEN	Source: Notified:	
Completed: 06:28:58 Associated Person: Friday 11/25/2016 Received: 22:18:13	Officer 3: Officer 4: 16-619755 4504 - EMS 1482 SEABROOK DR ALDEN Officer 1: ALDEN FIRE DEPT - 9	Source: Notified: VILL Received By:	E-911
Completed: 06:28:58 Associated Person: Friday 11/25/2016 Received: 22:18:13 Dispatched: 22:20:26	Officer 3: Officer 4: 16-619755 4504 - EMS 1482 SEABROOK DR ALDEN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	Source: Notified: VILL Received By: Dispatched By:	E-911
Completed: 06:28:58 Associated Person: Friday 11/25/2016 Received: 22:18:13 Dispatched: 22:20:26 Arrived: 22:35:34	Officer 3: Officer 4: 16-619755 4504 - EMS 1482 SEABROOK DR ALDEN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Source: Notified: VILL Received By: Dispatched By: Source:	E-911
Completed: 06:28:58 Associated Person: Friday 11/25/2016 Received: 22:18:13 Dispatched: 22:20:26 Arrived: 22:35:34 Completed: 22:59:06	Officer 3: Officer 4: 16-619755 4504 - EMS 1482 SEABROOK DR ALDEN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	Source: Notified: VILL Received By: Dispatched By:	E-911
Completed: 06:28:58 Associated Person: Friday 11/25/2016 Received: 22:18:13 Dispatched: 22:20:26 Arrived: 22:35:34 Completed: 22:59:06 Associated Person:	Officer 3: Officer 4: 16-619755	Source: Notified: VILL Received By: Dispatched By: Source:	E-911
Completed: 06:28:58 Associated Person: Friday 11/25/2016 Received: 22:18:13 Dispatched: 22:20:26 Arrived: 22:35:34 Completed: 22:59:06	Officer 3: Officer 4: 16-619755 4504 - EMS 1482 SEABROOK DR ALDEN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Source: Notified: VILL Received By: Dispatched By: Source: Notified:	E-911
Completed: 06:28:58 Associated Person: Friday 11/25/2016 Received: 22:18:13 Dispatched: 22:20:26 Arrived: 22:35:34 Completed: 22:59:06 Associated Person:	Officer 3: Officer 4: 16-619755 4504 - EMS 1482 SEABROOK DR ALDEN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Source: Notified: VILL Received By: Dispatched By: Source: Notified:	E-911
Completed: 06:28:58 Associated Person: Friday 11/25/2016 Received: 22:18:13 Dispatched: 22:20:26 Arrived: 22:35:34 Completed: 22:59:06 Associated Person: Saturday 11/26/2016	Officer 3: Officer 4: 16-619755 4504 - EMS 1482 SEABROOK DR ALDEN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4: 16-619799 4504 - EMS 13367 RAILROAD ST ALDEN	Source: Notified: VILL Received By: Dispatched By: Source: Notified: VILL Received By: Dispatched By: Dispatched By:	E-911 PHONE
Completed: 06:28:58 Associated Person: Friday 11/25/2016 Received: 22:18:13 Dispatched: 22:20:26 Arrived: 22:35:34 Completed: 22:59:06 Associated Person: Saturday 11/26/2016 Received: 16:24:59	Officer 3: Officer 4: 16-619755 4504 - EMS 1482 SEABROOK DR ALDEN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4: 16-619799 4504 - EMS 13367 RAILROAD ST ALDEN Officer 1: ALDEN FIRE DEPT - 9	Source: Notified: VILL Received By: Dispatched By: Source: Notified:	E-911 PHONE

Saturday 11/26/2016	16-619811 4504 - EMS 1285 EAST DR ALDEN VILL		
Received: 19:26:48	Officer 1: LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 19:26:48	Officer 2: ALDEN FIRE DEPT - 9		ARMSTRONG
Arrived: 19:33:07	Officer 3:	Source:	E-911
Completed: 21:24:12	Officer 4:	Notified:	
Associated Person:		<u> </u>	
Associated Person:			
Monday 11/28/2016	16-619886 4504 - EMS 13320 BROADWAY ALDEN VI		
Received: 00:53:30	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 00:58:06	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 01:03:08	Officer 3:	Source:	PHONE
Completed: 01:36:11	Officer 4:	Notifled:	
Associated Person:			
Associated Person:			
Monday 11/28/2016	16-619913 4504 - EMS 13409 IRVING ST ALDEN VILL		
Received: 12:57:48	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 12:59:55	Officer 2:LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 13:05:23	Officer 3:	Source:	PHONE
Completed: 13:05:42	Officer 4:	Notified:	
Associated Person:			
Associated Person: PAT			
Tuesday 11/29/2016	16-619990 4504 - EMS 1444 ELM ST ALDEN VILL		
Received: 21:32:37	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 21:32:58	Officer 2:LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 21:40:29	Officer 3:	Source:	E-911
Completed: 23:41:09	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Associated Person			
Wednesday 11/30/2016	16-620022 4504 - EMS 13155 PARK ST 4 ALDEN VILL	•	
Received: 12:51:01	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 12:51:04	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	
Arrived: 13:00:12	Officer 3:	Source:	E-911
Completed: 15:30:28	Officer 4:	Notified:	
Associated Person:			
Wednesday 11/30/2016	16-620024 4504 - EMS 12845 BROADWAY ALDEN V		
Received: 13:47:39	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 13:47:39	Officer 2:LVAC7 - 701	•	FIRESTONE JANE -
Arrived: 13:50:23	Officer 3:	Source:	E-911
Completed: 14:44:09	Officer 4:	Notified:	
Associated Person:	- Company of the Comp		
Saturday 12/03/2016	16-620161 4504 - EMS 13409 IRVING ST ALDEN VILL	-	
Received: 10:03:51	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 10:03:52	Officer 2:LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 10:10:42	Officer 3:	Source:	PHONE
Completed: 10:17:35	Officer 4:	Notified:	
Associated Person:			

Associated Person:	46 620252 JERA EMO		
Monday 12/05/2016	16-620252 4504 - EMS 1478 SEABROOK DR ALDEN V	VILL	
Received: 03:51:16	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 03:52:16	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 04:03:43	Officer 3:	Source:	PHONE
Completed: 04:36:30	Officer 4:	Notified:	_
Associated Person:			
Monday 12/05/2016	16-620266 4504 - EMS 13203 BROADWAY ALDEN VI	LL	
Received: 12:21:48	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 12:23:04	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Aπived: 12:26:33	Officer 3:	Source:	E-911
Completed: 14:23:50	Officer 4:	Notified:	
Associated Person:			
Tuesday 12/06/2016	16-620322 4504 - EMS 12845 BROADWAY ALDEN VI		
Received: 12:16:30	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 12:16:31	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 12:24:37	Officer 3:	Source:	E-911
Completed: 13:02:31	Officer 4:	Notified:	
Associated Person:			
Wednesday 12/07/2016	16-620350 4504 - EMS 13409 IRVING ST ALDEN VILL		<u> </u>
Received: 01:19:50	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 01:21:14	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 01:29:08	Officer 3:	Source:	PHONE
Completed: 02:09:39	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Wednesday 12/07/2016	16-620371 4504 - EMS 13409 IRVING ST ALDEN VILL	•	
Received: 15:52:02	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 15:52:02	Officer 2: LVAC7 - 701	Dispatched By:	ARMSTRONG
Arrived: 15:57:19	Officer 3:	Source:	OTHER POLICE
Completed: 16:53:35	Officer 4:	Notifled:	
Associated Person:			
Thursday 12/08/2016	16-620391 4504 - EMS 13409 IRVING ST ALDEN VILL	•	
Received: 01:03:00	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 01:04:23	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 01:13:59	Officer 3:	Source:	PHONE
Completed: 01:52:13	Officer 4:	Notified:	
Associated Person:			
Associated Person: Page 1			
Tuesday 12/13/2016	16-620663 4504 - EMS 13006 BROADWAY 15 ALDEN	I VILL	
Received: 01:47:39	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 01:51:07	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	
Diopatorios. VI.OT.OT			
Arrived: 02:00:27	Officer 3:	Source:	PHONE
•	Officer 3: Officer 4:	Source: Notified:	PHONE

Wednesday 12/14/2016	16-620740 4504 - EMS 13127 BROADWAY 1 ALDEN V	—————— VILL	
Received: 09:19:36 Dispatched: 09:19:37 Arrived: 09:36:12 Completed: 10:14:05	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - E-911
Associated Person	Oniçor T.	Hodried.	
Wednesday 12/14/2016	16-620767 4504 - EMS 13237 COLONIAL WOODS DR	ALDEN VILL	
Received: 19:03:49 Dispatched: 19:03:49 Arrived: 19:14:31 Completed: 22:33:03	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	ARMSTRONG SCHAEFER TAMMIE - E-911
Associated Person Associated Person		:	
Friday 12/16/2016	16-620862 4504 - EMS 1454 SEABROOK DR ALDEN	VILL	
Received: 01:50:16 Dispatched: 01:50:53	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	Received By: Dispatched By:	
Arrived: 02:02:56	Officer 3:	Source:	PHONE
Completed: 02:39:58	Officer 4:	_Notified:	
Associated Person:			
Friday 12/16/2016	16-620873 4504 - EMS 13320 BROADWAY ALDEN V		
Received: 06:45:06	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 06:47:37	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	
Arrived: 06:59:00	Officer 3:	Source:	PHONE
Completed: 07:57:09	Officer 4:	Notified:	
Associated Person:			
Sunday 12/18/2016	16-621007 4504 - EMS 1476 ELM ST ALDEN VILL		
Received: 11:49:44	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 11:49:45	Officer 2:LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived: 11:58:34	Officer 3:	Source:	E-911
Completed: 13:48:37	Officer 4:	Notified:	
Associated Person:	40.004050 4504 5710		
Monday 12/19/2016	16-621056 4504 - EMS 13190 PARK ST ALDEN VILL		
Received: 10:46:56	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 11:01:56	Officer 2:		FIRESTONE JANE -
Arrived: 11:54:50	Officer 3:	Source: Notified:	E-911
Completed: 11:55:04 Associated Person	Officer 4:	Monied:	
Associated Person:			
Wednesday 12/21/2016	16-621145 4504 - EMS 13006 BROADWAY 1 ALDEN		
Received: 02:23:49	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 02:25:24	Officer 2: LVAC7 - 701	•	STEWART ANGELA -
Arrived: 02:42:35	Officer 3:	Source:	E-911
Completed: 03:18:31	Officer 4:	Notified:	
Associated Person:			

Thursday 12/22/2016	16-621261 4504 - EMS 13409 IRVING ST ALDEN VILL		
Received: 21:40:32	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 21:41:48	Officer 2:LVAC7 - 701		FIRESTONE JANE -
Arrived: 21:48:06	Officer 3:	Source:	E-911
Completed: 22:25:38	Officer 4:	Notified:	LIEUTENANT
Associated Person: \			
Thursday 12/22/2016	16-621264 4504 - EMS 1414 MECHANIC ST ALDEN V		
Received: 22:31:58	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 22:31:59	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 22:38:19	Officer 3:	Source:	E-911
Completed: 23:24:34	Officer 4:	<u>Notified:</u>	
Associated Person:			
Thursday 12/22/2016	16-621268 4504 - EMS 13173 BROADWAY ALDEN VI	LL.	-
Received: 23:48:39	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 23:48:45	Officer 2:LVAC7 - 701		BALK JENNIFER - D87
Arrived: 23:56:26	Officer 3:	Source:	E-911
Completed: 00:38:39	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Friday 12/23/2016	16-621300 4504 - EMS 12845 BROADWAY ALDEN V		-
Received: 14:01:45	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 14:01:45	Officer 2: LVAC7 - 701	•	FIRESTONE JANE -
Arrived: 14:07:00	Officer 3:	Source:	E-911
Completed: 14:32:00	Officer 4:	Notified:	LIEUTENANT
Associated Person:		_	
Wednesday 12/28/2016	16-621498 4504 - EMS 13157 PARK ST 4 ALDEN VILL		
Received: 01:50:02	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 01:50:49	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 02:07:47	Officer 3:	Source:	PHONE
Completed: 02:38:58	Officer 4:	Notified:	
Associated Person:			COT A COT A
Associated Person: Q			
Friday 12/30/2016	16-621654 4504 - EMS 13137 BROADWAY 2 ALDEN	VILL	
Received: 21:59:53	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 22:00:09	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 22:08:56	Officer 3:	Source:	E-911
Completed: 22:59:27	Officer 4:	Notified:	
Associated Person: P			
Wednesday 01/04/2017	17-700195 4504 - EMS 1716 CRITTENDEN RD ALDEI	N VILL	
Received: 17:29:45	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 17:30:25	Officer 2: LVAC7 - 701	•	: BALK JENNIFER - D87
Arrived: 17:36:17	Officer 3:	Source:	E-911
Completed: 18:39:41	Officer 4:	Notified:	LIEUTENANT
Associated Person:			

Friday 01/06/2017 17-700273 4504 - EMS 1629 CRITTENDEN RD ALDEN VILL Received: 04:59:59 Officer 1: ALDEN FIRE DEPT - 9 Received By: STEWART ANGELA -Dispatched: 04:59:59 Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 05:17:15 Officer 3: Source: E-911 Completed: 06:02:04 Officer 4: Notified: Associated Person: Associated Person: | Sunday 01/08/2017 17-700386 4504 - EMS 1545 CRITTENDEN RD ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 06:02:25 Received By: Dispatched: 06:04:06 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 06:15:41 Officer 3: Source: E-911 Notified: Completed: 08:12:21 Officer 4: Associated Person: 17-700388 4504 - EMS Sunday 01/08/2017 1569 HOME CT ALDEN VILL Received: 06:56:10 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 06:56:10 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Officer 3: Arrived: Source: 07:05:38 E-911 Notified: Completed: 08:26:14 Officer 4: Associated Person: Sunday 01/08/2017 17-700410 4504 - EMS 1525 RUSHER DR 2 ALDEN VILL Received: 20:08:14 Officer 1: ALDEN FIRE DEPT - 9 Received By: ARMSTRONG Dispatched: 20:08:20 Officer 2: LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: 20:17:02 Officer 3: Source: E-911 Completed: 21:03:45 Officer 4: Notified: Associated Person Monday 01/09/2017 17-700459 4504 - EMS 1296 EAST DR ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received By: **BALK JENNIFER - D87** Received: 19:45:10 Dispatched: 19:45:15 Officer 2:LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: 19:51:00 Officer 3: Source: **PHONE** Notified: Officer 4: Completed: 21:27:45 Associated Personi Associated Person: 1 Wednesday 01/11/2017 17-700532 4504 - EMS 13354 MERCER DR ALDEN VILL Received: 01:00:00 Officer 1: ALDEN FIRE DEPT - 9 Received By: Officer 2: LVAC7 - 701 Dispatched By: STEWART ANGELA -Dispatched: 01:00:45 Officer 3: Source: PHONE Arrived: 01:11:44 Completed: 02:15:02 Officer 4: Notified: Associated Person: \ Wednesday 01/11/2017 17-700542 4504 - EMS 1525 RUSHER DR 15 ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 01:46:39 Dispatched By: Dispatched: 01:47:27 Officer 2:LVAC7 - 701 Arrived: 01:50:01 Officer 3: Source: PHONE Notified: Completed: 01:59:15 Officer 4: Associated Person:

Wednesday 01/11/2017	17-700619 4504 - EMS 1525 RUSHER DR 24 ALDEN \	————— ЛLL	
Received: 19:06:42	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 19:06:43	Officer 2: LVAC7 - 701		ARMSTRONG
Arrived: 19:12:00	Officer 3:	Source:	E-911
Completed: 21:38:42	Officer 4:	Notified:	LIEUTENANT
Associated Person			
riday 01/13/2017	17-700730 4504 - EMS 13409 IRVING ST ALDEN VILI		
Received: 14:42:49	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 14:44:29	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 14:48:46	Officer 3:	Source:	PHONE
Completed: 15:38:35	Officer 4:	Notified:	
Associated Person:			
Vednesday 01/18/2017	17-700962 4504 - EMS 1648 CRITTENDEN RD ALDE	N VILL	
Received: 09:28:27	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 09:28:28	Officer 2: LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 09:36:25	Officer 3:	Source:	E-911
Completed: 09:49:46	Officer 4:	Notified:	
Associated Person:			
Saturday 01/21/2017	17-701143 4504 - EMS 13249 BROADWAY ALDEN V	7LL	
Received: 20:43:43	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Olspatched: 20:44:35	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 20:50:14	Officer 3:	Source:	PHONE
Completed: 22:26:18	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Sunday 01/22/2017	17-701178 4504 - EMS 13352 PARK ST ALDEN VILL		
Received: 12:56:57	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 12:57:25	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 13:02:44	Officer 3:	Source:	PHONE
Completed: 13:56:13	Officer 4:	Notified:	
Associated Person: R		<u> </u>	
Tuesday 01/24/2017	17-701250 4504 · EMS Broadway @ Exchange	ST ALDEN VILL	
Received: 07:34:50	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Dispatched: 07:34:50			E-911
Arrived: 07:41:50	Officer 3:	Source:	E-911
Arrived: 07:41:50 Completed: 08:10:17		Source: Notified:	L-911
Arrived: 07:41:50 Completed: 08:10:17 Associated Person:	Officer 3:		
Arrived: 07:41:50 Completed: 08:10:17	Officer 3: Officer 4:	Notified:	
Arrived: 07:41:50 Completed: 08:10:17 Associated Person:	Officer 3: Officer 4: 17-701298 4504 - EMS	Notified:	
Arrived: 07:41:50 Completed: 08:10:17 Associated Person:	Officer 3: Officer 4: 17-701298 4504 - EMS CRITTENDEN RD @ CHERR	Notified: Y TREE LA ALD! Received By:	EN VILL
Arrived: 07:41:50 Completed: 08:10:17 Associated Person:	Officer 3: Officer 4: 17-701298 4504 - EMS CRITTENDEN RD @ CHERR Officer 1: ALDEN FIRE DEPT - 9	Notified: Y TREE LA ALD! Received By:	EN VILL ARMSTRONG

Wednesday 01/25/2017	17-701353 4504 - EMS 1569 HOMECOURT ALDEN V	 ILL	
Received: 22:23:44 Dispatched: 22:25:16 Arrived: 22:33:41 Completed: 00:14:26	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	STEWART ANGELA - STEWART ANGELA - E-911
Associated Person:	Olioci 4:	NOUNEG.	
	42 404000 4504 540		
Thursday 01/26/2017	17-701386 4504 - EMS 1282 EAST DR ALDEN VILL		
Received: 17:17:49	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 17:23:20	Officer 2:ALDEN FIRE DEPT - 9	Dispatched By:	
Arrived: 17:27:20	Officer 3:	Source:	PHONE
Completed: 17:50:41	Officer 4:	Notified:	
Associated Person			
Thursday 01/26/2017	17-701390 4504 - EMS 13137 BROADWAY ALDEN V	ILL	
Received: 19:57:31	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 19:57:32	Officer 2:LVAC7 - 701	Dispatched By:	ARMSTRONG
Arrived: 20:05:05	Officer 3:	Source:	E-911
Completed: 20:48:42	Officer 4:	Notified:	
Associated Person:			
Thursday 02/02/2017	17-701753 4504 - EMS 1464 BAYVIEW DR ALDEN VI	LL.	
Received: 13:56:01	Officer 1:ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 13:56:02	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 14:02:49	Officer 3:	Source:	E-911
Completed: 15:47:30	Officer 4:	Notified:	
Associated Person:	·		
Thursday 02/02/2017	17-701770 4504 - EMS 13137 BROADWAY ALDEN V	1LL	
Received: 19:36:38	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 19:37:14	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	
Arrived: 19:43:07	Officer 3:	Source:	PHONE
Completed: 21:17:26	Officer 4:	Notified:	
Associated Person			
Friday 02/03/2017	17-701820 4504 - EMS 1594 LINDAN AV ALDEN VILL	_	
Received: 17:13:29	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 17:13:29	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 17:20:00	Officer 3:	Source:	E-911
Completed: 18:11:00	Officer 4:	Notified:	
Associated Person:	and the second s	-	
Associated Person:			
Sunday 02/05/2017	17-701935 4504 - EMS 13367 RAILROAD ST ALDEN	VILL	
Baselined: 00:40:24	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Received: 20:10:24		-	- ADMETDONG
Dispatched: 20:10:25	Officer 2: LVAC7 - 701	Dispatched By:	. ARIVISTRUING
	Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Dispatched By: Source: Notified:	E-911

Tuesday 02/07/2017	17-702032 4504 - EMS 1622 WILLOW WOODS LA A	LDEN VILL	
Received: 13:40:14	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 13:42:16	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 13:46:14	Officer 3:	Source:	E-911
Completed: 14:42:18	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Friday 02/10/2017	17-702152 4504 - EMS 1471 SEABROOK DR ALDEN	i Vill	
Received: 02:16:46	Officer 1:ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 02:17:40	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 02:27:07	Officer 3:	Source:	E-911
Completed: 02:51:58	Officer 4:	Notifled:	
Associated Person:			
Friday 02/10/2017	17-702204 4504 - EMS 1604 MEADOW DR ALDEN V	'ILL	
Received: 22:35:43	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 22:35:44	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 22:46:58	Officer 3:	Source:	E-911
Completed: 23:27:23	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Tuesday 02/14/2017	17-702401 4504 - EMS 12845 BROADWAY ALDEN	VILL	
Received: 16:53:04	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 16:53:10	Officer 2: LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 16:56:57	Officer 3:	Source:	E-911
Completed: 18:49:15	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Thursday 02/16/2017	17-702484 4504 - EMS 1468 KELLOGG ST ALDEN \	/ILL,	
Received: 05:30:33	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 05:30:37	Officer 2:LVAC7 - 701	Dispatched By:	STEWART ANGELA -
Arrived: 05:43:43	Officer 3: TOWNLINE FIRE DEPT		E-911
Completed: 05:58:38	Officer 4:	Notified:	
Associated Person:			
Thursday 02/16/2017	17-702488 4504 - EMS 12885 BROADWAY 6 ALDEN	I VILL	
Received: 08:29:14	Officer 1: ALDEN FIRE DEPT - 9	•	
Dispatched: 08:30:48	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 08:46:52	Officer 3:	Source:	PHONE
Completed: 08:54:13	Officer 4:	Notified:	
Associated Person:			
Friday 02/24/2017	17-702913 4508 - EMS ASS 12914 W MAIN ST ALDEN V		
Received: 01:52:32	Officer 1: ALDEN FIRE DEPT - 9	•	
Dispatched: 01:53:25	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 02:00:20	Officer 3:	Source:	E-911
Completed: 02:27:52	Officer 4:	Notified:	

	<u>.</u>		
Saturday 02/25/2017	17-702965 4504 - EMS 1515 WESTCOTT AV ALDEN \	/ILL	
Received: 05:37:54 Dispatched: 05:38:30 Arrived: 05:47:43 Completed: 06:42:00	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person: G		TTO GITTO GI	
Associated Person: F		Į.	
Monday 02/27/2017	17-703076 4504 - EMS 12845 BROADWAY ALDEN VI	ill.	
Received: 11:33:59 Dispatched: 11:33:59 Arrived: 11:47:39 Completed: 12:23:29 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	COHAN SHARON - D85 PAWLIKOWSKI JEAN - E-911
Monday 02/27/2017	17-703090 4504 - EMS 12914 W MAIN ST ALDEN VILI	L .	
Received: 15:53:28 Dispatched: 15:54:20 Arrived: 16:02:00 Completed: 16:45:00	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - E-911 LIEUTENANT
Associated Person:			
Wednesday 03/01/2017	17-703171 4504 - EMS 13409 IRVING ST ALDEN VILL	•	
Received: 01:11:55 Dispatched: 01:11:55 Arrived: 01:20:34 Completed: 02:04:26	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	STEWART ANGELA - STEWART ANGELA - E-911
Associated Person:		: 	
Wednesday 03/01/2017	17-703207 4504 - EMS 12845 BROADWAY ALDEN V	ILL	
Received: 15:41:13 Dispatched: 15:41:13 Arrived: 15:45:19 Completed: 16:42:15 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	BALK JENNIFER - D87 ARMSTRONG E-911
Sunday 03/05/2017	17-703409 4504 - EMS 1613 HOMECOURT ALDEN V	7LL	
Received: 14:10:04 Dispatched: 14:11:00 Arrived: 14:19:00 Completed: 15:17:37	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	COHAN SHARON - D85 COHAN SHARON - D85 E-911
Associated Person:			
Sunday 03/05/2017	17-703412 4504 - EMS 1031 EXCHANGE ST ALDEN '	VILL	
Received: 14:35:35 Dispatched: 14:35:39 Arrived: 14:42:34 Completed: 15:34:02 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	COHAN SHARON - D85 COHAN SHARON - D85 E-911

Monday 03/06/2017	17-703469 4504 - EMS 12775 BROADWAY ALDEN V	/ill	
Received: 14:23:47	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 14:24:00	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 14:30:43	Officer 3:	Source:	E-911
Completed: 14:38:33	Officer 4:	Notified:	
Associated Person:			
Thursday 03/09/2017	17-703644 4504 - EMS 1343 CHESTNUT ST ALDEN V		
Received: 00:46:21	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 00:47:30	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 00:56:47	Officer 3:	Source:	E-911
Completed: 01:41:24	Officer 4:	Notified:	
Associated Person:			
Saturday 03/11/2017	17-703784 4504 - EMS 1662 BAXTER AV ALDEN VIL	 L	
Received: 11:43:35	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 11:43:36	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 11:53:14	Officer 3:	Source:	E-911
Completed: 13:30:51	Officer 4:	Notified:	
Associated Person			
Associated Person:			
Saturday 03/11/2017	17-703791 4499 - FIRE OTHE 1811 CRITTENDEN RD ALDE		
Received: 14:55:57	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 14:58:53	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 15:03:20	Officer 3:	Source:	PHONE
Completed: 16:11:00	Officer 4:	Notified:	
Associated Person			
Sunday 03/12/2017	17-703825 4504 - EMS 13298 BROADWAY ALDEN V	/ILL	
Received: 10:13:12	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 10:13:12	Officer 2: LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 10:21:15	Officer 3:	Source:	PHONE
Completed: 12:20:34	Officer 4:	Notified:	
Associated Person:			
Tuesday 03/14/2017	17-703929 4504 - EMS 1643 MEADOW DR ALDEN V	ILL	
Received: 10:35:41	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 10:35:41	Officer 2: LVAC7 - 701	•	FIRESTONE JANE -
Arrived: 10:48:21	Officer 3:	Source:	E-911
Completed: 11:41:46	Officer 4:	Notified:	
Associated Person:			
Thursday 03/16/2017	17-704007 4504 - EMS 12993 W MAIN ST ALDEN VII	LL	7
Received: 00:17:56	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 00:20:24	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 00:36:34	Officer 3:	Source:	PHONE
Completed: 01:23:49	Officer 4:	Notified:	
Associated Person: Cal			

Monday 03/20/2017 17-704275 4504 - EMS 1459 SEABROOK DR ALDEN VILL Received: 19:38:52 Officer 1: ALDEN FIRE DEPT - 9 Received By: **ARMSTRONG** Dispatched: 19:39:17 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 19:46:45 Officer 3: Source: E-911 Completed: 21:47:43 Officer 4: Notified: Associated Persons Wednesday 03/22/2017 17-704355 4504 - EMS BROADWAY @ WESTCOTT AV ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 07:48:51 Received By: PAWLIKOWSKI JEAN -Dispatched: 07:48:52 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 07:54:25 Officer 3: Source: PHONE Completed: 08:13:35 Officer 4: Notified: Associated Person: Wednesday 03/22/2017 17-704358 4504 - EMS 13148 W MAIN ST 4 ALDEN VILL Received: 08:45:12 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 08:45:13 Dispatched By: COHAN SHARON - D85 Officer 2: LVAC7 - 701 Arrived: 08:50:24 Officer 3: Source: **PHONE** Completed: 09:20:44 Officer 4: Notified: Associated Person: Saturday 03/25/2017 17-704511 4504 - EMS 1847 LAFAYETTE DR ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 12:37:48 Received By: Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Dispatched: 12:39:14 Arrived: 12:47:52 Officer 3: Source: E-911 Officer 4: Notified: Completed: 13:51:36 Associated Person: 1 Monday 03/27/2017 17-704620 4504 - EMS 13259 BROADWAY 1R ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 06:04:53 Received By: Dispatched: 06:05:35 Officer 2:LVAC7 - 701 Dispatched By: Source: Arrived: Officer 3: **CELL PHONE** 06:19:08 Notified: Completed: 06:36:19 Officer 4: Associated Person: I Tuesday 03/28/2017 17-704706 4504 - EMS 13409 IRVING ST ALDEN VILL Received: 21:30:34 Officer 1: ALDEN FIRE DEPT - 9 Received By: **BALK JENNIFER - D87** Dispatched: 21:30:35 Officer 2: LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Officer 3: Source: Arrived: 21:38:21 E-911 Notified: Completed: 22:22:20 Officer 4: Associated Person: Associated Person: Wednesday 03/29/2017 17-704741 4504 - EMS 12845 BROADWAY ALDEN VILL Received: 15:58:13 Officer 1: ALDEN FIRE DEPT - 9 Received By: SCHAEFER TAMMIE -Dispatched: 15:58:20 Officer 2:LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: Officer 3: Source: 16:09:38 E-911 Completed: 17:03:53 Officer 4: Notified: LIEUTENANT Associated Person:

Thursday 03/30/2017	17-704762 4504 - EMS 1525 RUSHER DR 15 ALDEN	VILL		
Received: 01:55:35	Officer 1: ALDEN FIRE DEPT - 9		CTEMADT ANGELA	
Dispatched: 01:55:38	Officer 2: LVAC7 - 701		STEWART ANGELA - STEWART ANGELA -	
Arrived: 02:07:51	Officer 3:	Source:	PHONE	
Completed: 02:53:22	Officer 4:	Notified:	PHONE	
Associated Person:	Onicer 4.	140tilled.		
Thursday 03/30/2017	17-704783 4504 - EMS	i		_
maroday dordarza (r	12775 BROADWAY ALDEN	VILL		
Received: 11:47:02	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -	
Dispatched: 11:47:14	Officer 2: LVAC7 - 701	Dispatched By:		
Arrived: 11:55:00	Officer 3:	Source:	E-911	
Completed: 12:10:06	Officer 4:	Notified:	_ • • • • • • • • • • • • • • • • • • •	
Associated Person:				
Thursday 03/30/2017	17-704785 4504 - EMS 12845 BROADWAY ALDEN	————· VILI.		_
Received: 12:26:44	Officer 1: ALDEN FIRE DEPT - 9	Received By:		
Dispatched: 12:27:12	Officer 2:LVAC7 - 701	Dispatched By:		
Arrived: 12:33:29	Officer 3:	Source:	E-911	
Completed: 13:19:32	Officer 4:	Notified:	F-411	
Associated Person:	Officer 7.	rodijet.		
	17-704864 4504 - EMS			
Friday 03/31/2017	17-704864 4504 - EMS 1594 MEADOW DR ALDEN \	/ILL		
Received: 21:27:50	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87	
Dispatched: 21:27:50	Officer 2: LVAC7 - 701		BALK JENNIFER - D87	
Arrived: 21:34:35	Officer 3:	Source:	PHONE	
Completed: 22:23:03	Officer 4:	Notified:	LIEUTENANT	
Associated Person:				
Associated Person:				
Saturday 04/01/2017	17-704904 4504 - EMS			
•	12840 W MAIN ST ALDEN VI	ILL		
Received: 15:16:07	Officer 1: ALDEN FIRE DEPT - 9	Received By:		
Dispatched: 15:17:46	Officer 2: LVAC7 - 701	Dispatched By:	ARMSTRONG	
Arrived: 15:24:06	Officer 3:	Source:	E-911	
Completed: 16:09:42	Officer 4:	Notified:		
Associated Person:				
Saturday 04/01/2017	17-704921 4504 - EMS 1406 KELLOGG ST ALDEN			
Received: 20:18:01	Officer 1: LVAC7 - 701	Received By:	SCHAEFER TAMMIE -	
Dispatched: 20:18:10	Officer 2: ALDEN FIRE DEPT - 9		SCHAEFER TAMMIE -	
Arrived: 20:21:12	Officer 3:	Source:	E-911	
Completed: 20:44:54	Officer 4:	Notified:		
Associated Person:				
Monday 04/03/2017	17-705042 4504 - EMS 1599 EMERSON ST ALDEN	VILL		
Received: 21:47:29	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -	
Dispatched: 21:47:30	Officer 2:LVAC7 - 701		BALK JENNIFER - D87	
Arrived: 21:52:50	Officer 3:	Source:	E-911	
Completed: 23:42:48	Officer 4:	Notified:		
Associated Person:	¢-			

Wednesday 04/05/2017 17-705121 4504 - EMS 1458 CHESTNUT ST ALDEN VILL Received: 09:19:16 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 09:20:58 Officer 2:LVAC7 - 701 Dispatched By: Arrived: 09:28:40 Officer 3: Source: PHONE Completed: 10:26:49 Officer 4: Notified: Associated Person: Associated Person: Sunday 04/09/2017 17-705304 4504 - EMS 1471 SEABROOK DR ALDEN VILL Received: 00:27:29 Officer 1: ALDEN FIRE DEPT - 9 Received By: STEWART ANGELA -Dispatched: 00:27:30 Officer 2:LVAC7 - 701 Dispatched By: STEWART ANGELA -Arrived: 00:38:06 Officer 3: Source: PHONE Completed: 00:58:42 Officer 4: Notified: Associated Person: 6 Sunday 04/09/2017 17-705345 4504 - EMS 1452 KELLOGG ST ALDEN VILL Received: 19:34:53 Officer 1: ALDEN FIRE DEPT - 9 Received By: **BALK JENNIFER - D87** Dispatched: 19:34:53 Dispatched By: SCHAEFER TAMMIE -Officer 2:LVAC7 - 701 Arrived: 19:43:02 Officer 3: Source: E-911 Completed: 19:55:37 Notified: Officer 4: Associated Person: Associated Person: Tuesday 04/11/2017 17-705448 4504 - EMS 12845 BROADWAY ALDEN VILL Received: 13:55:37 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 13:55:37 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 13:59:22 Officer 3: Source: E-911 Completed: 14:37:47 Officer 4: Notified: Associated Person: Friday 04/14/2017 17-705622 4504 - EMS 1480 EXCHANGE ST ALDEN VILL Received: 10:33:17 Officer 1: ALDEN FIRE DEPT - 9 **COHAN SHARON - D85** Received By: Dispatched: 10:33:18 Officer 2:LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: Officer 3: Source: 10:40:43 E-911 Completed: 12:41:42 Officer 4: Notified: Associated Person: | Monday 04/17/2017 17-705802 4504 - EMS 1338 EAST DR ALDEN VILL Received: 09:24:21 Officer 1: ALDEN FIRE DEPT - 9 Received By: **PAWLIKOWSKI JEAN -**Dispatched: 09:24:21 Dispatched By: FIRESTONE JANE -Officer 2: LVAC7 - 701 Arrived: 09:35:36 Officer 3: Source: E-911 Completed: 10:38:52 Officer 4: Notified: Associated Person: 4 Associated Persona Tuesday 04/18/2017 17-705852 4000 - MENTAL 12845 BROADWAY ALDEN VILL Received: 09:32:06 Officer 1:LVAC7 - 701 Received By: FIRESTONE JANE -Dispatched: 09:32:07 Officer 2: Dispatched By: FIRESTONE JANE -Arrived: Officer 3: Source: 09:53:42 E-911 Completed: 10:32:29 Officer 4: Notified: Associated Person: !

Tuesday 04/18/2017	17-705854 4504 - EMS 1534 RUSHER DR 1C ALDEN V	—_—	
Received: 10:39:38	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 10:39:38	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 10:43:02	Officer 3:	Source:	E-911
Completed: 11:51:31	Officer 4:	Notified:	2-311
Associated Person:			
Thursday 04/20/2017	17-705960 4504 - EMS 1648 CRITTENDEN RD ALDEN	VILL	
Received: 11:34:34	Officer 1:LVAC7 - 701	Received By:	COHAN SHARON - D85
Dispatched: 11:34:35	Officer 2:		COHAN SHARON - D85
Arrived: 11:57:00	Officer 3:	Source:	PHONE
Completed: 12:46:42	Officer 4:	Notified:	· · · · · · · ·
Associated Person			
Friday 04/21/2017	17-706035 4504 - EMS 13336 BROADWAY ALDEN VI	 LL	
Received: 09:53:24	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 09:54:00	Officer 2:LVAC7 - 701		COHAN SHARON - D85
Arrived: 09:58:49	Officer 3:	Source:	PHONE
Completed: 10:47:33	Officer 4:	Notified:	
Associated Person:	9,1100. 4.	TTOLINGO,	
Tuesday 04/25/2017	17-706304 4504 - EMS		
1 U#SU29 04/25/2017	12845 BROADWAY ALDEN VI	LL	
Received: 16:12:17	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 16:12:18	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 16:18:24	Officer 3:	Source:	E-911
Completed: 18:20:50	Officer 4:	Notified:	
Associated Person:		<u> </u>	
Wednesday 04/26/2017	17-706360 4504 - EMS 13611 BROADWAY ALDEN VI	LL	
Received: 16:21:15	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 16:21:22	Officer 2: LVAC7 - 701	Dispatched By:	ARMSTRONG
Arrived: 16:27:04	Officer 3:	Source:	PHONE
Completed: 18:16:39	Officer 4:	Notified:	
Associated Person			
Associated Person:			
Thursday 04/27/2017	17-706401 4504 - EMS 13155 PARK ST 1 ALDEN VILL		
Received: 08:10:30	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 08:10:31	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 08:17:00	Officer 3:	Source:	E-911
Completed: 09:44:45	Officer 4:	Notified:	
Associated Person:			
Thursday 04/27/2017	17-706409 4504 - EMS 13171 PARK ST 2 ALDEN VILL		
Received: 11:45:23	Officer 1; ALDEN FIRE DEPT - 9	Received By: .	PAWLIKOWSKI JEAN -
Dispatched: 11:45:23	Officer 2: LVAC7 - 701	•	PAWLIKOWSKI JEAN -
Arrived: 11:57:00	Officer 3:	Source:	E-911
Completed: 12:49:43	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
	T - T - T - T - T - T - T - T - T -		

Thursday 04/27/2017	17-706418 4504 - EMS 12885 BROADWAY ALDEN V		
Received: 14:01:48 Dispatched: 14:03:00 Arrived: 14:08:38 Completed: 15:04:31	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	COHAN SHARON - D85 E-911
Associated Person			
Thursday 04/27/2017	17-706419 4504 - EMS 1569 HOME CT ALDEN VILL		
Received: 14:28:30 Dispatched: 14:28:31 Arrived: 14:44:38	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Received By: Dispatched By: Source:	COHAN SHARON - D85 E-911
Completed: 15:30:47	Officer 4:	Notified:	
Associated Person:			
Thursday 04/27/2017	17-706443 4504 - EMS 13298 BROADWAY ALDEN V		
Received: 19:28:27 Dispatched: 19:28:30 Arrived: 19:31:58 Completed: 21:18:32 Associated Person:	Officer 1: ALDEN FIRE DEPT ~9 Officer 2: LVAC7 ~ 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - E-911
Monday 05/01/2017	17-706657 4504 - EMS 1424 ABBY LA ALDEN VILL		
Received: 10:53:11 Dispatched: 10:53:12 Arrived: 11:03:00 Completed: 12:05:55	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	COHAN SHARON - D85 E-911
Associated Person:			
Tuesday 05/02/2017	17-706746 4504 - EMS 1387 CHESTNUT ST ALDEN \	/ILL	<u> </u>
Received: 15:29:43 Dispatched: 15:32:11 Arrived: 15:36:12 Completed: 17:20:35	Officer 1:LVAC7 - 701 Officer 2:ALDEN FIRE DEPT - 9 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person:			
Associated Person:	40 de 200 450 4 5110		
Wednesday 05/03/2017	17-706780 4504 - EMS 1488 BAYVIEW DR ALDEN VI	L L	
Received: 00:50:53 Dispatched: 00:51:39	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	Received By: Dispatched By: Source:	E-911
Arrived: 00:59:46 Completed: 01:46:51	Officer 3: Officer 4:	Notified:	
Arrived: 00:59:46			
Arrived: 00:59:46 Completed: 01:46:51		Notified:	
Arrived: 00:59:46 Completed: 01:46:51 Associated Person:	Officer 4: 17-706803 4504 - EMS	Notified: VILL Received By:	

Wednesday 05/10/2017 17-707198 4504 - EMS 1376 EXCHANGE ST ALDEN VILL Received: 14:47:51 Officer 1: ALDEN FIRE DEPT - 9 Received By: COHAN SHARON - D85 Dispatched: 14:48:20 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 14:51:20 Officer 3: Source: E-911 Completed: 16:32:29 Officer 4: Notified: Associated Person: Thursday 05/11/2017 17-707292 4000 - MENTAL 13148 W MAIN ST ALDEN VILL Received: 21:58:59 Officer 1: LVAC7 - 701 **ARMSTRONG** Received By: Dispatched: 21:59:32 Officer 2: Dispatched By: ARMSTRONG Arrived: 22:17:36 Officer 3: Source: OTHER POLICE Completed: 23:05:26 Officer 4: Notified: Associated Person: Friday 05/12/2017 17-707321 4504 - EMS 12845 BROADWAY ALDEN VILL Received: 09:30:29 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 09:30:30 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 09:35:07 Officer 3: Source: E-911 Completed: 11:45:11 Officer 4: Notified: Associated Personi Associated Person: Friday 05/12/2017 17-707353 4504 · EMS 13336 BROADWAY ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 19:25:11 Received By: ARMSTRONG Dispatched: 19:25:12 Officer 2: LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Source: Arrived: 19:30:13 Officer 3: E-911 Notified: Completed: 21:40:09 Officer 4: LIEUTENANT Associated Person: Associated Person: Monday 05/15/2017 17-707553 4504 - EMS 1488 BAYVIEW DR ALDEN VILL Officer 1; ALDEN FIRE DEPT - 9 Received By: Received: 23:39:00 Dispatched: 23:39:39 Officer 2: LVAC7 - 701 Dispatched By: Source: **CELL PHONE** Arrived: 23:49:28 Officer 3: Notified: Completed: 00:33:04 Officer 4: Associated Person: Friday 05/19/2017 17-707774 4504 - EMS 1387 CHESTNUT ST ALDEN VILL Received: 08:53:21 Officer 1:LVAC7 - 701 Received By: FIRESTONE JANE -Dispatched By: COHAN SHARON - D85 Dispatched: 08:53:34 Officer 2: ALDEN FIRE DEPT - 9 Arrived: 08:59:50 Officer 3: Source: E-911 Notified: Completed: 11:39:42 Officer 4: Associated Person: Associated Person: 17-707959 4508 - EMS ASSIST Monday 05/22/2017 1534 RUSHER DR 4B ALDEN VILL Received: 11:15:47 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSK! JEAN -Dispatched: 11:15:48 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 11:20:41 Officer 3: Source: PHONE Notified: Completed: 11:29:05 Officer 4: Associated Person: Associated Person: F

Tuesday 05/23/2017	17-708034 4504 - EMS 12845 BROADWAY ALDEN V		
Received: 15:15:02 Dispatched: 15:15:03 Arrived: 15:22:28 Completed: 17:02:00	Officer 1:ALDEN FIRE DEPT - 9 Officer 2:LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	ARMSTRONG E-911
Associated Person:		<u>لاستىسىي</u>	<u> </u>
Wednesday 05/24/2017	17-708067 4504 - EMS 13315 RAILROAD ST ALDEN 1	VILL	
Received: 08:27:26	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 08:28:53	Officer 2:LVAC7 - 701		FIRESTONE JANE -
Arrived: 08:33:52	Officer 3:	Source:	E-911
Completed: 09:28:31	Officer 4:	Notified:	
Associated Person:			
Saturday 05/27/2017	17-708242 4504 - EMS 13167 BROADWAY ALDEN V	ill	
Received: 00:30:26	Officer 1:ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 00:30:30	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 00:36:25	Officer 3:	Source:	E-911
Completed: 01:29:58	Officer 4:	Notified:	
Associated Person:			_
Wednesday 05/31/2017	17-708513 4504 - EMS 12775 BROADWAY ALDEN V	ILL	-
Received: 10:34:08	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 10:35:51	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 10:37:06	Officer 3:	Source:	E-911
Completed: 12:22:20	Officer 4:	Notified:	
Associated Person:			
Thursday 06/01/2017	17-708573 4504 - EMS 13127 BROADWAY ALDEN V	ill	
Received: 10:50:33	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 10:50:33	Officer 2:LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived: 10:57:18	Officer 3:	Source:	E-911
Completed: 11:57:03	Officer 4:	Notified:	
Associated Person:			
Thursday 06/01/2017	17-708596 4504 - EMS 12845 BROADWAY ALDEN V	7LL	
Received: 17:07:58	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 17:07:58	Officer 2: LVAC7 - 701	-1 -	SCHAEFER TAMMIE -
Arrived: 17:13:33	Officer 3:	Source:	E-911
Completed: 18:08:07	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Sunday 06/04/2017	17-708757 4504 - EMS 1439 MECHANIC ST ALDEN \	/ILL	
Received: 09:39:25	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 09:39:26	Officer 2: ALDEN FIRE DEPT - 9	, ,	: PAWLIKOWSKI JEAN -
Arrived: 09:47:04	Officer 3:	Source:	E-911
Completed: 10:38:54	Officer 4:	Notified:	
Associated Person:			

Tuesday 06/06/2017	17-708912 4504 - EMS		
Deschad: 47.07.04	1488 BAYVIEW DR ALDEN VIL	- -	
Received: 17:27:31	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 17:27:35	Officer 2: LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 17:34:42	Officer 3:	Source:	E-911
Completed: 18:20:37	Officer 4:	Notified:	
Associated Person:	47 70004 4704 5510		
Wednesday 06/07/2017	17-708981 4504 - EMS 13118 W MAIN ST ALDEN VILL	-	
Received: 15:46:47	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 15:48:24	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 15:51:20	Officer 3:	Source:	E-911
Completed: 16:05:44	Officer 4:	Notified:	
Associated Person:			
Thursday 06/08/2017	17-709014 4504 - EMS 13395 IRVING ST ALDEN VILL		
Received: 00:03:19	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 00:03:21	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 00:10:31	Officer 3:	Source:	OTHER POLICE
Completed: 02:21:34	Officer 4:	Notified:	
Associated Person			
Sunday 06/11/2017	17-709206 4504 - EMS 1285 EAST DR ALDEN VILL		
Received: 03:40:13	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 03:40:30	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 03:50:07	Officer 3:	Source:	E-911
Completed: 05:46:14	Officer 4:	Notified:	
Associated Person:			
Wednesday 06/14/2017	17-709444 4504 - EMS 12845 BROADWAY ALDEN VI		
Received: 12:29:35	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 12:29:35	Officer 2:LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 12:32:00	Officer 3:	Source:	E-911
Completed: 14:54:18	Officer 4:	Notified:	
Associated Person:			
Tuesday 06/20/2017	17-709848 4504 - EMS 12845 BROADWAY ALDEN V	 LL	
Received: 10:26:38	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 10:26:38	Officer 2:LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 10:35:43	Officer 3:	Source:	E-911
Completed: 10:35:44	Officer 4:	Notified:	
Associated Person:			
Monday 06/26/2017	17-710191 4504 - EMS		
	13595 BROADWAY ALDEN V		
Received: 10:52:32	13595 BROADWAY ALDEN V	· -	COHAN SHARON - D85
Received: 10:58:38 Dispatched: 10:58:39	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85 PAWLIKOWSKI JEAN -
Dispatched: 10:58:39	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 10:58:39	Officer 1: ALDEN FIRE DEPT - 9	Received By: Dispatched By:	

Monday 06/26/2017	17-710222 4504 - EMS 13249 BROADWAY ALDEN \	/ILL	
Received: 20:47:30	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 20:47:30	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 20:54:41	Officer 3:	Source:	PHONE
Completed: 23:10:55	Officer 4:	Notified:	
Associated Perso			
Wednesday 06/28/2017	17-710314 4504 - EMS 13090 BROADWAY ALDEN \	/ILL	
Received: 12:31:01	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 12:31:01	Officer 2: LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 12:40:35	Officer 3:	Source:	E-911
Completed: 13:25:30	Officer 4:	Notified:	
Associated Person:			
Friday 06/30/2017	17-710433 4504 - EMS 12845 BROADWAY ALDEN \	/ILL	
Received: 12:01:36	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 12:01:38	Officer 2: LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived: 12:04:29	Officer 3:	Source:	E-911
Completed: 13:01:00	Officer 4:	Notified:	
Associated Person:			<u></u>
Wednesday 07/05/2017	17-710779 4504 - EMS 13383 IRVING ST ALDEN VIL	L	
Received: 02:41:50	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 02:41:53	Officer 2: LVAC7 - 701	Dispatched By:	STEWART ANGELA -
Arrived: 02:57:14	Officer 3:	Source:	E-911
Completed: 03:42:44	Officer 4:	Notified:	
Associated Person:			
Wednesday 07/05/2017	17-710781 4504 - EMS 1389 EXCHANGE ST ALDEN	VILL.	
Received: 04:31:32	Officer 1:ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 04:31:36	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 04:38:02	Officer 3:	Source:	E-911
Completed: 04:55:28	Officer 4:	Notified:	
Associated Person:			
Wednesday 07/05/2017	17-710820 4504 - EMS 1285 EAST DR ALDEN VILL		
Received: 17:43:41	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 17:44:35	Officer 2:ALDEN FIRE DEPT - 9	Dispatched By:	
Arrived: 17:50:20	Officer 3:	Source:	E-911
Completed: 19:19:48	Officer 4:	Notified:	
Associated Person:			
Thursday 07/06/2017	17-710884 4504 - EMS 1257 EXCHANGE ST ALDEN	VILL	
Received: 18:09:07	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 18:10:14	Officer 2: LVAC7 701	Dispatched By:	
Arrived: 18:15:15	Officer 3:	Source:	E-911
Completed: 18:35:51	Officer 4:	Notified:	

Saturday 07/08/2017	17-711040 4504 - EMS		
	13367 RAILROAD ST ALDEN	VILL	
Received: 23:57:22	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 23:58:20	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 00:05:27	Officer 3:	Source:	E-911
Completed: 02:33:20	Officer 4:	Notified:	
Associated Person:			
Tuesday 07/11/2017	17-711204 4504 - EMS 1488 BAYVIEW DR ALDEN VI	LL	
Received: 19:05:04	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 19:05:49	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 19:11:47	Officer 3:	Source:	PHONE
Completed: 20:59:28	Officer 4:	Notified:	
Associated Person:			
Thursday 07/13/2017	17-711339 4504 - EMS 12845 BROADWAY ALDEN V	'ILL	 -
Received: 14:46:24	Officer 1: ALDEN FIRE DEPT -9	Received By:	COHAN SHARON - D85
Dispatched: 14:46:24	Officer 2: LVAC7 - 701	•	COHAN SHARON - D85
Arrived: 14:56:14	Officer 3:	Source:	E-911
Completed: 15:41:04	Officer 4:	Notified:	_ • • • • • • • • • • • • • • • • • • •
Associated Person			
Friday 07/14/2017	17-711423 4504 - EMS	-	
	13500 BROADWAY ALDEN V	'ILL	
Received: 12:22:05	Officer 1: BOWMANSVILLE FIRE	Received By:	COHAN SHARON - D85
Dispatched: 12:22:06	Officer 2: LVAC7 - 701	•	PAWLIKOWSKI JEAN -
Arrived: 12:27:18	Officer 3:	Source:	E-911
Completed: 13:27:25	Officer 4:	Notified:	
Associated Person:			
Monday 07/17/2017	17-711579 4504 - EMS 13340 MAPLE RIDGE DR ALD	EN VILL	
Received: 00:16:48	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 00:17:38	Officer 2:LVAC7 - 701		STEWART ANGELA -
Arrived: 00:25:34	Officer 3:	Source:	E-911
Completed: 01:09:09	Officer 4:	Notified:	
Associated Person:			
Friday 07/28/2017	17-712334 4504 - EMS EMERSON ST @ PARK ST A	LDEN VILL	
Received: 14:25:46	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 14:25:47	Officer 2:LVAC7 - 701		FIRESTONE JANE -
Arrived: 14:30:38	Officer 3:	Source:	E-911
Completed: 15:30:57	Officer 4:	Notified:	
Associated Person:			
Friday 07/28/2017	17-712336 4504 - EMS 12914 W MAIN ST ALDEN VII	L	
Received: 16:05:06	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 16:05:32	Officer 2:LVAC7 - 701		ARMSTRONG
Arrived: 16:09:57	Officer 3:	Source:	E-911
Completed: 17:01:49	Officer 4:	Notified:	LIEUTENANT
Associated Person:		** p	
Associated Person:			

Saturday 07/29/2017	17-712407 4504 - EMS 13384 IRVING ST ALDEN VILL	•		
Received: 14:16:42	Officer 1: ALDEN FIRE DEPT -9	Received By:	PAWLIKOWSKI JEAN -	
Dispatched: 14:16:42	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -	
Arrived: 14:23:41	Officer 3:	Source:	E-911	
Completed: 15:10:32	Officer 4:	Notified:		
Associated Person				
Saturday 07/29/2017	17-712414 4504 - EMS 13285 MAPLE RIDGE DR ALD	EN VILL		
Received: 17:36:58	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG	
Dispatched: 17:37:12	Officer 2: LVAC7 - 701	Dispatched By:		
Arrived: 17:41:49	Officer 3:	Source:	E-911	
Completed: 19:08:27	Officer 4:	Notified:	LIEUTENANT	
Associated Person				
Associated Person				
Sunday 07/30/2017	17-712474 4504 - EMS 1441 KELLOGG ST ALDEN VI			_
Received: 09:58:43	Officer 1: ALDEN FIRE DEPT - 9	Received By:		
Dispatched: 10:00:09	Officer 2:LVAC7 - 701	Dispatched By:		
Arrived: 10:03:35	Officer 3:	Source:	PHONE	
Completed: 10:21:10	Officer 4:	Notified:	THORE	
Associated Perso		rtourico.		
	47 740000 4504 5000			—
Monday 07/31/2017	17-712539 4504 - EMS 13383 IRVING ST ALDEN VILL	_		
Received: 08:30:09	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85	
Dispatched: 08:30:10	Officer 2:LVAC7 - 701	•	FIRESTONE JANE -	
Arrived: 08:34:33	Officer 3:	Source:	E-911	
Completed: 09:34:56	Officer 4:	Notified:		
Associated Person:				
Monday 07/31/2017	17-712561 4504 - EMS 1441 KELLOGG ST ALDEN VI	LL		
Received: 15:12:47	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG	
Dispatched: 15:13:08	Officer 2:LVAC7 - 701	Dispatched By:	ARMSTRONG	
Arrived: 15:21:56	Officer 3:	Source:	E-911	
Completed: 15:37:47	Officer 4:	Notified:		
Associated Person:				
Associated Person:				
Tuesday 08/01/2017	17-712638 4514 - WELFARE 13515 BROADWAY ALDEN V			
Received: 18:16:53	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87	
Dispatched: 18:16:53	Officer 2:LVAC7 - 701		BALK JENNIFER - D87	
Arrived: 18:20:50	Officer 3:	Source:	PHONE	
Completed: 18:23:09	Officer 4:	Notified:		
Associated Person:				
Associated Person:				
Wednesday 08/02/2017	17-712715 4504 - EMS 13367 RAILROAD ST ALDEN	VILL		
Received: 20:33:23	Officer 1: ALDEN FIRE DEPT -9	Received By:	SCHAEFER TAMMIE -	
Dispatched: 20:33:30	Officer 2: LVAC7 - 701	•	SCHAEFER TAMMIE -	
Arrived: 20:37:01	Officer 3:	Source:	E-911	
Completed: 20:50:39	Officer 4:	Notified:		
Associated Person:				
· ~~				

Friday 08/04/2017	17-712843 4504 - EMS 12775 BROADWAY ALDEN	VILL	
Received: 20:00:04	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 20:00:05	Officer 2: LVAC7 - 701	_	BALK JENNIFER - D87
Arrived: 20:05:12	Officer 3:	Source:	PHONE
Completed: 20:05:12	Officer 4:	Notified:	
Associated Person:			
Sunday 08/06/2017	17-712942 4504 - EMS 13107 BROADWAY ALDEN		
Received: 12:57:03	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 12:57:15	Officer 2: LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived: 13:04:09	Officer 3:	Source:	E-911
Completed: 13:23:02	Officer 4:	Notified:	
Associated Person:			
Monday 08/07/2017	17-712982 4504 - EMS 1470 EAST DR ALDEN VILL		
Received: 04:36:07	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 04:37:10	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 04:46:55	Officer 3:	Source:	E-911
Completed: 06:44:00	Officer 4:	Notified:	
Associated Person			
Tuesday 08/08/2017	17-713036 4504 - EMS 1594 MEADOW DR ALDEN \	/ILL	
Received: 05:49:23	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 05:50:00	Officer 2: LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived: 05:57:22	Officer 3:	Source:	E-911
Completed: 06:11:55	Officer 4:	Notified:	
Associated Person:			
Tuesday 08/08/2017	17-713084 4504 - EMS BROADWAY @W MAIN ST	ALDEN VILL	
Received: 20:51:26	Officer 1: ALDEN FIRE DEPT - 9		BALK JENNIFER - D87
Dispatched: 20:52:05	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 20:53:27	Officer 3:	Source:	E-911
Completed: 23:02:39	Officer 4:	Notified:	
Associated Person:			
Thursday 08/10/2017	17-713218 4504 - EMS 13118 W MAIN ST ALDEN V	ILL	
Received: 19:18:40	Officer 1: ALDEN FIRE DEPT - 9	_	ARMSTRONG
Dispatched: 19:18:42	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 19:20:45	Officer 3:	Source:	E-911
Completed: 19:47:02	Officer 4:	Notified:	
Associated Person:		·,	
Friday 08/11/2017	17-713273 4504 - EMS 12885 BROADWAY 5 ALDEI	N VILL	
Received: 14:25:17	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 14:25:17	Officer 2: LVAC7 - 701	-	COHAN SHARON - D85
Arrived: 14:29:51	Officer 3:	Source:	PHONE
Completed: 14:49:00	Officer 4:	Notified:	
Associated Person: R			

Friday 08/11/2017	17-713301 4504 - EMS			
-	1569 HOMECOURT ALDEN V	'ILL	·	
Received: 20:35:11	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG	
Dispatched: 20:36:34	Officer 2: LVAC7 - 701	Dispatched By:		
Arrived: 20:38:48	Officer 3:	Source:	E-911	
Completed: 20:59:00	Officer 4:	Notified:		
Associated Person				
Associated Person:				
Saturday 08/12/2017	17-713343 4504 - EMS 1609 MEADOW DR ALDEN VI	LL		
Received: 12:17:48	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85	
Dispatched: 12:17:49	Officer 2: LVAC7 - 701	Dispatched By:	COHAN SHARON - D85	
Arrived: 12:25:08	Officer 3:	Source:	PHONE	
Completed: 12:36:25	Officer 4:	Notified:		
Associated Person:				
Saturday 08/12/2017	17-713375 4504 - EMS 1470 EAST DR ALDEN VILL			
Received: 23:48:25	Officer 1: ALDEN FIRE DEPT - 9	Received By:		
Dispatched: 23:48:28	Officer 2:LVAC7 - 701	Dispatched By:		
Arrived: 23:57:18	Officer 3:	Source:	E-911	
Completed: 00:45:06	Officer 4:	Notified:		
Associated Person:			7	
Sunday 08/13/2017	17-713421 4504 - EMS 1250 SULLIVAN RD ALDEN V	ILL		
Received: 20:30:35	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -	
Dispatched: 20:31:03	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87	
Arrived: 20:37:05	Officer 3:	Source:	E-911	
Completed: 23:13:00	Officer 4:	Notified:		
Associated Person				
Monday 08/14/2017	17-713468 4504 - EMS 12845 BROADWAY ALDEN V			
Received: 11:25:02	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85	
Dispatched: 11:26:00	Officer 2: LVAC7 - 701	Dispatched By:	COHAN SHARON - D85	
Arrived: 11:31:34	Officer 3:	Source:	E-911	
Completed: 12:18:13	Officer 4:	Notified:		
Associated Person:				
Tuesday 08/15/2017	17-713550 4504 - EMS 13268 BROADWAY ALDEN V	/ILL		
Received: 18:32:19	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -	
Dispatched: 18:32:19	Officer 2: LVAC7 - 701		FIRESTONE JANE -	
Arrived: 18:35:11	Officer 3:	Source:	E-911	
Completed: 18:57:07	Officer 4:	Notified:	LIEUTENANT	
Associated Person				
Friday 08/18/2017	17-713682 4504 - EMS 1525 RUSHER DR 1 ALDEN V	ILL	···	_
Received: 11:23:43	Officer 1: ALDEN FIRE DEPT +9	Received By:	FIRESTONE JANE -	
Dispatched: 11:23:43	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87	
Arrived: 11:33:00	Officer 3:	Source:	E-911	
Completed: 12:20:05	Officer 4:	Notified:		
Associated Person:				

Sunday 08/20/2017	17-713810 4504 - EMS 1376 EXCHANGE ST ALDEN V		· · · · · · · · · · · · · · · · · · ·
Received: 07:57:28 Dispatched: 07:59:09 Arrived: 08:04:33 Completed: 10:45:28	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person			
Monday 08/21/2017	17-713853 4504 - EMS 13595 BROADWAY ALDEN VI	 LL	<u> </u>
Received: 11:44:54 Dispatched: 11:45:43 Arrived: 11:50:35 Completed: 12:43:55 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Tuesday 08/22/2017	17-713913 4504 • EMS 13137 BROADWAY ALDEN VI	LL	
Received: 17:14:48 Dispatched: 17:15:00 Arrived: 17:18:20 Completed: 18:01:07	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	BALK JENNIFER - D87 ARMSTRONG E-911
Associated Person:			
Friday 08/25/2017	17-714059 4504 - EMS 13281 COLONIAL WOODS DR	ALDEN VILL	
Received: 12:13:56 Dispatched: 12:14:58 Arrived: 12:19:42 Completed: 14:22:25 Associated Person	Officer 1:ALDEN FIRE DEPT - 9 Officer 2:LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PHONE
Associated Person:			
Friday 08/25/2017	17-714094 4504 - EMS 12863 BROADWAY ALDEN V	LL.	
Received: 21:59:41 Dispatched: 21:59:45 Arrived: 22:01:32 Completed: 22:12:53 Associated Person	Officer 1:LVAC7 - 701 Officer 2:ALDEN FIRE DEPT - 9 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - PHONE
Monday 08/28/2017	17-714234 4504 - EMS 12845 BROADWAY ALDEN V	 LL	
Received: 15:45:20 Dispatched: 15:46:06 Arrived: 15:51:25 Completed: 17:30:01	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	ARMSTRONG E-911
Associated Person			
Associated Person Wednesday 08/30/2017	17-714320 4504 - EMS		
Received: 01:42:46 Dispatched: 01:44:09 Arrived: 01:53:32	13281 COLONIAL WOODS DR Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Received By: Dispatched By: Source:	E-911
Completed: 02:29:57 Associated Person:	Officer 4:	Notified:	

Sunday 09/03/2017 17-714562 4504 - EMS 1468 KELLOGG ST ALDEN VILL Received: 01:35:02 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 01:35:40 Officer 2: LVAC7 - 701 Dispatched By: Arrived: Officer 3: 01:44:16 Source: E-911 Officer 4: Completed: 02:06:18 Notified: Associated Person: (Associated Person: I Sunday 09/03/2017 17-714576 4504 - EMS 1468 KELLOGG ST ALDEN VILL Received: 12:01:51 Officer 1: ALDEN FIRE DEPT - 9 Received By: Officer 2: LVAC7 - 701 Dispatched By: **Dispatched: 12:02:36** Arrived: 12:05:07 Officer 3: Source: E-911 Completed: 12:21:41 Officer 4: Notified: Associated Person: Monday 09/04/2017 17-714609 4499 - FIRE OTHER 1536 RUSHER DR 6D ALDEN VILL Received: 02:27:27 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 02:27:29 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 02:39:39 Officer 3: Source: **PHONE** Officer 4: Completed: 03:10:34 Notified: Associated Person: Associated Person: \ 17-714815 4504 - EMS Thursday 09/07/2017 1338 EXCHANGE ST ALDEN VILL Received By: Received: 14:13:45 Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Dispatched: 14:14:53 Dispatched By: Arrived: 14:25:03 Officer 3: Source: E-911 Completed: 16:28:01 Officer 4: Notified: Associated Person: Friday 09/08/2017 17-714860 4504 - EMS 12845 BROADWAY ALDEN VILL Received: 11:46:55 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched By: FIRESTONE JANE -Dispatched: 11:48:01 Officer 2:LVAC7 - 701 Source: Arrived: Officer 3: E-911 11:49:23 Notified: Completed: 13:52:00 Officer 4: Associated Person: Saturday 09/09/2017 17-714908 4504 - EMS 13383 IRVING ST ALDEN VILL Received: 07:08:16 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKÓWSKI JEAN -Dispatched: 07:08:42 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: Officer 3: Source: E-911 07:15:58 Notified: Completed: 09:13:36 Officer 4: Associated Person: Monday 09/11/2017 17-715017 4504 - EMS 13383 IRVING ST ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 11:36:35 Received By: FIRESTONE JANE -Dispatched: 11:36:36 Officer 2: LVAC7 - 701 Dispatched By: COHAN SHARON - D85 11:42:44 Source: E-911 Arrived: Officer 3: Completed: 12:36:28 Officer 4: Notified: Associated Person:

Friday 09/15/2017	17-715294 4504 - EMS 13006 BROADWAY ALDEN V		· ·
Received: 22:13:07 Dispatched: 22:13:23 Arrived: 22:17:55 Completed: 23:02:19	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	BALK JENNIFER - D87 BALK JENNIFER - D87 PHONE
Associated Person:			
Tuesday 09/19/2017	17-715502 4504 - EMS 1376 EXCHANGE ST ALDEN \	/ILL	
Received: 17:47:39 Dispatched: 17:47:40 Arrived: 17:48:58 Completed: 20:15:12 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - E-911 LIEUTENANT
Sunday 09/24/2017	17-715785 4504 - EMS 1662 BAXTER AV ALDEN VILI		
Received: 16:56:45 Dispatched: 16:57:02 Arrived: 17:02:46 Completed: 19:16:36 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - FIRESTONE JANE - E-911
Monday 09/25/2017	17-715839 4504 - EMS 13118 W MAIN ST ALDEN VIL		
Received: 19:14:54 Dispatched: 19:14:55 Arrived: 19:15:17 Completed: 21:18:33 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - E-911
Tuesday 09/26/2017	17-715903 4504 - EMS 1647 CRITTENDEN RD ALDE	N VILL	
Received: 18:45:56 Dispatched: 18:46:10 Arrived: 18:51:10 Completed: 19:14:36	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PHONE
Associated Person:		<u>_</u>	
Wednesday 09/27/2017	17-715920 4504 - EMS 1338 EAST DR ALDEN VILL		
Received: 07:17:44 Dispatched: 07:18:47 Arrived: 07:28:28 Completed: 08:50:22 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - PAWLIKOWSKI JEAN - E-911
Wednesday 09/27/2017	17-715963 4504 - EMS 1376 EXCHANGE ST ALDEN	VILE	
Received: 21:34:33 Dispatched: 21:34:38 Arrived: 21:44:25	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Received By:	ARMSTRONG BALK JENNIFER - D87 E-911

Thursday 09/28/2017	17-715989 4504 · EMS 1532 RUSHER DR 4B ALDEN \	/ILL	······································
Received: 11:42:45 Dispatched: 11:42:46 Arrived: 11:52:12 Completed: 12:05:05	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - PHONE
Associated Person:			
Friday 09/29/2017	17-716049 4504 - EMS 12845 BROADWAY ALDEN V	ILL	
Received: 13:50:27 Dispatched: 13:50:29 Arrived: 13:50:29	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Received By: Dispatched By: Source:	FIRESTONE JANE - E-911
Completed: 13:50:30 Associated Person:	Officer 4:	Notified:	
Saturday 09/30/2017	17-716099 4504 - EMS 1326 ABBY LA ALDEN VILL		
Received: 11:16:30 Dispatched: 11:16:31 Arrived: 11:23:50 Completed: 12:22:50	Officer 1: ALDEN FIRE DEPT -9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - PAWLIKOWSKI JEAN - ON VIEW
Associated Person:			
Saturday 09/30/2017	17-716122 4504 - EMS 12885 BROADWAY ALDEN V		-
Received: 21:44:06 Dispatched: 21:44:06 Arrived: 21:48:33 Completed: 22:23:35	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - PHONE
Associated Person:			
Associated Person:	The state of the s		
Monday 10/02/2017	17-716241 4504 - EMS 1373 ABBY LA ALDEN VILL		
Received: 22:39:47 Dispatched: 22:39:47 Arrived: 22:52:09 Completed: 23:37:46	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	BALK JENNIFER - D87 BALK JENNIFER - D87 E-911
Associated Person:			
Tuesday 10/03/2017	17-716283 4504 - EMS 13325 BROADWAY ALDEN V	/ILL	
Received: 14:13:51 Dispatched: 14:14:48 Arrived: 14:20:58 Completed: 14:20:58 Associated Person	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PHONE
Wednesday 10/04/2017	17-716334 4504 - EMS 1376 EXCHANGE ST ALDEN	VILL	<u> </u>
Received: 13:15:13 Dispatched: 13:16:01 Arrived: 13:22:53 Completed: 13:47:00	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By Source: Notified:	COHAN SHARON - D85 E-911

Wednesday 10/04/2017	17-716358 4504 - EMS 1376 EXCHANGE ST ALDEN	VILL	
Received: 19:02:48 Dispatched: 19:02:50 Arrived: 19:09:06	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Received By: Dispatched By: Source:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - E-911
Completed: 20:12:09	Officer 4:	Notified:	L-911
Associated Person:			
Friday 10/06/2017	17-716448 4504 - EMS 12914 W MAIN ST ALDEN VIL		
Received: 13:23:51	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 13:23:52	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 13:26:53	Officer 3:	Source:	E-911
Completed: 14:29:41	Officer 4:	Notified:	
Associated Person:			
Associated Person:		ة - د <u>-ري</u>	
Saturday 10/07/2017	17-716485 4504 - EMS 12845 BROADWAY ALDEN V	TLL	
Received: 10:45:24	Officer 1: ALDEN FIRE DEPT -9	Received By:	COHAN SHARON - D85
Dispatched: 10:45:25	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 10:51:26	Officer 3:	Source:	E-911
Completed: 11:53:24	Officer 4:	Notified:	
Associated Person:	47.740044 4704 7744		
Friday 10/13/2017	17-716844 4504 - EMS 12845 BROADWAY ALDEN V		
Received: 16:07:19	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 16:08:08	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 16:10:47	Officer 3:	Source:	E-911
Completed: 17:20:28	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Saturday 10/14/2017	17-716904 4504 - EMS 13190 PARK ST ALDEN VILL		
Received: 13:04:49	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 13:08:08	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 13:08:08 Completed: 14:13:52	Officer 3: Officer 4:	Source: Notified:	PHONE
Associated Person:	Onice 4.	MOCRIOU.	
	47.746040 4504 FNG		
Saturday 10/14/2017	17-716910 4504 - EMS 13190 PARK ST ALDEN VILL		
Received: 14:12:22	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 14:13:06	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	
Arrived: 14:43:21	Officer 3:	Source: Notified:	PHONE
Completed: 15:41:47	Officer 4:	Nounea:	
Associated Person		.	
Saturday 10/14/2017	17-716912 4504 - EMS 13190 PARK ST ALDEN VILL		
Received: 14:57:02	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 14:59:10	Officer 2:LVAC7 - 701	Dispatched By	
Arrived: 15:12:49	Officer 3:	Source:	RADIO
Completed: 15:57:31	Officer 4:	Notified:	
Associated Person:			

Monday 10/16/2017 17-716999 4504 - EMS 13167 PARK ST ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 01:18:55 Received By: STEWART ANGELA -Dispatched By: Dispatched: 01:19:35 Officer 2: LVAC7 - 701 Arrived: Officer 3: 01:30:15 Source: PHONE Completed: 03:16:13 Officer 4: Notified: Associated Person: Tuesday 10/17/2017 17-717068 4504 - EMS 13137 BROADWAY ALDEN VILL Received: 10:53:07 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 10:53:22 Officer 2: LVAC7 - 701 Dispatched By: Arrived: Officer 3: 10:59:56 Source: E-911 Officer 4: Notified: Completed: 11:31:04 Associated Person: Thursday 10/19/2017 17-717189 4504 - EMS 13190 PARK ST ALDEN VILL Received: 11:09:59 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 11:10:13 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 11:14:55 Officer 3: Source: E-911 Completed: 13:18:18 Officer 4: Notified: Associated Persons Associated Person Friday 10/20/2017 17-717257 4504 - EMS 13275 PARK ST 5 ALDEN VILL Received: 10:10:43 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 10:10:43 Officer 2:LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Source: Arrived: 10:17:46 Officer 3: E-911 Officer 4: Notified: Completed: 11:11:47 Associated Person: (Associated Person: Sunday 10/22/2017 17-717394 4504 - EMS 1795 CRITTENDEN RD ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Received: 07:42:28 Dispatched By: COHAN SHARON - D85 Dispatched: 07:42:50 Officer 2: LVAC7 - 701 Arrived: 07:48:33 Officer 3: MAUTE STACY - 48 Source: E-911 Completed: 10:12:32 Officer 4: GRECO ANGELA - 33 Notified: Associated Person: Monday 10/23/2017 17-717461 4504 - EMS 13336 BROADWAY ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 14:11:17 COHAN SHARON - D85 Dispatched: 14:12:00 Officer 2:LVAC7 - 701 Dispatched By: Officer 3: Source: Arrived: 14:17:18 E-911 Notified: Completed: 15:03:50 Officer 4: Associated Person: Wednesday 10/25/2017 17-717574 4504 - EMS 1113 EXCHANGE ST ALDEN VILL Received: 17:07:46 Officer 1: ALDEN FIRE DEPT - 9 Received By: Officer 2: LVAC7 - 701 Dispatched: 17:09:43 Dispatched By: Arrived: 17:13:10 Officer 3: Source: E-911 Notified: LIEUTENANT Completed: 19:47:55 Officer 4: Associated Person: Pl

Wednesday 10/25/2017	17-717575 4504 - EMS 1461 KELLOGG ST ALDEN V		
Received: 17:37:18 Dispatched: 17:38:23 Arrived: 17:40:22 Completed: 18:37:10	Officer 1: ALDEN FIRE DEPT -9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911 LIEUTENANT
Associated Person:			
Thursday 10/26/2017	17-717627 4504 - EMS 1530 RUSHER DR 1A ALDEN 1	VILL	
Received: 15:59:35 Dispatched: 16:01:48 Arrived: 16:07:51 Completed: 16:58:57	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person:	47 747AF		
Friday 10/27/2017	17-717675 4504 - EMS 1113 EXCHANGE ST ALDEN	VILL	
Received: 15:29:03 Dispatched: 15:29:06 Arrived: 15:35:49 Completed: 17:21:59 Associated Person:	Officer 1: LVAC7 - 701 Officer 2: ALDEN FIRE DEPT - 9 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	ARMSTRONG ARMSTRONG E-911
Saturday 10/28/2017	17-717708 4504 - EMS		
outured Torzorzo II	1525 RUSHER DR 20 ALDEN	VILL	
Received: 01:11:31 Dispatched: 01:11:32 Arrived: 01:19:31 Completed: 03:15:52 Associated Person: Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	STEWART ANGELA - BALK JENNIFER - D87 E-911
Saturday 10/28/2017	17-717734 4504 - EMS 1431 SEABROOK DR ALDEN	VILL	
Received: 14:18:34 Dispatched: 14:18:35 Arrived: 14:24:56 Completed: 14:39:54 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	FIRESTONE JANE - FIRESTONE JANE - PHONE
Tuesday 10/31/2017	17-717885 4504 - EMS 13370 CHERRY TREE LA ALI	DEN VILL	
Received: 16:11:21 Dispatched: 16:12:59 Arrived: 16:19:12 Completed: 18:43:09 Associated Person	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911 LIEUTENANT
Associated Person:	1 September 2012		
Wednesday 11/01/2017	17-717910 4504 - EMS 13353 MERCER DR ALDEN \	/ILL	
Received: 00:10:49 Dispatched: 00:10:52 Arrived: 00:18:44 Completed: 02:00:15 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	STEWART ANGELA - E-911

Wednesday 11/01/2017 17-717921 4504 - EMS 1409 EAST DR ALDEN VILL Received: 08:09:46 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 08:09:46 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 08:16:17 Officer 3: Source: E-911 Completed: 10:42:43 Notified: Officer 4: Associated Person: Sunday 11/05/2017 17-718139 4504 - EMS 1322 EAST DR ALDEN VILL Received: 19:22:50 Officer 1:LVAC7 - 701 Received By: SCHAEFER TAMMIE -Dispatched: 19:22:51 Officer 2: Dispatched By: SCHAEFER TAMMIE -Source: Arrived: 19:46:45 Officer 3: PHONE Notified: Completed: 20:05:31 Officer 4: Associated Person: Monday 11/06/2017 17-718194 4504 - EMS 12914 BROADWAY 3 ALDEN VILL Received: 12:43:47 Officer 1: ALDEN FIRE DEPT - 9 Received By: **COHAN SHARON - D85** Dispatched: 12:44:21 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 12:53:20 Officer 3: Source: E-911 Completed: 14:43:22 Officer 4: Notified: Associated Person: Wednesday 11/08/2017 17-718293 4504 · EMS 12885 BROADWAY 6 ALDEN VILL Received: 08:44:20 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 08:44:20 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Arrived: 08:50:28 Officer 3: Source: E-911 Notified: Completed: 09:08:34 Officer 4: Associated Person: R Wednesday 11/08/2017 17-718305 4504 - EMS 1530 RUSHER DR 1A ALDEN VILL Received: 13:56:40 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 13:56:40 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Source: PHONE Arrived: 14:02:28 Officer 3: Notified: Completed: 16:01:13 Officer 4: Associated Person: Wednesday 11/08/2017 17-718343 4504 - EMS 13157 PARK ST 8 ALDEN VILL Received: 23:32:13 Officer 1: ALDEN FIRE DEPT - 9 Received By: STEWART ANGELA -Dispatched By: STEWART ANGELA -Dispatched: 23:33:29 Officer 2:LVAC7 - 701 Arrived: 23:40:38 Officer 3: Source: E-911 Completed: 02:05:34 Officer 4: Notified: Associated Person Thursday 11/09/2017 17-718386 4504 - EMS 13333 BROADWAY ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 19:52:17 Received By: ARMSTRONG Dispatched: 19:52:24 Officer 2: LVAC7 - 701 Dispatched By: ARMSTRONG Arrived: 19:55:30 Officer 3: Source: OTHER POLICE Completed: 21:37:48 Officer 4: Notified: Associated Person:

Friday 11/10/2017	17-718416 4504 - EMS 13333 BROADWAY 4 ALDEN	VILL	
Received: 12:02:43 Dispatched: 12:02:44 Arrived: 12:06:00	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Source:	FIRESTONE JANE - COHAN SHARON - D85 E-911
Completed: 13:01:00	Officer 4:	Notified:	
Associated Person			
Monday 11/13/2017	17-718544 4504 - EMS 13281 COLONIAL WOODS DR	ALDEN VILL	
Received: 09:38:01	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 09:39:38	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 09:47:53	Officer 3:	Source:	E-911
Completed: 10:39:40	Officer 4:	Notified:	
Associated Person:			
Monday 11/13/2017	17-718549 4504 - EMS 12845 BROADWAY ALDEN V	TLL	
Received: 11:10:28	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 11:12:34	Officer 2:LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 11:17:10	Officer 3:	Source:	E-911
Completed: 13:32:32	Officer 4:	Notified:	
Associated Person:	the second secon		<u> </u>
Thursday 11/16/2017	17-718686 4504 - EMS 1530 RUSHER DR 1A ALDEN	VILL	
Received: 08:05:01	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 08:05:07	Officer 2: LVAC7 - 701	•	COHAN SHARON - D85
Arrived: 08:13:29	Officer 3:	Source:	PHONE
Completed: 10:16:55	Officer 4:	Notified:	
Associated Person:	<u> </u>		
Thursday 11/16/2017	17-718703 4504 - EMS 1534 RUSHER DR 8C ALDEN	VILŁ	
Received: 13:31:29	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 13:31:32	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 13:39:59	Officer 3:	Source:	E-911
Completed: 14:20:00	Officer 4:	Notified:	
Associated Person:			- COL
Associated Person:		<u> </u>	
Thursday 11/16/2017	17-718722 4504 - EMS 13611 BROADWAY ALDEN \	/ILL	
Received: 18:45:41	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 18:45:47	Officer 2: ALDEN FIRE DEPT - 9	, ,	ARMSTRONG
Arrived: 18:50:37	Officer 3:	Source:	E-911
Completed: 20:46:15	Officer 4:	Notified:	
Associated Person:	and the second s		
Associated Person:			
Friday 11/17/2017	17-718752 4504 - EMS 13313 MAPLE RIDGE DR ALI	DEN VILL	
Received: 12:29:28	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 12:30:00	Officer 2: LVAC7 - 701	•	: PAWLIKOWSKI JEAN -
Arrived: 12:37:24	Officer 3:	Source:	E-911
Completed: 12:54:27	Officer 4:	Notified:	
Associated Person:	the state of the s		
Associated Person: F	and the second s		

Friday 11/17/2017	17-718775 4508 - EMS ASSIS 1569 HOMECOURT ALDEN V	-	
Received: 21:09:47	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 21:09:50	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	•
Arrived: 21:14:46	Officer 3:	Source:	E-911
Completed: 21:32:59	Officer 4:	Notified:	
Associated Person			
Sunday 11/19/2017	17-718888 4504 - EMS 1338 EAST DR ALDEN VILL		-
Received: 22:06:01	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 22:06:01	Officer 2:LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 22:13:03	Officer 3:	Source:	E-911
Completed: 23:09:50	Officer 4:	Notified:	
Associated Person:			
Thursday 11/23/2017	17-719075 4504 - EMS 1530 RUSHER DR 1A ALDEN	VILL	
Received: 05:25:06	Officer 1: ALDEN FIRE DEPT -9	Received By:	
Dispatched: 05:25:32	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 05:34:18	Officer 3:	Source:	PHONE
Completed: 06:20:05	Officer 4:	Notified:	
Associated Person	The second secon	, , , , , , , , , , , , , , , , , ,	
Sunday 11/26/2017	17-719245 4504 - EMS 13346 PARK ST ALDEN VILL		
Received: 19:25:49	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 19:27:09	Officer 2:LVAC7 - 701	Dispatched By:	ARMSTRONG
Arrived: 19:33:46	Officer 3:	Source:	E-911
Completed: 21:28:21	Officer 4:	Notified:	
Associated Person			·
Tuesday 11/28/2017	17-719320 4200 - SUICIDE O 1456 ELM ST ALDEN VILL	R ATTEMPT	
Received: 05:38:01	Officer 1: LVAC7 - 701	Received By:	STEWART ANGELA -
Dispatched: 05:39:06	Officer 2:	Dispatched By:	STEWART ANGELA -
Arrived: 05:51:42	Officer 3:	Source:	PHONE
Completed: 11:34:45	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Tuesday 11/28/2017	17-719344 4504 - EMS 13148 W MAIN ST ALDEN VII	.L	
Received: 14:38:12	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 14:39:40	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 14:43:12	Officer 3:	Source:	E-911
Completed: 15:27:17	Officer 4:	Notified:	
Associated Person:			
Wednesday 11/29/2017	17-719380 4504 - EMS 1414 CHESTNUT ST ALDEN	VILL.	
Received: 07:35:44	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 07:38:01	Officer 2: LVAC7 - 701		: PAWLIKOWSKI JEAN -
Arrived: 07:41:00	Officer 3:	Source:	E-911
Completed: 08:47:35	Officer 4:	Notified:	
Associated Person:	The state of the s		2

Friday 12/01/2017	17-719507 4504 - EMS 12845 BROADWAY ALDEN \		
Received: 14:20;52 Dispatched: 14:20;53 Arrived: 14:31:33	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3:	Received By: Dispatched By: Source:	FIRESTONE JANE - FIRESTONE JANE - E-911
Completed: 15:09:00	Officer 4:	Notified:	
Associated Person:			
Tuesday 12/12/2017	17-720130 4504 - EMS 13280 BROADWAY ALDEN \	/ILL	
Received: 15:45:59	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 15:47:45	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 15:50:14	Officer 3:	Source:	PHONE
Completed: 16:37:35	Officer 4:	Notified:	
Associated Person:			
Wednesday 12/13/2017	17-720169 4504 - EMS 13595 BROADWAY ALDEN \	/ILL	
Received: 08:25:31	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 08:27:07	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 08:33:22	Officer 3:	Source:	E-911
Completed: 09:25:09	Officer 4:	Notified:	
Associated Person:			
Wednesday 12/13/2017	17-720185 4504 - EMS 1530 RUSHER DR 1A ALDEN	VILL	
Received: 13:03:20	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 13:04:53	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	
Arrived: 13:09:38	Officer 3:	Source:	E-911
Completed: 13:27:37	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Wednesday 12/13/2017	17-720188 4504 - EMS 1530 RUSHER DR 1A ALDEN	VILL	
Received: 13:46:46	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 13:48:50	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 13:48:50	Officer 3:	Source:	PHONE
Completed: 14:53:47	Officer 4:	Notified:	
Associated Person			
Thursday 12/14/2017	17-720244 4504 - EMS 1529 CRITTENDEN RD ALDE	EN VILL	
Received: 11:41:27	Officer 1: ALDEN FIRE DEPT - 9		
Dispatched: 11:42:17	Officer 2:LVAC7 - 701		FIRESTONE JANE -
Arrived: 11:45:18	Officer 3:	Source:	E-911
Completed: 12:20:52	Officer 4:	Notified:	
Associated Person: P			
Sunday 12/17/2017	17-720405 4504 - EMS 1074 EXCHANGE ST ALDEN	VILL	
Received: 01:40:35	Officer 1:ALDEN FIRE DEPT - 9	•	
Dispatched: 01:40:39	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 01:53:39	Officer 3:	Source:	PHONE
Completed: 02:41:08	Officer 4:	Notified:	
Associated Person:			

Wednesday 12/20/2017	17-720601 4504 - EMS 13258 IRVING ST ALDEN VILL		
Received: 11:40:13	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 11:42:02	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 11:48:52	Officer 3:	Source:	E-911
Completed: 13:00:10	Officer 4:	Notified:	
Associated Person	· · · · · · · · · · · · · · · · · · ·		
Thursday 12/21/2017	17-720648 4504 - EMS 1596 EMERSON ST ALDEN VI	LL	
Received: 10:04:18	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 10:05:22	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 10:10:54	Officer 3:	Source:	PHONE
Completed: 11:48:22	Officer 4:	Notified:	
Associated Person		<u>. </u>	
Monday 12/25/2017	17-720893 4504 - EMS 1411 EXCHANGE ST ALDEN \	/ILL	
Received: 21:37:10	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 21:37:11	Officer 2: LVAC7 - 701	-	BALK JENNIFER - D87
Arrived: 21:43:08	Officer 3:	Source:	PHONE
Completed: 23:41:42	Officer 4:	Notified:	
Associated Person:	Section of the sectio		
Wednesday 12/27/2017	17-720966 4504 - EMS 1135 EXCHANGE ST ALDEN \	VILL	_
Received: 06:35:59	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 06:36:43	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 06:43:54	Officer 3:	Source:	E-911
Completed: 09:08:37	Officer 4:	Notified:	
Associated Person:			
Sunday 12/31/2017	17-721194 4504 - EMS 1458 SEABROOK DR ALDEN	VILL	
Received: 22:50:08	Officer 1: ALDEN FIRE DEPT -9	Received By:	
Dispatched: 22:50:10	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 22:59:00	Officer 3:	Source:	PHONE
Completed: 23:50:23	Officer 4:	Notified:	
Associated Person:			
Tuesday 01/02/2018	18-800054 4504 - EMS 1530 RUSHER DR 1A ALDEN	VILL	
Received: 05:26:28	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 05:26:42	Officer 2:LVAC7 - 701	Dispatched By	
Arrived: 05:37:59	Officer 3:	Source:	PHONE
Completed: 06:35:13	Officer 4:	Notified:	
Associated Person:			
Friday 01/05/2018	18-800270 4504 - EMS 12914 W MAIN ST ALDEN VII	LL	
Received: 21:36:07	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 21:38:11	Officer 2: LVAC7 - 701	• -	: STEWART ANGELA -
Arrived: 21:44:24	Officer 3:	Source:	E-911
Completed: 23:43:13	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Associated Person:			

Saturday 01/06/2018	18-800282 4902 - INJURY AC EXCHANGE ST @ BROADWA		*
Received: 03:30:40 Dispatched: 03:31:46	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701	Received By:	STEWART ANGELA - STEWART ANGELA -
Arrived: 03:36:50	Officer 3:	Source:	OTHER POLICE
Completed: 04:34:24	Officer 4:	Notified:	
Associated Person			
Sunday 01/07/2018	18-800349 4504 - EMS 1403 EXCHANGE ST 1 ALDEN	VILL	
Received: 13:30:16	Officer 1: LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 13:30:17	Officer 2: ALDEN FIRE DEPT - 9		FIRESTONE JANE -
Arrived: 13:38:21	Officer 3:	Source:	E-911
Completed: 13:54:55	Officer 4:	Notified:	
Associated Person:			
Sunday 01/07/2018	18-800371 4504 - EMS 1432 ELM ST ALDEN VILL		
Received: 21:24:47	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 21:29:54	Officer 2: LVAC7 - 701	Dispatched By:	BALK JENNIFER - D87
Arrived: 21:30:02	Officer 3:	Source:	PHONE
Completed: 23:33:56	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Wednesday 01/10/2018	18-800528 4504 - EMS 13171 PARK ST ALDEN VILL		
Received: 11:10:32	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 11:10:33	Officer 2: LVAC7 - 701		COHAN SHARON - D85
Arrived: 11:20:26	Officer 3:	Source:	PHONE
Completed: 11:34:11	Officer 4:	Notified:	_
Associated Person:			
Wednesday 01/10/2018	18-800536 4504 - EMS 13090 BROADWAY ALDEN V		
Received: 13:36:04	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 13:36:06	Officer 2: LVAC7 - 701	Dispatched By:	F 844
Arrived: 13:41:07	Officer 3:	Source: Notified:	E-911
Completed: 13:59:29	Officer 4:	Notaneo:	
Associated Person: Thursday 01/11/2018	18-800570 4504 - EMS	<u></u>	
·	1339 EXCHANGE ST ALDEN		
Received: 03:38:59	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 03:39:02	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 03:51:18 Completed: 04:42:20	Officer 3: Officer 4:	Source: Notified:	E-911
Associated Person:	Officer 4.	Monned:	
Monday 01/15/2018	18-800805 4504 - EMS 13500 BROADWAY ALDEN V		
Received: 16:45:33	Officer 1:LVAC7 - 701	Received By:	ARMSTRONG
Dispatched: 16:45:33	Officer 2: ALDEN FIRE DEPT -9		ARMSTRONG
Arrived: 16:54:53	Officer 3:	Source:	E-911
Completed: 18:38:11	Officer 4:	Notified:	
Associated Person:			
Associated Person: Q	22	· · · · · · · · · · · · · · · · · · ·	

Wednesday 01/17/2018	18-800903 4504 - EMS 12845 BROADWAY ALDEN VI	LL.	
Received: 15:28:13	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 15:28:13	Officer 2: LVAC7 - 701	Dispatched By:	SCHAEFER TAMMIE -
Arrived: 15:34:01	Officer 3:	Source:	E-911
Completed: 16:52:17	Officer 4:	Notified:	
Associated Person:			
Friday 01/19/2018	18-800999 4504 - EMS 13595 BROADWAY ALDEN VI	LL	
Received: 11:01:50	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 11:03:15	Officer 2: LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 11:09:35	Officer 3:	Source:	E-911
Completed: 12:10:41	Officer 4:	Notified:	
Associated Person			
Friday 01/19/2018	18-801011 4504 - EMS 12845 BROADWAY ALDEN VI		
Received: 14:22:28	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 14:23:59	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 14:28:24	Officer 3:	Source:	E-911
Completed: 15:26:31	Officer 4:	Notified:	
Associated Person:			
Saturday 01/20/2018	18-801074 4504 - EMS 13320 BROADWAY ALDEN VI		
Received: 17:26:16	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 17:26:20	Officer 2: LVAC7 - 701	Dispatched By:	SCHAEFER TAMMIE -
Arrived: 17:30:02	Officer 3:	Source:	PHONE
Completed: 19:33:46	Officer 4:	Notified:	
Associated Person:			
Monday 01/22/2018	18-801159 4504 - EMS 13107 BROADWAY ALDEN V		
Received: 13:10:47	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 13:10:58	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 13:17:52	Officer 3:	Source:	E-911
Completed: 14:16:13	Officer 4:	Notified:	
Associated Person			
Friday 01/26/2018	18-801359 4504 - EMS 1382 ABBY LA ALDEN VILL		
Received: 08:34:34	Officer 1: ALDEN FIRE DEPT -9	Received By:	FIRESTONE JANE -
Dispatched: 08:34:34	Officer 2: LVAC7 - 701	, ,	COHAN SHARON - D85
Arrived: 08:41:09	Officer 3:	Source:	E-911
Completed: 09:43:26	Officer 4:	Notified:	
Associated Person:		7	
Saturday 01/27/2018	18-801426 4504 - EMS 13207 PARK ST ALDEN VILL		
Deschad. 00:47:00	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Received: 06:17:22			
Dispatched: 06:18:49	Officer 2: LVAC7 - 701	Dispatched By:	
Dispatched: 06:18:49 Arrived: 06:25:33	Officer 3:	Source:	E-911
Dispatched: 06:18:49			

<u></u>			
Saturday 01/27/2018	18-801444 4504 - EMS 1325 EAST DR ALDEN VILL		
Received: 15:41:44	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 15:42:21	Officer 2: LVAC7 - 701		ARMSTRONG
Arrived: 15:48:47	Officer 3:	Source:	OTHER POLICE
Completed: 16:06:44	Officer 4:	Notified:	
Associated Persor			
Tuesday 01/30/2018	18-801585 4504 - EMS 1325 EAST DR ALDEN VILL		
Received: 19:11:12	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 19:12:23	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 19:19:09	Officer 3:	Source:	E-911
Completed: 21:02:30	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Wednesday 01/31/2018	18-801616 4504 - EMS 13595 BROADWAY ALDEN V	7LL	
Received: 13:57:34	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 13:57:34	Officer 2:LVAC7 - 701		FIRESTONE JANE -
Arrived: 14:01:52	Officer 3:	Source:	E-911
Completed: 14:58:59	Officer 4:	Notified:	
Associated Person:			<u> </u>
Sunday 02/04/2018	18-801798 4504 - EMS 1677 MEADOW DR ALDEN VI	LL	
Received: 12:01:41	Officer 1: ALDEN FIRE DEPT - 9	Received By:	COHAN SHARON - D85
Dispatched: 12:03:00	Officer 2:LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 12:12:36	Officer 3:	Source:	E-911
Completed: 14:13:16	Officer 4:	Notified:	
Associated Person:			
Sunday 02/04/2018	18-801813 4504 - EMS 1536 RUSHER DR ALDEN VIL	.L	
Received: 21:41:36	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 21:41:36	Officer 2:LVAC7 - 701		BALK JENNIFER - D87
Arrived: 21:48:22	Officer 3:	Source:	E-911
Completed: 22:40:27	Officer 4:	Notified:	
Associated Person:			
Monday 02/05/2018	18-801853 4504 • EMS 12845 BROADWAY ALDEN \	/ILL	
Received: 16:42:35	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 16:43:02	Officer 2:LVAC7 - 701	, ,	BALK JENNIFER - D87
Arrived: 16:48:08	Officer 3:	Source:	E-911
Completed: 18:54:10	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Tuesday 02/06/2018	18-801887 4504 - EMS 13595 BROADWAY ALDEN \	/ILL	
Received: 11:05:52	Officer 1:LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 11:05:53	Officer 2: ALDEN FIRE DEPT - 9	•	FIRESTONE JANE -
Arrived: 11:10:52	Officer 3:	Source:	E-911
Completed: 11:37:26	Officer 4:	Notified:	
Associated Person:			

Wednesday 02/07/2018	18-801935 4504 - EMS BROADWAY @ CRITTENDE	N RD ALDEN VIL	<u> </u>
Received: 08:48:52	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 08:49:44	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 08:55:55	Officer 3:	Source:	PHONE
Completed: 09:53:32	Officer 4:	Notified:	
Associated Person;			
Thursday 02/08/2018	18-801994 4504 - EMS 13190 PARK ST ALDEN VILL		
Received: 07:51:43	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 07:51:48	Officer 2: LVAC7 - 701	•	STEWART ANGELA -
Arrived: 07:57:43	Officer 3:	Source:	OTHER POLICE
Completed: 08:55:59	Officer 4:	Notified:	
Associated Persor			
Friday 02/09/2018	18-802068 4504 - EMS 1570 EMERSON ST ALDEN VI		
Received: 13:53:40	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 13:54:38	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 13:57:53	Officer 3:	Source:	E-911
Completed: 14:57:27	Officer 4:	Notified:	
Associated Person		<u> </u>	
Associated Person:			
Saturday 02/10/2018	18-802111 4504 - EMS 13252 MT VERNON DR ALDE	N VILL	
Received: 07:30:44	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 07:31:34	Officer 2: LVAC7 - 701	Dispatched By:	STEWART ANGELA -
Arrived: 07:41:50	Officer 3:	Source:	E-911
Completed: 09:28:54	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Monday 02/12/2018	18-802213 4504 - EMS 1596 EMERSON ST ALDEN V	ill	
Received: 07:02:03	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 07:02:04	Officer 2:LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 07:09:39	Officer 3:	Source:	E-911
Completed: 08:12:13	Officer 4:	Notified:	
Associated Person:	and the second second		
Monday 02/12/2018	18-802238 4504 - EMS 1282 EAST DR ALDEN VILL		
Received: 16:58:10	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 16:58:11	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 17:06:45	Officer 3:	Source:	PHONE
Completed: 19:13:12	Officer 4:	Notified:	
Associated Person			
Tuesday 02/13/2018	18-802285 4504 - EMS 13524 BROADWAY ALDEN V	/ILL	
Received: 11:06:42	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 11:06:48	Officer 2: LVAC7 - 701		: PAWLIKOWSKI JEAN -
Arrived: 11:16:56	Officer 3:	Source:	E-911
Completed: 12:08:28	Officer 4:	Notified:	
Associated Person			
Associated Person:			

Tuesday 02/13/2018	18-802290 4504 - EMS 12845 BROADWAY ALDEN V	7LL	
Received: 12:10:24	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 12:10:35	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 12:17:39	Officer 3:	Source:	E-911
Completed: 13:16:23	Officer 4:	Notified:	
Associated Person:			
Wednesday 02/14/2018	18-802321 4504 - EMS 1648 CRITTENDEN RD ALDEI	N VILL	
Received: 06:36:22	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 06:36;26	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 06:41:53	Officer 3:	Source:	E-911
Completed: 07:14:33	Officer 4:	Notified:	
Associated Person:			
Friday 02/16/2018	18-802441 4504 - EMS 12845 BROADWAY ALDEN V	ill	
Received: 09:09:19	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 09:09:45	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 09:13:57	Officer 3:	Source:	E-911
Completed: 10:04:40	Officer 4:	Notified:	
Associated Person:			
Associated Person			
Tuesday 02/20/2018	18-802648 4504 - EMS 1502 EAST DR ALDEN VILL		-
Received: 04:04:44	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 04:06:08	Officer 2: LVAC7 - 701	•	STEWART ANGELA -
Arrived: 04:16:03	Officer 3:	Source:	E-911
Completed: 05:02:03	Officer 4:	Notified:	
Associated Person:			
Wednesday 02/21/2018	18-802766 4504 - EMS 12845 BROADWAY ALDEN V	TLL	
Received: 17:46:47	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 17:46:48	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 17:51:19	Officer 3:	Source:	E-911
Completed: 18:37:47	Officer 4:	Notified:	
Associated Person:			
Thursday 02/22/2018	18-802802 4508 - EMS ASSIS 1530 RUSHER DR 1A ALDEN 1		
Received: 10:41:59	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 10:42:56	Officer 2:LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 10:48:40	Officer 3:	Source:	E-911
Completed: 10:50:52	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Friday 02/23/2018	18-802871 4508 - EMS ASSIS 1532 RUSHER DR 4B ALDEN		
Received: 13:51:24	Officer 1:ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 13:51:25	Officer 2:LVAC7 - 701	•	FIRESTONE JANE -
Arrived: 13:57:18	Officer 3:	Source:	E-911
Completed: 14:03:42	Officer 4:	Notified:	
Associated Person:		11.02.00	

Tuesday 02/27/2018	18-803089 4504 - EMS 13535 BROADWAY ALDEN V	—————— ILL	· · · · · · · · · · · · · · · · · · ·
Received: 09:58:55	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 09:59:50	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
Arrived: 10:05:39	Officer 3:	Source:	CELL PHONE
Completed: 11:34:13	Officer 4:	Notified:	
Associated Person			•
Associated Person:			
Nednesday 02/28/2018	18-803153 4504 - EMS 13443 IRVING ST ALDEN VILL		
Received: 13:32:13	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 13:32:38	Officer 2: LVAC7 - 701	•	PAWLIKOWSKI JEAN -
Arrived: 13:37:40	Officer 3:	Source:	E-911
Completed: 14:40:36	Officer 4:	Notified:	
Associated Person:			
Thursday 03/01/2018	18-803222 4504 - EMS 13006 BROADWAY 5 ALDEN V		
Received: 13:32:05	Officer 1: ALDEN FIRE DEPT - 9		FIDESTONE LANG
Received: 13:32:05 Dispatched: 13:32:06		Received By:	FIRESTONE JANE
Dispatched: 13:32:06 Arrived: 13:35:00	Officer 2:LVAC7 - 701 Officer 3:	Source:	FIRESTONE JANE -
Completed: 14:38:59	Officer 4:	Notified:	OTHER
•	Officer 4:	Nouned:	
Associated Person:			
Thursday 03/01/2018	18-803234 4504 - EMS 1320 SAVAGE RD ALDEN VILI	L	
Received: 16:27:46	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 16:30:39	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 16:33:20	Officer 3:	Source:	E-911
Completed: 17:18:25	Officer 4:	Notified:	LIEUTENANT
Associated Person:			
Sunday 03/04/2018	18-803385 4504 - EMS 1319 EXCHANGE ST ALDEN \		
Received: 02:25:18	Officer 1: ALDEN FIRE DEPT - 9	Received By:	•
Dispatched: 02:25:39	Officer 2: LVAC7 - 701	Dispatched By:	STEWART ANGELA -
Arrived: 02:34:02	Officer 3:	Source:	E-911
Completed: 04:42:04	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Sunday 03/04/2018	18-803401 4504 - EMS 13090 BROADWAY ALDEN V	"LL	
Received: 13:25:37	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 13:26:33	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 13:30:06	Officer 3:	Source:	E-911
Completed: 14:18:33	Officer 4:	Notified:	
Associated Person:			
Wednesday 03/07/2018	18-803562 4504 - EMS 1423 SEABROOK DR ALDEN	VILL	
Received: 07:08:23	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 07:08:24	Officer 2: LVAC7 - 701		PAWLIKOWSKI JEAN -
*	Officer 3:	Source:	E-911
Arrived: 07:16:28	VIIIGELO:		
Arrived: 07;16:28 Completed: 08:26:30			
Arrived: 07:16:28 Completed: 08:26:30 Associated Person:	Officer 4:	Notified:	

Friday 03/09/2018	18-803692 4504 · EMS 13336 BROADWAY ALDEN	VILL	
Received: 20:34:25 Dispatched: 20:35:17 Arrived: 20:39:15 Completed: 21:46:38	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:		ARMSTRONG ARMSTRONG E-911
Associated Person			
Saturday 03/10/2018	18-803700 4504 • EMS 1525 RUSHER DR 24 ALDEN	VILL	
Received: 00:04:20 Dispatched: 00:04:29 Arrived: 00:10:05 Completed: 02:00:54 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	STEWART ANGELA - E-911
Saturday 03/10/2018	18-803726 4401 - FIRE RESI 1581 LINDAN AV ALDEN VIL		
Received: 11:55:18 Dispatched: 11:55:19 Arrived: 12:00:08 Completed: 16:29:40 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	FIRESTONE JANE - PAWLIKOWSKI JEAN - E-911
Thursday 03/15/2018	18-804025 4504 · EMS		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1525 RUSHER DR ALDEN VI	LL	
Received: 15:41:10 Dispatched: 15:45:23 Arrived: 15:47:05 Completed: 16:09:50 Associated Person: (Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	•	ARMSTRONG ARMSTRONG E-911
Thursday 03/15/2018	18-804032 4504 - EMS 1329 EXCHANGE ST ALDEN	VILL	alan alam aramanlarin anno
Received: 17:18:34 Dispatched: 17:18:35 Arrived: 17:20:03 Completed: 18:20:22 Associated Person:	Officer 1: LVAC7 - 701 Officer 2: ALDEN FIRE DEPT - 9 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - RADIO
Friday 03/16/2018	18-804072 4504 - EMS 12845 BROADWAY ALDEN	VILL	_
Received: 12:28:43 Dispatched: 12:28:44 Arrived: 12:36:36 Completed: 13:23:57	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:		FIRESTONE JANE - FIRESTONE JANE - E-911
Associated Person:			the first of the f
Associated Person: P	18-804201 4504 - EMS		
Monday 03/19/2018	18-804201 4504 - EMS 12845 BROADWAY ALDEN	VILL	
Received: 12:39:50 Dispatched: 12:40:06 Arrived: 12:44:11 Completed: 13:29:15	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	PAWLIKOWSKI JEAN - FIRESTONE JANE - E-911
Associated Person: Associated Person	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

Monday 03/19/2018	18-804224 4504 - EMS 1532 RUSHER DR ALDEN VI		
Received: 18:42:20	Officer 1: ALDEN FIRE DEPT - 9		ARMSTRONG
Dispatched: 18:42:20	Officer 2:LVAC7 - 701		BALK JENNIFER - D87
Arrived: 18:47:32	Officer 3:	Source:	E-911
Completed: 18:57:17	Officer 4:	Notified:	
Associated Person: (
Tuesday 03/20/2018	18-804273 4504 - EMS 12845 BROADWAY ALDEN	<u></u> -	
Received: 16:52:32	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 16:52:41	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 16:57:59	Officer 3:	Source:	E-911
Completed: 17:56:08	Officer 4:	Notified:	
Associated Person:	and the state of t		
Associated Person:			
Wednesday 03/21/2018	18-804314 4504 - EMS 12845 BROADWAY ALDEN	VILL	
Received: 11:34:55	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 11:34:56	Officer 2:LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 11:42:10	Officer 3:	Source:	E-911
Completed: 12:27:40	Officer 4:	Notified:	
Associated Person:			
Friday 03/23/2018	18-804394 4504 - EMS 1577 HOMECOURT ALDEN	VILL	
Received: 08:54:42	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 08:56:41	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 09:06:48	Officer 3:	Source:	E-911
Completed: 09:57:01	Officer 4:	Notified:	
Associated Person:			
Associated Person:		and the second manager of the second	
Tuesday 03/27/2018	18-804629 4504 - EMS 13336 BROADWAY ALDEN	VILL	
Received: 17:01:53	Officer 1: ALDEN FIRE DEPT - 9		
Dispatched: 17:03:05	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 17:05:54	Officer 3:	Source:	PHONE
Completed: 17:33:30	Officer 4:	Notified:	
Associated Person			
Wednesday 03/28/2018	18-804669 4504 - EMS 1596 EMERSON ST ALDEN	VILL	
Received: 10:09:15	Officer 1: LVAC7 - 701	Received By:	FIRESTONE JANE -
Dispatched: 10:09:16	Officer 2: ALDEN FIRE DEPT - 9	*	FIRESTONE JANE -
Arrived: 10:16:45	Officer 3:	Source:	PHONE
Completed: 11:19:36	Officer 4:	Notified:	
Associated Person:	<u> </u>		
Thursday 03/29/2018	18-804715 4504 - EMS 1355 VILLAGE PARK DR AL	DEN VILL	
Received: 04:29:34	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 04:29:37	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 04:42:01	Officer 3:	Source:	E-911
Completed: 05:33:02	Officer 4:	Notified:	<u>, </u>
Associated Person: V	A STATE OF THE STA	Control of the Contro	

Thursday 02/20/2040	18-804739 4508 - EMS ASSIS	 _	
Thursday 03/29/2018	15-804/39 4508 - EMS ASSIS 1530 RUSHER DR 1A ALDEN '	• •	
Received: 18:01:48	Officer 1: ALDEN FIRE DEPT - 9	Received By:	BALK JENNIFER - D87
Dispatched: 18:01:49	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 18:08:24	Officer 3:	Source:	PHONE
Completed: 18:18:28	Officer 4:	Notified:	
Associated Person:			A. C. Carrier and C.
Associated Person:	man menorable disease of the second		
Thursday 03/29/2018	18-804749 4504 - EMS 1530 RUSHER DR 1A ALDEN '	VILL	
Received: 21:17:19	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 21:18:02	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 21:28:23	Officer 3:	Source:	PHONE
Completed: 22:18:13	Officer 4:	Notified:	
Associated Person:			
Sunday 04/01/2018	18-804884 4504 - EMS 1470 EAST DR ALDEN VILL		
Received: 07:48:39	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 07:48:39	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 07:59:42	Officer 3:	Source:	PHONE
Completed: 08:11:33	Officer 4:	_Notified:	
Associated Person:	and the second second	egeneral effects as with	"
Sunday 04/01/2018	18-804889 4504 - EMS 13314 RAILROAD ST ALDEN	VILL	•
Received: 11:33:14	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 11:35:24	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 11:38:12	Officer 3:	Source:	E-911
Completed: 11:58:55	Officer 4:	Notified:	
Associated Person:	The second secon		the first of the second state of the second st
Tuesday 04/03/2018	18-804973 4504 - EMS 1596 EMERSON ST ALDEN V	/ILL	
Received: 09:32:10	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 09:32:28	Officer 2: LVAC7 - 701	Dispatched By:	COHAN SHARON - D85
Arrived: 09:38:41	Officer 3:	Source:	E-911
Completed: 10:30:26	Officer 4:	Notified:	
Associated Person:		<u> </u>	
Tuesday 04/03/2018	18-804988 4504 - EMS 12845 BROADWAY ALDEN \	/ILL	
Received: 14:45:15	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 14:45:15	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 14:54:28	Officer 3:	Source:	E-911
Completed: 15:41:29	Officer 4:	Notified:	
Associated Person:		·	
Tuesday 04/03/2018	18-804989 4504 - EMS 13006 BROADWAY 9 ALDEN	VILL	
Received: 15:08:08	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 15:08:09	Officer 2: LVAC7 - 701	, ,	: FIRESTONE JANE -
Arrived: 15:15:14	Officer 3:	Source:	E-911
Completed: 15:58:55	Officer 4:	Notified:	and the second of the second o
Associated Person:			

Wednesday 04/04/2018 18-805060 4504 - EMS 13197 BROADWAY ALDEN VILL Received: 12:55:12 Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Dispatched: 12:55:53 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Arrived: 12:58:59 Officer 3: Source: Ë-911 Completed: 14:00:08 Officer 4: Notified: Associated Person: Wednesday 04/04/2018 18-805083 4504 - EMS 12835 BROADWAY ALDEN VILL Received: 16:57:40 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 16:57:41 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 17:01:02 Officer 3: Source: E-911 Completed: 17:51:12 Officer 4: Notified: Associated Person: Thursday 04/05/2018 18-805102 4504 - EMS 12775 BROADWAY ALDEN VILL Received: 01:17:07 Officer 1: ALDEN FIRE DEPT - 9 Received By: **BALK JENNIFER - D87** Dispatched: 01:17:07 Officer 2: LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Arrived: 01:26:56 Officer 3: Source: E-911 Completed: 02:07:23 Officer 4: Notified: Associated Person: Friday 04/06/2018 18-805190 4504 - EMS 1387 CHESTNUT ST ALDEN VILL Received: 14:19:53 Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Dispatched: 14:20:58 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 14:28:25 Officer 3: Source: E-911 Notified: Completed: 16:09:20 Officer 4: Associated Person: 8 Monday 04/09/2018 18-805363 4504 - EMS 1385 KELLOGG ST ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received By: ARMSTRONG Received: 15:39:08 Officer 2: LVAC7 - 701 Dispatched By: ARMSTRONG Dispatched: 15:40:28 Arrived: Officer 3: Source: RADIO 15:40:28 Officer 4: Notified: Completed: 16:53:57 Associated Person: 18-805423 4504 - EMS Tuesday 04/10/2018 13500 BROADWAY ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received By: SCHAEFER TAMMIE -Received: 15:03:21 Dispatched By: SCHAEFER TAMMIE -Dispatched: 15:03:22 Officer 2: LVAC7 - 701 Officer 3: Source: E-911 Arrived: 15:12:19 Completed: 16:29:33 Officer 4: Notified: Associated Person: Wednesday 04/11/2018 18-805478 4504 - EMS 12845 BROADWAY ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received By: PAWLIKOWSKI JEAN -Received: 10:37:31 Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 10:37:31 Officer 2:LVAC7 - 701 Arrived: 10:43:59 Officer 3: Source: E-911 Completed: 11:27:53 Officer 4: Notified: Associated Person: Associated Person:

18-805509 4504 - EMS Wednesday 04/11/2018 1594 MEADOW DR ALDEN VILL Received: 19:47:38 Officer 1: ALDEN FIRE DEPT - 9 Received By: **SCHAEFER TAMMIE -Dispatched: 19:47:40** Officer 2: LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: 19:51:21 Officer 3: Source: E-911 Completed: 20:04:56 Officer 4: Notified: Associated Person: Thursday 04/12/2018 18-805565 4504 - EMS 13336 BROADWAY ALDEN VILL Received By: Received: 20:10:13 Officer 1: ALDEN FIRE DEPT - 9 ARMSTRONG Officer 2:LVAC7 - 701 Dispatched: 20:10:58 Dispatched By: STEWART ANGELA -Arrived: 20:13:30 Officer 3: Source: E-911 Completed: 22:07:56 Officer 4: Notified: Associated Person Associated Person: Saturday 04/14/2018 18-805668 4504 - EMS 13140 W MAIN ST ALDEN VILL Received: 21:17:58 Officer 1: ALDEN FIRE DEPT - 9 Received By: Dispatched: 21:20:14 Officer 2: LVAC7 - 701 Dispatched By: Arrived: 21:23:19 Officer 3: Source: E-911 Completed: 23:21:32 Officer 4: Notified: Associated Person: R Wednesday 04/18/2018 18-805871 4508 - EMS ASSIST 1532 RUSHER DR 4B ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 11:09:57 Received By: PAWLIKÓWSKI JEAN -Officer 2: LVAC7 - 701 Dispatched: 11:11:05 Dispatched By: FIRESTONE JANE -Arrived: Officer 3: Source: 11:14:46 E-911 Completed: 11:24:06 Officer 4: Notified: Associated Person: Wednesday 04/18/2018 18-805881 4504 - EMS 12845 BROADWAY ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received By: FIRESTONE JANE -Received: 13:46:30 Officer 2: LVAC7 - 701 Dispatched By: PAWLIKOWSKI JEAN -Dispatched: 13:47:17 Source: Arrived: 14:02:05 Officer 3: E-911 Completed: 14:50:07 Officer 4: Notified: Associated Person: 18-805916 4508 - EMS ASSIST Thursday 04/19/2018 1532 RUSHER DR 4B ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received By: Received: 05:38:40 Dispatched: 05:40:37 Officer 2:LVAC7 - 701 Dispatched By: Source: Arrived: 05:49:22 Officer 3: PHONE Officer 4: Notified: Completed: 05:59:59 Associated Person: I Associated Person: Friday 04/20/2018 18-805988 4504 - EMS 12845 BROADWAY ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 14:13:35 Received By: Dispatched By: Dispatched: 14:15:14 Officer 2: LVAC7 - 701 Arrived: 14:17:45 Officer 3: Source: E-911 Completed: 15:12:41 Officer 4: Notified: Associated Person:

Sunday 04/22/2018 18-806078 4504 - EMS 1756 CRITTENDEN RD ALDEN VILL Received: 14:25:44 Officer 1:LVAC7 - 701 Received By: FIRESTONE JANE -Dispatched: 14:25:46 Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: FIRESTONE JANE -Arrived: 14:31:00 Officer 3: Source: E-911 Completed: 16:40:11 Officer 4: Notified: Associated Person: Wednesday 04/25/2018 18-806302 4504 - EMS 13140 W MAIN ST ALDEN VILL Received: 21:40:17 Officer 1: LVAC7 - 701 Received By: ARMSTRONG Dispatched: 21:41:30 Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: ARMSTRONG Arrived: 21:48:14 Officer 3: Source: E-911 Completed: 22:58:00 Officer 4: Notified: Associated Person: Service of Elitabeth Associated Person: Thursday 04/26/2018 18-806334 4504 - EMS 13155 PARK ST 1 ALDEN VILL Officer 1: ALDEN FIRE DEPT - 9 Received: 10:56:01 Received By: **SCHAEFER TAMMIE -**Dispatched: 10:56:10 Officer 2: LVAC7 - 701 Dispatched By: SCHAEFER TAMMIE -Arrived: 11:12:23 Officer 3: Source: E-911 Notified: Completed: 11:46:12 Officer 4: Associated Person: Sunday 04/29/2018 18-806529 4504 - EMS 1368 EAST DR ALDEN VILL Received: 22:15:41 Officer 1: ALDEN FIRE DEPT - 9 Received By: **BALK JENNIFER - D87** Dispatched: 22:15:42 Officer 2: LVAC7 - 701 Dispatched By: BALK JENNIFER - D87 Source: Arrived: 22:25:44 Officer 3: E-911 Completed: 23:02:42 Officer 4: Notified: Associated Person: 0 ----Associated Person: Tuesday 05/01/2018 18-806660 4504 - EMS 13201 PARK ST 1W ALDEN VILL Received: 20:19:39 Officer 1: ALDEN FIRE DEPT - 9 Received By: **ARMSTRONG** Dispatched: 20:19:41 Officer 2: LVAC7 - 701 Dispatched By: ARMSTRONG Source: Arrived: Officer 3: OTHER POLICE 20:23:26 Completed: 22:49:19 Officer 4: Notified: Associated Person: Thursday 05/03/2018 18-806762 4504 - EMS 13140 W MAIN ST ALDEN VILL Received: Officer 1: ALDEN FIRE DEPT - 9 Received By: 10:18:16 Dispatched: 10:19:56 Officer 2: LVAC7 - 701 Dispatched By: FIRESTONE JANE -Source: Arrived: 10:36:00 Officer 3: E-911 Notified: Officer 4: Completed: 11:14:16 Associated Person: Associated Person: Monday 05/07/2018 18-807011 4504 - EMS 13207 PARK ST ALDEN VILL Received: 14:55:29 Officer 1:LVAC7 - 701 Received By: **ARMSTRONG** Dispatched: 14:56:36 Officer 2: ALDEN FIRE DEPT - 9 Dispatched By: ARMSTRONG Arrived: 15:12:54 Officer 3: Source: E-911 Completed: 16:04:37 Officer 4: Notified: Associated Person: Perm

Tuesday 05/08/2018	18-807049 4504 - EMS 1530 RUSHER DR 1A ALDEN 1		
Received: 05:00:43	Officer 1: ALDEN FIRE DEPT - 9	-	OTEMAST AND T
Dispatched: 05:00:44	Officer 2: LVAC7 - 701	Received By:	STEWART ANGELA -
Arrived: 05:10:12	Officer 3:		STEWART ANGELA -
Completed: 05:59:55	Officer 4:	Source: Notified:	E-911
Associated Person:	Officer 4.	Nouned:	
Wednesday 05/09/2018	18-807121 4504 - EMS 1470 EAST DR ALDEN VILL		*
Received: 07:48:56	Officer 1: ALDEN FIRE DEPT - 9	Described On	EIDEOTONE JAME
Dispatched: 07:48:56	Officer 2:LVAC7 - 701	Received By:	FIRESTONE JANE -
Arrived: 07:56:46	Officer 3:	Source:	FIRESTONE JANE -
Completed: 08:19:00	Officer 4:	Notified:	PHONE
Associated Person:	Officer 4.	Nouried.	
Nednesday 05/09/2018	18-807124 4504 - EMS 1532 RUSHER DR 4B ALDEN 1	VILL	
Received: 08:12:16	Officer 1: LVAC7 - 701	Received By:	
Dispatched: 08:15:10	Officer 2: ALDEN FIRE DEPT - 9	Dispatched By:	
Arrived: 08:17:49	Officer 3:	Source:	PHONE
Completed: 08:31:04	Officer 4:	Notified:	
Associated Person:		سرگ و افرون و پرسید در پیر	
Associated Person:			
Wednesday 05/09/2018	18-807142 4504 - EMS 1532 RUSHER DR 4B ALDEN	VILL	
Received: 12:59:41	Officer 1: ALDEN FIRE DEPT -9	Received By:	FIRESTONE JANE -
Dispatched: 12:59:42	Officer 2: LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 13:05:45	Officer 3:	Source:	PHONE
Completed: 13:11:07	Officer 4:	Notified:	
Associated Person:		:	
Wednesday 05/09/2018	18-807143 4504 - EMS 13362 MERCER DR ALDEN V	ILL	
Received: 13:11:51	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 13:14:43	Officer 2: LVAC7 - 701	Dispatched By:	FIRESTONE JANE -
Arrived: 13:15:19	Officer 3:	Source:	E-911
Completed: 13:26:51	Officer 4:	Notified:	
Associated Person:			
Friday 05/11/2018	18-807269 4504 - EMS 12845 BROADWAY ALDEN V	/ILL	
Received: 15:15:26	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 15:16:39	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 15:23:40	Officer 3:	Source:	CELL PHONE
Completed: 16:16:19	Officer 4:	Notified:	
Associated Person:			
Sunday 05/13/2018	18-807369 4504 - EMS 1423 SEABROOK DR ALDEN	VILL	
Received: 10:49:07	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 10:49:09	Officer 2:LVAC7 - 701	_	FIRESTONE JANE -
Arrived: 10:52:47	Officer 3:	Source:	E-911
Completed: 12:48:07	Officer 4:	Notified:	
Associated Dansey,			
Associated Person:			

Sunday 05/13/2018	18-807377 4508 - EMS ASSIS 13275 PARK ST 2 ALDEN VILL	,	
Received: 14:58:56 Dispatched: 15:00:01 Arrived: 15:05:54 Completed: 15:10:04	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - E-911
Associated Person:			
Sunday 05/13/2018	18-807378 4504 - EMS 952 EXCHANGE ST ALDEN VII		
Received: 15:03:17 Dispatched: 15:04:21 Arrived: 15:08:59 Completed: 16:37:33	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person: Monday 05/14/2018	18-807419 4504 - EMS		
Received: 10:51:35 Dispatched: 10:51:35 Arrived: 10:57:45 Completed: 12:23:16 Associated Person:	1686 BAXTER AV ALDEN VILL Officer 1:LVAC7 - 701 Officer 2:ALDEN FIRE DEPT - 9 Officer 3: Officer 4:	Received By:	FIRESTONE JANE - FIRESTONE JANE - PHONE
Tuesday 05/15/2018	18-807470 4504 - EMS 13190 PARK ST ALDEN VILL		
Received: 07:57:22 Dispatched: 07:57:22 Arrived: 08:03:47 Completed: 08:20:59 Associated Person:	Officer 1: ALDEN FIRE DEPT -9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - PHONE
Tuesday 05/15/2018	18-807482 4504 - EMS 13190 PARK ST ALDEN VILL		
Received: 11:21:16 Dispatched: 11:22:50 Arrived: 11:30:23 Completed: 11:50:02	Officer 1: ALDEN FIRE DEPT -9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person: F			
Wednesday 05/16/2018	18-807547 4504 - EMS 12845 BROADWAY ALDEN VI	 LL	
Received: 11:55:03 Dispatched: 11:55:31 Arrived: 12:00:13 Completed: 13:34:03	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - PHONE
Associated Person: P			K
Associated Person: Wednesday 05/16/2018	18-807562 4504 - EMS 1594 LINDAN AV ALDEN VILL		
Received: 16:20:45 Dispatched: 16:20:46 Arrived: 16:27:54 Completed: 18:35:06 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - PHONE

Thursday 05/17/2018	18-807622 4504 - EMS 12886 BROADWAY ALDEN V		
Received: 16:49:08 Dispatched: 16:50:40 Arrived: 16:53:27 Completed: 18:51:53 Associated Person	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PHONE
Saturday 05/19/2018	18-807765 4504 - EMS 1154 EXCHANGE ST ALDEN \	 /ILL	
Received: 20:16:57 Dispatched: 20:17:53 Arrived: 20:21:09 Completed: 22:29:49 Associated Person: Monday 05/21/2018	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
monday out the to	1594 MEADOW DR ALDEN VII	LL	
Received: 07:29:46 Dispatched: 07:29:47 Arrived: 07:38:10 Completed: 07:40:43 Associated Person:	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By; Dispatched By; Source: Notified:	FIRESTONE JANE - FIRESTONE JANE - E-911
Tuesday 05/22/2018	18-807901 4504 - EMS		
Received: 06:35:07 Dispatched: 06:35:10 Arrived: 06:35:11 Completed: 07:32:45 Associated Person:	1423 SEABROOK DR ALDEN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PHONE
Tuesday 05/22/2018	18-807925 4504 - EMS 12845 BROADWAY ALDEN V		
Received: 15:17:11 Dispatched: 15:17:12 Arrived: 15:20:07 Completed: 17:54:50 Associated Person:	Officer 1: LVAC7 - 701 Officer 2: ALDEN FIRE DEPT - 9 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	SCHAEFER TAMMIE - SCHAEFER TAMMIE - E-911
Wednesday 05/23/2018	18-807960 4504 - EMS 1533 HOMECOURT ALDEN V		
Received: 08:58:14 Dispatched: 08:58:39 Arrived: 09:05:47 Completed: 09:57:50	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	PAWLIKOWSKI JEAN - E-911
Associated Person:			
Associated Person	18-808026 4504 - EMS		
Received: 14:52:09 Dispatched: 14:53:56 Arrived: 14:55:56 Completed: 15:52:45 Associated Person: Associated Person: 0	18-808026 4504 - EMS 13292 RAILROAD ST ALDEN Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	VILL Received By: Dispatched By: Source: Notified:	E-911

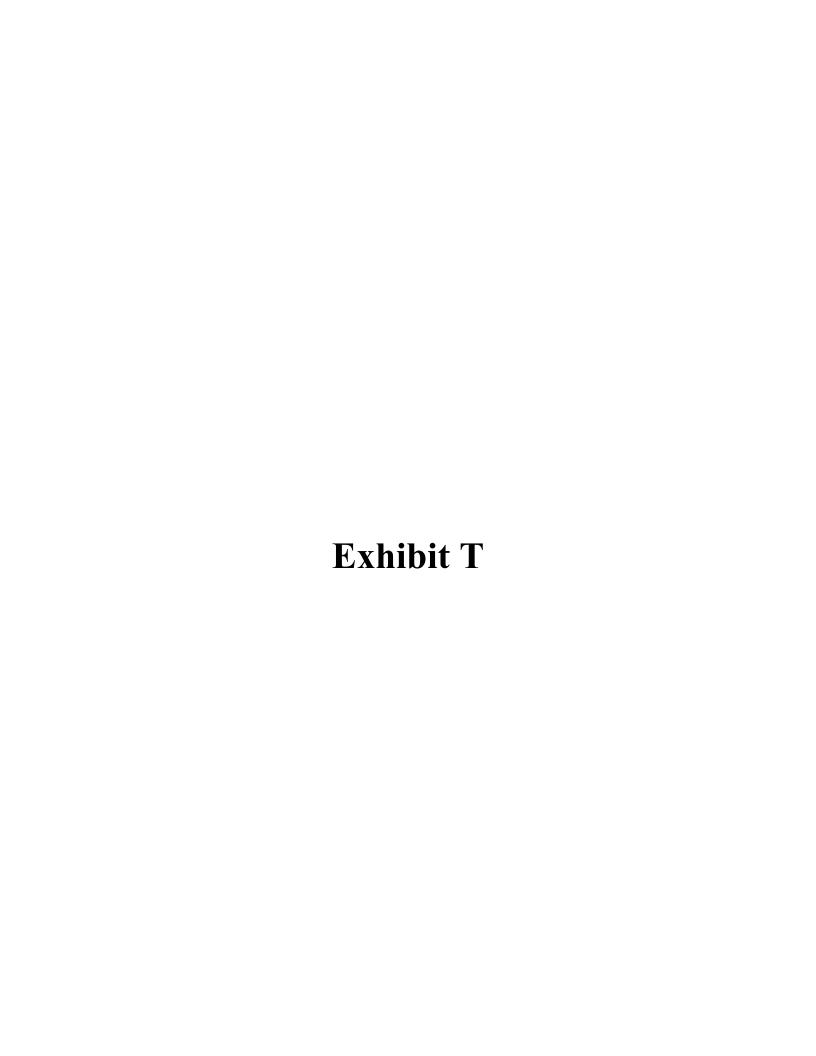
Friday 05/25/2018	18-808104 4504 - EMS 1456 ELM ST ALDEN VILL		
Received: 18:40:27 Dispatched: 18:41:15 Arrived: 18:42:19 Completed: 19:33:25	Officer 1: ALDEN FIRE DEPT - 9 Officer 2: LVAC7 - 701 Officer 3: Officer 4:	Received By: Dispatched By: Source: Notified:	E-911
Associated Person:	Officer 4.	Noulieu:	
	40 000004 4F04 FMC		
Sunday 05/27/2018	18-808224 4504 - EMS 1594 MEADOW DR ALDEN VII	LL	
Received: 10:01:48	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 10:02:21	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 10:09:58	Officer 3:	Source:	E-911
Completed: 10:14:44	Officer 4:	Notified:	
Associated Person:			
Tuesday 05/29/2018	18-808334 4504 - EMS 13207 PARK ST ALDEN VILL		
Received: 06:13:41	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 06:13:45	Officer 2:LVAC7 - 701		STEWART ANGELA -
Arrived: 06:22:48	Officer 3:	Source:	E-911
Completed: 07:26:55	Officer 4:	Notified:	
Associated Person: I			
Thursday 05/31/2018	18-808481 4504 - EMS 1306 DUCHESS LA ALDEN VI	LL	
Received: 05:35:44	Officer 1:ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 05:36:27	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 05:46:03	Officer 3:	Source:	E-911
Completed: 06:31:46	Officer 4:	Notified:	
Associated Person:		<u>`</u>	
Monday 06/04/2018	18-808793 4504 - EMS 1387 CHESTNUT ST ALDEN \	/ILL	
Received: 09:54:17	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 09:54:41	Officer 2:LVAC7 - 701	Dispatched By:	
Arrived: 10:03:27	Officer 3:	Source:	E-911
Completed: 11:09:03	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Wednesday 06/06/2018	18-808951 4504 - EMS 1463 SEABROOK DR ALDEN	VILL	
Received: 15:17:43	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 15:18:38	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 15:22:01	Officer 3:	Source:	E-911
Completed: 17:23:58	Officer 4:	Notified:	
Associated Person:			<u> </u>
Associated Person:			
Thursday 06/07/2018	18-808999 4504 · EMS 1319 EXCHANGE ST ALDEN	VILL	
Received: 13:05:26	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 13:06:20	Officer 2: LVAC7 - 701		FIRESTONE JANE -
Arrived: 13:16:01	Officer 3:	Source:	E-911
Completed: 14:51:34	Officer 4:	Notified:	
Associated Person:			

Friday 06/08/2018	18-809058 4504 - EMS 13399 PARK ST ALDEN VILL		
Received: 10:28:42	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 10:29:22	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 10:38:25	Officer 3:	Source:	E-911
Completed: 11:31:05	Officer 4:	Notified:	
Associated Person:	<u> </u>		
Wednesday 06/13/2018	18-809397 4504 - EMS 12960 W MAIN ST ALDEN VILI	L.	_
Received: 16:07:16	Officer 1:LVAC7 - 701	Received By:	SCHAEFER TAMMIE -
Dispatched: 16:07:41	Officer 2: ALDEN FIRE DEPT - 9		ARMSTRONG
Arrived: 16:11:59	Officer 3:	Source:	E-911
Completed: 18:09:13	Officer 4:	Notified:	
Associated Person:			
Associated Person:			
Thursday 06/14/2018	18-809456 4504 - EMS 13129 BROADWAY ALDEN V		
Received: 13:31:36	Officer 1:ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 13:31:53	Officer 2:LVAC7 - 701	_	SCHAEFER TAMMIE -
Arrived: 13:33:30	Officer 3:	Source:	E-911
Completed: 14:31:06	Officer 4:	Notified:	L-911
Associated Person		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Monday 06/18/2018	18-809706 6005 - LVAC PRIV	ΔTF	
-	13404 BROADWAY ALDEN V	ILL	
Received: 13:28:09	Officer 1:LVAC7 - 701	Received By:	
Dispatched: 13:28:17	Officer 2:	Dispatched By:	
Arrived: 13:39:58	Officer 3:	Source:	RADIO
Completed: 14:03:21	Officer 4:	Notified:	
Associated Person:			
Monday 06/18/2018	18-809730 4504 - EMS 1474 KELLOGG ST ALDEN VI	LL	
Received: 21:39:14	Officer 1:ALDEN FIRE DEPT -9	Received By:	STEWART ANGELA -
Dispatched: 21:39:42	Officer 2: LVAC7 - 701	Dispatched By:	STEWART ANGELA -
Arrived: 21:43:31	Officer 3:	Source:	E-911
Completed: 22:05:17	Officer 4:	Notified:	
Associated Person:			
Wednesday 06/20/2018	18-809845 4504 - EMS 1320 SAVAGE RD ALDEN VIL	L	
Received: 17:37:48	Officer 1: ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 17:37:54	Officer 2:LVAC7 - 701	Dispatched By:	ARMSTRONG
Arrived: 17:52:00	Officer 3:	Source:	OTHER POLICE
Completed: 19:34:26	Officer 4:	Notified:	
Associated Person:		<u> </u>	
Friday 06/22/2018	18-809974 4504 - EMS 1525 RUSHER DR ALDEN VIL	 .L	*
Received: 19:43:38	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 19:43:39	Officer 2:LVAC7 - 701		SCHAEFER TAMMIE -
Arrived: 19:51:49	Officer 3:	Source:	E-911
Completed: 20:55:11	Officer 4:	Notified:	
Associated Person:			
Associated Person:			

Wednesday 06/27/2018	18-810262 4504 - EMS		
	12845 BROADWAY ALDEN V	'ILL	
Received: 08:38:45	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 08:39:40	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 08:53:32	Officer 3:	Source:	OTHER POLICE
Completed: 09:42:14	Officer 4:	Notified:	
Associated Person			
Saturday 06/30/2018	18-810445 4504 - EMS 1458 SEABROOK DR ALDEN	VILL	
Received: 00:14:09	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 00:14:12	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 00:22:44	Officer 3:	Source:	E-911
Completed: 00:59:50	Officer 4:	Notified:	
Associated Person			
Sunday 07/01/2018	18-810553 4504 - EMS 12775 BROADWAY ALDEN V		
Received: 12:34:31	Officer 1: ALDEN FIRE DEPT -9	Received By:	
Dispatched: 12:36:11	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 12:39:55	Officer 3:	Source:	E-911
Completed: 14:32:00	Officer 4:	Notified:	
Associated Person:			
Tuesday 07/03/2018	18-810704 4504 - EMS 12845 BROADWAY ALDEN V	TLL	
Received: 10:16:47	Officer 1: ALDEN FIRE DEPT -9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 10:16:47	Officer 2: LVAC7 - 701		BALK JENNIFER - D87
Arrived: 10:17:18	Officer 3:	Source:	E-911
Completed: 11:11:50	Officer 4:	Notified:	
Associated Person:			
Thursday 07/05/2018	18-810900 4508 - EMS ASSIS 13137 BROADWAY 6 ALDEN		
Received: 13:51:09	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
Dispatched: 13:52:31	Officer 2; LVAC7 - 701	Dispatched By:	
Arrived: 13:59:34	Officer 3:	Source:	PHÔNE
Completed: 14:09:22	Officer 4:	Notified:	
Associated Person:			_
Saturday 07/07/2018	18-811026 4504 - EMS 13404 BROADWAY ALDEN \		
Received: 10:17:04	Officer 1: ALDEN FIRE DEPT - 9	Received By:	SCHAEFER TAMMIE -
Dispatched: 10:18:24	Officer 2: LVAC7 - 701	Dispatched By:	
Arrived: 10:21:01	Officer 3:	Source:	E-911
Completed: 12:26:49	Officer 4:	Notified:	
Associated Person			
Sunday 07/08/2018	18-811099 4504 - EMS 13353 MERCER DR ALDEN V	/ILL	
Received: 06:18:44	Officer 1: ALDEN FIRE DEPT - 9	Received By:	
	Officer 2:LVAC7 - 701	Dispatched By:	
Dispatched: 06:19:40	Office 2.64AC1 - 101		
Dispatched: 06:19:40 Arrived: 06:30:13	Officer 3:	Source:	PHONE
-			

Monday 07/09/2018	18-811174 4504 - EMS 1525 RUSHER DR 24 ALDEN \		
Received: 12:42:12	Officer 1: ALDEN FIRE DEPT - 9	Received By:	PAWLIKOWSKI JEAN -
Dispatched: 12:42:39	Officer 2:LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 12:47:41	Officer 3:	Source:	E-911
Completed: 13:54:20	Officer 4:	Notified:	
Associated Person			
Wednesday 07/11/2018	18-811315 4504 - EMS 13335 CHERRY TREE LA ALC	EN VILL	
Received: 14:43:41	Officer 1:ALDEN FIRE DEPT - 9	Received By:	ARMSTRONG
Dispatched: 14:43:55	Officer 2:LVAC7 - 701	Dispatched By:	ARMSTRONG
Arrived: 14:49:18	Officer 3:	Source:	E-911
Completed: 15:07:11	Officer 4:	Notified:	
Associated Person			
Sunday 07/15/2018	18-811594 4504 - EMS 1532 RUSHER DR 5B ALDEN 1	/ILL	
Received: 21:29:57	Officer 1: ALDEN FIRE DEPT - 9	Received By:	STEWART ANGELA -
Dispatched: 21:29:59	Officer 2:LVAC7 - 701	•	STEWART ANGELA -
Arrived: 21:35:33	Officer 3:	Source:	E-911
Completed: 23:41:08	Officer 4:	Notified:	
Associated Person			
Thursday 07/19/2018	18-811797 4504 - EMS 963 EXCHANGE ST ALDEN V	 KL	·
Received: 09:12:40	Officer 1: ALDEN FIRE DEPT - 9	Received By:	FIRESTONE JANE -
Dispatched: 09:12:40	Officer 2: LVAC7 - 701	Dispatched By:	PAWLIKOWSKI JEAN -
Arrived: 09:20:56	Officer 3:	Source:	E-911
Completed: 10:16:33 *	Officer 4:	Notified:	
Associated Person:			

Total Complaints:451







Department of Health Bureau of Emergency Medical Services

POLICY STATEMENT

Supercedes/Updates:

No. 12 - 06

Date: June 7, 2012

Re: EMS Mutual Aid

Page 1 of 11

This policy was developed in conjunction with the New York State Emergency Medical Services Council (SEMSCO) and an appointed Technical Advisory Group (TAG) comprised of various representatives of the State's EMS community. In addition to the guidance policy, included this policy is an updated definition of Mutual Aid and a tool kit (Appendix A) intended to be a resource to EMS agencies, County EMS Coordinators and Regional EMS Councils (REMSCO) when developing, evaluating and reviewing EMS Mutual Aid plans.

PURPOSE:

The purpose of this policy is to update and clarify the appropriate uses of EMS Mutual Aid and to address issues faced by many New York State EMS agencies as a result of frequent shortages of certified personnel available to respond to requests for emergency medical assistance.

This policy is based on these previous policy statements which remain in effect: 89-02 – EMS Mutual Aid Planning Guidelines; 95-04 – EMS Mutual Aid; 95-09 – Developing EMS Agency Policies and Procedures; 01-02 – EMS use of the Incident Command System; 01-04 – EMT Staffing Standard for Voluntary Ambulance Services; and PHL Article 30, and Part 800 - The State EMS Code.

All of the above policy statements, laws, and regulations are available on the Bureau of EMS website: www.health.state.ny.us/nysdoh/ems/main.htm . All EMS agency leadership and staff are encouraged to review each of these documents.

OBJECTIVES:

- 1. To provide a clear, comprehensive definition of EMS Mutual Aid, and how mutual aid should be used appropriately;
- 2. To reaffirm the role of the Regional EMS Councils (REMSCO) and EMS Program Agencies in developing, reviewing and approving mutual aid plans;
- 3. To provide guidelines for mutual aid plans that EMS agencies, 911 Communication Centers and County EMS Coordinators can follow that adhere to Article 30 requirements with respect to Primary Operating Territory, and the concept of closest appropriate EMS agency:
- 4. To encourage collaboration and cooperation between REMSCOs, County EMS Coordinators, 911 Communication Centers, and all EMS agencies in the development, review and approval of EMS mutual aid plans.
- 5. To delineate different types of mutual aid plans according to the scale of the required response.

12-06 EMS Mutual Aid Page 1 of 11

DEFINITION OF MUTUAL AID:

• Article 30 of Public Health Law does not directly define mutual aid, but rather it identifies and defines Mutual Aid Agreements in Section 3001.20 as follows:

"'Mutual aid agreement' means a written agreement, entered into by two or more ambulance services or advanced life support first response services possessing valid ambulance service or advanced life support first response service certificates or statements of registration, for the organized, coordinated, and cooperative reciprocal mobilization of personnel, equipment, services, or facilities for back-up or support upon request as required pursuant to a written mutual aid plan. An ambulance service and advanced life support first response service may participate in one or more mutual aid agreements."

 Article 5 of County Law, section 223-B (3) EMS Training and Mutual Aid Programs states:

"If the office of county EMS coordinator is created in any county, a county EMS coordinator shall be appointed. It shall be his or her duty to administer the county programs for EMS training and mutual aid in cases of emergencies in which the services of EMS providers would be used... "

• Policy Statement 89-02 defines Mutual Aid in the following manner:

"MUTUAL AID – means the pre-planned and organized response of emergency medical services, and other emergency personnel and equipment, to a request for assistance, in an emergency, when local resources have been expended. The response is predicated on formal agreements among participating agencies or jurisdictions."

- Policy 95-04 mentions the use of EMS mutual aid in this way:
 - o "From time to time, to meet peak demand or extraordinary resource utilization, it may be necessary to request assistance to answer a call or provide additional resources. This is the concept and intent of EMS mutual aid."
 - o "EMS mutual aid requests must be made with the intent of having the closest (usually means the unit with the shortest response time to the patient) available EMS unit respond to a patient's medical need, at a time when the resources of the requesting agency are temporarily unavailable or have been expended."
 - o "Mutual aid plans and agreements for normal day to day requests are the responsibility of the individual EMS service."
 - o "Service type (eg. volunteer, fire, hospital, commercial) must not be a consideration in any plan or to any request."

With consideration of the aforementioned documents, a combined and updated five part definition of EMS mutual aid that supersedes previous definitions and reflects the current state of EMS operational coverage, is stated as:

- 1. A preplanned, organized and coordinated response of EMS agencies to a request for assistance when local EMS resources are either temporarily unavailable, or have already been expended;
- The elements of any response under a mutual aid request will be determined by a
 formal written mutual aid plan or agreement among participating EMS agencies
 and/or jurisdictions, and approved by the REMSCO having jurisdiction for the
 geographic area in question. EMS agencies may participate in more than one
 mutual aid plan;

12-06 EMS Mutual Aid Page 2 of 11

- 3. Mutual aid plans or agreements must be designed to address all possible applications of mutual aid, whether for large scale multiple casualty incidents, or for the needs of EMS operational assistance for neighboring EMS agencies. However, mutual aid plans are not intended substitute for the following:
 - a. An EMS agency's continued, routine, ongoing or frequent inability to provide EMS response when requested or dispatched due to staffing and/or equipment shortages
 - b. A determination of need for an expansion of operation territory for routine, frequent or ongoing response outside of an agencies primary operating authority.
 - c. Contracting with an appropriately authorized EMS agency.
- 4. The plan or agreement must also be designed to utilize the EMS agency having the appropriate resources with the shortest response time to the scene of the call. For the purposes of this section, response time is defined as time of dispatch to time on scene.
- 5. The provisions of Article 30 with respect to the Primary Operating Territory of an EMS agency must be considered when designing the EMS mutual aid plan.

ROLE OF REGIONAL EMS COUNCILS

- Article 30, Section 3003.3 (f), states that REMSCO have the power to: "undertake, or cause to be undertaken plans, surveys, analyses and studies necessary, convenient, or desirable for the effectuation of its purposes and powers, and to prepare recommendations and reports in regard thereto;"
- Article 30, Section 3003.4 state that "Each regional council shall have the responsibility to coordinate emergency medical service programs within its region..."
- Under Article 30, section 3003-A-1, EMS Program Agencies: "....may be responsible for facilitating quality improvement of emergency medical care within its region... and other activities to support and facilitate regional emergency medical systems."
- Article 30 section 3010.1(b) states: "...An ambulance service shall receive patients only within the primary territory specified on its ambulance service certificate or statement of registration, except: (b) as required for the fulfillment of a mutual aid agreement authorized by the regional council;"
- Additionally, Part 800.21(p) requires every EMS service to have a written mutual aid plan.

REMSCOs have a responsibility to participate in the development, review and authorization of mutual aid plans of all types. By virtue of their statutory authority, REMSCOs, with assistance from EMS Program Agencies, are expected to initiate efforts with 911 Communication Centers, County EMS Coordinators and all EMS agencies, to develop, review and authorize EMS mutual aid plans that reflect the needs and resources of their particular region of the state.

TYPES OF MUTUAL AID PLANS

The types of mutual aid plans can range from complex statewide plans to simple interagency agreements. Examples of mutual aid plans, in descending order of complexity, include:

- The Statewide Mobilization Plan;
- Multiple casualty incidents, and other large events that require single or multiple jurisdictional response plans within or between regions;
- Countywide plans that cover the geography of particular primary operating territories within a county in the event resources are expended or unavailable;

12-06 EMS Mutual Aid Page 3 of 11

• Individual, or multiple, interagency plans, that are in compliance with all applicable laws, that provide coverage assistance to neighboring agencies in the event resources are expended or otherwise unavailable.

In order to provide the closest appropriate EMS unit, and to foster ease of implementation by 911 Communication Centers and County EMS Coordinators, these plans shall designate the following:

- Those services having appropriately staffed, readily available units in closest proximity and with direct access to the district involved, thereby being capable of providing an optimal response time;
- Beginning first with services possessing operating authority for the requesting district;
- In cases where no service with operating authority exists or is willing/able to participate, proceeding next to those services without operating authority for the requesting district;
- Additional mutual aid plan participants shall be based on the next closest, appropriately staffed and readily available services.

All listed EMS agencies should agree, by positive affirmation in the plan, their commitment and willingness to participate and respond to the service areas identified on the list.

CONCLUSION

The New York State EMS Council Technical Advisory Group (TAG), with whom this policy was developed, have prepared a Mutual Aid Planning Tool Kit. This tool kit (Appendix A) is intended to be a resource to EMS agencies, County EMS Coordinators and Regional EMS Councils (REMSCO) when developing, evaluating and reviewing EMS Mutual Aid plans.

It is imperative, for the efficient and timely operation of EMS systems across the state that all REMSCOs, County EMS Coordinators, 911 Communication Centers, and all EMS agencies collaborate and cooperate in the development, review and authorization of EMS mutual aid plans.

Again, mutual aid plans are not intended substitute for an EMS agency's continued, routine, ongoing or frequent inability to provide EMS response when requested or dispatched due to staffing and/or equipment shortages; a determination of need for an expansion of operation territory for routine, frequent or ongoing response outside of an agencies primary operating authority and contracting with an appropriately authorized EMS agency. But rather to address all possible applications of mutual aid, whether for large scale multiple casualty incidents, or for the needs of EMS operational assistance for neighboring EMS agencies

12-06 EMS Mutual Aid Page 4 of 11

Appendix A New York State EMS Agency Mutual Aid Planning Worksheet

The following Mutual Aid worksheets are intended to give EMS agencies, County EMS/Emergency Services Coordinators, and Regional EMS Councils a logical and objective pathway to evaluate, formulate, and approve EMS Mutual Aid plans. They attempt to gather the most pertinent information for mutual aid decision making. However, additional information that is unique to a given area may also need to be considered. This information should be documented on additional sheets, along with any information requested that does not fit in the space provided.

Section 1: EMS Agency instructions:

This worksheet is intended to identify all EMS agencies that should be considered to respond as mutual aid to a requesting EMS agency. Please list all EMS agencies that are willing to respond as mutual aid to all or a portion of the requesting agency's service area, and what minimum response time is expected. When considering which agency should be first call for mutual aid, any agency that has overlapping operating authority with the requesting agency should, in most cases, be the first call agency. However, there may be geographic or operational reasons to utilize an adjacent agency that has separate operating authority from the requesting agency. As a result, agencies with overlapping operating authority may be designated to participate as secondary mutual aid coverage if needed. In all cases, adequately document the reasons for all choices.

Section 2: EMS Coordinator instructions:

By completing this form you are affirming the choices for EMS mutual aid made by the agencies in your jurisdiction. Please attach any supporting documentation or narrative comments that will substantiate your determination. During this process it is expected that you will confer with your Regional Council to clarify any of the information you have been given by your agencies, and to discuss the broad outline of the plan you will submit for approval.

Section 3: Regional Council instructions:

It is expected that Regional Councils will collaborate with County EMS Coordinators to either initiate a review and revision to existing EMS mutual aid plans, or develop EMS mutual aid plans that meet the standards of this policy. During that process there should be cooperation and collaboration with County EMS Coordinators, agencies, and concerned governmental bodies to affirm the validity of the plans submitted. This form is designed to facilitate that process. Please attach any additional supporting documentation not included by EMS Coordinators, and/or attach a brief narrative substantiating your approval.

12-06 EMS Mutual Aid Page 5 of 11

Section 1: EMS Agency Review

1.	Name of EMS Agency:	
	Ambulance Operating Territory: (as written on the current Ambulance Certificate) Does another EMS Agency possess a valid NYS	S DOH operating certificate for this area? [] YES [] NO
4.	Please list all current EMS Agencies possessing	g valid operating certificates:
	<u>Name</u>	Is this EMS Agency able to provide Mutual Aid to you?
	a	[] YES, [] NO Reason:
	b	[] YES, [] NO Reason:
	c	[] YES, [] NO Reason:
	d	[] YES, [] NO Reason:
	possessing a valid operating certificate for you mutual aid requests? [] YES [] NO If "YES", please identify these EMS agencies: a b c d	ur area, can respond in a more timely and reliable manner to your
6.		that you utilize to determine what constitutes a "reasonable response stion (For the purposes of this section, response time is defined as

12-06 EMS Mutual Aid Page 6 of 11

EMS Agency	Designated to Cover:
a	[] Entirety of area, [] Specific Portion:
b	[] Entirety of area, [] Specific Portion:
C	[] Entirety of area, [] Specific Portion:
d	[] Entirety of area, [] Specific Portion:
mation: I, the u	ndersigned, verify that I represent and am duly authorized by th
	indersigned, verify that I represent and am duly authorized by the to designate the EMS Agencies identified to provide Mutual Aid
cy identified abov	indersigned, verify that I represent and am duly authorized by the to designate the EMS Agencies identified to provide Mutual Aid nization consistent with all applicable laws and regulations.
cy identified abov	e to designate the EMS Agencies identified to provide Mutual Aid
cy identified abov	e to designate the EMS Agencies identified to provide Mutual Aid nization consistent with all applicable laws and regulations.
cy identified abov	e to designate the EMS Agencies identified to provide Mutual Aid nization consistent with all applicable laws and regulations. Print Name: Signature:

12-06 EMS Mutual Aid Page 7 of 11

Section 2: County EMS Coordinator Review

1.	Name of County EMS Coordinator:
2.	County of Jurisdiction:
3.	After your review of the information submitted by this EMS Agency designating their choices for other EMS
	Agencies to provide Mutual Aid assistance to their area of operations in accordance with all existing regulations, do
	you find:
	a. That the primary EMS Agencies designated are the most technically capable with meeting initial medical
	requests to respond? [] YES [] No
	b. If any of the designated EMS Agencies do not possess a valid operating certificate from the DOH, have you
	verified in collaboration with the local Regional EMS Council that all existing EMS agencies identified by the
	NYSDOH, Bureau of EMS (BEMS) as having valid operating certificates for this area either cannot, or will not
	have the capability to respond in a reasonable response time? [] YES [] NO
	c. Please provide the time criteria (in minutes), that you utilize to determine what constitutes a "reasonable
	response time" for the geographical service area in question (For the purposes of this section, response time
	is defined as time of dispatch to time on scene):minutes.

To support your determination, please provide supporting documentation such as BEMS service lists, levels of care provided, municipal preference lists, alternative mutual aid coordination processes utilized (i.e., system status management, GPS tracking, or other technologies), or any other verifiable method that substantiates a history of local mutual aid.

12-06 EMS Mutual Aid Page 8 of 11

4.	Do you have any special considerations or concerns associated with any element of the aforementioned EMS				
	Agencies designated to respond under this Mutual Aid agreement? [] NO, [] Yes: Please describe:				
<u>A</u>	<u>ffirmation</u> :				
Ι,	, the County EMS Coordinator forCounty, have reviewed the				
af	orementioned elements of this Mutual Aid Agreement for: (EMS Agency)				
	, and find it to be both reasonable and compliant with all applicable regulations.				
	Print Name:				
	Signature:				
	Date:				

12-06 EMS Mutual Aid Page 9 of 11

Section 3: Regional EMS Council Review

1.	Name	e of Regional EMS Council:
2.	Name	e of Reviewer:
3.	Title:	
4.	After	your review of the information submitted by this EMS Agency designating their choices for other EMS
	Agend	cies to provide Mutual Aid assistance to their area of operations in accordance with all existing regulations,
	do yo	u find:
	a.	That the primary EMS Agencies designated are the most technically capable with meeting initial medical
		requests to respond? [] YES [] No
	b.	If any of the designated EMS Agencies do not possess a valid operating authority, have you verified in
		collaboration with the local County EMS Coordinator that all existing EMS agencies identified by the
		NYSDOH, Bureau of EMS (BEMS) as having valid operating authority for this area either cannot, or will
		not have the capability to respond in a reasonable response time? [] YES [] NO
	C.	Please provide the time criteria (in minutes), that you utilize to determine what constitutes a "reasonable
		response time" for the geographical service area in question (For the purposes of this section, response
		time is defined as time of dispatch to time on scene):minutes.

To support your determination, please provide supporting documentation such as BEMS service lists, levels of care provided, municipal preference lists, alternative mutual aid coordination processes utilized (i.e., system status management, GPS tracking, or other technologies), or any other verifiable method that substantiates a history of local mutual aid.

12-06 EMS Mutual Aid Page 10 of 11

5.	5. Do you have any special considerations or concerns associated with a	ny element of the aforementioned EMS
	Agencies designated to respond under this Mutual Aid agreement? [] NO, [] Yes: Please describe: _
Affi	firmation:	
•	, the authorized reviewer for the	Regional EMS Council, hav
revi	riewed the aforementioned elements of this Mutual Aid Aq	greement for: (EMS Agency)_
	, and find it to be both reasonable ar	nd compliant with all applicable
regu	julations.	
	Print Name:	
	- Cianatura.	
	_	
	Title: _	
	Date:	

12-06 EMS Mutual Aid Page 11 of 11



Erie County Fire Service Mutual Aid Plan

County of Erie Department of Emergency Services
Division of Fire Safety

ADOPTED: January 2, 2003

REVISED AND ADOPTED: May 27, 2010

TABLE OF CONTENTS

SECTION		PAGE			
1	Objective	3			
2	Participation	4			
3	Designation of Personnel	7			
4	Status of the Local Fire Company or Department	10			
5	Operation of the Erie County Fire Control Center	10			
6	Inventory of Fire Apparatus	12			
7	Standard Thread	13			
8	Emergency or Alternate County Fire Control Center	13			
9	Participation in the State Fire Mobilization and Mutual Aid Plan	14			
10	Coordination with Other Emergency Services	15			
ATTACHMENTS: ☐ Organizational Chart – Erie County Division of Fire Safety ☐ Resolution for Participation – Signature Page					

SECTION 1 ~ OBJECTIVE

A. Definition of Mutual Aid

Mutual Aid is organized, supervised, coordinated, cooperative, reciprocal assistance in which personnel, equipment and physical facilities of all participating fire departments and other appropriate emergency response agencies, regardless of types or size, are utilized for fire or other emergencies in which the services of a firefighter or other appropriate first responder would be used throughout the County of Erie and adjacent areas.

This plan in no way changes any mutual aid agreements or plans now in existence with any fire company or department in Erie County.

It formalizes what has been in existence for many years. Present operations will not be affected. Local Fire Chiefs will continue to exercise all their power and authority.

B. Amendments

- 1. Amendments to this plan may be made periodically and will follow this procedure:
- a. Prepared by the Deputy Commissioner of Fire Safety through the Mutual Aid Committee of the Fire Advisory Board and representatives of the Erie County Volunteer Firefighter's Association, Erie County Fire Chiefs Mutual Aid Organization, Erie County Volunteer Fire Police Association and the Erie County Fire District Officers Association.
 - b. Recommended by the County Fire Advisory Board.
- c. Submitted to all local participants for their review, comments and signature.
- d. Admitted into the New York State Fire Mobilization and Mutual Aid Plan by the New York State Department of State, Office of Fire Preventions and Control.
- Notwithstanding the above, Section 3, Table of Organization Designation of Personnel; Section 4, Line of Authority and Section 6, Operation of Erie County Fire Control Center shall be subject to change, modification or elimination at any time by Erie County.

C. Annual Review

Each year this plan shall be reviewed by the Deputy Commissioner of the Fire Safety Division, the Mutual Aid Committee of the Fire Advisory Board and Amendments, Corrections or Changes Processed.

SECTION 2 ~ PARTICIPATION

A. Extent and Limit of Participation by Fire Departments

ALL cities, towns, villages and fire districts in Erie County may fully participate in this plan.

These departments or companies presently consist of:

City of Buffalo Fire Department

City of Lackawanna Fire Department

City of Tonawanda Fire Department

All Volunteer Fire Companies & Departments

Aircraft/Rescue/Fire Fighting Department at BNIA

Specialized Fire, Rescue, EMS and Hazardous Materials Teams as appropriate

B. Extent and Limit of Participation with Counties of Cattaraugus, Chautauqua, Wyoming, Genesee and Niagara:

There are no formal agreements with these counties. Local reciprocal assistance, if any, is in accordance with Section 209 of the General Municipal Law

All requests for assistance will be routed through the Erie County Communications Center or their respective control centers.

Mutual Aid is provided to and received from Cattaraugus, Chautauqua, Wyoming, Genesee and Niagara Counties through their respective County Fire Control Centers under the direction of their County Fire Coordinators or their legally appointed deputies.

C. Erie County, Niagara County, Province of Ontario Cross Border Mutual Aid:

Three distinct fire disaster situations could arise requiring the assistance of cross border fire service. A Level One incident or situation occurs when specialized equipment and/or manpower is most readily or exclusively available across the border or the municipalities' usual local mutual aid resources are fully engaged. Second Level or region-wide are defined as incidents where county-wide or region-wide fire resources are fully engaged and additional fire service assistance is needed beyond the capability of the county or region. Level Three fire disasters require an executive declaration either from a state or local executive.

1. Legal Authority to respond to cross border fire disaster New York General Municipal Law, Section 209, and Ontario Municipal Act, Chapter 302, Section 210, impose no territorial limitation on fire service response. Municipal authorities in the Niagara Region and in Erie and Niagara Counties are permitted to call for and receive aid and equipment from foreign fire company's at all three levels of fire disaster.

2. Liability

- a. Any loss or damage to, or expense incurred in the operation of fire apparatus or other equipment answering a call for assistance from outside territory, and the cost of any materials used in connection with such call, and for salaries and other compensation and traveling and maintenance expense of the assisting forces furnished during the time they shall be performing their duties for the assisting municipality/entity, shall be a charge upon the municipality which issued the call for assistance. This paragraph shall not apply to the case of damage or expense to fire apparatus or equipment which occurred while responding to a request for assistance or returning from the scene upon completing the assistance and while the apparatus or equipment was not involved in the emergency operation, and which was caused by:
 - 1. The act or omission of a firefighter in the performance of their duties who is a member of the assisting force which suffered damage; or
 - 2. The act or omission of a third party or through an instrumentality not connected with the actual emergency operation.

While responding to a call for assistance, the municipality or entity shall be liable for the negligence for firefighters of that municipality or entity occurring in the performance of their duties in the same manner and to the same extent as if such negligence occurred in the performance of their duties within the area regularly served and protected by said unit.

Any such claim for loss, damage, expense or cost shall not be allowed unless within 60 days after the same shall have been sustained, a written notice of such claim, under oath, itemizing such loss, or expense is served by mail upon the fiscal officer of the municipality/entity which requested assistance.

***Coverage must be from time of call to return to service, all inclusive.

b. Liability for workers' compensation for firefighters involved in a cross border incident remains with the firefighters' home fire company.

3. Procedure

According to standard operating procedures of individual fire companies.

D. Entering and Participating in the Plan

Any duly established fire company or fire department may participate in this plan by filing with the Office of the Deputy Commissioner of the Fire Safety Division, a copy of a resolution adopted by the Fire Company or department.

Such resolution shall state that such Fire Company or department elects to participate in the Erie County Mutual Aid Plan and will comply with the provisions of such plan.

The resolution shall also state that the fire company or department shall recognize a call for assistance from another fire company or department through the Erie County Fire Control Center or a fire radio base station. These shall also be filed with the Deputy Commissioner of the Fire Safety Division. A copy of a resolution adopted by the legislative body of each participating city or village or by the board of fire commissioners or other governing board having jurisdiction over the fire department, the board of fire commissioners of each participating fire district, or the town board of each town in relation to participating fire companies serving territories outside of cities, villages and fire districts or in relation to a town fire department.

Such resolution shall state that no restrictions against a call for assistance outside the area regularly served and protected by the fire company or department of the municipality or district within the meaning of Section 209 (1) of the General Municipal Law (Mutual Aid), which would affect the power of such fire company or department to participate in the Erie County Fire Mutual Aid Plan except as noted in the resolution.

If the "outside services" or mutual aid activities of a participating fire company or fire department are restricted pursuant to Section 209 (10) of the General

Municipal Law, notice of any such restriction shall be given promptly to the Deputy Commissioner of the Fire Safety Division.

Any such restriction imposed by the legislative body of a city, town or village or by the board of fire commissioners shall take effect in accordance with the resolution imposing the restriction.

The fact that a fire company or department becomes a member of the Erie County Fire Mutual Aid Plan will in no way give the County or State any right, other than that already in effect, to order fire companies or departments to send their apparatus to out of area locations.

If equipment and/or manpower is needed somewhere, a request will be made for voluntary assistance and the responding agency will be directed as to how and where to respond. It will not be an order. The obligation to respond rests with the responding agency.

E. Withdrawal from the Plan

Any fire company or department may elect to withdraw from this plan by adopting a resolution to such effect. Such a resolution will become effective 60 days after filing notice with the Erie County Deputy Commissioner of the Fire Safety Division. Such withdrawal shall remain in effect until reinstated by resolution as defined under Section 209 (1) of the General Municipal Law.

Withdrawal from the plan may have an adverse effect on mutual aid operations, both on the withdrawing fire company or department and on the surrounding fire companies or departments and should be seriously thought out before such action is taken.

SECTION 3 ~ DESIGNATION OF PERSONNEL

A. Organization Chart ~ See Appendix A

B. Extent and Limit of Authority of County Officials

- Commissioner of Emergency Services shall have all the powers and shall perform all of the duties conferred or imposed upon county fire coordinators by the laws of the State of New York.
- 2. Deputy Commissioner of the Fire Safety Division shall, when so directed by the Commissioner of Emergency Services, have and exercise any and all of the powers and duties vested in and imposed upon a county fire coordinator by the laws of the State of New York; the Erie County Charter; and the Erie County job description for that position; and those duties as assigned by the Commissioner of Emergency Services.

These duties and responsibilities shall include, but not be limited to:

- ✓ Administers the Erie County Mutual Aid Plan and is responsible for the efficient operation of the plan for intra and inter-county purposes at fires or where the services of firefighters are used.
- Administer the Erie County Fire Radio System under authorization of the Federal Communications Commission and with the advice of the Fire Advisory Board.
- ✓ Administer the Erie County Fire Communications Center.
- Act as a liaison officer between the fire service of Erie County and the New York State Department of State, Office of Fire Prevention and Control.
- ✓ Act as a liaison officer between fire service and County Executive, County Legislature, other counties and agencies.
- ✓ Appoint and remove, subject to Fire Advisory Board approval, the Deputy Fire Radio Coordinators in accordance with Section 401 of the County Law, Section 3 of the Public Officers Law and the Civil Service Law if necessary.
- 3. Assistant Coordinator of the Fire Safety Division is directly responsible to the Deputy Commissioner of the Fire Safety Division and shall, when so directed by the Commissioner of Emergency Services, have and exercise any and all of the powers and duties vested in and imposed upon a county deputy fire coordinator by the laws of the State of New York; the Erie County Charter; and the Erie County job description for that position; and those duties as assigned by the Commissioner of Emergency Services and/or the Deputy Commissioner of the Fire Safety Division.
 - The Assistant Coordinator assumes the duties of the Deputy Commissioner as assigned or when designated as such, during extended absence, or in case of death of the Deputy Commissioner until a new one is appointed.
- 4. Fire Advisory Board is an unsalaried board of 25 members appointed by the Erie County Executive and confirmed by the Erie County Legislature pursuant to Section 225-A of the County Law and new Article 11-C added by Local Law #1-1986
 - a. The board meets regularly with the Commissioner of Emergency Services and the Deputy Commissioner of Fire Safety to advise them, the County Executive and County Legislature on matters of firematic interest and importance to the county.

- b. The board assists in the development and maintenance of programs of fire training and mutual aid in case of fire or other emergencies where the services of firefighters are used.
- c. Erie County Fire Advisory Board is responsible to the Deputy Commissioner of Fire Safety for all matters concerning the Erie County Fire Radio System.

The Board shall review all radio procedures and shall issue policy relative to radio usage; and approve all radio equipment requests.

The Board shall ensure adherence to all radio policy and procedures through the Deputy Fire Radio Coordinators.

- 5. Deputy Fire Radio Coordinator (Mutual Aid Operations) is directly responsible to the Deputy Commissioner and the Assistant Coordinator of the Fire Safety Division. The normal area of assignment is determined by the Deputy Commissioner and the Fire Advisory Board.
 - a. As a volunteer, he represents the Deputy Commissioner of the Fire Safety Division at the fire or other incident requiring the service of firefighters.
 - b. The Deputy Fire Radio Coordinator requests the local base stations or County Fire Control Center to dispatch mutual aid at the request of the fire chief or incident commander.
 - c. Acts as advisor to the fire chief or incident commander regarding kinds of fire mutual aid available
 - d. In the case of emergency, would make appropriate provisions for radio coverage.
 - e. Observes and checks on the manner of use of the fire radio system. Where use does not conform to adopted plans and the Erie County Radio Procedure Book, the Deputy Fire Radio Coordinator, shall notify the officers of the fire company involved. These officers are expected to correct the situation at once. Reports said abuses to the Deputy Commisioner of Fire Safety.
 - f. Reviews present fire company running cards, box assignments and/or dispatch protocols with the fire companies or departments and notifies the Deputy Commissioner of the Fire Safety Division of any changes made so that revisions can be made at the County Fire Control Center.

SECTION 4 ~ STATUS OF THE LOCAL FIRE COMPANY OR DEPARTMENT

Maintenance of Individuality

Each fire company or department participating in this plan shall retain its internal command and individuality.

B. Authority of "Requesting" Fire Chief or Incident Commander

- 1. A "requesting fire chief or incident commander is one who requests mutual aid for his company or department in accordance with this plan.
- 2. The command structure at a fire or other emergency in which the service of firefighters would be used for firefighters and officers entering the area under mutual aid <u>remains with the chief of the fire company or incident commander of the department requesting the mutual aid.</u>
- 3. The fire officer in command will utilize the incident command system in working with chiefs, senior officers and company officers of companies or departments providing the mutual aid.
- 4. The firefighters in the assisting company or department will be supervised by their own officers, who are in turn, commanded by officers of the company or department requesting the mutual aid.

C. Local Mutual Aid Plans Presently Operating Exclusive of the County Fire Mutual Aid Plan

Mutual unwritten plans exist between the three (3) cities and the volunteer fire service and between the volunteer fire companies and departments themselves. No formalized agreements exist that are known to the County with the exception of being an agreement between the Town of West Seneca and the West Seneca State School and Development Center.

SECTION 5 ~ OPERATION OF ERIE COUNTY COMMUNICATIONS CENTER

A. Location

Chestnut Ridge Park, Communications Building, Orchard Park, NY Erie County Public Safety Campus – MERS Control – Buffalo NY

B. Supervision and Dispatching Service

1. The Deputy Commissioner of Fire Safety is responsible for all activities of the County Fire Control Center and is authorized to dispatch.

- 2. Back-up dispatching service is provided from Chestnut Ridge Park, Orchard Park, NY or the Erie County Public Safety Campus, Buffalo NY as required.
- 3. The Deputy Commissioner of Fire Safety is authorized to provide a predetermined number of dispatchers to be used in emergencies using either radio coordinators or others recommended by the radio coordinators.
- 4. Restriction no person may operate any radio equipment at the County Fire Control or any alternate control center unless he possesses a valid Erie County Fire Radio Communications Training Certificate issued by the Erie County Division of Fire Safety.

C. Radio and Telephone Communications Regulations

- 1. Procedure the radio procedure shall conform completely with that prescribed in the Erie County Manual of Radio Procedures for Firefighters and the Declaration and Statement of Policy adopted by the Fire Advisory Board.
- 2. Authorization to Operate no fire officer or firefighter may use the Erie County Fire Radio System unless he completes the course "Erie County Fire Radio Communications Training" and receives such a certificate as prepared by the Erie County Division of Fire Safety.

A "Certification of Training" and/or wallet card for this course must be in the personal possession of any firefighter using a mobile two-way radio, including walkie-talkies, in this County under the license issued to the County of Erie.

3. No fire radio may operate on the fire frequency as part of the County fire network unless specifically authorized by the Deputy Commissioner of the Fire Safety Division and upon advice of the Erie County Fire Advisory Board and in accordance with the rules and regulations of the Federal Communications Commission. Upon application to the Erie County Deputy Commissioner of Fire Safety Division and the Fire Advisory Board and upon issuance of a mobile station identifier, a fire chief of a fire company or department may operate a mobile radio unit in his personal car.

At the expiration of his term in office, the identifier is cancelled and the mobile unit cannot be used for transmissions. Operation of an identifier authorized by the licensee is a violation of rules of the Federal Communications Commission.

D. Radio System

- 1. The fire radio system of the County of Erie shall be depicted on a map available for immediate examination.
- 2. The Erie County Fire Radio System is comprised of the following Area Base Stations:

Amherst Control Springville Control
Cheektowaga Control Lancaster Control
West Seneca Control Hamburg Control

Angola Control East Aurora Control Helmuth Control

3. The following Base Stations are operational within their respective jurisdictions and have the capability of operating with the County fire Radio System in a Mutual Aid Mode:

Buffalo Fire Dispatch Orchard Park Control

Town of Tonawanda Control Lackawanna Fire

Grand Island Control City of Tonawanda

Aircraft/Rescue/Fire Fighting Department of BNIA

E. Communication with the County Fire Control Centers of Chautauqua, Cattaraugus, Wyoming, Genesee and Niagara Counties:

Erie County and the above mentioned counties conduct daily tests with one another on the state-wide inter-county fire emergency radio net using the frequency of 45.88 MHz.

Cheektowaga Fire Control houses the transmitter on this frequency and the dispatchers of the base station staff the unit.

Back-up operation can be performed at Chestnut Ridge Park as necessary.

F. Provision for Emergency Power of Base Stations

It is recommended that fire radio base stations provide and maintain emergency back up power systems including, but not limited to emergency generators and uninterruptible power supply (UPS) systems

SECTION 6 – INVENTORY OF FIRE APPARATUS

A. Location of County Inventory of Fire Apparatus

The County inventory records shall be located as follows:

First Set – Fire Safety Division

Second Set – At Each Base Station

Third Set – Erie County Emergency Services Communications Center (MERS Control) at the Public Safety Campus

A copy of said inventory of fire apparatus shall be forwarded to the New York State Office of Fire Prevention & Control.

B. Officer Responsible for Maintaining Inventory

The officer responsible for maintaining the County inventory is the Deputy Commissioner of Fire Safety.

C. Method Used in Maintaining Inventory

The Chief of each Fire Company or Department in the plan shall submit changes in inventory of the company or department immediately to the Deputy Commissioner of Fire Safety.

The Deputy Commissioner of Fire Safety shall make and submit such corrections to each base station within 30 days of the receipt by him of such changes.

D. Review of Inventory

This inventory shall be reviewed annually at the same time that this plan is reviewed by the Deputy Commissioner of Fire Safety, the Mutual Aid Committee of the Fire Advisory Board.

SECTION 7 – STANDARD THREAD

All apparatus is to adapt to a N.S. Thread. All apparatus participating in this plan shall be equipped to adapt to national standard threads as defined by the National Bureau of Standards or other couplings.

SECTION 8 – EMERGENCY OR ALTERNATE COUNTY FIRE CONTROL CENTER

A. Transfer of Control

- 1. In the event that an Area Base Station experiences a failure and goes off the air, control of that Base Station will be transferred to its back up station.
- 2. The Area Base Stations are paired up with their primary frequencies and will back each other up in the event of failure.

The Area Base Stations are paired up as follows:

Cheektowaga Control / Lancaster Control

Hamburg Control / Angola Control

Helmuth Control / Springville Control

West Seneca Control / East Aurora Control

Amherst Control / Town of Tonawanda Control

Grand Island Control / City of Tonawanda

3. Control shall be transferred to the Erie County Fire Control Center at Chestnut Ridge Park in the event that an Area Base Station and its back up station suspend its control function due to a failure.

B. Alternate Fire Control Centers

Fire Alternate – Radio Communications Building, Chestnut Ridge Park – dispatchers shall report to the Deputy Commissioner of Fire Safety who shall act as Chief Dispatcher.

Second Alternate – in order of base stations listed or designated by the Erie County Deputy Commissioner of the Fire Safety Division. Dispatchers normally operating at these base stations shall man these alternate County Control Centers. Duplicate running cards shall be located at the second alternate.

Third Alternate – Mobile radios in the Deputy Commissioner of Fire Safety's Vehicle or other designated by him. Duplicate running cards shall be located in these vehicles.

<u>SECTION 9 – PARTICIPATION IN THE STATE FIRE MOBILIZATION AND MUTUAL AID PLAN</u>

A. State Mobilization

The Commissioner of Emergency Services, the Deputy Commissioner of the Fire Safety Division or a deputy in the line of authority designated pursuant to Section 401 of the County Law, after utilizing all available assistance within Erie County and all routinely activated mutual aid assistance from Cattaraugus, Chautauqua, Wyoming, Genesee and Niagara Counties, may call the New York State Department of State, Office of Fire Prevention and Control to request activation of the State Fire Mobilization and Mutual Aid Plan.

The procedure shall conform with that specified in the Guide to Fire Mobilization and Mutual Aid Plans in the State of New York issued by the New York State Department of State, Office of Fire Prevention and Control.

B. Authority and Responsibility of the Regional Fire Administrator

The authority and responsibility of the Regional Fire Administrator under the activated State Fire Mobilization and Mutual Aid Plan is established by the New York State Department of State, Office of Fire Prevention and Control.

In Erie County, the Deputy Commissioner of the Fire Safety Division has been designated as the Regional Fire Administrator by the State.

C. Retirement Provision Relating to Position of Regional Fire Administrator
Should the Deputy Commissioner of the Fire Safety Division be separated from his office for any reason, he is automatically retired as Regional Fire Administrator if he also holds his position.

The State Fire Administrator in the New York State Department of State, Office of Fire Prevention and Control, is authorized by law to appoint to this position.

D. County Number Issued Under the State Fire Mobilization and Mutual Aid Plan
The Erie County Deputy Commissioner of the Fire Safety shall utilize County
Number 15 assigned to Erie County by the State Fire Mobilization and Mutual
Aid Plan.

<u>SECTION 10 – COORDINATION WITH OTHER EMERGENCY SERVICES</u>

A. Sheriff

The Erie County Fire Control Center shall be in immediate communications via radio and telephone with the alternate control centers for both fire and sheriff.

B. Other Services

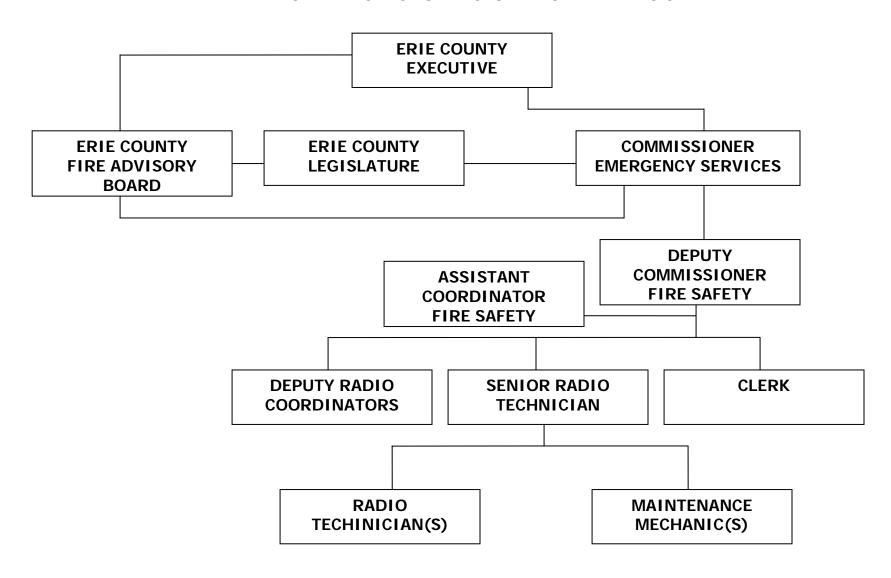
Telephone number will be listed at the Erie County Fire Control Center for the following services:

Utilities: Gas, Water & Electric

Police – FBI – Environmental – Health Department

These numbers shall also be maintained at all alternate County Fire Control Centers.

DEPARTMENT OF EMERGENCY SERVICES FIRE SAFETY DIVISION



County of Erie

Mutual Aid Plan

Adopted 2016

Contents

1. Purpose:	. 3
2. Scope:	3
3. Intent:	3
4. Legal Authority:	. 3
5. Participation	3
6. Terms	. 4
7. Withdrawal from the plan	5
8. SELECTION OF RESPONDING RESOURCES	5
9. INSURANCE AND LIABILITY	. 5
10. FINANCIAL AND RESPONSIBILITY	. 6
11. COMMUNICATIONS AND DISPATCH	6
ATTACHMENT 1	7
ERIE COUNTY EMERGENCY MEDICAL MUTUAL AID PLAN	
ATTACHMENT 2	8
ERIE COUNTY EMERGENCY MEDICAL MUTUAL AID PLAN	
ATTACHMENT 3	9

- 1. <u>Purpose:</u> The purpose of this medical mutual aid plan and its appendices is to establish basic operating procedures and an agreement between services that provide Emergency Medical Service (EMS) in Erie County. This document represents a reciprocal assistance agreement in which personnel and equipment will assist other EMS agencies in the delivery of emergency medical care within Erie County during normal operations as well as during disaster operations.
- **2.** <u>Scope:</u> All Emergency Medical Service Agencies in Erie County share a common goal of providing patients with quality care. This plan is designed to allocate resources and provide patients with efficient and time sensitive services. The proper medical care for the sick and injured is the primary scope of this plan.

3. Intent:

This plan is intended to be applicable to the following situations:

- I. Volume of emergency calls in excess of what is normally experienced, and exceeding the capability of the primary EMS agency to effectively respond.
- II. Temporary shortage of resources on the part of a primary EMS agency rendering it temporarily incapable of effectively responding to an emergency call.
- III. Temporary shortages in human resources on the part of a primary EMS agency, as may occur at certain times of the day or days of the week. Request must be made with intent of having the closest available EMS unit with the appropriate level of care respond to a patient's medical needs.

This plan is applicable to emergency incidents as described in the above section of this document. This may not be activated for the purpose of providing scheduled, routine or other non-emergency services. Normal day to day operations are not affected by this plan.

4. Legal Authority:

The authority for development of this plan comes from the several sections of law.

- I. Public Health Law-Article 30, Section 3001(20)
- II. County Law Article 5, Section 223-b
- III. Executive Law, Article 2B
 General Municipal Law, Section 209b (3-a)
 NYS Bureau of EMS Policy 89-02, 95-04, 12-06
- **5.** <u>Participation</u> Any EMS agency may participate in the mutual aid agreement by approving the contents of this agreement and approving the appropriate attached resolution.

All participants must understand they are expected to contribute their resources, when needed, according to their availability as well as to be able to receive the resources of other participants in this plan, when needed. This does not, however, imply the expectation of equal capability among all parties. It is recognized that some will be able to contribute certain types of resources that others cannot. Nothing in this plan shall be construed to prohibit or limit participation of EMS agencies that, by virtue of their size or other limitations, can't contribute the same type or volume of services that they may receive under this plan.

Each EMS agency participating in this plan shall retain its own internal command structure and individuality. Each participating EMS agency agrees to utilize the National Incident Management System (NIMS). All agencies shall train, or cause to be trained, all personnel to the appropriate level of NIMS training.

6. Terms

Signatories of this agreement agree to the following provisions:

- I. EMS agencies should respond to EMS calls within their service area as designated in the applicable New York State EMS Operating License, and in accordance with the response requirements below.
- II. EMS agencies shall adhere to the following response standard:
 - a) Upon receipt of an EMS call within its service area, or in response to requested assistance to another EMS service area, the 911 Center will dispatch an appropriate EMS agency.
 - b) If the initial EMS agency has not acknowledged the dispatch within three minutes of being notified, then the 911 Center shall re-activate that agency.
 c) If the dispatched EMS agency does not have a driver and EMT responding within
 - c) If the dispatched EMS agency does not have a driver and EMT responding within six minutes of the initial dispatch, then they will be re-toned along with the next closest appropriate available EMS agency.
 - d) If an EMS agency, who is unable to turn a crew for a call, receives another request for dispatch to a second call within a "One Hour" period, the Dispatch center will tone the Primary EMS Agency as well as, the closest appropriate available EMS agency for Mutual Aid.

NOTE: An appropriate EMS unit/responder is an EMS resource that has the personnel and equipment needed to provide definitive pre-hospital care consistent with the nature of the call as determined from dispatch or on-scene information.

- e) An Advanced Life Support (ALS) unit shall be dispatched by the 911 Center if the Medical Priorities Protocols indicate or if requested by the responding agency.
- f) The 911 Center shall maintain the status of all transporting EMS agencies. This shall be accomplished by:

Each transporting EMS agency reporting availability by contacting MERS each morning by 06:00 and 18:00. Each transporting EMS agency shall inform the 911 Center of any changes in response status

- g) If an EMS transport is required, and the applicable EMS transporting agency is not in service, then the 911 Center shall dispatch the closest available EMS transporting unit, and perform a courtesy notification of the applicable service.
- h) If ALS response is required, and the applicable EMS transporting agency is not in service, or is responding with BLS capability, then the 911 Center shall dispatch the closest available ALS unit, and perform a courtesy notification of the applicable service.

If Department does not provide regular ALS services to the community. Both agencies will respond if a Multiple Casualty Incident (MCI) situation exits.

- i) Cancellation of a responding EMS transporting unit can only be performed as follows:
- a. For situations where an actual illness or mechanism of injury does NOT exist, the EMS transporting unit may be cancelled by law enforcement or the first emergency responder to arrive at the scene .
- b. For situations where an actual illness or mechanism of injury does exist, the patients shall be evaluated by a currently certified Basic EMT or an EMS provider of higher certification
- III. An available unit is defined as ambulance with a driver and a certified EMS provider.
- IV. BLS status means that a basic EMT is available.
- V. ALS status means that an Advanced EMT, AEMT-CC or Paramedic is available.
- 7. <u>Withdrawal from the plan</u> An EMS agency that wishes to withdraw from participation in this plan may do so by stating its intention in writing, signed by an authorized representative of that agency, and forwarding the statement of intention to the Erie County ALS Coordinator, 3359 Broadway Cheektowaga, NY 14227. Such a request should be submitted at least 30 days prior to the desired date of withdrawal.

Withdrawal from this plan by any EMS agency will result in the suspension of Mutual Aid assistance to that EMS agency pursuant to this plan. Such withdrawal shall remain in effect until such time that this plan is reinstated by resolution. The EMS agency shall be required to file their own plan in accordance with the NYS Department of Health Title 10, NYS Codes, Rules and Regulations, Part 800.21 (p.1-6).

- **8. SELECTION OF RESPONDING RESOURCES** It is agreed that, to the maximum extent that can be reasonably determined at the time of need, the resources dispatched to a request for mutual aid assistance under this plan will be those that are defined by the local agency either at time of call or through predetermined "Box Alarms". If none or more than one has coincident primary operating territory, the preference of the requesting primary EMS agency shall be expressed in written protocol and submitted to the Office of Emergency Services. Appropriate mutual aid resources will be considered when selecting the agency to respond.
- 9. INSURANCE AND LIABILITY Each participating agency shall maintain proper and adequate insurance coverage with respect to errors and omissions, loss or damage to property, injury or death to persons including workers' compensation coverage for its members and employees. Unless otherwise provided by law or under separate agreement, such as it is understood that liability for losses incurred while operating pursuant to this plan will remain with the agency incurring or causing the loss, and will not be transferable to any other agency as a result of this plan. Nothing in this plan can be construed as restricting or preventing the transfer of liability where it is provided for by law or under separate agreement.

10. <u>FINANCIAL AND RESPONSIBILITY</u> EMS agencies requesting mutual aid assistance under this plan shall incur no liability for charges or fees for service from EMS agencies rendering such assistance. The assisting EMS agencies shall be entitled, at their option, to bill patients or their insurance carriers for any usual or customary charges, in exactly the same way as they would bill patients receiving their services within their own primary operating territory unless provided for under supplemental contracts.

11. <u>COMMUNICATIONS AND DISPATCH</u> The Erie County 911 Center shall serve as the focal point for all dispatching pursuant to this plan, and all activation's of this plan and shall be accomplished via contact with the 911 Center or designated back up. Request for EMS resources for participating EMS agencies outside of Erie County shall be made through the 911 Center. Communications on multi-agency MCl's will be handled on 155.340 or other appropriate assigned Erie County frequency.

ATTACHMENT 1 ERIE COUNTY EMERGENCY MEDICAL MUTUAL AID PLAN

RESOLUTION BY FIRE COMPANY, FIRE DEPARTMENT OR AMBULANCE SERVICE ELECTING TO PARTICIPATE IN THE ERIE COUNTY EMERGENCY SERVICES EMS MUTUAL AID PLAN

		offered the follow	ing resolution
and moved its adoption:			J
RESOLVED that			
	name of fire company or depa	rtment)	
elects to participate in the Erie Co recognize a call for assistance thro provisions of such plan as now in	ough the Erie County 911 Dispa	tch Center and will com	ply with the
RESOLVED that a copy of this reso	olution be filed with the Erie Co	unty Office of Emergenc	y Services.
,		seconded t	he resolution
Voted In Favor	Opposed	Abstained	
Carried			
			(Date)
			(Officer)

ATTACHMENT 2

ERIE COUNTY EMERGENCY MEDICAL MUTUAL AID PLAN

RESOLUTION BY THE MUNICIPALITY OR FIRE DISTRICT BODY HAVING JURISDICTION OVER THE FIRE COMPANY, FIRE DEPARTMENT OR AMBULANCE SERVICE

		offered the following	
resolution and moved its	adoption:		
RESOLVED that this	s board encourages participatio	n by the	
			in the Erie
County (name of fire company, fire depart	artment or Ambulance Agency)	
assistance through the Eri	<u>-</u>	an, and will agree to recognize a ca nd will comply with the provisions and be it further	
RESOLVED that a copy of	this resolution be filed with the	Erie County Office of Emergency Se	rvices.
		seconded the resolution	on
Voted In Favor	Opposed	Abstained	
Carried			
		(date)
		(officer)

NOTE: Resolution to be adopted by the legislative body of the city, Town, Village or the board of fire commissioners or other governing board having jurisdiction over the local agency.

ATTACHMENT 3

ENDORSEMENT:

The following agencies have agreed to abide by the terms of this agreement:

Agency	Date
AMR	
Boston	
Gowanda	
LVAC	
North Collins	
Orchard Park Dist EMS	
Town of Tonawanda PM	
Twin City	

Western New York Regional Mutual Aid Plan 2016-2017

Version: February 2017

All facilities listed in this Mutual Aid Plan are current and active members.

www.ghfa.org

WESTERN NEW YORK REGIONAL MUTUAL AID PLAN (MAP)

Table of Contents

Acti	ons Taken by Disaster Struck Facility to Activate Regional Mutual Aid Plan	2
Acti	vation of Joint Region Mutual Aid Plan by Regional Coordinating Center	3
Reg	gional Coordinating Center Action Guide	4
Loc	ation of Coordinating Center and Contact Information	5
Reg	gional Coordinating Center / Steering Committee Job Action Checklist	6
l.	Mutual Aid Plan Steering Committee	7
II.	Western New York Health Care Regional Mutual Aid Plan - Overview	10
III.	Responsibilities of the Sending (Evacuating) Facility	11
	Responsibilities of the Receiving Facility	13
	Supplies for Disaster Struck Facility or Resident Accepting Facility	14
	Disaster "overtakes" Regional Mutual Aid Plan	15
IV.	Finances	16
V.	Cooperating Agencies	17
VI.	Transportation	21
VII.	Additional Sources	25
VIII.	. Emergency Health Staffing	25
IX.	Sectors 1-7 (WNY Plan)	26
X.	Mutual Aid Participants – 2016-2017	30
XI.	Patient / Medical Record & Equipment Tracking Sheet	77
XII.	Sample Resident Emergency Evacuation Tag	78
XIII.	Influx Of Patients Log	79
XIV	. WNYMAP Transportation Evacuation Survey	80
ΧV	eFINDS	. 85

WESTERN NEW YORK MAP

Actions Taken by Disaster Struck Facility to Activate Regional Mutual Aid Plan

DISASTER OCCURS

NOTE:

If WNY MAP area is overwhelmed the RCC will active the Joint Region MAP for help outside the WNY MAP area.

Individual health care facility being affected:

- 1. Notify appropriate Emergency Agency (911)
- 2. Notify Regional Coordinating Center (or backup, if necessary)
 - o Primary: Beechwood Homes, 716-810-7000; Cell 716-867-4774; FAX 716-250-6200
 - Backup: Mercy Nursing Facility @ OLV, 716-819-5300; Cell 716-949-5988; FAX 716-819-5309
- 3. Internal notification / set-up Internal Command
- 4. Notify NYS Department of Health Regional Office, as necessary
 - o Western Region Office 716-847-4320
 - o Duty Officer (after hours number) 1-866-881-2809
 - Hot Line 1-888-201-4563

Request that NYSDOH send out a Health Commerce System / Integrated Health Alerting and Notification System alert (HCS / IHANS) to all member facilities, notifying them of the situation, and asking them to prepare to report their number of empty beds and other emergency reporting information when requested.

- 5. Notify appropriate County Office of Emergency Management (see Section V for phone numbers); consider prompting for a Conference Call to include all WNYMAP members and Emergency Manager
- 6. Continue to follow your facility's internal Emergency Management Plan

DISASTER RESULTS IN:

NEED FOR SUPPLIES:

- 1. Call your facility suppliers.
- 2. Contact suppliers listed in your regional MAP.
- 3. Contact County Emergency Mgr
- See supply availability from member facilities in your regional MAP.

NOTES:

- Fax request form to supplier to use as identification of supplies at police roadblocks.
- Coordinate supplies through local Emergency Operations Center, when requested.

NEED FOR COMMUNICATIONS:

- 1. Attempt all primary means of communication, including:
 - a. Phone / Cell Phone
 - b. Fax
 - c. Email
- HAM Radios (A.R.E.S.): Contact county Office of Emergency Management to assist in communication. If phone lines are down, try communication via:
 - a. Cell phone
 - b. Text messaging
 - c. Local Fire or Police Dept.
 - d. Via runner

NEED FOR TRANSPORTATION:

- Notify County Office of
 Emergency Management
- 2. Work with Emergency Agency Emergency Medical Services. Know number and type of transport vehicles you need. (See Transportation Evacuation Survey in Annex V.)
- 3. Activate private transportation contracts you may have.

2

 Request transportation help from facilities in your regional MAP (to whom you are evacuating to) to move residents to resident accepting facilities.

NEED TO EVACUATE:

Through liaison with Emergency Agency Command:

Slow Evacuation: Move residents to Stop-Over Point OR transfer residents directly to resident accepting facility within your regional MAP.

Fast Evacuation: Alert and move residents to Stop-Over Points & subsequently to resident accepting facilities within your regional MAP, as necessary.

- Send additional medical information, staff, and equipment, when possible
- · Track residents and staff

ONE FACILITY EVACUATING:

Notify RCC and they will:

- 1. Contact resident accepting facility.
- Advise number and type of residents being sent. Follow resident type/ capacity on Facility Profile sheets.

Disaster struck facility will:

 Send disaster tag & required medical information.
 NOTE: Disaster-struck facility notifies each resident's responsible party and physician.

Disaster struck facility can do all the above if RCC is not available.

MORE THAN ONE FACILITY EVACUATING:

Regional Coordinating Center / Steering Committee, will:

- Coordinate with evacuating facilities to assign residents to resident accepting facilities; follow the Facility Profile sheets.
- Communicate with NYSDOH and OEM.

RESIDENT ACCEPTING FACILITY

When notified of an evacuation, implement the following:

- Internal plans to prep resident reception point & care areas, including equip. needed for Special Care residents, as applicable.
- Be prepared to care for residents until disaster-struck facility staff arrive.
- Confirm residents received with sender.

Activation of Joint Region Mutual Aid Plan by Regional Coordinating Center

DISASTER RESULTS IN INABILITY OF REGIONAL MAP TO PROVIDE ADEQUATE SUPPLIES, TRANSPORTATION OR PLACE ALL EVACUATING RESIDENTS

JOINT REGION MUTUAL AID PLAN CAN BE ACTIVATED BY THE REGIONAL COORDINATING CENTER AS FOLLOWS:

CONTACT:

- ONE OF THE OTHER THREE REGIONAL COORDINATING CENTERS, OR BACK-UP, IF NECESSARY
 - o Greater Rochester
 - Primary: St. John's Health Care 585-760-1340; Cell 585-766-3651 or 585-704-2115
 - Back Up: St. Ann's Community 585-697-6666; Cell 585-313-8097, 585-314-6600 or 585-764-5863
 - Southern Tier
 - Primary: Chemung County NF 607-737-2001; Cell 607-481-9642 or 607-329-7088
 - Back Up: Steuben Centers for Rehabilitation and Healthcare 607-776-7651; Cell 607-346-6780
 - Central NY
 - Primary: Van Duyn Home & Hosp. 315-449-6000; Cell 315-383-5206
 - Back Up: Syracuse Home Assoc. 315-638-2521; Cell 315-952-8107
- NYS DEPARTMENT OF HEALTH
 - o Region Office 585-423-8020
 - Duty Officer (after hours number) 1-866-881-2809
 - o Hot Line 1-888-201-4563 AND
- LOCAL OFFICE OF EMERGENCY MANAGEMENT (See Section V for phone numbers)

NEED FOR SUPPLIES:

- Go to vendor list of another regional MAP to request supplies directly.
- Request supplies from availability of facility in another regional MAP. OPTION: Contact Regional Coordinating Center to coordinate this.

NOTES:

- Fax request form to supplier to use as identification of supplies at police roadblocks.
- Coordinate supplies through Local EOC, or County Office of Emergency Mgt, when requested.

NEED FOR TRANSPORTATION:

- Request Emergency
 Medical Services help to
 move residents out of
 regional MAP areas. Know
 number and type of
 transport vehicles you
 need.
- Request transportation from availability of facilities in another regional MAP. Call facilities you are evacuating to first.
- Contact County Office of Emergency Management.

NEED TO PLACE RESIDENTS:

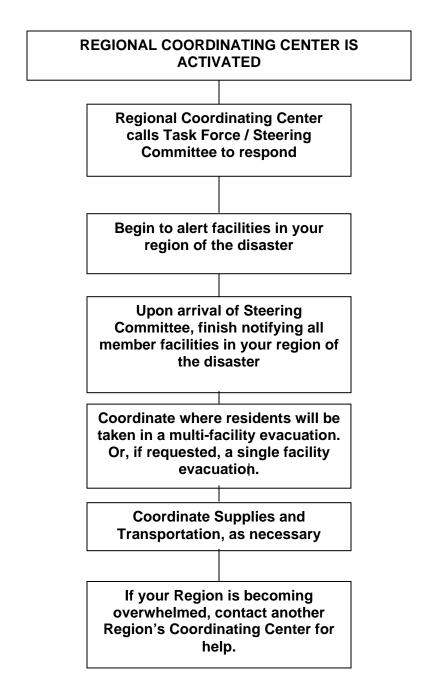
 When all space is used or otherwise unavailable in your regional MAP:

OPTION A

Regional Coordinating Center (from both Evacuating Region & Accepting Region), (Steering Committee), will:

- Alert healthcare facilities out of the disaster struck region as necessary.
- Coordinate where residents will be evacuated to.
- Be aware of and follow the resident number and type of residents the accepting facility can accept. Refer to the Facility Profile sheets.
- Send appropriate medical information and medication with residents.
- Controlled substances <u>and staff</u> must be sent to the accepting facility as soon as possible.
- Track resident location.
- Disaster-struck facilities will contact responsible parties and physicians.

Regional Coordinating Center Action Guide



Location of Coordinating Center and Contact Information

Greater Rochester Mutual Aid Plan

Primary Regional Coordinating Center: St. John's Home, 585-760-1340

Cell: 585-766-3651 or 585-704-2115

Back Up Regional Coordinating Center: St. Ann's Community, 585-697-6666

Cell: 585-313-8097, or 585-314-6600 or 585-764-5863

Email Address: rochmap@gmail.com

Website: www.ghfa.org

Western New York Mutual Aid Plan

Primary Regional Coordinating Center: Beechwood Homes, 716-810-7000

Cell: 716-867-4774

Back Up Regional Coordinating Center: Mercy Nursing Facility at OLV,

716-819-5300; Cell: 716-949-5988

Email Address: <u>WNYMAP@gmail.com</u>

Website: <u>www.ghfa.org</u>

Southern Tier Mutual Aid Plan

Primary Regional Coordinating Center: Chemung County Nursing,

607-737-2001

Cell: 607-481-9642 or 607-329-7088

Back Up Regional Coordinating Center: Steuben Centers for Rehabilitation and

Healthcare, 607-776-7651

Cell: 607-346-6780

Email Address: SoTierMap@gmail.com

Website: <u>www.ghfa.org</u>

Long Term Care Executive Council of Central New York Mutual Aid Plan

Primary Regional Coordinating Center: Van Duyn Nursing Home, 315-449-6000

Cell: 315-491-5499 or 315-383-5206

Back Up Regional Coordinating Center: Syracuse Home Assoc., 315-638-2521

Cell: 315-952-8107

Email Address: <u>LTCCNY@gmail.com</u>

Website: www.ghfa.org

Logging onto the Genesee Health Facilities Association website (<u>www.ghfa.org</u>) instructions:

• Click on the MEMBER LOGIN box on the right side of the page.

o *If you do not have a username and password*; Email info@ghfa.org with your name, title, email address, and facility name. They will set you up in the system and email you a user name and password.

 Once logged in click on the title "Mutual Aid Plans of New York" in the header row.

5

Regional Coordinating Center / Steering Committee Job Action Checklist

Regional Coordinating Center Actions:

- 1. <u>Activation</u> This will be done by notification from disaster struck facility or request by DOH or OEM.
- 2. <u>Alerting Steering Committee</u> These individuals will accomplish the responsibilities of the Regional Coordinating Center when they arrive on site. Therefore, as soon as you (Regional Coordinating Center) are activated, call your region's Steering Committee. 24/7 numbers are kept at RCC and by each member.
- 3. Until committee member(s) arrive, <u>start alerting</u> other facilities in your region regarding the disaster at a member facility. Tell them they <u>may</u> get another call for help.

NOTE: If Primary Regional Coordinating Center (Beechwood Home) <u>is</u> the disaster struck facility, or cannot be used for any reason, Coordinating Center responsibilities will shift to the Back-up facility (Mercy Nursing Facility @ OLV).

NOTE: RCC Email Address (once activated and staffed): WNYMAP@gmail.com, Password: mutual_aid. Members should be instructed to include the facility name in the subject line of emails.

Steering Committee Actions:

- 1. Respond when notified by Regional Coordinating Center.
- 2. Call in other Steering Committee members to help, if all have not been notified.
- 3. If RCC staffing permits, request permission to send a Liaison Officer (Steering Committee member) to the County Emergency Operations Center if one has been established.
- As necessary, alert other facilities of evacuation and that they may call them for help (taking residents, needing help with evacuation transportation, or in need of supplies).
- 5. Keep local County Office of Emergency Management and NYS Department of Health advised of activities.
- 6. **If more than one facility is evacuating**, coordinate who is to evacuate where, to ensure that two facilities do not evacuate to the same location.
- 7. If you feel your **region is becoming overwhelmed**, contact other Regional Coordinating Centers in the Joint Region MAP to put their facilities on alert. Work together in controlling evacuation or obtaining supplies.

I. Mutual Aid Plan Steering Committee

Consultant:

Scott Barry & Paul McManus Phillips & Associates, LLC. 500 CrossKeys Office Park Fairport, NY 14450 Phone: 585-223-1130

Fax: 585-223-1189 sbarry@phillipsllc.com

Chair:

Geri Robinson

Park Creek Senior Living Community

410 Mill Street

Williamsville, NY 14221 Ph: 716-632-3000; grobinson@park-creek.com

Brian Hyzy, Dir. Plant Operations/Environmental Services

Beechwood Homes 2235 Millersport Highway Getzville, NY 14068 Ph: 716-810-7220

Fax 716-688-4209 Cell: 986-5180

bhyzy@beechwoodcare.org

Treasurer:

Barbara Gorenflo **Blocher Homes** 135 Evans Street Williamsville, NY 14221 716-810-7400 716-631-9422

bgorenflo@beechwoodcare.org

Ronald Alessi, Maintenance Director Absolut Care of Houghton 9876 Luckey Drive Houghton, NY 14744

Ph. 585-567-2207 Fax: 585-567-2730 Cell: 716-913-5299 ralessi@absolutcare.com

Isadore De Marco

Canterbury Woods/Oxford Village 705 Renaissance Drive Williamsville, NY 14221 Ph. 716-929-5800

idemarco@gcha.org

Dale Dibble Our Lady of Peace 5285 Lewiston Road Lewiston, NY 14092 Cell: 716-609-1659 Ph. 716-298-3714 ddibble@ladyofpeace.org

Robert F. Gristmacher Niagara Hospice House 4675 Sunset Drive Lockport, NY 14094 Ph: 716-439-4417

rgristmacher@niagarahospice.com

Tom Bloomer

Brothers of Mercy Nursing and Rehabilitation Center

10570 Bergtold Road Clarence, NY 14031 Ph: 716-759-7662 Fax: 716-759-6223

bloomer@brothersofmercy.org

Marnie Ulkins WCA Home 134 Temple Street Fredonia, NY 14063 Ph. 716-672-7961 wcamarnie@netsync.net

Phyllis Leffler

Emerald North Nursing & Rehabilitation Center

1205 Delaware Ave. Buffalo, NY 14209 Ph. 716-885-3838; Fax: 716-885-2331 Cell: 716-949-3712

pleffler@emeraldbuffalo.com

Brian Meyers,

Emerg. Prepard. Coord.

Wyoming County Community Hospital/Nursing Facility

400 North Main Street Warsaw, NY 14569 Ph. 585-786-8890 Cell: 585-322-6222 Fax: 585-786-1226 bmeyers@wyomingco.net

Patricia O'Connor, Administrator Mercy Nursing Facility at OLV

55 Melroy Avenue Buffalo, NY 14220 Ph: 716-819-5300 Fax: 716-819-5299 Cell: 574-1974

poconnor@chsbuffalo.org

Pete Riester, Director of Maintenance

Brompton Heights 275 Brompton Road Williamsville, NY 14221 Ph. 716-634-5734; Fax: 716-634-1416

Cell 818-3368

Priester@bromptonheights.com

Tammy McCool WCA Home 134 Temple Street Fredonia, NY 14063 Ph. 716-672-7961 wcatammy@netsync.net

Mark Wheeler, Administrator Father Baker Manor 6400 Powers Road Orchard Park, NY 14127 Ph: 716-667-0001, Fax: 716-677-0028 mwheeler@chsbuffalo.org

Kevin Kennedy Absolut Care of Salamanca 451 Broad Street, Salamanca, NY 14779 Ph. 716-945-1800; Fax: 716-945-5867 kkennedy@absolutcare.com

Timothy Kornacki and Richard Healy **Emergency Preparedness** Kaleida HealthDesk: 716-859-8476 Cell:716-803-7270 rhealy@kaleidahealth.org tkornacki@kaleidahealth.org

James Neuman **Blocher Homes** 135 Evans Street Williamsville, NY 14221 Ph: 716-445-6600 jneuman@beechwoodcare.org

Dawn James Wyoming County Community Hospital/Nursing Facility 400 North Main Street Warsaw, NY 14569 Ph. 585-786-8890 Fax: 585-786-1226 djames@wcchs.net

Patrick McFeely, Administrator Garden Gate Health Care Facility 2365 Union Road Cheektowaga, NY 14227 Ph. 716-668-8100; Fax: 716-668-3516 pmcfeely@mcguiregroup.com

Paul Moves

Brothers of Mercy Nursing and Rehabilitation Center 10570 Bergtold Road Clarence, NY 14031

Ph: 716-759-7662 Fax: 716-759-6223

moyes@brothersofmercy.org

Michelle Murtha Kraus, Administrator Fox Run at Orchard Park One Fox Run Lane Orchard Park, NY 14127 Ph. 716-508-2150 Fax: 716-508-2197 mkraus@foxrunorchardpark.com

Lawrence Piselli, Administrator Elderwood at Cheektowaga 225 Bennett Road Cheektowaga, NY 14227 Ph. 716-681-9480; Fax: 716-681-8175 lpiselli@elderwood.com

Joann Stoll Niagara Hospice House 4675 Sunset Drive Lockport, NY 14094 Ph: 716-439-4417 joann.stoll@niagarahospice.com

Deborah A. Smith, Administrator St. Vincent's Home 319 Washington Avenue Dunkirk, NY 14048 Ph. 716-366-2066; Fax: 716-366-0393 dsmith@chsbuffalo.org

Tom Hopkins, Administrator Villages of Orleans Health & Rehabilitation, The 14012 Route 31 Albion, NY 14411-9353 Ph. 585-589-5637; Fax: 585-589-6567 thopkins@thevillagesoforleans.com

Darlene Iarocci Niagara Hospice House 4675 Sunset Drive Lockport, NY 14094 Ph: 716-439-4417 darlene.iarocci@thehcp.org

Chris Cox Elderwood Corporate ccox@elderwood.com

Paul Henry Director of Maintenance Batavia Health Care Center 257 State St., Batavia NY 14020 p.henry@bataviahcc.com 585-343-1300 cell 716-860-7391

Melody Parker Administrator Cloverhill Adult Residence 355 South Main Street Albion, N.Y. 14411 cloverhill87@yahoo.com 585-589-7832 Cell: 585-281-6325

Robert Burlingham, LNHA Administrator Batavia Health Care Center, LLC 257 State Street Batavia, NY 14020 r.burlingham@bataviahcc.com phone: (585) 343-1300 cell: (585) 738-2420

Mimi Piciullo Administrator Tennyson Court
49 Tennyson Court
Williamsville, NY 14221
mpiciullo@TennysonCourt.com
phone: 716-632-9496

II. Western New York Health Care Regional Mutual Aid Plan - Overview

The following plan is designed for those disasters where an unpredictable event requires the immediate evacuation of residents. It is not designed as part of a contingency plan for long term resident evacuation due to employee strike or closure of a health care facility. The commitment to this Plan (caring for evacuated residents) is for two weeks or less, unless approved for a longer term by the Plan member and the NYS Department of Health. The MAP is also designed to help with supplies and transportation of evacuated residents.

NYSDOH, SOEM, and County OEMs

This plan will be instituted in conjunction with the New York State Health Department acting as a monitoring agent. Interaction with the State and County Offices of Emergency Management will be done as necessary.

Joint Region MAP

The WNY Health Care Regional Mutual Aid Plan is part of the New York State Joint Region Mutual Aid Plan, or JRMAP with the Greater Rochester Mutual Aid Plan (GRMAP), the Southern Tier Mutual Aid Plan (STMAP), and the Long Term Care Executive Council of Central NY Mutual Aid Plan (LTCEC-MAP). This gives WNYMAP "backup" if a disaster overwhelmed our region. Your facility is automatically part of the JRMAP through good standing in WNYMAP.

NOTE: Internal plans for receiving residents and maintaining quality of care for the resident population must be developed and made available to the Health Department. On the "sending" side, your facility must have an internal Full Building Evacuation Plan. Members must keep staff trained in these plans and procedures.

Evacuation

If conditions within a facility pose an imminent danger to residents and staff and must be evacuated immediately, residents will be moved to a "Stop-Over Point." If there is time, however, it is far better to evacuate directly from your facility to "Receiving" facility(ies) without going to a Stop-Over Point. You must advise the Regional Coordinating Center and receiving facilities where you can be reached via telephone. Any resident injured in the disaster would be evacuated directly to a hospital. Stop-Over Point residents should have disaster tags and eFINDS wristbands applied before being transferred to member facilities. NYSDOH must be contacted as soon as residents are evacuated. A facility's first priority will be to evacuate to a similar level of care.

Stop-Over Point

Stop-Over Points (schools, churches, etc.) must be by written agreement between each facility and the individual organizations. Written agreements must be updated annually. This is the facility's responsibility.

Medical Information

Evacuation tags contain medical information which enables the receiving facilities to provide care until staff and medical records from the sending facility arrives. The tags are part of the Mutual Aid Plan. A record of resident destination or arrival at receiving facility form is utilized by an evacuating facility to document/track where residents were evacuated to and to confirm their arrival at the receiving facility.

Changes in MAP Information

If a facility needs to make changes during the plan year, it is that facility's responsibility to provide such information to the Steering Committee **AND** to each participating facility. This can also be done through the website. Such changes may include:

- a) Changes in administrative personnel and phone numbers,
- b) Temporary changes which affect the number of residents the receiving facility can accommodate.

Members are Required to Participate in the Following:

- Annual Meeting
- "Plan" and Sector drills
- Joint Region Mutual Aid Plan drills

III. Responsibilities of the Sending (Evacuating) Facility

(For a quick guide, see Algorithm in front of plan)

Beginning Actions

Follow your facility's disaster procedures. Call 911 or your local emergency contact number. Also contact the New York State Department of Health as applicable:

- Western Region 716-847-4320
- Duty Officer 1-866-881-2809 (after hours number)
- Hot Line 1-888-201-4563

Contact Regional Coordinating Center (Primary: Beechwood Homes, 716-810-7000; Cell 716-867-4774, Backup: Mercy Nursing Facility @ OLV, 716-819-3000; Cell: 716-949-5988).

Be familiar with the function and extent of community emergency services such as police and fire departments, local disaster coordinators, Office of Emergency Preparedness, Red Cross, Salvation Army, etc., and advise them of your needs. (See Cooperating Agencies – Section V).

Ensure Disaster Command Center (Fire Chief, etc.) is aware of your Stop-Over Point. Facility's command post must coordinate/liaison with Emergency Authority's Incident Command.

Stop-Over

If you determine that you cannot safely remain in your facility long enough to complete your evacuation directly to Receiving facilities in the MAP, alert your Stop-Over Point that a disaster has occurred. Identify yourself and the problem. This will provide advance warning to the Stop-Over Point to begin preparations for the arrival of your residents. You should have staff members present as your residents arrive at the Stop-Over Point. You should consider having CPR ability available, food, wheelchairs, etc.

Transfer of Residents / Regional Coordinating Center

Notify (or ask RCC to do) the receiving facilities of the specific number of residents being transported, the number of supporting personnel, approximate time of arrival and the number of wheelchair, stretcher, ambulatory, and special need residents being sent (always send evacuation tag and required medical information). It is important not to overload the Receiving Facility with Special Needs residents. Evacuations/transfer of residents must be made to the same level of care. Request help from the Regional Coordinating Center. NOTE: Help from the Regional Coordinating Center can be requested, even in a single facility evacuation.

Send nursing personnel and supplemental staff to receiving facilities, as soon as possible. Send additional medical information, meds and controlled substances with nurse. Notify attending physicians and responsible parties of resident. If possible, send useable mattresses and other equipment with residents. Note: Medical staff (nurse, nursing assistant, EMT) must accompany transportation vehicle if not available on the vehicle.

Required Medical Information

Send, or make available, sufficient resident medical information to insure proper care. The minimum required is a completed Resident Emergency Evacuation tag with a copy of the physician orders, medication sheets, and advanced directives (Healthcare Proxy or MOLST Form) tucked in the envelope on the reverse side of the tag. The evacuation tag shall also be placed on the residents to ensure matching the residents with the correct medical records in the event the resident and their medical record become separated. Another option is to have wristbands with such information as Name, Code Status, MR#, and Elopement Risk.

Complete the Patient Medical Record / Equipment Tracking Sheet (see Section XI). Keep one copy; fax one copy to the RCC; fax one copy to the PAF; send one copy with transporters.

Institute and complete your facilities eFINDS Procedure. (See Section XV)

Medications

If both sending and receiving facilities are willing, resident specific medications, where time allows, will be packaged and labeled with the patient's name and medical administration record. This will be sent with the patient to the receiving facility. *Controlled substances will not be sent. If either facility is unwilling to do this, then the receiving facility will obtain and provide essential medications. The resident accepting facility may obtain the controlled substances from their own pharmacy. However, the Medical Director at the resident accepting facility will need to write new orders for controlled substances. Request waiver from NYSDOH for administering medication at different locations.

* Controlled substances may go from a sending facility to a receiving facility under the control of a nurse. At the receiving facility they will either administer the controlled substances themselves or do a security count with the receiving facility nurses.

Take drug box to resident accepting facility, when applicable.

Staff

Provide or secure resident and staff transportation to receiving facilities from Stop-Over Point. (See <u>Transportation</u>). You may request these vehicles from receiving facilities.

Understand that the staff of evacuated facility will be under the administrative direction of receiving facility. Administration must work closely with receiving facilities. Verification of background and licensure of staff is the responsibility of "home" facility. Documentation should be provided as soon as possible to receiving facility.

Record destination of residents and staff prior to leaving Stop-Over Point (or prior to leaving your facility, if you will not be going to the Stop-Over Point). Transportation and lodging for staff evacuating with residents will also have to be considered, especially if out of the WNYMAP area.

NOTE: Staff must wear facility ID badges to get through police road blocks.

Communications

Maintain communication with receiving facilities from your Stop-Over Point, or from your facility Command Post if you will not be going to the Stop-Over Point.

- *Keep receivers aware of any Command Post changes.
- *Normal modes of communication will be used. If all communications fail, request help from Amateur Radio Emergency Services (ARES) <u>through</u> your county Office of Emergency Management.
- ** Address how you will "handle" the media.

Responsibilities of the Receiving Facility

You must develop an internal plan to appropriately receive and care for incoming residents.

- 1. Agree to temporarily provide supportive coverage until the sending facility can provide their residents with coverage. (See Emergency Health Staffing) if you need immediate staffing help. Provide administrative direction for displaced residents and staff.
- 2. Agree to arrange or provide all beds (or mattresses on floor, etc.), linens, and other equipment, supplies and food. (See **Cooperating Agencies**).
 - Staff from sending facility will be under the administrative direction of the receiving facility. Verification of background and licensure of staff is the responsibility of the "home" facility. Documentation should be provided as soon as possible to receiving facility.
- 3. Be familiar with the function and extent of community emergency services such as police and fire departments, local disaster coordinators, Office of Emergency Preparedness, Red Cross, Salvation Army, etc., and advise them of your needs. (See Cooperating Agencies).
- 4. Upon receipt of the initial alert, start preparation for receiving residents: alert personnel, prepare area, etc.
- 5. Maintain communications with the sending facility at the stopover point, or at the facility Command Post
- 6. When evacuating residents arrive, complete the Influx of Patients Log (See Section XIII). Keep one copy; fax one copy to the RCC; fax one copy to the DSF.
- 7. Complete the electronic eFINDS tracking. (See Section XV)
- 8. Verify the residents and staff you have received with the sending facility, then notify families/responsible parties and the residents' attending physician.

13

9. At end of disaster, all residents (with their medical records) must be returned to facility of origin, unless other agreements are reached between the resident, NYSDOH, and facility administration.

Supplies for Disaster Struck Facility or Resident Accepting Facility

NEED FOR SUPPLIES:

- 1. Call your facility suppliers.
- 2. See supply availability from member facilities in your regional MAP.
- 3. Contact suppliers listed in your regional MAP. See Section 9 of WNY Regional MAP.
- 4. Contact the County Office of Emergency Management for assistance.
- 5. Request Regional Coordinating Center help to obtain supplies out of region.

NOTES:

- a. Fax request form to supplier to use as identification of supplies at police road blocks.
- b. Coordinate supplies through local EOC, when requested.

Revised: February 2017 14

Disaster "overtakes" Regional Mutual Aid Plan

NOTE: For quick checklist, see Algorithms at beginning of Plan

If regional Mutual Aid Plan (MAP) cannot place all evacuated residents, within the Regional Plan or the regional MAP cannot provide adequate supplies or transportation at the time of a disaster:

- 1. Advise your Regional Coordinating Center if not already activated (Primary: Beechwood Homes, 716-810-7000; Cell 716-867-4774, Backup: Mercy Nursing Facility at OLV, 716-819-5300; Cell 716-574-1974), NYS Department of Health, and local Office of Emergency Management.
- 2. The Regional Coordinating Center, with help from the Steering Committee, will:

15

- Alert other Regional Coordinating Centers. They will alert healthcare facilities out of the disaster struck region.
- RCC will coordinate where residents will be evacuated to especially if more than one facility is evacuating.

PROTECTING IN PLACE (BUT IN NEED OF SUPPLIES):

- If the disaster exhausts all supply sources in your region contact the Regional Coordinating Center for help. They will:
 - o Go to the vendor lists of a Joint Region Mutual Aid Plan to request supplies.
 - o Contact a facility within the Joint Region Mutual Aid Plan to request help with supplies.
 - o Contact the appropriate County Office of Emergency Management for assistance.

NOTE: Fax supply request to those from whom you seek assistance to help deliveries get through police road blocks.

IV. Finances

In the event of a facility evacuation, both nursing homes and adult homes will notify the Western Regional Office of the Department of Health at the earliest possible opportunity.

The sending facility would receive their own Medicaid rate for any evacuated Medicaid residents. Private pay residents would be billed directly by the sending facility at their daily rate. It is the responsibility of the sending and receiving facilities to negotiate reimbursement of costs incurred by the receiving facilities.

It is understood that when receiving facilities have accepted residents beyond their certified census, they cannot admit additional residents until their census returns to their number of certified beds.

See Joint Region Mutual Aid Plan MOU regarding finances when evacuating and "stay away" is over 30 days.

Revised: February 2017 16

V. Cooperating Agencies

COOPERATING AGENCY	SERVICES PROVIDED
Cattaraugus County Emergency Services Mr. Christopher Baker Director of Emergency Services Disaster Coordinator – Fire Coordinator 303 Court Street Little Valley, NY 14755 Phone: (716) 938-2240 Fax: (716) 938-9170	Call
Chautauqua County Mr. Julius Leone, Jr. Dir. of Emergency Services leone@chautcofire.org 2 Academy St., suite A Mayville, NY 14757 Phone: (716) 753-4341 Fax: (716) 753-4363 After Hours: Contact Dispatch Center 716-753-4232	Call
Erie County Mr. Gregory Butcher, Deputy Commissioner (716) 858-2944 gregory.butcher@erie.gov Mr. James T. Glass Emergency Services Coordinator (716) 858-6287 glassj@erie.gov 24 hour number is (716) 898-3696 Erie County Dept. of Emergency Svcs. 45 Elm Street Buffalo, NY 14203 FAX: (716) 858-7937 Emergency Contact: (716) 898-3696 Daniel.neaverth@erie.gov	Call
Genesee County Mr. Timothy Yeager, Coordinator Emergency Management Services 7690 State Street Road Batavia, NY 14020 Phone: (585) 344-0078 Fax: (585) 345-3098 / (585) 344-8535 e-mail tyaeger@co.genesee.ny	Call

COOPERATING AGENCY	SERVICES PROVIDED
Niagara County Mr. Jonathan Schultz Dir of Emergency Services/Fire Coordinator 5574 Niagara Street Ext., Box 496 Lockport, NY 14095-0496 24 Hr. Fire Control: (716) 433-4482 Phone: (716) 438-3171 Fax: (716) 438-3173 Jonathan.schultz@niagaracounty.com John.cecula@niagaracounty.com Karen.thompson@niagaracounty.com Dan.stapleton@niagaracounty.com	Transportation Cellular phones Generators
Orleans County Office of Emergency Management Mr. Dale Banker, Emergency Manager 14064 West County House Road Albion, NY 14411 Phone: (585) 589-4414 Fax: (585) 589-7671 dale.banker@orleansny.com	Food Transportation Cots/blankets Cellular phones Generators
Wyoming County Mr. Anthony Santoro Office of Emergency Management 151 N. Main Street Warsaw, NY 14569 Phone: (585) 786-8867 24 hr:(585) 786-2255 Fax: (585) 786-8961	Generators Transportation coordination Cots/bedding
Department of Health Ms. Norine Nickason, Program Director NYS Department of Health Adult Care Facility Surveillance 335 E. Main Street, 1 st Floor Rochester, NY 14604-2127 Phone: (585) 423-8185 Fax: (585) 423-8171 After 5:00pm, weekends and holidays: Hotline 1-866-881-2809 (Statewide in Albany)	Mr. Joseph Egnaczak Long Term Care Program Director NYS Department of Health 584 Delaware Avenue Buffalo, NY 14202 Phone: (716) 847-4320 After 5:00 pm, weekends and holidays: Hotline 1-866-881-2809
American Red Cross Ken Turner, Regional Disaster Program Officer Amanda Vallone, Senior Disaster Program Mgr Rachelle Uschold, Disaster Program Specialist Jason Carmer, Disaster Program Specialist 786 Delaware Avenue Buffalo, NY 14209 Phone: (716) 878-2353* Voice Mail: (716) 878-2355 (Ken's)	Cots, blankets for 8 counties of WNY – see page for additional services

COOPERATING AGENCY SERVICES PROVIDED Mobile Canteen: Can provide if loss of power. **Salvation Army** Light refreshment service, including coffee, Mr. John Hagelberger, Director of Operations bouillon, cocoa, milk, cold drinks, doughnuts, 960 Main Street cold sandwiches, etc. Truck also holds 50 Buffalo, NY 14202 Phone: (716) 883-9800, (716) 888-6206 gallons of water. Emergency Feeding Services: Immediate not Cell: (716) 983-0621 long term: soups, canned meats and beans, canned vegetables, dehydrated potatoes and rice, canned juices, canned fruits, cooked hot cereal, packaged crackers and cookies Emergency Shelter: Temporary shelter at the Salvation Army facilities, on-site items – cots, toiletry items, etc. Transportation: Salvation Army trucks (10 -12) and vans (12 and 15 psg) Clothing Handling and Distribution: Initial clothing needs at time of emergency; public appeal for clothing; assembly and distribution of clothing received. Also blankets and mattresses. Spiritual Counseling: For long and protracted

emergency disasters. Grief counseling.



American Red Cross

Greater Buffalo Chapter 786 Delaware Ave. Buffalo. NY 14209-2088 (716) 886-7500

TO: Licensed Care Facility Administration

FROM: American Red Cross, Greater Buffalo Chapter Emergency Services Department

DATE: August 8, 1999

RE: Disaster Preparedness

This is an update on our previous letter outlining the services that the local chapter of the American Red Cross can provide to your facility should it experience a disaster. This letter supersedes any previous correspondence.

We wish to clarify our particular role in a disaster so that there will be no misunderstanding of our proposed services. The American Red Cross, while mandated by public law to be the lead voluntary agency in disaster, is not allowed to open or maintain special population shelters. Special populations such as non-ambulatory or those with special medical needs are the responsibility of the Department of Health. Our role is with the generic populations of Erie and Cattaraugus Counties as well as the City of North Tonawanda and we would serve your facility as a support. Some of the support services we routinely provide:

- Disaster locator services to allow your communication systems to be dedicated to the incident.
- Disaster-trained nurses who can serve as hospital liaison, family liaison or with morgue assistance.
- Cots and blankets for workers and patients (if appropriate).

Our services operate 24 hours per day and can be activated by calling (716) 878-2353. Workers are on duty at all times or, if you wish, you can speak with the departmental director, Kenneth J. Turner.

Revised: February 2017 20

VI. Transportation

For major disasters with more than 10 people involved, the fire chief or other emergency service official will request a system of transportation through the emergency communications dispatcher. If the disaster is community wide, facilities may have to provide transportation.

Individual member facilities have agreed to use their vehicles to transport residents to the Stop-Over Point and/or to the receiving facilities. If there is a disaster in your sector, it is imperative to send transportation to the sending facility immediately.

The following list indicates this transportation.

FACILITY:	PHONE:	TRANSPORTATION:
Absolut Care of Aurora Park	716-652-1560	1 bus 10 pass. + 1 w/c, 2 nd bus 6 pass +2 w/c
Absolut Care of Eden	716-992-3987	1 van 2 passenger plus 1 w/c
Absolut Care of Gasport	716-772-2631	1 bus 6 pass. + 3 w/c
Absolut Care of Houghton	585-567-2207	1 van 8 psg
Absolut Center for Nursing &	716-945-1800	1 w/c bus 6 passenger + 2 w/c
Rehabilitation at Salamanca		
Absolut Center for Nursing and	716-366-6710	1 Braun Entervan, 2 pass. + 1 w/c
Rehabilitation at Dunkirk, LLC		•
Absolut of Allegany	716-373-2238	1 van 3 seats
Absolut of Orchard Park	716-662-4433	1 bus seating for $10 + 2 \text{ w/c}$
Amberleigh Assisted Living & Memory	716-689-4195	4 passenger car
Care		20 passengers in bus with lift
Applegate Manor	585-798-3420	1 SUV 3 seats, 1 car 3 seats
Autumn View Health Care Facility	716-648-2450	1 SUV 6 psg
Batavia Healthcare Center	585-343-1300	1 van can accommodate 3 w/c + 6 seated
Beechwood Health Care Center	716-810-7000	4 dr car 5 psg inc. driver
Bergquist Adult Home	716-985-6832	1 van 5 pass + 2 w/c
Blocher Homes, Inc.	716-810-7400	1 SUV- 5 passenger
Briarwood Manor	716-433-1513	van 6 psg.
Briody Health Care Facility	716-434-6361	1 van 3 w/c
Bristol Home	716-884-4371	1 14 passenger w/c bus
Bristol Village	716-319-9500	10 passenger van
Brompton Heights	716-634-5734	1 van 14 psg / 4 wc & 6 passenger
Brookdale Bassett Park	716-689-2394	1 van 12 psg with w/chair lift – shared
		w/Brookdale Bassett Road
Brookdale Bassett Road	716-688-4011	1 van 9 psg
Brookdale Kenmore	716-874-3200	1 bus with 10 pass + 2 w/c; 1 van for 6 passengers
		(ambulatory)
Brookdale Lakewood	716-665-2414	2012 Ford bus – 12 per
Brookdale Niagara Memory Care	716-731-1461	1 bus seats 12 plus 2 w/c and driver (shared with
		Sterling House Niagara)
Brookdale Senior Living Sterling House	716-731-1634	1 year 12 marson massangan 2 ye/a
Niagara		1 van 12 person passenger, 2 w/c
Brookdale Williamsville	716-632-7123	1 10 psg bus
Brothers of Mercy Nursing & Rehab.	716-759-6985	1 wheelchair van (5 wheelchair + 8 psg),
Ctr. And Sacred Heart Home		Campus Van
Canterbury Woods	716-929-5800	1 SUV (3 passengers); 2 Minivans (3 passengers &
		1 wheelchair each); 1 Van (3 wheelchairs & 14
		passengers OR 24 passengers)

FACILITY:	PHONE:	TRANSPORTATION:
Chautauqua Nursing & Rehab Center	716-366-6400	8 psg bus 5 w/c; 6 psg bus – 5 w/c
Cloisters, The	585-786-8727	6 psg suv
Cloverhill Adult Residence	585-589-7832	1 SUV 3 seats
Cuba Memorial Hospital	585-968-2000	1 Van, 4 pass + 2 W/C
East Side Nursing Home, Inc.	585-786-8151	1 wheelchair van (6 seats and 3 w/c spaces)
Eden Heights-Eden Adult Care Facility	716-992-4466	1 van 12 psg.
Eden Heights-Olean Adult Care Facility	716-372-4466	1 bus 12 psg & 2 w/c
Eden Heights-West Seneca Adult Care	716-822-4466	1 van 14 psg.
Facility		1 0
Elderwood Assisted Living at Hamburg	716-649-7676	1 van 12 psg; 1 (4 door) sedan
Elderwood Assisted Living at	716-871-1814	1 van 7 psg
Tonawanda		
Elderwood Assisted Living at West	716-677-4242	1 (4 door) sedan; 1 van 12 psg
Seneca		
Elderwood Assisted Living at Wheatfield	716-731-2200	1 Bus 14 psg & 2 w/c
Elderwood Assisted Living at	716-681-8631	Cheektowaga Campus
Cheektowaga		- 1 bus/14 psg/1 wc
Elderwood at Cheektowaga	716-681-9480	1 bus/14 psg/1 wc
Elderwood at Grand Island	716-773-5900	1 car 3 psg
Elderwood at Lancaster	716-683-6165	1 van 5 psg
Elderwood at Wheatfield	716-215-8000	4 w/c + 8 passengers
Elderwood Village at Williamsville	716-565-9663	1 van 14 psg. & 1 car/5 psg.
Father Baker Manor	716-667-0001	1 bus 12 psg or 6 wc
Fiddlers Green Manor NH	716-592-4781	1 van 5 psg.
Fox Run at Orchard Park	716-662-5001	14 psg bus with capacity for 2 w/c
		5 psg car and 3 psg truck
Garden Gate Health Care Facility	716-668-8100	1 van 2 w/c, 1 van 14 psg., 1 van 7 psg.
Garden House Residence, Weinberg	716-639-3311	1 pickup truck
Campus		
Genesee Co. Nursing Home	585-344-0584	1 truck; 2 vans(5psg, 3psg, 2wc)
Glenwell	716-608-7000	1 bus, 10 psg plus 1 w/c
Greenfield Court	716-684-8400	5 psg car; 1 bus 12 psg.
Greenfield Manor	716-684-8400	
Greenfield Health and Rehab Ctr.	716-684-3000	1 bus 1 truck
Greenfield Terrace	716-681-4438	1 bus, 12 passenger
Harris Hill	716-632-3700	1 large 12 psg van
Heritage Green Rehab & Skilled Nursing	716-483-5000	1 van 7 passenger
Heritage Park Rehab & Skilled Nursing	716-488-1921	1 van, 6 passenger
Heritage Village Rehab & Skilled	716-985-4612	1 van, 7 psg.
Nursing		
Heritage Village Retirement Campus	716-985-6832	1 van 6 pass. + 2 w/c
Highland Park Rehabilitation and	585-593-3750	1 15 psg buss with w/c lift, 1 6 psg van
Nursing Center		
HighPointe on Michigan	716-748-3101	1 van 4 psg + 6 w/c
Hospice of Orleans, Inc.	585-589-0809	1 van 5 pass and 8 wheelchairs
Hultquist Place	716-720-9610	1 van 12 psg & 2 w/c. Van has a lift
Humboldt House Rehab and Nursing	716-886-4377	van – 7 w/c capacity + 2 passengers
Center	E1 < < < 100=	12 2 7
Lutheran Retirement Home and	716-665-4905	6 vans 12 psg; 3 vans 7 psg
Rehabilitation Center	71 < 001 07 7	1 12
Mary Agnes Manor, LLC	716-881-0565	1 van, seats 12

FACILITY:	PHONE:	TRANSPORTATION:
Medina Memorial Hospital SNF	585-798-8104	1 12-14 passenger lift van
Mercy Nursing Facility at OLV	716-949-5988	part-time use of 1 w/c van 3 w/c 4 psg
New York State Veterans Home at	585-345-2083	1 van 1 stretcher and 1 wheelchair or 3
Batavia		wheelchairs;
		1 bus/4 wheelchairs & 10 psg.
Newfane Rehabilitation & Health Care	716-778-7111	1 bus 9 psg. with 2 w/c spaces
Center		
Niagara Hospice House	716-280-0600	1 pickup truck and 1 Ambulette (Stretcher) + 4 psg
Northgate Healthcare Facility	716-694-7700	1 van 7 psg.
Oakwood Senior Living	716-877-7171	1- 15 psg bus
Orchard Heights	716-662-0651	1 car 3 psg + 1 van 15 pass
Orchard Manor, Inc.	585-798-4100	w/c van - 2 w/c and two other residents
Our Lady Of Peace Nursing Care	716-298-2900	1 van 3 amb or 2 $w/c + 1$ bus + 4 amb and 6 w/c
Residents		1 van 5 amb or 2 w/c and 1 amb
Park Creek Senior Living	716-632-3000	1 van 10 psg + 2 wheelchair
Peregrine's Landing Senior Community	716-893-3000	1 van, several cars (20 psg.)
Pines Healthcare/Rehab CtrOlean, The	716-373-1910	1 van 7 psg, 1 bus 6 W/C + 4 people (not
		including driver) or 12 people and no w/c, 1 3 psg
		pick up truck
		1 3 psg box truck w/8ft x 8ft 16ft box
Peregrine's Landing at Orchard Park	716-675-1022	1 van 12 psg 2 wheelchair
Rosa Coplon	716-639-3311	1 truck 2 psg .
Schoellkopf Health Center	716-278-4578	1 van 4 w/c + 4 seats or 3 w/c + 6 seats
Seneca Health Care Center	716-828-0500	1 van 7 psg.
Southern Tier Meadows	716-679-4883	1 van 6 pass.
Symphony Living at Dunkirk	716-366-2066	1 van 6 passenger/1 staff (5/27: not running at
		this time)
Symphony Manor at Lancaster	716-683-5150	1 truck 2 psg
Tanglewood Manor/Memory Garden	716-483-2876	1 van 12 psg
		1 van 5 people
Tennyson Court Senior Care Community	716-632-9496	1 van 10 psg + 2 W/C
TLC Health Network - Lakeshore Health	716-951-7000	1 bus 8 psg. and 2 wheelchair
Care Center		
Villages of Orleans Health &	585-589-5637	1 van 4 psg + 2 w/c
Rehabilitation, The		
Wellsville Manor Care Center	585-593-4400	1 wheelchair van, holds 2 wheelchairs, 1
		passenger
Willows, The	585-798-5233	Ford Escape 3 passengers
Wyoming County Community	585-786-8940	1 van 4 psg. 6 w/c
Hospital/Nursing Facility	ext. 4701	

ADDITIONAL TRANSPOR SOURCES:	TATION	TRANSPORTATION VEHICLES:		
<u> </u>	<u>CO</u> 1	UNTY OF ERIE:		
Mr. Daniel Neaverth, Jr. Commissioner of Emergency Service	ces	Ambulance transport - Private ambulances (Volunteer fire department and emergency squad are generally requested under Mutual Aid by the local fire service officer)		
Mr. John Adolf, Deputy Commissioner Emergency Medical Services				
Mr. Gregory Gill Coordinator of Advanced Life Supp	oort Services			
County of Erie, Dept. of Emergency E.M.S. Division 3359 Broadway Cheektowaga, NY 14227 Phone: 716-681-6070	/ Services			
After Hours MERS: 716-898-3696 Mr. Dean Seyler / Mr. Edward Sauer Senior MERS Coordinator Dept. of Emergency Services Phone: 716-898-3696 (after hours) for assistance (Medical Emergency Radio System)		Ambulance transport - Private ambulances (Volunteer fire department and emergency squad are generally requested under Mutual Aid by the local fire service officer)		
	COUN	TY OF ORLEANS:		
Office of Disaster Preparedness Mr. Paul Wagner, Emergency Mgr. 14064 County House Road Phone: 585-589-4414	Requested through County Mutual Aid System by Incident Commander fire dept.) Ambulance transportation would include all County commercial, volunte and fire dept. ambulances.			
Albion, NY 14411 24 hour emergency contact dispatch	Additional ambulances would be requested through mutual aid adjacent counties by officer in charge.			
585-589-5527	Buses for walking patients and residents: Fire department buses (3) Calto Kendall, Holley (school bus type).			
	Orleans County Community Action buses (6) with wheelchair lifts.			
	County Com	prehensive Emergency Plan would also utilize school buses.		

VII. Additional Sources

Agency	Telephone
Aries Transportation Services	716-362-9701
Coach USA	716-693-2700
Southtowns Wheelchair Van Service	716-675-7900
First Call	716-871-1500

VIII. Emergency Health Staffing

In the event of an evacuation emergency in a participating facility of the Western New York Mutual Aid Plan, it is recognized that staff members of the sending facility will go to the receiving facilities to care for their residents as soon as possible. If additional staff is needed during the interim, over-and-above the capabilities of the receiving staff, following are sources of assistance:

Agency	Telephone	Availability
Willcare	716-856-7500	CNAs, LPNs, RNs
Office of Emergency Preparedness or Emergency Management	Check your local phone book	EMTs
PSA Healthcare	716-276-2123	5 – 8 available CNAs and PCAs, 5 days/week 11 – 7 pm
Tender Loving Care/Staff Builders	716-679-7777	LPN's, RN's, & CAN's

Revised: February 2017 25

IX. Sectors 1-7 (WNY Plan)

WNY Sector 1			
Niagara County			
Absolut Care of Gasport	716-772-2631		
Briody Health Care Facility	716-434-6361		
Elderwood at Wheatfield	716-215-8000		
Newfane Rehab & Healthcare Center	716-778-7111		
Niagara Hospice House	716-280-0600		
Niagara Rehabilitation and Nursing Center	716-282-1207		
Odd Fellow & Rebekah Rehabilitation & Health Care Center, Inc.	716-434-6324		
Orleans Community Health	585-798-2000		
Our Lady of Peace Nursing Care Residence	716-298-2900		
Schoellkopf Health Center	716-278-4578		
Northern Erie County			
Northgate Manor	716-694-7700		
Orleans County			
Hospice of Orleans, Inc.	585-589-0809		
Orchard Manor, Inc.	585-798-4103		
Villages of Orleans Health & Rehabilitation, The	585-589-5637		
Adult Homes and Assisted Living Facilities			
Applegate Manor	585-798-3420		
Briarwood Manor	716-433-1513		
Brookdale Niagara Memory Care	716-731-1461		
Cloverhill Adult Residence	585-589-7832		
Elderwood Assisted Living at Wheatfield	716-731-2200		
Heritage Manor of Lockport	716-433-7626		
Lockport Presbyterian Home	716-434-8805		
Mount View Assisted Living, Inc.	716-433-0790		
Willows, The	585-798-5233		
Senior Independent Living Apartments			
Brookdale Senior Living Sterling House Niagara	716-731-1634		
WNY Sector 2			
Niagara County			
Kaleida Health - DeGraff SNF	716-690-2080		
Northern Erie County			
Beechwood Health Care Center	716-810-7000		
Brothers of Mercy Nursing / Rehab Ctr.	716-759-6985		
Canterbury Woods Assisted Living	716-929-5800		
Comprehensive Rehabilitation and Nursing Center at Williamsville	716-633-5400		
Elderwood at Amherst	716-835-2543		
Elderwood at Grand Island	716-773-5900		
Elderwood at Williamsville	716-689-6681		
Harris Hill Nursing Facility	716-632-3700		
McAuley Residence, The	716-447-6600		
Rosa Coplon	716-639-3311		

WNY Sector 2 (cont.)	
Safire Rehabilitation of Northtowns	716-837-4466
Schofield Residence	716-874-1566
Williamsville Suburban	716-276-1900
Adult Homes and Assisted Living Facilities	·
Blocher Homes, Inc.	716-810-7400
Bristol Village	716-319-9500
Brompton Heights	716-634-5734
Brookdale Bassett Park	716-689-2394
Brookdale Bassett Road	716-688-4011
Brookdale Kenmore	716-874-3200
Brookdale Williamsville	716-632-7123
Brothers of Mercy Sacred Heart Home	716-759-2644
Canterbury Woods Enriched Living	716-929-5800
Dosberg Manor Adult Care Residence	716-639-3311 x2507
Elderwood Assisted Living at Tonawanda	716-871-1814
Elderwood Village at Williamsville	716-565-9663
Heathwood Assisted Living at Williamsville	716-688-0111
Garden House Residence, Weinberg Campus	716-639-3311
Ken-Ton Presbyterian Village	716-874-6070
Oakwood Senior Living	716-877-7171
Park Creek Senior Living Community	716-632-3000
Tennyson Court Senior Care Community	716-632-9496
Senior Independent Living Apartments	
Ken-Ton Presbyterian Village	716-874-6070
Presbyterian Village at North Church	716-631-3430
WNY Sector 3	
Erie County	
Buffalo Center for Rehab & Nursing	716-883-6782
Emerald North Nursing and Rehabilitation Center	716-885-3638
Emerald South Nursing and Rehabilitation Center	716-885-6733
Erie County Medical Center SNF	716-898-3599
Humboldt House Rehabilitation and Nursing Center	716-886-4377
Kaleida Health HighPointe on Michigan	716-748-3101
Mercy Nursing Facility at OLV	716-819-5300
Safire Rehabilitation of Southtowns	716-566-5252
St. Catherine Laboure Health Care Center	716-862-1045
Terrace View Long Term Care	716-551-7100
Adult Homes and Assisted Living Facilities	
Bristol Home	716-884-4371
Mary Agnes Manor	716-881-0565
WNY Sector 4	
Erie County (Southern)	
Absolut at Eden	716-992-3987
Absolut of Orchard Park	716-662-4433
Absolut Care of Aurora Park	716-652-1560
Autumn View Health Care Facility	716-648-2450

WNY Sector 4 (cont.)	
Elderwood at Hamburg	716-648-2820
Elderwood at Lancaster	716-683-6165
Father Baker Manor	716-667-0001
Fox Run at Orchard Park	716-662-5001
Garden Gate Health Care Facility	716-668-8100
Greenfield Health & Rehabilitation Center	716-684-3000
Seneca Health Care Center	716-828-0500
Adult Homes and Assisted Living	
Absolut Care of Orchard Brooke	716-662-6753
Eden Heights – Eden Adult Care Facility	716-992-4466
Eden Heights – West Seneca Adult Care Facility	716-822-4466
Elderwood Assisted Living at Cheektowaga	716-681-8631
Elderwood Assisted Living at Hamburg	716-649-7676
Elderwood Assisted Living at West Seneca	716-677-4242
Fox Run at Orchard Park	716-662-5001
Glenwell	716-608-7000
Greenfield Court	716-684-8400
Greenfield Terrace	716-681-4438
Orchard Heights, Inc.	716-662-0651
Peregrine's Landing at Orchard Park	716-675-1022
Peregrine's Landing Senior Community	716-893-3000
Symphony Manor at Lancaster	716-683-5150
Senior Independent Living Apartments	710-003-3130
Greenfield Manor	716-684-8400
WNY Sector 5	
Cattaraugus County (Northern)	
Gowanda Nursing Home	716-532-5700
Chautauqua County	
Absolut Center for Nursing & Rehabilitation at Dunkirk	716-366-6710
Absolut Care of Westfield	716-326-4646
Chautauqua Nursing and Rehabilitation Center	716-366-6400
Heritage Green Rehab & Skilled Nursing	716-483-5000
Heritage Park Rehab & Skilled Nursing	716-488-1921
Heritage Village Rehab & Skilled Nursing	716-985-4612
Lutheran Retirement Home and Rehabilitation Center	716-665-4905
TLC Health Network - Lake Shore Health Care Center	716-951-7000
Adult Homes and Assisted Living	710 731 7000
Bergquist Adult Home	716-985-6832
Brookdale Lakewood	716-665-2978
Frewsburg Rest Home	716-569-3095
Hultquist Place	716-720-9610
Memory Garden	716-488-9434
Orchard Grove Residences	716-338-1601
St. Columban's on the Lake	716-934-4515
Southern Tier Meadows	716-934-4313
	110-017-4003
Symphony Living at Dunkirk	716-366-2066

WNY Sector 5 (cont.)	
Tanglewood Manor	716-483-2876
Women's Christian Association	716-672-7961
Senior Independent Living Apartments	
Heritage Village Retirement Campus	716-985-6832
WNY Sector 6	
Genesee County	
Batavia Healthcare Center	585-343-1300
Genesee County Nursing Home	585-344-0584
New York State Veterans Home at Batavia	585-345-2083
Wyoming County	
East Side Nursing Home, Inc.	585-786-8151
Wyoming County Community Hospital / Nursing Facility	585-786-8940
Adult Homes and Assisted Living	
Cloisters, The	585-786-8727
Genesee County Nursing Adult Home	585-344-0584
Manor House, The	585-344-2345
WNY Sector 7	
Allegany County	
Absolut Care at Allegany	716-373-2238
Absolut Care of Houghton	585-567-2207
Cuba Memorial Hospital	585-968-2000
Highland Park Rehabilitation and Nursing Center	585-593-3750
Wellsville Manor	585-593-4400
Cattaraugus County	
Absolut Center for Nursing & Rehab at Salamanca	716-945-1800
Pines Healthcare & Rehab Center – Machias, The	716-353-8516
Pines Healthcare & Rehab Center – Olean, The	716-373-1910
Erie County (Southern)	
Fiddlers Green Manor Nursing Home	716-592-4781
Jennie B Richmond Chaffee Nursing Home	716-592-2871
Adult Homes and Assisted Living	
Eden Heights – Olean Adult Care Facility	716-992-4466

Western New York Health Care Regional Mutual Aid Plan Membership List

X. **Mutual Aid Participants – 2016-2017**

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Absolut Care of Allegany 2178 North 5 th Street Allegany, NY 14706 Ph. 716-373-2238; Fax: 716-373-2273 Cell: 716-292-1154 Bernadette Roesch, Administrator John May, Maintenance Supervisor	broesch@absolutcare.com johnm@absolutcare.com	B1 (4)	Allegany Limestone Elementary School Maple Avenue, Allegany 716-373-6464	4	7
Absolut Care of Aurora Park 292 Main Street East Aurora, NY 14052 Ph. 716-652-1560; Fax: 716-652-0018 Cell: 716-238-5854 Kirsten Whittemore, Administrator Joe Hill, Director of Maintenance	kwhittemore@absolutcare.com jhill@absolutcare.com	A2 (1), B1 (10), C1 (4), C2 (4), D2 (9), D3 (4), F	Parkdale Elementary 141 Girard Ave 716-687-2352	32	4
Absolut Care of Eden 2806 George Street Eden, NY 14057 Ph. 716-992-3987; Fax: 716-992-3194 Cell: 716-548-4781 Matt Hriczko, Administrator Patrick Harroun, Maintenance Supervisor	mhriczko@absolutcare.com pharroun@absolutcare.com	D2 (2), B1 (2)	Eden Fire Hall 716-992-3408	4	4
Absolut Care of Gasport 4540 Lincoln Drive Gasport, NY 14067 Ph. 716-772-2631; Fax: 716-772-2054 Cell: 716-250-5338 Isaac Williams, Administrator John Dicarlo, Dir. Environmental Svcs	iwilliams@absolutcare.com jdicarlo@absolutcare.com	B1 (1), C1 (1), C2 (1), C4 (1), D2 (1), D3 (1), D4 (1), E2 (1)	Royalton-Hartland Elementary School 4500 Orchard Place 716-772-2616	8	1

Revised: February 2017

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care

A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative

B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II

B5 = Behavior, Level III

31 **IV and Wound Care**

C1 = Intravenous Care

C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care**

C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing

D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs

E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Absolut Care of Houghton 9876 Luckey Drive Houghton, NY 14744 Ph. 585-567-2207; Fax:585-567-2730 Cell: 716-289-1632 Brendan Maloney, Administrator Tim Dash, Maintenance Director	bmaloney@absolutcare.com tdash@absolutcare.com	N/A	Houghton Academy 585-567-8115 or 585-567- 8500 Houghton Wesleyan Church 585-567-2264	10	7
Absolut Care of Orchard Park 6060 Armor Road Orchard Park, NY 14127 Ph. 716-662-4433; Fax 716-662-2743 Cell: 716-796-8975 Jennifer May, Administrator Neil Carrow, Director of Maintenance	imay@absolutcare.com ncarrow@absolutcare.com	B1 91), C4 (2), D3 (2), D4 (2), E3 (2), F	Park Associates 300 Gleed Ave E. Aurora 716-687-2806	20	4
Absolut Care of Salamanca 451 Broad Street, Salamanca, NY 14779 Ph. 716-945-1800; Fax: 716-945-5867 Cell: 716-573-9659 Kevin Kennedy, Administrator Bill Burlingame, Director of Maintenance	kkennedy@absolutcare.com wburlingame@absolutcare.com	A2 (2), C1 (2), C2 (2), D2 (2), D3 (2), D4 (2), F	Salamanca H.S. 716-945-2400	12	7
Absolut Care of Westfield 26 Cass Street Westfield, NY 14787 Ph. 716-326-4646; Fax: 716-679-9698 Cell: 716-253-0772 Andrew Burdziakowski, Administrator Joanne Agel, DON	aburd@absolutcare.com jagel@absolutcare.com	B1 (2), C4 (2), D2 (2), D3 (2), D4 (2), E3 (2)	Eason Hall 26 Elm St., Westfield 716-326-4961	12	5

32

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care

A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative

B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care

C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury

D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs

E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Absolut Center for Nursing & Rehabilitation at Dunkirk 447 Lakeshore West Drive Dunkirk, NY 14048 Ph. 716-366-6710; Fax: 716-366-7116 Cell: 716-548-4781 Matt Hriczko, Administrator Rick Cain, Maintenance Supervisor	mhriczko@absolutcare.com rcain@absolutcare.com	B1 (2), B2 (2), C1 (2), C2 (2), C3 (2)	SUNY Fredonia College Dodds Hall (Ann Burns) 716-673-3465	4	5
Autumn View Health Care Facility 4650 Southwestern Blvd. Hamburg, NY 14075-1900 Ph. 716-648-2450; Fax: 716-648-2029 Aaron Polanski, Administrator Grace Coventry RN, Director of Q.A. & Education	apolanski@mcguiregroup.com gcoventry@mcguiregroup.com	A2 (2), A4 (2), B1 (2), C1 (2), C3 (2), C4, D2 (2), D3 (2), D4 (2), F	Frontier Central High School/Big Tree Fire Company 4432 Bayview Road/S-4470 Bayview Road, Hamburg NY 716-926-1720/648-1270	23	4
Batavia Healthcare Center 257 State Street Batavia, NY 14020 Ph. 585-343-1300; Fax: 585-344-3756 Cell: 585-738-2420 Robert Burlingham, Administrator Bobbie Ackerman, DON	r.burlingham@bataviahcc.com b.ackerman@bataviahcc.com	A2, B1, C1, C2, C4, D2, D3, D4, E1, E4 (no TB),	NYS School for the Blind 2A Richmond Ave. Batavia, NY 585-343-5384	6	6

A1 = Ventilator Care A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I B4 = Behavior, Level II

Behavior/Dementia Care

B5 = Behavior, Level III

IV and Wound Care

33

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Beechwood Health Care Center 2235 Millersport Highway Getzville, NY 14068 Ph. 716-810-7000; Fax: 716-250-6200 Cell: 716-220-5817 Rich McCune, Administrator Brian Hyzy, Director of Plant/Envir. Svcs	rmccune@beechwoodcare.org bhyzy@beechwoodcare.org	A2-A3 (10), B1 (27), B2 (3), B3 (5), C1-C2 (10), C4 (3), D2 (27), D3 (10), D4 (27), E1 (5), E3 (27), E4 (10),	Eastern Hills Wesleyan Church 8445 Greiner Road Williamsville, NY 14221 (716) 688-7165	27	2
Briody Health Care Facility 909 Lincoln Avenue Lockport, NY 14094 Ph. 716-434-6361; Fax: 716-434-6396; Cell: 716-622-3431 Ann Briody Petock, Administrator Bonnie Patrick, Assist. Administrator	abriodypetock@briody.org bpatrick@briody.org	A2 (1), A3, A4, B1, B2, C1 (1), C2, D2, D3, D4, E1,F	Lockport High School Main #478-4450 Dir. Of Athletics # 478-4500 716-478-4481	8	1
Brothers of Mercy Nursing & Rehab. Ctr. 10570 Bergtold Road Clarence, NY 14031 Ph. 716-759-6985 Fax: 716-759-6223 Cell: 716-957-9023 Paul Moyes, Director of Facility Services Tom Bloomer, Administrator	Paul@brothersofmercy.org bloomer@brothersofmercy.org	A2, A3, B1, B3, C1, C2, D2, D3, D4	Primary Brothers of Mercy Nursing and Rehabilitation Center Secondary Clarence Senior High School 9625 Main St Clarence, 14031 716-407-9020 716-407-9131 or 716-407-9043 Cell phone 868-0963	24	2

34

IV and Wound Care

C1 = Intravenous Care

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve A4 = Chest PT

Respiratory Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative B3 = Behavior, Level I B4 = Behavior, Level II

Behavior/Dementia Care

B5 = Behavior, Level III

C3 = TPN
C4 = Complex Dressing/Negative
Pressure Wound Care
C5 = Daily Peritoneal Dialysis

C2 = Peripheral, PICC, Central Line

Special Therapies

D1 = Traumatic Brain Injury
D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding
D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Buffalo Center for Rehab & Nursing 1014 Delaware Avenue Buffalo, NY 14209 Ph. 716-883-6782; Fax: 716-883-6932 Cell: 716-517-1752 David Denny, Administrator Michelle Hardy, Assistant Administrator	ddenny@delawarecenter.net mhardy@delawarecenter.net	C1 (6), D3 (20), A2 (3), A3 (1), C2 (2), D4 (20)	Hellenic Orthodox Church of the Annunciation 146 West Utica Buffalo, NY 14209 716-882-9485	20	3
Canterbury Woods SNF 705 Renaissance Drive Williamsville, NY 14221 Ph. 716-929-5800; Fax:716-929-5108 Cell: 716-818-1740 Isadore A. De Marco, Administrator Dave O'Brien, Facilities Director	idemarco@echa.org dobrien@echa.org	A2 (1), B1 (5), B2 (1), C1 (1), C2 (1), D2 (3), D3 (3), D4 (3), E4 (2), F (would need IV equip/ meds)	St. Gregory the Great Church 100 St. Gregory Ct. Williamsville, N.Y. 14221 716-688-5678	5	2
Chautauqua Nursing and Rehabilitation Center 10836 Temple Road Dunkirk, NY 14048-9611 Ph. 716-366-6400; Fax: 716-366-0114 Cell: 716-875-4095 Margaret Mary Wagner, Administrator Andrea Snyder, Acting Administrator	mwagner@ctnrc.com asnyder@ctnrc.com	A2 (2), B1 (4), B2 (2), B3 (1), C1 (2), D2 (3), D3 (3), D4 (3), E1 (1)	State University College at Fredonia, Dodd's Hall 716-673-3465	20	5

35

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve

Respiratory Care

A4 = Chest PT

B1 = Dementia, non combative B2 = Dementia, occasionally combative B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

Behavior/Dementia Care

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPNC4 = Complex Dressing/Negative **Pressure Wound Care**

C5 = Daily Peritoneal Dialysis

D1 = Traumatic Brain Injury

Special Therapies

D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Comprehensive Rehabilitation and Nursing Center of Williamsville 147 Reist Street Williamsville, NY 14221 Ph. 716-633-5400; Fax: 716-633-9342 Cell: 716-864-7650 Martin MacKenzie, Administrator Jason Teitelbaum, Assistant Administrator	mmackenzie@williamsvillerehab.com jteitelbaum@williamsvillerehab.com	B1 (2), C1 (2), C2 (2), C4 (2), D2 (1), D3 (1), D4 (14), F	St. Mary of the Angels 716-632-2155	14	2
Cuba Memorial Hospital 140 W. Main St Cuba, NY 14272 Ph. 585-968-2000 Ext 281; Fax: 585-968-1710 Cell: 585-993-1818 Gene Faulkner, Administrator Jacquie Torpey RN, Emergency Preparedness	gfaulkner@cubamemorialhospital.org jtorpey@cubamemorialhospital.org	B1 (4), B2 (4), B3 (1), D1 (1), D2 (2), D3 (2), D4 (4), E3 (2)	Cuba Rushford School 140 W. main St Cuba, NY 14727 585-968-2650	6	7
DeGraff Skilled Nursing Facility 445 Tremont Street P.O. Box 750 N. Tonawanda, NY 14120 Ph. 716-690-2080; Fax: 716-690-2118 Cell: 716-331-8754 Stanley Gasiewicz, Administrator Tina Ford, DON	sgasiewicz2@kaleidahealth.org tford@kaleidahealth.org	B1 (2), B2 (2), C1 (4), C2 (4), C4 (3), D2 (2), D3 (3), D4 (1)	DeGraff Community Center 139 Division St. North Tonawanda, NY 716-692-8137	8	2

36

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
East Side Nursing Home, Inc. 62 Prospect Street Warsaw, NY 14569 Ph. 585-786-8151; Fax: 585-786-8390 Cell: 585-786-8151 Jerome Krull, Administrator Kelli Goulet, Staff Development Coord.	jkrull@bhcg.com kgoulet@bhcg.com	B1 (10), B2 (3), B3 (2), C1 (5), C2 (5), C4 (5), D2 (10), D3 (5), D4 (10)	Warsaw Central Schools 153 West Buffalo Street Warsaw, NY 14569 585-786-8000	10	6
Elderwood at Amherst 4459 Bailey Avenue Amherst, NY 14226 Ph. 716-835-2543; Fax: 716-835-7633 Cell: 716-863-8804 John Dunn, Administrator Javier Fernandez, Dir. Of Plant Ops	jdunn@elderwood.com jfernandez@elderwood.com	B1 (2), B2 (1), C1 (1), C2 (1), D2 (2), D3 (2), D4 (9), F	Eggertsville Fire Hall Eggert Rd. 716-689-1212	9	2
Elderwood at Cheektowaga 225 Bennett Road Cheektowaga, NY 14227 Ph. 716-681-9480; Fax: 716-681-8175 Cell: 716-796-5113 Lawrence Piselli, Administrator Thomas Tripi, Director of Operations	lpiselli@elderwood.com ttripi@elderwood.com	A2 (2), B1 (17), B2 (17), C1 (8), C2 (8), C4 (17), D2 (8), D3 (8), D4 (17), E1 (2), E3 (8), E4 (8), F	Resurrection Church Auditorium 130 Como Park Boulevard Cheektowaga, N.Y. 716-683-3712	17	4

37

A1 = Ventilator Care A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPNC4 = Complex Dressing/Negative

Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D4 = Ortho/Rehab

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Elderwood at Grand Island 2850 Grand Island Blvd. Grand Island, NY 14072 Ph. 716-773-5900; Fax: 716-773-9728 Cell: 716-200-7831 Thomas DiJohn, Administrator Robert Fitzgerald, Dir. Of Maintenance	tdijohn@elderwood.com rfitzgerald@elderwood.com	B1 (1), B2 (1), C1 (1), C2 (1), D2 (2), D3 (1), D4 (3), F	Grand Island Fire Hall 2275 Baseline Road Grand Island, NY 14072 716-773-7508	9	2
Elderwood at Hamburg 5775 Maelou Drive Hamburg, NY 14075 Ph. 716-648-2820; Fax: 716-648-2980 Cell: 716-432-7999 Tim McCooey, Administrator Daniel Geary, Maintenance Director	tmccooey@elderwood.com dgeary@elderwood.com	A2 (3), B1, B2, B3, C1, C2, C3, C4, D2, D3, D4, E4, F	Hamburg Sr. High School 716-646-3302	16	4
Elderwood at Lancaster 1818 Como Park Blvd. Lancaster, NY 14086 Ph. 716-683-6165; Fax: 716-683-5326 Cell: 716-955-9935 Denise Bothwell, Administrator Deborah Wainwright, DON	dbothwell@elderwood.com dwainwright@elderwood.com	B1 (2), B2 (2), C1 (2), C4 (2), D2 (2), D3 (2), D4 (2), E4 (2), F	Cayuga Heights Elem. School 716-686-2452	10	4
Elderwood at Wheatfield 2600 Niagara Falls Blvd. Wheatfield, NY 14304 Ph. 716-215-8000; Fax: 716-215-8011 Cell: 716-525-3253 Shannon Cayea, Administrator Amy Bretherton, Administrative Assist.	scayea@elderwood.com abretherton@elderwood.com	B1-B3 (12), C1, D1-D4, E3-E4, F	Elderwood Residences at Wheatfield 100 Crestwood Court Wheatfield, NY 14304 716-215-8040 Fax 716-215- 8042 Security 289-6615 Administrator 954-3197	12	1

38

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve A4 = Chest PT

Respiratory Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative B3 = Behavior, Level I B4 = Behavior, Level II

Behavior/Dementia Care

B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care
C2 = Peripheral, PICC, Central Line
C3 = TPN
C4 = Complex Dressing/Negative
Pressure Wound Care

C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury
D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding
D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Elderwood at Williamsville 200 Bassett Road Williamsville, NY 14221 Ph. 716-689-6681; Fax: 716-689-2547 Cell: 716-481-4246 Scott West, Administrator Kathleen Wannemacher, DON	swest@elderwood.com kwannemacher@elderwood.com	A1 (1), A2 (4), A3 (1), B1 (6), B2 (3), C1 (5), C2 (5), C4 (10), D2 (10), D3 (10), D4 (20), E1 (4), E4 (20),	Heathwood Assisted Living at Williamsville 716-688-0111	20	2
Emerald North Nursing and Rehabilitation Center 1205 Delaware Avenue Buffalo, NY 14209 Ph. 716-885-3838; Fax: 716-885-2331 Cell: 716-949-3712 Phyllis Leffler, Administrator Betty Jo Hanna, Envir. Svcs Mgr.	pleffler@emeraldbuffalo.com bhanna@emeraldbuffalo.com	C1 (1), C2 (1), C4 (1), D1 (1), D2 (3), D4 (3), E4 (2), F	Canisius High School Delaware Ave. Buffalo, NY 14209 716-882-0466	9	3
Emerald South Nursing and Rehabilitation Center 1175 Delaware Avenue Buffalo, NY 14209 Ph. 716-885-6733; Fax: 716-885-2331 Cell: 716-430-1513 Betsy Long, Administrator Deborah Scales, DON	blong@emeraldbuffalo.com dscales@emeraldbuffalo.com	N/A	Canisius High School Delaware Ave. Buffalo, NY 14209 716-882-0466	12	3

39

A1 = Ventilator Care
A2 = Tracheostomy Care
A3 = Passey Muir Valve
A4 = Chest PT

Respiratory Care

Behavior/Dementia Care

B1 = Dementia, non combative
B2 = Dementia, occasionally combative
B3 = Behavior, Level I
B4 = Behavior, Level II
B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care
C2 = Peripheral, PICC, Central Line
C3 = TPN
C4 = Complex Dressing/Negative
Pressure Wound Care
C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury
D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding
D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Father Baker Manor 6400 Powers Road Orchard Park, NY 14127 Ph.716-667-0001; Fax: 716-667-0028 Cell: 716-225-9307 Mark Wheeler, Administrator Greg Porto, Director of Plant Operations	mwheeler@chsbuffalo.org gporto@chsbuffalo.org	A2 (3), A3 (3), B1 (3), C1 (3), C2 (2), C3 (1), C4 (3), D2 (4), D3 (4), D4 (4), E3 (4), E4 (2), F	Armor Bible Presbyterian Church 716-648-4559	16	4
Fiddlers Green Manor Nursing Home 168 West Main Street Springville, NY 14141 Ph. 716-592-4781; Fax: 716-592-2249 Cell: 716-598-1076 Mary Swartz, Administrator Mark Smeltzer, Assist. Administrator	marys@avantemgmt.com msmeltzer@fgmanor.com	A2 (2), B1-B4 (2), C1 (2), D2- D4 (4 each), E1 (4), E2 (1)	Springville G I High School 716-592-3200	8	7
Fox Run at Orchard Park One Fox Run Lane Orchard Park, NY 14127 Ph. 716-508-2150; Fax: 716-508-2197 Cell: 716-989-8500 Michelle Murtha Kraus, Adm./Contact Ken Swain, Director of Facilities	mmurtha@foxrunorchardpark.com kswain@foxrunorchardpark.com	B1, B2, B3, B4, D2, D3, D4, E3, E4	Trinity Lutheran Church and School 716-923-3880	5	4

40

A1 = Ventilator Care A2 = Tracheostomy Care

A3 = Passey Muir Valve

A4 = Chest PT

Respiratory Care

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Garden Gate Health Care Facility 2365 Union Road Cheektowaga, NY 14227 Ph. 716-668-8100; Fax: 716-668-3516 Cell: 716-270-7886 Patrick McFeely, Administrator Kris Anderson, DON	pmcfeely@mcguiregroup.com kanderson@mcguiregroup.com	A2 (4), B1 (18), C1-C5 (5), D2 (5), D3 (10), D4 (18), E1 (1)	Apple Tree Business Park 2875 Union Rd Cheektowaga, NY 716-479-5850 (24 hr security number)	20	4
Genesee County Nursing Home 278 Bank Street Batavia, NY 14020 Ph. 585-344-0584; Fax: 585-344-4685 Cell: 585-752-6932 Sharon Zeames, Administrator Jeanne Sheelar, Administrative Assist.	sharon.zeames@co.genesee.ny.us jsheelar@co.genesee.ny.us	B2 (4), C1 (3), C2 (3), C4 (4 Complex dressings only), F	Genesee County Office For the Aging 2 Bank Street Batavia, NY 14020 585-343-1611	16	6
Gowanda Rehabilitation and Nursing Ctr. 100 Miller Street Gowanda, NY 14070 Ph. 716-532-5700; Fax: 716-532-5703 Cell: 716-393-7145 Eili Kaganoff, Administrator Frank Testa, Maintenance Director	ekaganoff@grncrehab.com ftesta@grncrehab.com	A2 (3), B1 (5), C1 (5), C2 (5), C4 (5), D1-D4 (5), E1 (3)	VFW Post 5007 716-532-5817	16	5
Greenfield Health & Rehab. Center 5949 Broadway Avenue Lancaster, NY 14086 Ph. 716-684-3000; Fax: 716-684-3380 Cell: 716-491-7972 Darlene Jones Crispell, Administrator Nick Kwasniak, Exec. Dir. Env. Svcs.	dcrispell@niagaralutheran.org nkwasniak@niagaralutheran.org	B1 (2), B2 (2), C1 (5), C2 (2), D2 (16), D3 (3), D4 (16)	Lord of Life Lutheran Church 1025 Borden Road Depew, NY 14043 716-668-8000	16	4

41

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve A4 = Chest PT

Respiratory Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

Behavior/Dementia Care

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPNC4 = Complex Dressing/Negative

Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D4 = Ortho/Rehab

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Harris Hill Nursing Facility 2699 Wehrle Rd. Williamsville, NY 14221 Ph. 716-632-3700; Fax: 716-929-1719 Cell: 716-319-7782 Jonathan Hart, Administrator Aron Gatti, Envir. Svcs Mgr.	jhart@mcguiregroup.com agatti@mcguiregroup.com	A2 (2), B1 (3), B2 (1), C1 (10), C2 (5), D2, D3, D4 (4), F	Medical Office Building, 2733 Wehrle Rd., Williamsville, NY 14221 Contact Number is (716) 983-6617	19	2
Heritage Green Rehab and Skilled Nursing 3023 Route 430, P.O. Box 400 Greenhurst, NY 14742 Ph. 716-483-5000; Fax: 716-488-2414 Cell: 716-397-4365 Jeff Ondrey, Administrator Randy Jackson, Dir. Eniv. Svcs	jondrey@heritage1886.org rjackson@heritage1886.org	A2 (1), A3 (2), B1 (1), C1 (1), C2 (2), D2 (2), D3 (2), D4 (2), E3 (1), E4 (1),	Fluvanna Community Church 3363 Fluvanna Ave Ext. Jamestown, NY 14701 Pastor Dayle Keefer Church: 716-484-0553 716-487-2255	13	5
Heritage Park Rehab & Skilled Nursing 150 Prather Avenue Jamestown, NY 14701 Ph. 716-488-1921; Fax: 716-484-9370 Cell: 716-708-9299 Deborah Bergey, Administrator Jeff Chase, DON	dbergey@heritage1886.org jchase@heritage1886.org	A2 (2), B1 (4), B2 (1), B3 (1), C1 (2), C2 (2), D3 (4), D4 (2), E3 (2), F	Salvation Army 83 S. Main St Jamestown, NY 716-664-4108 after 4 pm: 483-0830	15	5

42

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve

A3 = Passey Muir Valv A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care
C2 = Peripheral, PICC, Central Line
C3 = TPN
C4 = Carpelar Pressing (Nearting)

C4 = Complex Dressing/Negative Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury
D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D3 = Tube Feeding D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Heritage Village Rehab & Skilled Nursing 4570 Route 60 Gerry, NY 14740 Ph. 716-985-4612; Fax: 716-985-4197 Cell: 607-760-4039 Jeremy Rutter, Administrator Chris Wahl, Dir. Environmental Svcs	jrutter@heritage1886.org cwahl@heritage1886.org	A2 (2), B1 (4), C1 (2), D2 (2)	Schwab Manor Heritage Village Retirement 716-985-6836	12	5
Highland Park Rehabilitation & Nursing Center 160 Seneca Street Wellsville, NY 14895 Ph. 585-593-3750; Fax: 585-593-5860 Cell: 585-808-3750 James Fuller, Administrator Mark Transki, Maintenance Director	jfuller@highlandparkrehab.com mtranski@highlandparkrehab.com	N/A	Shepherd of the Valley 4164 Fasset Lane 585-593-3274	8	7
HighPointe on Michigan 1031 Michigan Avenue Buffalo, NY 14203 Ph. 716-748-3101; Fax: 716-748-3288 Cell: 716-331-8212 Colleen Krauss, Administrator Elizabeth Connors, Exec. Secretary	ckrauss@kaleidahealth.org econnors@kaleidahealth.org	A1, A2, A3, A4, B1, B2, C1, C2, C3, C4, D2, D3, D4, E1, E3	City Honors School 186 East North Street Buffalo, NY 14204 716-816-4230	30	3

43

A1 = Ventilator Care A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Hospice of Orleans, Inc. 14090 Rt. 31 West, P.O. Box 489 Albion, NY 14411 Ph: 585-589-0809; Fax: 585-589-5304 Cell: 585-331-2141 Joel L. Allen, Director of Finance Maryanne Fischer, Executive Director	jallen@hospiceoforleans.org mfischer@hospiceoforleans.org	A2 (1) B1 (1) C1(1) D1(1) E1 (1) C2 (1) D2 (1) D3 (1) E3 (1) F (1)	Hospice of Orleans, Inc. Main Office Building, 14080 Rt. 31 West, Albion, NY 14411 585-589-0809	1	1
Humboldt House Rehab. and Nursing Ctr. 64 Hager Street Buffalo, NY 14208 Ph. 716-886-4377; Fax: 716-886-0036 Cell: 716-864-7313 Edin Thompson, Administrator Patrick Learn, Director of Maintenance	ethompson@humboldthouse.org plearn@humboldthouse.org	B1 (3), B2 (3), C2 (3), D2 (3), D3 (3), D4 (5), E3 (2), E4 (3)	Holy Trinity Lutheran Church 1080 Main Street Buffalo, NY 14209 716-886-2400 Cell: Rev. Lee Miller 716- 860-6060	17	3
Jennie B Richmond Chaffee Nursing Home 222 East Main Street Springville, NY 14141 Ph. 716-592-2871; Fax: 716-592-8103 Cell: 716-289-0064 Roger Soricelli, Adm./Contact Trish Loveless, Business Ofc. Mgr.	rsoricelli@bch-jbr.org ploveless@bch-jbr.org	D3 (2), D3 (3), D4 (6)	Bertrand Chaffee Hospital 224 East Main Street Springville NY 14141 716-592-2871 X 1200	8	7

44

A1 = Ventilator Care A2 = Tracheostomy Care

A3 = Passey Muir Valve

A4 = Chest PT

Respiratory Care

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Lutheran Retirement Home and Rehabilitation Center 715 Falconer Street Jamestown, NY 14701 Ph. 716-665-4905; Fax: 716-720-9316 Cell: 716-450-8022 Thomas Holt, Administrator Joseph Gaughn, Director of Maintenance	tholt@lutheran-jamestown.org jgaughn@lutheran-jamestown.org	B1 (1), C1 (1), C2 (1), D2 (1), D3 (1), D4 (2), F	Gustavus Adolphus Children's Home 716-665-2116	14	5
McAuley Residence 1503 Military Road Kenmore, NY 14217 Ph. 716-447-6600; Fax: 716-447-6620 Cell: 716-432-5810 Dawn Clabeaux, Administrator Deb Smith, DON	dclabeaux@chsbuffalo.org dsmith@chsbuffalo.org	A2 (2), C1 (2), C2 (2), C3 (2), C4 (2), D1 (2), D2 (2), D3 (2), D4 (2), E1 (2)	Kenmore Mercy Hospital 716-447-6100	16	2
Medina Memorial Hospital SNF 200 Ohio St. Medina N.Y. 14103 Ph. 585-798-2000; Fax: 585-798-8107 Cell: 585-331-1102 Jennifer Maynard, Administrator Joanna Miller, Director of EP	jmaynard@medianmemorial.org jmiller@medinamemorial.org	B1 (3), B2 (1), D2 (3), D4 (3), F	Medina Central School 1016 Gwinn St Medina 14103 585-798-2700	3	1

45

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve A4 = Chest PT

B1 = Dementia, non combative B2 = Dementia, occasionally combative

Behavior/Dementia Care

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Mercy Nursing Facility at OLV/LIFE 55 Melroy Avenue Lackawanna, NY 14218 Ph. 716-819-5300; Fax: 716-819-5309 24/7 number: 716-949-5988 Cell: 716-574-1974 Patricia O'Connor, Administrator Sally Smith, DON	poconnor@chsbuffalo.org ssmith2@chsbuffalo.org	C1 (2), C2 (2), D3 (2), D4 (2), F	Victory Ridge Apartments 55 Melroy Ave, Bldg A Lackawanna, NY 14218 716-819-5090	8	3
NYS Veterans Home at Batavia 220 Richmond Avenue Batavia, NY 14020 Ph. 585-345-2083; Fax: 585-345-9030 Cell: 716-481-3992 Joanne Hernick, Administrator Ken Kieliszek, Health Program Administrator	kkieliszek@nysvets.org JIH49@nysvets.org	C1 (2), C2 (2), C4 (2 if equip/ supplies brought), D2 (2), D3 (2), D4 (2), E3 (2)	Batavia VA Medical Center Bldg. #4 585-343-7500	12	6
Newfane Rehab. & Health Care Ctr. 2709 Transit Road Newfane, NY 14108 Ph. 716-778-7111; Fax: 716-778-9218 Cell: 716-860-6057 Matthew McDougall, Administrator Jim Haas, Director of Plant Operations	mmcdougall@newfanerehab.com jhaas@newfanerehab.com	A2 (2), A3 (2), B1 (10), B2 (10), C1 (3), C2 (3), C4 (3), D2 (4), D3 (4), D4 (6),	Newfane M. S. 716-778-7544	17	1

46

Respiratory Care A1 = Ventilator Care

A2 = Tracheostomy Care A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care

C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing

D3 = Tube Feeding D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Niagara Hospice House 4675 Sunset Drive Lockport, NY 14094 Ph. 716-280-0600; Fax: 716-439-4538 Cell: 716-471-4392 Joann Stoll, RN, CHPN VP of Hospice Services	joann.stoll@niagarahospice.com	N/A	Homecare Building 4675 Sunset Drive, Lockport, NY 14094 716-439 4417	2	1
Niagara Rehabilitation and Nursing Center 822 Cedar Avenue Niagara Falls, NY 14301-1136 Ph. 716-282-1207; Fax: 716-282-8589 Cell: 716-866-8677 Bryan Donovan, Administrator Heather Martindale, Director of Nursing	bdonovan@niagararehab.com hmartindale@niagararehab.com	B1 (8), B2 (2), D2 (2), D3 (2), D4 (2)	Niagara Towers 901 Cedar Ave., Niagara Falls, NY 14301 716-284-4488	16	1
Northgate Healthcare Facility 7264 Nash Road N. Tonawanda, NY 14120 Ph. 716-694-7700; Fax: 716-694-7720 Cell: 716-913-4155 Terry Collins, Administrator Sherry Trinkwalder, DON	tcollins@mcguiregroup.com strinkwalder@mcguiregroup.com	A1 (2), B1 & B2 (2), C1- C2 & C4 (2), D3 & D4 (4)	Adams Fire Hall 716-433-4482	20	1
Odd Fellow & Rebekah Rehabilitation & Health Care Center, Inc. 104 Old Niagara Road Lockport, NY 14094 Ph. 716-434-6324; Fax: 716-434-4020 Cell: 716-417-1589 Eugene L. Urban, Administrator Jeff Costich, Director of Maintenance	e.urban@ofhcc.org j.costich@ofhcc.org	B1 (1), B2 (1), D2 (1), D3 (1), D4 (1), F	Wrights Corners Fire Hall 4043 Lake Avenue Lockport, NY 716-433-2759 FIRE CONTROL: 433-4482	10	1

47

IV and Wound Care

A1 = Ventilator Care
A2 = Tracheostomy Care
A3 = Passey Muir Valve
A4 = Chest PT

Respiratory Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative B3 = Behavior, Level I B4 = Behavior, Level II B5 = Behavior, Level III

Behavior/Dementia Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN C4 = Complex Dressing/Negative **Pressure Wound Care**

C5 = Daily Peritoneal Dialysis

D1 = Traumatic Brain Injury

Special Therapies

D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Orchard Manor, Inc. 600 Bates Road Medina, NY 14103 Ph. 585-798-4100; Fax: 585-798-1403 Cell: 716-425-2033 Peter Fadeley, Administrator Andrew Blackburn, Director of Bldg & Grounds	pfadeley@orchardmanor.com ablackburn@orchardmanor.com	A2 (2), B1 (16), B3 (8), C1 (8), C2 (16), C3 (1), C4 (1), D2 (2), D3 (8), D4 (16), E1 (3), E2 (1)	Shelby Volunteer Fire Dept. Route 63, Medina, NY 14103 585-798-2015	16	1
Our Lady Of Peace 5285 Lewiston Road Lewiston, NY 14092 Ph. 716-298-2900; Fax: 716-298-2800 Cell: 716-523-2543 Dale Dibble, Dir. Environmental Svcs. Teresa Dillsworth, Administrator	ddibble@ladyofpeace.org tdillsworth@ladyofpeace.org	N/A	Sacred Heart Villa School 5269 Lewiston Road Lewiston 284-8273	25	1
Pines Healthcare & Rehab Center – Machias, The 9822 Route 16, PO Box 310 Machias, NY 14101 Ph. 716-353-8516; Fax: 716-353-4316 Cell: 716-307-6897 Tammy Schmidt, Administrator Bev Fehringer, DON	twschmidt@cattco.org bafehringer@cattco.org	B1 (1), D3 (4), D4 (2), F	Machias Volunteer Fire Department 716-353-8793	11	7

48

A1 = Ventilator Care A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

B1 = Dementia, non combative

B2 = Dementia, occasionally combative

B3 = Behavior, Level I B4 = Behavior, Level II

Behavior/Dementia Care

B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Pines Healthcare & Rehab Ctr - Olean, The 2245 W. State Street Olean, NY 14760 Ph. 716-373-1910; Fax: 716-373-1805 Cell: 716-785-7042 Timothy Hellwig, Administrator Marge Walsh, DON	thellwig@cattco.org mlwalsh@cattco.org	A2 (1), A3 (1), B1 (2), D1 (1), D2 (1), D3 (3), D4 (2)	Archbishop Walsh High School 208 N. 24 th St. Olean, NY 14760 716-372-8122	12	7
Rosa Coplon Jewish Home & Infirmary 2700 N. Forest Road Getzville, NY 14068 Ph. 716-639-3311; Fax: 716-639-3309 Cell: 716-432-4541 William Gillick, Administrator Amber Ezzo, Director of Nursing	wgillick@weinbergcampus.org aezzo@weinbergcampus.org	B1 (2), C1 (3), D2 (5), D3 (5), D4 (3)	461/471 John James Audubon Parkway Total Aging in Place / Benderson Village at the Weinberg Campus 716-639-3311	18	2
Safire Rehabilitation of Northtowns 2799 Sheridan Drive Tonawanda, NY 14150 Ph. 716-837-4466; Fax: 716-332-3520 Cell: 716-628-9939 Sharon Zeames, Administrator Dayan Ruffin, DON	szeames@glcmail.net druffin@glcmail.net	B1 (1), B2, D3 (3), C1 (3), C2 (4), D4 (3), E1 (1)	Williamsville View 165 S. Union Rd. Williamsville, NY 14221 Phone: (716) 633-9610	10	2
Safire Rehabilitation of Southtowns, LLC 300 Dorrance Avenue Buffalo, NY 14220 Ph. 716-566-5252; Fax: 716-825-0335 Cell: 716-400-3122 Chris Otterbein, Administrator Debbie Ballou, DON	cotterbein@glcmail.net dballou@glcmail.net	B1 (12), C1 (1), C2 (1), D2 (2), D3 (2), D4 (12), F	Mercy Nursing Facility at OLV 55 Melroy Avenue Buffalo, NY 14220 716-819-5300	12	3

49

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve

Respiratory Care

A4 = Chest PT

B1 = Dementia, non combative B2 = Dementia, occasionally combative B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

Behavior/Dementia Care

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPNC4 = Complex Dressing/Negative

Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing

D3 = Tube Feeding D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
St. Catherine Laboure Health Care Center 2157 Main Street Buffalo, NY 14214 Ph. 716-862-1077; Fax: 716-862-1443 Cell: 716-548-0497 Jeffrey Toczek, Administrator Tom Smalley, Safety Manager	jtoczek@chsbuffalo.org tsmalley@chsbuffalo.org	A2 (2), B1 (8), B2 (2), B3 (1), C1 (4), C2 (2), C4 (2), D1 (2), D2 (3), D3 (4), D4 (4), E1 (2) E3 (8), E4 (8), F	Sisters of Charity Hospital	8	3
Schoellkopf Health Center 621 Tenth Street Niagara Falls, NY 14302 Ph. 716-278-4578; Fax: 716-278-4876 Cell: 716-479-3699 John Durno, Administrator Maria Knack, Administrative Assist.	john.durno@nfmmc.org maria.knack@nfmmc.org	A2 (2), B1 (10), B2, C1 (2), C2 (2), D1 (2), D2 (4), D3 (4), D4 (12), E1 (1), E3 (2), E4 (2)	Spallino Towers 720 Tenth St 716-285-5505	12	1

50

A1 = Ventilator Care A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN C4 = Complex Dressing/Negative **Pressure Wound Care**

C5 = Daily Peritoneal Dialysis

Special Therapies

D4 = Ortho/Rehab

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Schofield Residence 3333 Elmwood Avenue Kenmore, NY 14217 Ph. 716-874-1566; Fax: 716-874-6942 Cell: 716-361-8616 Randy Gerlach, Administrator Dawn Friend, RN, DON	rgerlach@schofieldcare.org dfriend@schofieldcare.org	B1-B4, C1-C2, D1-D4, F (no more then 4 in each category)	St. John's Ukranian Church 716-873-5011	12	2
Seneca Health Care Center 2987 Seneca Street West Seneca, NY 14224 Ph. 716-828-0500; Fax: 716-828-1377 Cell: 716-946-1122 Katie Witherell, Administrator Amy Schleer, Director of Nursing	kwitherell@mcguiregroup.com aschleer@mcguiregroup.com	A2 (16), B1 (16), B2 (16), B3 (16), B4 (16), C1 (16), C2 (16), C4 (16), D1 (16), D2 (16), D3 (16), D4 (16), E3 (16), E4 (16)	West Middle School 395 Center Road West Seneca, NY 14224 716-677-3500	16	4

51

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPNC4 = Complex Dressing/Negative

Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Terrace View Long Term Care 462 Grider Street Buffalo NY 14215 Ph. 716-551-7100; Fax 716-551-7193 Cell: 716-289-6040 Anthony Depinto, Administrator Mary Ann Fix, Administrative Assistant	adepinto@ecmc.edu mfix@ecmc.edu	A1 (1), A2 (4), A3 (1), A4 (1), B1 (7), B2 (5), C1 (19), C2 (19), C4 (19), D1 (19), D2 (19), D3 (19), D4 (6), E1-2 (1), E3-4 (1),	School #84 462 Grider Street Buffalo NY 14215 716-898-3599	39	3
TLC Health Network - Lakeshore Health Care Center 845 Routes 5 & 20 Irving, NY 14081 Ph. 716-951-7035; Fax: 716-951-7298 Cell: 585-509-6618 John Galati, Administrator Carrie Fix, Administrative Assistant	igalati@tlchealth.org cfix@tlchealth.org	A2 (2), C1, C2, D2-D4	Sunset Bay Fire Hall 716-934-4880	12	5
Villages of Orleans Health & Rehabilitation, The 14012 Route 31 Albion, NY 14411-9353 Ph. 585-589-3238; Fax: 585-589-6567 Cell: 716-289-3737 Tom Hopkins, Administrator Debra Donnelly, DON	thopkins@thevillagesoforleans.com ddonnelly@thevillagesoforleans.com	B2 (2), D4 (4), E1 (1), F	Albion High school 585-589-2056	12	1

52

A1 = Ventilator Care
A2 = Tracheostomy Care
A3 = Passey Muir Valve
A4 = Chest PT

Respiratory Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I B4 = Behavior, Level II

Behavior/Dementia Care

B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C3 = TPN
C4 = Complex Dressing/Negative
Pressure Wound Care
C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing

D3 = Tube Feeding
D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases

E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Wellsville Manor Care Center 4192a Bolivar Rd Wellsville, NY 14895 Ph. 585-593-4400; Fax: 585-593-4418 Cell: 585-278-4348 Tammy Henning, Administrator	thenning@ wellsvillemanorcarecenter.com	A2 (3), A4 (3), B1 (12), B2 (6), B3 (6), B4 (3), C1 (4), C2 (4), C4 (1), D2 (12), D3 (4), D4 (12), E1 (1), E3 (4), E4 (1), F	Primary Shepherd of the Valley Church Secondary Manor Hills 4192b Bolivar Rd Wellsville, NY 585 593-3274	12	7
Williamsville Suburban 193 S. Union Rd. Williamsville, NY 14221 Ph. 716-276-1900; Fax: 716-632-2308 Cell: 716-713-0262 Nicole Gallagher, Administrator Bob Martin, Chief Engineer	ngallaher@glcmail.net bmartin@glcmail.net	B1 (22), B2 (22), B3 (22), C1 (5), C2 (5), D1 (10), D2 (15), D3 (10), D4 (22), E1 (3), F	Williamsville View 163 S. Union Williamsville, NY 716-632-6152	22	2

53

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve A4 = Chest PT

Respiratory Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

Behavior/Dementia Care

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPNC4 = Complex Dressing/Negative

Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

NURSING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity to Receive	Sector
Wyoming County Community Hospital/Nursing Facility 400 North Main Street Warsaw, NY 14569 Ph. 585-786-2233; Fax: 585-786-1226 Cell: 585-314-0341 Dawn James, Administrator Dawn Kilner, RN, DON Brian Meyers, Emergency Preparedness Coordinator	djames@wcchs.net dkilner@wcchs.net bmeyers@wyomingco.net	A2 (2), A4 (6), B1 (8), C1 (6), C2 (6), C3 (6), C4 (12), D1 (2), D2 (6), D3 (8), D4 (12), E1 (2), E3 (6), E4 (12),	Wyoming County Community Hospital/Nursing Facility	14	6

A1 = Ventilator Care A2 = Tracheostomy Care

A3 = Passey Muir Valve A4 = Chest PT

Respiratory Care

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

54

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

Adult Homes and Assisted Living Facilities

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Absolut Care of Orchard Brooke 6060 Armor Road Orchard Park, NY 14127 Ph. 716-662-6753; Fax: 716-662-2743 Cell: 716-796-8975 Jennifer May, Administrator Stacey Pillath, RN, DON	jmay@absolutcare.com staceyp@absolutcare.com	N/A	□ Primary Stopover Point: Absolut of Orchard Park 6060 Armor Road, Orchard Park 14127 716-662-4433. □ Distant Evac. Point: Absolut Facilities Management 300 Gleed Avenue, East Aurora 14052	8	4
Amberleigh Assisted Living and Memory Care 2330 Maple Road Williamsville, NY 14221 Ph. 716-689-4195 Fax: 716-636-3687 Cell: 716-866-8777 Margaret Kleinmann, Administrator Catherine Dunlavey, Assistant Director	mkleinmann@capitalseniorliving.net cdunlavey@capitalseniorliving.net	FACILITY DUE TO OPEN LATE SUMMER 2 Memory Care; 5 Assisted Living	Amherst Senior Center	9	2

Revised: February 2017

ntin Coro

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care

A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative

B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II

B5 = Behavior, Level III

IV and Wound Care

55

C1 = Intravenous Care

C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative Pressure Wound Care C5 = Daily Peritoneal Dialysis **Special Therapies**

D1 = Traumatic Brain Injury

D2 = Stroke/Speech/Swallowing

D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs

E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Applegate Manor 400 Ohio Street Medina, N.Y. 14103 Ph. 585-798-3420; Fax: 585-798-3433 Cell: 585-281-6327 Tricia Trupo, Administrator Rick Johnson, Owner/Operator	applegate90@yahoo.com rjohnson58us@yahoo.com	N/A	Cloverhill Adult Residence 355 South Main Street Albion, NY 14411 585-589-7832	3	1
Bergquist Adult Home 4600 Route 60, P.O. Box 350 Gerry, NY 14740 Ph. 716-985-6832; Fax: 716-338-0159 Cell: 716-499-6976 Rebecca LeBaron, Administrator Matt Myschisin, Dir. Envir. Svcs.	rlebaron@heritage1886.org mmyschisin@heritage1886.org	N/A	Heritage Village Rehab & Skilled Nursing 4570 Rt 60, Gerry, 14740 716-985-4612	3	5
Blocher Homes, The 135 Evans Street Williamsville, NY 14221 Ph. 716-810-7400; Fax: 716-631-9244 Cell: 716-417-2949 Barbara Gorenflo, Administrator James Neuman, Dir. Of Plant Ops	bgorenflo@beechwoodcare.org jneuman@beechwoodcare.org	N/A	Williamsville South H.S. 5950 Main Street Williamsville, 14221 716-626-8200	6	2

56

IV and Wound Care

C1 = Intravenous Care

A1 = Ventilator Care A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I B4 = Behavior, Level II B5 = Behavior, Level III

C3 = TPNC4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

C2 = Peripheral, PICC, Central Line

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Briarwood Manor, Inc. 1001 Lincoln Avenue Lockport, NY 14094 Ph. 716-433-1513; Fax: 716-438-0919 Cell: 716-435-7200 Mark Ferreri, Administrator Jonathan Eckert, Maintenance Super.	mferreri@briarwoodmanor.com jeckert@briarwoodmanor.com	B1 (2)	South Lockport Fire Hall Transit Road 716-434-4944 Cell 870-3293	16	1
Bristol Home 1500 Main Street Buffalo, NY 14209 Ph. 716-884-4371; Fax: 716-884-0850 Cell: 716-361-4661 Shaton Ozolins, Administrator Mike Schueler, Maintenance Director	sozolins@bristolhome.org mschueler@bristolhome.org	N/A	Catholic Academy: 716-885-6111 (school hrs.); 716-884-0053 (non school hrs.)	5	3
Bristol Village 8455 Clarence Center Road Clarence, NY 14032 Ph. 716-319-9500; Fax: 716-319-9501 Cell: 716-481-8037 Michael Helbringer, Administrator Kreig Larson, Director of Facilities	Mhelbringer@bristolhome.org klarson@bristolhome.org	N/A	Vinecroft 5945 Vinecroft Drive Clarence Center 14032 716-741-7741	10	2

57

A1 = Ventilator Care A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I B4 = Behavior, Level II B5 = Behavior, Level III

Behavior/Dementia Care

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Brompton Heights 275 Brompton Road Williamsville, NY 14221 Ph. 716-634-5734; Fax: 716-634-1416 Cell: 716-368-6088 Kelly Wright, Administrator Pete Riester, Safety Officer	kwright@hamistergroup.com priester@bromptonheights.com	B1 (2)	St Gregory the Great 200 St Gregory Court Williamsville, 14221 716-688-5323	16	2
Brookdale Bassett Park Manor 111 St. Gregory Ct. Williamsville, NY 14221 Ph. 716-689-2394; Fax: 716-689-2763 Cell: 585-560-2360 Wendy Marx, Executive Director Dan Sikorski, Maintenance Director	wendy.marx@brookdale.com dan.sikorski@brookdale.com	N/A	St. Gregory The Great Church 716-688-5678	7	2
Brookdale Bassett Road 245 Bassett Road Williamsville, NY 14221 Ph. 716-688-4011; Fax: 716-204-5947 Cell: Mary Beth MacClaren, Executive Director Terrance Coleman	marybetth.macclaren@brookdale.com terrance.coleman@brookdale.com	B1 (2)	St. Gregory the Great Church 716-688-5678 and Jewish Community Center	10	2

A1 = Ventilator Care A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I B4 = Behavior, Level II

B5 = Behavior, Level III

IV and Wound Care

58

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Brookdale Kenmore 2971 Delaware Avenue Kenmore, NY 14217 Ph. 716-874-3200; Fax: 716-873-4953 Cell: 716-906-0130 Eric Bernard, Administrator Dave Cole, Maintenance Mgr.	ebernard@brookdale.com dcole4@brookdale.com	N/A	St. Pauls Church 33 Victoria Blvd Kenmore, 14217 716-875-2730	14	2
Brookdale Lakewood 220 Southwestern Drive Lakewood, NY 14750 Ph. 716-665-2414; Fax: 716-665-2978 Cell: 716-490-5447 Joy King, Administrator Justin Foster, Maintenance Technician	Joy.king@brookdale.com justin.foster@brookdale.com	N/A (Enriched License)		10	5
Brookdale Niagara Memory Care 6751 Nash Road North Tonawanda, NY 14120 Ph. 716-731-1461; Fax: 716-731-1521 Cell: 716-253-0276 Mary Lou Perry, Executive Director Adam Ziegler, Maintenance Tech	mperry@brookdale.com aziegler@brookdale.com	B1 (4), B2 (4)	Adams Fire Co. 7113 Nash Road, Wheatfield, 14120 716-692-3212 or 911	4	1

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

59

C1 = Intravenous Care

C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing

D3 = Tube Feeding D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Brookdale Williamsville 6076 Main Street Williamsville, NY 14221 Ph. 716-632-7123; Fax: 716-632-7512 Cell: 716-908-5908 Kathleen Hyland Dion, Exec. Dir Scott Rogers, Maintenance Tech.	khylanddion@brookdale.com srogers1@brookdale.com	B1 (5), B2 (5), B3 (5)	Main Transit Fire Hall	5	2
Brothers of Mercy Sacred Heart Home 4520 Ransom Road Clarence, NY 14031 Ph. 716-759-2644; Fax: 716-759-6433 Cell: 716-512-8422 Marion Hummell, Administrator Murad Ramadan, Envir. Of Care Director	Marion@brothersofmercy.org ramadan@brothersofmercy.org	N/A	Primary Brothers of Mercy Nursing and Rehabilitation Center Secondary Clarence Senior High School 9625 Main St Clarence, 14031 407-9020 407-9131 or 407-9043 Cell phone 868-0963	7	2
Canterbury Woods - Assisted Living 705 Renaissance Drive Williamsville, NY 14221 Ph. 716-929-5800; Fax: 716-929-5108 Cell: 716-818-1740 Isadore A. De Marco, Administrator Dave O'Brien, Facilities Director	idemarco@echa.org dobrien@echa.org	N/A	St. Gregory the Great Church 100 St. Gregory Ct. Williamsville, 14221 716-688-5678	3	2

Respiratory Care A1 = Ventilator Care

A2 = Tracheostomy Care

A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative

B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II

B5 = Behavior, Level III

IV and Wound Care

60

C1 = Intravenous Care

C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury

D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs

E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Cloisters, The 171 N Maple Street Warsaw NY 14569 Ph. 585-786-8727; Fax: 585-786-0436 Cell: 585-704-5621 Kevin Ward, Adm./Owner	cloister@frontiernet.net	N/A	Warsaw Central School West Court Street Warsaw, 14569 585-786-8000	4	6
Cloverhill Adult Residence 355 South Main Street Albion, NY 14411 Ph. 585-589-7832; Fax: 585-589-7833 Cell: 585-281-6325 Melody Parker, Administrator Alan Johnson, II, Owner	cloverhill87@yahoo.com rjohnson58us@yahoo.com	N/A	Applegate Manor Adult 400 Ohio Street Medina, N.Y. 14103 585-798-3420	5	1
Dosberg Manor Adult Home 2680 N. Forest Road Getzville, NY 14068 Ph. 716-639-3311, ext 2507 Fax: 716-689-0008 Cell: 716-550-1961 Dana Notaro, Administrator Joe larocci, HR/Safety Mgr.	dnotaro@weinbergcampus.org jiarocci@weinbergcampus.org	N/A	Total Aging in Place Program 461 John James Audubon Parkway Getzville, 14068 716-250-3100 Secondary: Greenwood Residence 660 Mineral Springs Road West Seneca, 14224 716-827-4060	10	2

A1 = Ventilator Care

Respiratory Care

A2 = Tracheostomy Care A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative

B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

61

C1 = Intravenous Care

C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing

D3 = Tube Feeding D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs

E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Eden Heights-Eden Adult Care Facility 4071 Hardt Road Eden, NY 14057 Ph. 716-992-4466; Fax: 716-992-9078 Cell: 716-471-1705 Rise Pirinelli, Administrator	rpirinelli@EdenHeights.com	N/A	East Eden Fire Hall 716-992-3160	12	4
Eden Heights-Olean Adult Care Facility 161 South 25 th Street Olean, NY 14760 Ph. 716-372-4466; Fax: 716-372-1681 Cell: 716-969-6035 Joni Hewitt, Administrator Kelly Wilkins, Business Ofc. Mgr.	jhewitt@edenheights.com kwilkins@edenheights.com	N/A	Washington West School 716-375-8000	12	7
Eden Heights-West Seneca Adult Care Facility 3030 Clinton Street West Seneca, NY 14224 Ph. 716-822-4466; Fax: 716-822-5107 Cell: 716-432-7256 Terry Castanza, Administrator Danielle Beilman, Case Manager	Tcastanza@edenheights.com dbeilman@edenheights.com	N/A	Winchester Community Church 909 Harlem Road West Seneca, New York 14224, Cell # 716-574-2248	12	4

62

A1 = Ventilator Care A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line

C3 = TPNC4 = Complex Dressing/Negative

Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Elderwood Assisted Living at Cheektowaga 229 Bennett Road Cheektowaga, NY 14227 Ph. 716-681-8631: Fax: 716-681-8762 Cell: 716-713-5157	pbowen@elderwood.com	N/A	Resurrection Church 130 Como Park Blvd. Cheektowaga 716-683-3712	8	4
Paula C. Bowen, Administrator Elderwood Assisted Living at Hamburg 76 Buffalo Street Hamburg, NY 14075 Ph. 716-649-7676; Fax: 716-648-5670 Cell: 716-206-4907 Lisa Ippolito, Administrator Steven Nawrocki, Envir. Svcs. Mgr	lippolito@elderwood.com snawrocki@elderwood.com	N/A	Union Pleasant and Charlotte Elem. 716-646-3370	10	4
Elderwood Assisted Living at Tonawanda 111 Ensminger Road Tonawanda, NY 14150 Ph: 716-871-1814; Fax: 716-871-0809 Cell: 716-479-3682 Brenda West, Administrator	bwest@elderwood.com	N/A	Town of Tonawanda Senior Center 716-874-3266	10	2

Respiratory Care A1 = Ventilator Care

A2 = Tracheostomy Care A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I B4 = Behavior, Level II

B5 = Behavior, Level III

IV and Wound Care

63

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Elderwood Assisted Living at West Seneca 580 Orchard Park Road West Seneca, NY 14224 Ph. 716-677-4242; Fax: 716-677-0883 Cell: 716-984-4806 Susan McVay, Administrator Cheryl Bierma, Resident Case Manager	smcvay@elderwood.com cbierma@elderwood.com	N/A	West Seneca Senior H.S. 3330 Seneca St. W. Seneca 716-677-3350 and 716-609-3078	12	4
Elderwood Assisted Living at Wheatfield 2600 Niagara Falls Blvd Wheatfield, NY 14304 Ph: 716-731-2200; Fax: 716-731-9616 Cell: 716-796-1092 Holly Deyarmond, Administrator Jean Greenland, DON	hdeyarmond@elderwood.com jgreenland@elderwood.com		Crestwood Commons 100 Crestwood Court 716-215-8040	6	1
Elderwood Village at Williamsville 5271 Main Street Williamsville, NY 14221 Ph. 716-565-9663; Fax: 716-565-2311 Cell: 716-864-9782 Robin Secord, Administrator Jeff Artieri, Environmental Services Manager	rsecord@elderwood.com jartieri@elderwood.com	N/A	Forest Elementary School 716-626-9800	8	2

64

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing

D4 = Ortho/Rehab

D3 = Tube Feeding

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Fox Run at Orchard Park One Fox Run Lane Orchard Park, NY 14127 Ph. 716-508-2150; Fax: 716-508-2197 Cell: 716-989-8500 Michelle Kraus, Administrator Ken Swain, Director of Facilities	mkraus@foxrunorchardpark.com jfino@foxrunorchardpark.com	B1, B2, B3, B4, D2, D3, D4, E3, E4	Trinity Lutheran Church and School 716-923-3880	6	4
Frewsburg Rest Home, Inc. 106 West Main Street Frewsburg, NY 14738 Ph: 716-569-3095 Fax: 716-569-5775 Cell: 716-397-3816 Terri Ingersoll, Administrator Brad Lawson, Operations Director	tingersoll@tanglewoodmanor.com blawson@tanglewoodmanor.com	N/A	Frewsburg High School 2 nd option: Frewsburg Fire Dept.	7	5
Garden House Residence, Weinberg Campus 2720 North Forest Rd Getzville, NY 14068 Ph: 716-639-3311(Ext. 2507) Fax: 716-250-0574 Cell: 716-550-1961 Dana Notaro, Administrator Joe Iarocci, HR / Safety Mgr	dnotaro@weinbergcampus.org jiarocci@weinbergcampus.org	B1 (4)	facility owned property - senior living facility 461 JJ Audubon Parkway Amherst NY 14228 716-250-3100	4	2

Respiratory Care

A1 = Ventilator Care

A2 = Tracheostomy Care

A3 = Passey Muir Valve

Behavior/Dementia Care

B1 = Dementia, non combative

B2 = Dementia, occasionally combative B3 = Behavior, Level I

A4 = Chest PT B4 = Behavior, Level II B5 = Behavior, Level III **IV and Wound Care**

65

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Genesee County Nursing Home – Adult Home 278 Bank Street Batavia, NY 14020 Ph. 585-344-0584; Fax: 585-344-4685 Cell: 585-752-6932 Sharon Zeames, Administrator Jeanne Sheelar, Administrative Assist.	sharon.zeames@co.genesee.ny.us jsheelar@co.genesee.ny.us	N/A	Genesee County Office for the Aging 2 Bank Street, Batavia 585-343-1611	8	6
Glenwell DePaul 2248 Old Union Road Cheektowaga, NY 14226 Ph. 716-608-7000; Fax: 716-608-0151 Cell: 585-301-7872 Stacie Major, Administrator Judith Rodriguez, ALP Director	smajor@depaul.org jkrodriguez@depaul.org	B1 (2)	Resurrection Life Fellowship 2145 Old Union Road Cheektowaga, NY 14227 716-656-8995	12	4
Greenfield Court 5951 Broadway Lancaster, NY 14086 Ph. 716-684-8400; Fax: 716-684-8480 Cell: 716-880-9822 Chantal White, Adm./Contact	cwhite@niagaralutheran.org	N/A	Greenfield Health Rehab. Center 716-684-3000 off campus site of Lord of Life 1025 Borden Road Depew	5	4

Respiratory Care

A4 = Chest PT

A1 = Ventilator Care

A2 = Tracheostomy Care

A3 = Passey Muir Valve

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II

B5 = Behavior, Level III

IV and Wound Care

66

C1 = Intravenous Care

C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury

D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs

E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Greenfield Terrace 5979 Broadway Lancaster, NY 14086 Ph. 716-681-4435, prompt 5 Fax: 716-681-6894 Cell: 716-704-8808 Judith Kelly RN, Administrator Paula Kassim, Dir of Health Svcs.	jkelly@niagaralutheran.org pkassim@niagaralutheran.org	B1 (4)	Greenfield Health Rehab. Center 716-684-3000 off campus site of Lord of Life 1025 Borden Road Depew	4	4
Heathwood Assisted Living at Williamsville 815 Hopkins Road Williamsville, NY 14221 Ph. 716-688-0111; Fax: 716-688-7266 Cell: 716-954-3197 Michele Ladouceur, Administrator Dave Duffy, Environmental Svcs. Dir.	mladouceur@heathwoodassistedliving.com dduffy@heathwoodassistedliving.com	B1 (4) 2 on secure unit	Elderwood Health Care at Oakwood 716-689-6681	12	2
Heritage Manor of Lockport 41 Lexington Court Lockport, NY 14094 Ph. 716-433-7626; Fax: 716-433-7769 Cell: 716-628-4928 Louis J. Stich, Administrator Joseph Enzinna, COO	loustich@gmail.com joe.enzinna@yahoo.com	N/A	Briody Health Care Facility 909 Lincoln Ave Lockport, NY 14094 716-434-6361	5	1

A1 = Ventilator Care A2 = Tracheostomy Care

A3 = Passey Muir Valve

A4 = Chest PT

Respiratory Care

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

67

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Needs

Bariatric Care/Other Special

E1 = Bariatric over 350lbs

E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Hultquist Place 715 Falconer St Jamestown, NY 14701 Ph.716-720-9610; Fax:716-720-9609 Cell: 716-397-9386 Kathleen Lynch, Administrator Mala Reichard, Administrative Assistant	kathyl@lutheran-jamestown.org malar@lutheran-jamestown.org	N/A	Warner Place 155 Aldren Ave Jamestown, 14701 716-720-9430	10	5
Lockport Presbyterian Home 305 - 327 High Street Lockport, NY 14094 Ph. 716-434-8805; Fax: 716-434-6059 Cell: 716-445-4809 Colleen Bullion, Administrator Mary Brown, Administrative Assist.	cbullion@pscwny.org mbrown@pscwny.org	N/A	Kenan Center 433 Locust, Lockport, 14094 716-433-2617	6	1
Manor House, The 427 East Main Street Batavia, NY 14020 Ph. 585-344-2345; Fax: 585-344-4482 Cell: 716-560-2876 Sharon Weinel, Administrator Tina Hagen, Enriched Program Director	sweinel@themanorhouseasl.com thagen@themanorhouseasl.com			6	6

68

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing

D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs

E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Mary Agnes Manor, LLC 307 Porter Avenue Buffalo, NY 14201 Ph. 716-881-0565; Fax: 716-881-0582 Cell: 716-432-4571 Mary Baker, Administrator Scott Schwenkel, Dir of Operations	marygb@roadrunner.com sschwenkel@aol.com	B1 (3-6)	D'Youville College 716-881 3200	20	3
Memory Garden 560 Fairmount Avenue W.E. Jamestown, NY 14701 Ph. 716-488-9434; Fax: 716-487-3072 Cell: 716-499-2663 Brad Lawson, Operations Manager Troy Taylor, Administrator	blawson@tanglewoodmanor.com ttaylor@tanglewoodmanor.com	N/A	Zion Covenant Church 520 Fairmount Ave Jamestown, 14701 716-488-9310	5	5
Mount View Assisted Living, Inc. 5465 Upper Mountain Road Lockport, NY 14094 Ph. 716-433-0790; Fax: 716-433-079 Cell: 716-716-957-0324 Stephanie Leathers, Administrator Christine O'Connor, Resident Care Manager	sleathers@davidcommunities.com coconnor@davidcommunities.com	N/A	Niagara Co. Department Mental Health 5467 Upper Mountain Road Lockport, NY 14094 716-439-7410	15	1

A1 = Ventilator Care A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

69

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D4 = Ortho/Rehab

D1 = Traumatic Brain Injury

D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Oakwood Senior Living 2345 Delaware Ave. Kenmore NY 14217 Ph. 716-877-7171; Fax: 716-877-6383 Cell: 585-747-8479 Robin Wims, Administrator Aimee Sgarzi, ALP Director	rwims@kenwellgardens.com asgarzi@kenwellgardens.com		St. John the Baptist 1085 Englewood Ave Buffalo, NY 14223 Rev. Mike Parker 716-873-1122 After Hours: 716-400-7907	14	2
Orchard Grove Residences 2000 Southwestern Drive, WE Jamestown, NY 14701 Ph. 716-338-1600 Fax: 716-985-6690 Cell: 716-338-2124 Tammy DeVlieger, Administrator Matt Myschisin, Dir. Envir. Svcs.	tdevlieger@heritage1886.org mmyschisin@heritage1886.org	N/A	Southwestern Central School 600 Hunt Road Jamestown, NY 14701 716-484-1136	4	5
Orchard Heights, Inc. 5200 Chestnut Ridge Road Orchard Park, NY 14127 Ph. 716-662-0651; Fax: 716-662-3870 Cell: 716-262-6660 Colleen Roy, Administrator Brian Castiglia, Maintenance Dir.	croy@hamistergroup.com bcastiglia@orchardheights.com	N/A	Nativity of our Lord Church (school hall) 26 Thorn Avenue O.P. 14127 716-662-9339	14	4

70

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care

A3 = Passey Muir Valve A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPNC4 = Complex Dressing/Negative

Pressure Wound Care C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Park Creek Senior Living Community 410 Mill Street Williamsville, NY 14221 Ph. 716-632-3000; Fax: 716-632-3003 Cell: 716-984-6425 Geri Robinson, Administrator Tony Giambra, Envir. Director	grobinson@park-creek.com tgiambra@park-creek.com	B1 (9)	#1 Amherst Youth Foundation 5005 Sheridan Drive Williamsville, NY 14221 716-207-2163 #2 Faith United Church of Christ 1300 Maple Road Williamsville, 14221 716-689-7232	9	2
Peregrine's Landing at Orchard Park 101 Sterling Drive Orchard Park, NY 14127 Ph. 716-675-1022; Fax: 716-675-1007 Cell: 716-727-2337 Robert Collins, Administrator Paul Sansano, Maintenance Dir.	rcollins@peregrine-companies.com psansano@peregrine-companies.com	B2	Our Lady of the Sacred Heart 3148 Abbott Rd. Orchard Park, 14127 716-824-2935	5	4

71

Respiratory Care

A1 = Ventilator Care A2 = Tracheostomy Care A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Peregrine's Landing Senior Community 575 Cayuga Creek Road Cheektowaga, NY 14227 Ph. 716-893-3000; Fax: 716-893-3103 Cell: 716-264-3885 Sara Gentile, Administrator Paul Makowski, Maintenance Dir. Kelly Bolton, RN, Director of Nursing	sgentile@Peregrineslanding.com pmakowski@peregrineslanding.com kbolton@peregrineslanding.com	B1 (5)	Millenium Airport Hotel, 2040 Walden Ave. Buffalo, NY 14225 (716) 681-2400 Holiday Inn Amherst, 1881 NF Boulevard, Amherst NY 14226 (716)-691-8181 Hotel Indigo Amherst 10 Flint Rd. Amherst, NY 14228 (716) 689-4414 Day's Inn 4345 Genesee St. Cheektowaga NY 14225 (716) 631-0800	11	4
St. Columban's on the Lake 2546 Lake Road Silver Creek, NY 14136 Ph. 716-934-4515; Fax: 716-934-3919 Cell: 716-430-7981 Sr. Corona Colleary, Administrator Michele Yorke, Emergency Response Coordinator	ccolleary@stcolumbanshome.org myorke@stcolumbanshome.org	F	Our Lady of Mt. Carmel Assembly Hall Silver Creek, NY	5	5

72

A1 = Ventilator Care A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs E3 = Auto-immune Diseases

E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Southern Tier Meadows 4883 West Main Road Fredonia, NY 14063-9509 Ph. 716-679-4883 Fax: 716-679-4881 Cell: 716-753-6904 Debra Spinner, Administrator	spinnerd@stel.org	N/A	Lake Shore Community Chapel located at: 4552 West Main Road, Fredonia, NY 14063 (716) 679-4252	2	5
Symphony Living at Dunkirk 319 Washington Avenue Dunkirk, NY 14048 Ph. 716-366-2066; Fax: 716-366-0393 Cell: 716-680-3496 Valerie Stock, Administrator Holly Turk, Administrative Assist.	vstock@symphonyny.com hturk@symphonyny.com	B1 (1), B2 (1)	St. Elizabeth Ann Seton Church 328 Washington Ave Dunkirk 716-366-1750	4	5
Symphony Manor at Lancaster 5539 Broadway Ave Lancaster, NY 14086 Ph. 716-683-5150; Fax: 716-683-4049 Cell: 716-982-3327 Stacy Kiblin, Administrator Brian Johnson, Maint. Supervisor	skiblin@symphonyny.com bjohnson@symphonyny.com	N/A	St. Mary of Assumption Church 1 St. Mary's Hill Lancaster, 14086 716-683-6445	12	4
Tanglewood Manor 560 Fairmount Avenue Jamestown, NY 14701 Ph. 716-483-2876; Fax: 716-483-2832 Cell: 716-969-8469 Brad Lawson, Operations Manager Shannon Carnahan, Administrator	blawson@tanglewoodmanor.com scarnahan@tanglewoodmanor.com	N/A	Zion Covenant Church 520 Fairmount Ave Jamestown, 14701 716-488-9310	15	5

73

A1 = Ventilator Care
A2 = Tracheostomy Care

Respiratory Care

A3 = Passey Muir Valve A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing

D3 = Tube Feeding D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases E4 = Infectious Diseases

ADULT HOME / ASSISTED LIVING FACILITIES	Email	Special Care Provided	Stop-Over Point	Capacity To Receive	Sector
Tennyson Court Senior Care Community 49 Tennyson Court Williamsville, NY 14221 Ph. 716-632-9496; Fax: 716-632-1822 Cell: 716-698-1089 Mimi Piciullo, Administrator Daysha Whitaker	mpiciullo@tennysoncourt.com dwhitaker@tennysoncourt.com	B1 (4)	Williamsville South High School 5950 Main Street Williamsville, 14221 716-686-8200	8 (4 AL, 4 MC)	2
Willows, The 459 E. Oak Orchard St. Medina, NY 14103 Ph: 585-798-5233 Fax: 585-798-5827 Cell: 585-315-3999 Cindy Lee Albone, Administrator Kelly Bently, Resident Care Supervisor	calbone@willowsadultcare.com kbentley@willowsadultcare.com	N/A	Orchard Manor 600 Bates Road Medina NY 14103 585-798-4100	2	1
Women's Christian Association 134 Temple Street Fredonia, NY 14063 Ph. 716-672-7961; Fax: 716-672-3496 Cell: 716-410-1070 Tammy McCool, Administrator Marnie Ulkins, Asst. Administrator	wcatammy@netsync.net wcamarnie@netsync.net	B1 (note: all must be female)	(1) Fredonia Central School Office: 716-679-1868 Cell: 716-672-9229 or 716- 788-7731, 716-785-4731 (2) Job Corp 716-595-4211	3 (Women Only)	5

74

A1 = Ventilator Care

Respiratory Care

A2 = Tracheostomy Care A3 = Passey Muir Valve

A4 = Chest PT

Behavior/Dementia Care

B1 = Dementia, non combative B2 = Dementia, occasionally combative

B3 = Behavior, Level I

B4 = Behavior, Level II B5 = Behavior, Level III

IV and Wound Care

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing
D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases

E4 = Infectious Diseases

SENIOR INDEPENDENT LIVING APTS								
SENIOR INDEPENDENT LIVING FACILITIES	EMAIL	STOP-OVER POINT	CAPACITY TO RECEIVE	SECTOR				
Brookdale Senior Living Sterling House Niagara 6741 Nash Road N. Tonawanda, NY 14120 Ph. 716-731-1634; Fax: 716-731-1823 Cell: 716-940-3924 Cinty Sztorc, Administrator Jon Kipp, Maintenance Tech.	csztorc@brookdale.com jkipp@brookdale.com	Adams Fire Hall 911 or 716-692-3212	5	1				
GreenField Manor 5953 Broadway Lancaster, NY 14086 Ph. 716-684-8400; Fax: 716-684-6946; Cell: 716-880-9822 Chantal White, Adm./Contact	cwhite@niagaralutheran.org	Greenfield Health Rehab. Center 716-684-3000 off campus site of Lord of Life 1025 Borden Road Depew	10	4				
Heritage Village Retirement Campus 4600 Rt. 60 P.O. Box 350 Gerry, NY 14740 Ph. 716-985-6832; Fax: 716-338-0159 Cell: 716-499-6976 Rebecca LaBaron, Administrator Matt Myschisin, Director Envir. Svcs	rlebaron@heritage1886.org mmyschisin@heritage1886.org	Heritage Village Rehab & Skilled Nursing 4570 Rt 60 Gerry, 14740 716-985-4612	10	5				
Ken-Ton Presbyterian Village 3735 Delaware Ave. Kenmore, NY 14217 Ph. 716-874-6070 Fax: 716-874-1455 Cell: 716-946-1659 Pamela Flagler, Contact Colleen Bullion, Administrator	cbullion@pscwny.org pflagler@pscwny.org	Kenmore Presbyterian Church 2771 Delaware Ave. Kenmore, NY 14217 716-875-7600 / 716-836-6267	5	2				

SENIOR INDEPENDENT LIVING FACILITIES	EMAIL	STOP-OVER POINT	CAPACITY TO RECEIVE	QUAD
		(1) North Presbyterian Church 300 North Forest Williamsville, NY 14221 716-632-1330 (2) Amherst		
Presbyterian Village at North Church 214 Village Park Drive Williamsville, NY 14221 Ph. 716-631-3430 Fax: 716-207-0403 Cell: 716-998-2681 Jenna Bichler, Administrator Jim Trautman, Dir. Of Maintenance	ibichler@pscwny.org	Presbyterian Church 151 S. Youngs Road Williamsville, NY 14221 Contacts: Jacques Berlin 716-633-9450; Sue Shippes 716-689- 8094	10	2
		(3) Clarence Presbyterian Church 9675 Main Street Clarence, NY 716-759-8396 Contact: Rev. Greg Hall 716-228-6595		

A1 = Ventilator Care	
A2 = Tracheostomy Care	
A3 = Passey Muir Valve	

Respiratory Care

A4 = Chest PT

B1 = Dementia, non combative

B2 = Dementia, occasionally combative

B3 = Behavior, Level I B4 = Behavior, Level II B5 = Behavior, Level III

Behavior/Dementia Care

IV and Wound Care

76

C1 = Intravenous Care C2 = Peripheral, PICC, Central Line

C3 = TPN

C4 = Complex Dressing/Negative **Pressure Wound Care** C5 = Daily Peritoneal Dialysis

Special Therapies

D1 = Traumatic Brain Injury D2 = Stroke/Speech/Swallowing D3 = Tube Feeding

D4 = Ortho/Rehab

Bariatric Care/Other Special Needs

E1 = Bariatric over 350lbs E2 = Bariatric over 600lbs

E3 = Auto-immune Diseases

E4 = Infectious Diseases

XI. Patient / Medical Record & Equipment Tracking Sheet

Patient MR # or Tracking #	Date of Birth	Patient Name	Sex	Time Left Bldg.	Name, Type of and # Transport (State if applicable)	Original Chart Sent w/ Patient (Y) (N)	Meds & MAR Sent w/ Patient (Y) (N)	Equipment Sent	Family Notified: Name, Date & Time, Phone Number w/ Area Code		Name, Date & Time, Phone Number w/ Area Name, Phone Number, Page 6 Time			lotified , Phone Number, & Time	Time <u>A</u> rrived Stop- over / Time <u>L</u> eft	Time/ Date Arrived at Patient Accepting Facility
									<u>Y</u>	<u>N</u>		Y	<u>N</u>		Α	
															L	
															Α	
															L	
															Α	
															L	
															Α	
															L	
															Α	
															L	
															Α	
															L	
															Α	
															L	
															Α	
															L	
															Α	
															L	
															Α	
															L	

Disaster Struck Facility: Keep One Copy / Li FAX 1 copy to RCC / Li FAX 1 copy to Receiving Facility / Li GIVE 1 copy to Transporters	
Patient Accepting Facility: Have you communicated to RCC or Disaster Struck Facility that you received these residents? YES / NO	
Patient Accepting Facility: Print Name of Key Contact / Phone # / Fax:	

XII. Sample Resident Emergency Evacuation Tag

RESIDENT EMERGENCY EVACUATION TAG

FACILITY NAME PHONE
RESIDENT'S NAME DOB
LANGUAGE(s) SPOKEN ABLE TO COMMUNICATE Y/N
FAMILY CONTACT PHONE
CRITICAL DIAGNOSIS AND CRITICAL MEDICATIONS:
TREATMENTS:
ALLERGIES:
FACILITY PHARMACY:PHONE:
DNR ORDER: Y / N Other No Hospitalization (attach MOLST Form)
MENTAL STATUS (Dementia: Y / N) Alert □ Lethargic □ Oriented □ Confused: Mildly □ Severely □
BEHAVIOR PROBLEMS / SAFETY RISK None □ Wanders □ Verbally Aggressive □ Physically Aggressive □ Severe Behaviors □ Elopement/ Flight Risk □ Risk for Falls □
ADL'S / APPLIANCES Independent □ Supervision □ Partial Assist □ Total Assist □ Continent □ Incontinent Bladder □ Incontinent Bowel □ Catheter/ Ostomy □ Blind □ Glasses □ Deaf □ Hearing Aid L / R Dentures U / L Contact Lens□
DIET Diabetic □ Last Insulin Last Meal Kosher □
Thickened Liquids Consistency:
NPO □ Aspiration Precautions □ Modified Diet
Tube Feed TypeRate
TRANSFERS Independent □ Supervision □ Partial Assist of 1 2 Mechanical □ Total □
MOBILITY Independent □ Supervision □ Partial Assist of 1 2 Total □
EQUIPMENT: None □ Cane □ Walker □ Wheelchair □
SPECIAL PRECAUTIONS / PROCEDURES / EQUIPMENT
IV Access Type C-Dif
Ventilator □ Trach □ Speaking Valve□ Dialysis □
Suction ☐ How Often Seizure Precautions ☐
O₂Rate Mask Cannula Continuous PRN
Restraint: Type When Last Released
OTHER:
RESIDENT ACCEPTING FACILITY:CONTACT

<u>Document all care provided</u> <u>to Resident DURING</u>
TRANSFER and/or concerns in the space below

Revised: February 2017

78

XIII. Influx Of Patients Log

(Accounting for Incoming Patients and Equipment)

Make additional copies prior to use

1. FA	CILITY NAME			2.	DATE/TIM	IE PREPAR	ED	3. INCIDEN	NT D	ESC	RIPTION				
4. TR	IAGE AREA (for ent	try into the fac	cility)	<u> </u>											
Arrival Time	Facility Received From	MRN# / Triage #	Pt Name (Last, First)	Sex	DOB/ Age	w/ Resident	Meds & MAR Received w/ Resident (Y) (N)	Received	N	Na Tin Num	ly Notified: me, Date, ne, Phone ber w/ Area Code		N Ti Nur	CP Notified: ame, Date, ime, Phone nber w/ Area Code	Time Left Triage/ Destination
									Y	<u>N</u>		<u>Y</u>	<u>N</u>		
5. SU	BMITTED BY	I		6.	PHONE N	UMBER	7. DAT	E/TIME SUBM	İTTE	D	ı	1	ı	1	

FAX a completed copy of this form to the WNYMAP Regional Coordinating Center.

XIV. WNYMAP Transportation Evacuation Survey

Nurse / Physician Decision-Making Guide Assigning Patient Transport Mechanism Based on Clinical Criteria

a. Patients requiring Critical Care Transportation (RN-staffed or Advanced-trained Paramedic)

- IVs with medications running that exceed paramedic capabilities
- IV pump(s) operating (can be provided by the transport crew)
- Need any medications administered via Physician orders by any means in any dosage prescribed
- Cardiac monitoring/pacing (only external pacing can be provided by the transport crew) / intra-aortic counter pulsation device / LVAD
- Ventilator dependent (vent can be provided by the transport crew or home vent)
- Neurosurgical ventricular drains
- Invasive hemodynamic monitoring which cannot be temporarily or permanently discontinued (i.e. intra-arterial catheter if noninvasive blood pressure have not been reliable for Patient, they are hemodynamically unstable, and they have a continuing chance of survival.)

b. Patients requiring ALS transport (Paramedic)

- IVs with medication running that are within paramedic protocols (varies by sponsor hospital)
- IV pump(s) operating
- IV with clear fluids (no medications)
- Need limited medications administered via Physician orders by limited means in limited dosage prescribed
- Cardiac monitoring/pacing (only external pacing can be provided by the transport crew)
- BVM only in transport
- Prone or supine on stretcher required.

c. Patients requiring BLS transport (EMT)

- O2 therapy via nasal cannula or mask (can be provided by the transport crew)
- Saline lock and Heparin lock
- Visual monitoring / Vitals (BP/P/Resp)
- Prone or supine on stretcher required or unable to sustain
- If Behavioral Health, provide information regarding danger to self or others.

d. Patients requiring Chair Car/Wheelchair Accessible Bus (Medically knowledgeable person to ride on the transport)

- No medical care or monitoring needed, unless they have their own trained caregiver rendering the care.
- Not prone or supine, no stretcher needed.
- No O2 needed, unless patient has own prescribed portable O2 unit safely secured en route.
- If Behavioral Health, provide information regarding danger to self or others.

NOTE: Some wheelchair van companies provide a standard wheelchair, if needed, for the duration of the trip. Buses do not provide wheelchairs. Some electric wheelchairs cannot be secured in wheelchair vans due to size or design. These are NOT to be transported with the patient.

- **e.** Patients requiring Normal Means of Transport (typically a bus resident must be limited assist transfer or no assist required Medically knowledgeable person to ride on the transport)
- No medical care or monitoring needed, unless they have their own trained caregiver rendering the care.
- No O2 needed, unless patient has own prescribed portable O2 unit that can be safely secured en route.
- Not prone, supine, or in need of a wheelchair (can ambulate well enough to climb bus steps)
- If Behavioral Health, provide information regarding danger to self or others.
- Limited assist transfers or no assist required.

NOTE: A person with a folding wheelchair, who can ambulate enough to get in and out of a car, could go by car if there was room to bring/pack the wheelchair.

f. Patients requiring bariatric ambulance or transport (>350lbs.)

Revised: February 2017 80

Clinical Area Aggregate Numbers for Evacuation Planning

To be completed and sent internally to the Administrator/DON

Individual C	nical Area Namo ompleting Form Date Completed	n:					
1. TOTAL	PATIENTS:		(Sho	uld match	box below)		
NOTE: Normal form of transportation is for Limited Assist Transfer patients.							
Using the da				s, provide the to cortation for ev	otal number of acuation:	patients	
Critical Care Transport	ALS Transport	BLS Transp	<u> </u>	Wheelchair Accessible Bus	Normal (bus, etc.)	TOTAL	
SUPPLEMENTAL INFORMATION							

# Requiring Continuous O ₂	# on Ventilators	# with special medical equip. (can't be discontinued)

NOTE: Information in #2 & #3 below is supplemental and the # of patients below <u>SHOULD</u> already be included in the total above.

	2. BARIATRIC PATIENTS									
Please	Please provide additional information for each area below for the specific									
	transportation needs of Bariatric Patients:									
NOTE: BLS	Transport is ca	ategorized as	>350 lbs, while	the buses are ca	tegorized as					
	<500 lbs (if a patient exceeds 500 lbs, please note this).									
Critical			Wheelchair	-						
Care	ALS	BLS	Accessible	Normal	TOTAL					
Transport	Transport	Transport	Bus	(bus,etc.)	BARIATRIC					
_				•						

3. DISCHARGE TO HOME								
Please provide additional information for each area below for the specific transportation needs of patients Discharged to Home:								
	Wheelchair Accessible Bus	Normal (bus,etc.)	TOTAL DISCHARGE TO HOME					

Revised: February 2017 81

unit?	out your

Clinical Transportation Categories for Evacuation:

WNYMAP Facility Aggregate Numbers

To be completed by the Administrator/DON / Incident Commander.

•	•					
Individual Completing I E-ma						
Time and Date (Completed:			Total	Beds:	
1. TOTAL I	PATIENTS:		(Sho	uld match	box below)	
NOTE: Normal	form of transpor	tation is fo	or Limi	ted Assist Trans	fer patients.	
Using the dat				s, provide the to portation for ev	otal number of pacuation:	patients
Critical Care Transport	ALS Transport	BLS Transp		Wheelchair Accessible Bus	Normal (bus, etc.)	TOTAL

SUPPLEMENTAL INFORMATION

# Requiring Continuous O ₂	# on Ventilators	# with special medical equip. (can't be discontinued)

NOTE: Information in #2 & #3 below is supplemental and the # of patients below <u>SHOULD</u> already be included in the total above.

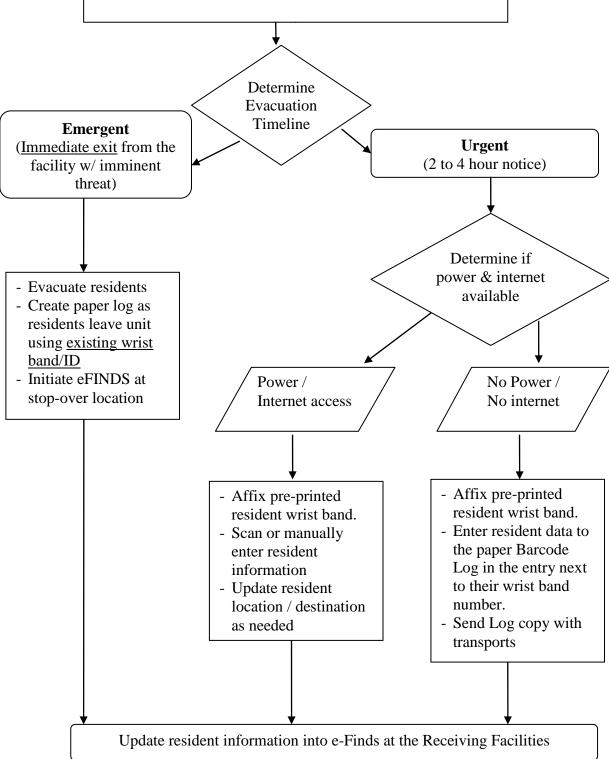
	2. BARIATRIC PATIENTS								
Please provide additional information for each area below for the specific transportation needs of Bariatric Patients: NOTE: BLS Transport is categorized as >350 lbs, while the buses are categorized as <500 lbs (if a patient exceeds 500 lbs, please note this).									
Critical Care Transport	ALS Transport	BLS Transport	Wheelchair Accessible Bus	Normal (bus,etc.)	TOTAL BARIATRIC				

Please provide additional information for each area below for the specific transportation needs of patients Discharged to Home: Wheelchair Normal (bus,etc.) 4. ASSISTED LIVING Total additional residents on-site for Assisted Living: Wheelchair Normal (bus,etc.) ASSISTED LIVING Total additional residents on-site for Senior Independent Living: Total additional residents on-site for Senior Independent Living: Total additional residents on-site for Senior Independent Living: Wheelchair Normal (bus,etc.) Wheelchair Normal (bus,etc.) Accessible Bus (bus,etc.) Foral additional residents on-site for Adult Day Health Care: Total additional residents on-site for Adult Day Health Care: Wheelchair Normal (bus,etc.) Wheelchair Accessible Bus (bus,etc.) HEALTH CARE Total additional residents on-site for Adult Day Health Care: Total additional residents on-site for Adult Day Health Care: Total Accessible Bus (bus,etc.)		3. DISCHARGE TO	HOME					
Wheelchair Accessible Bus 4. ASSISTED LIVING Total additional residents on-site for Assisted Living: Wheelchair Normal (bus,etc.) Wheelchair Normal (bus,etc.) 5. SENIOR INDEPENDENT LIVING Total additional residents on-site for Senior Independent Living: Wheelchair Normal SENIOR Wheelchair Normal INDEPENDENT Accessible Bus (bus,etc.) 6. ADULT DAY HEALTHCARE Total additional residents on-site for Adult Day Health Care: Wheelchair Normal (bus,etc.) Wheelchair Normal (bus,etc.) Health Care: TOTAL ADULT DAY HEALTH CARE Total additional residents on-site for Adult Day Health Care: Wheelchair Normal (bus,etc.) Wheelchair ADULT DAY HEALTH CARE	-			-				
Wheelchair Accessible Bus 4. ASSISTED LIVING Total additional residents on-site for Assisted Living: Wheelchair Normal (bus,etc.) Accessible Bus 5. SENIOR INDEPENDENT LIVING Total additional residents on-site for Senior Independent Living: Wheelchair Normal INDEPENDENT LIVING Total additional residents on-site for Senior Independent Living: Wheelchair Normal INDEPENDENT LIVING 6. ADULT DAY HEALTHCARE Total additional residents on-site for Adult Day Health Care: Wheelchair Normal ADULT DAY HEALTH CARE Wheelchair Normal (bus,etc.) Wheelchair Normal (bus,etc.) Wheelchair Normal ADULT DAY HEALTH CARE Total additional residents on-site for Adult Day Health Care: TOTAL ADULT DAY HEALTH CARE	transpor	tation needs of patients	Discharged to	Home:				
Total additional residents on-site for Assisted Living: Wheelchair Normal (bus,etc.) ASSISTED LIVING 5. SENIOR INDEPENDENT LIVING Total additional residents on-site for Senior Independent Living: Wheelchair Normal INDEPENDENT LIVING Wheelchair Normal (bus,etc.) LIVING 6. ADULT DAY HEALTHCARE Total additional residents on-site for Adult Day Health Care: Wheelchair Normal ADULT DAY HEALTH CARE Total additional residents on-site for Adult Day Health Care: Wheelchair Normal (bus,etc.) HEALTH CARE accessible Bus (bus,etc.) HEALTH CARE was provide us with the breakdown of nursing home patients, assisted living residents, residents and senior independent living residents to clarify the primary box in #1				DISCHARGE TO				
Total additional residents on-site for Assisted Living: Wheelchair Normal (bus,etc.) ASSISTED LIVING 5. SENIOR INDEPENDENT LIVING Total additional residents on-site for Senior Independent Living: Wheelchair Normal INDEPENDENT LIVING Wheelchair Normal (bus,etc.) LIVING 6. ADULT DAY HEALTHCARE Total additional residents on-site for Adult Day Health Care: Wheelchair Normal ADULT DAY HEALTH CARE Total additional residents on-site for Adult Day Health Care: Wheelchair Normal (bus,etc.) HEALTH CARE accessible Bus (bus,etc.) HEALTH CARE was provide us with the breakdown of nursing home patients, assisted living residents, residents and senior independent living residents to clarify the primary box in #1								
TOTAL Accessible Bus 5. SENIOR INDEPENDENT LIVING Total additional residents on-site for Senior Independent Living: Wheelchair Accessible Bus 6. ADULT DAY HEALTHCARE Total additional residents on-site for Adult Day Health Care: Wheelchair Accessible Bus 6. ADULT DAY HEALTHCARE Total additional residents on-site for Adult Day Health Care: Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Total Adult Day Health Care: TOTAL ADULT DAY HEALTH CARE Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Total Adult Day Health Care: Total Adult Day HEALTH CARE		4. ASSISTED LIV	VING					
5. SENIOR INDEPENDENT LIVING Total additional residents on-site for Senior Independent Living: Wheelchair Normal INDEPENDENT LIVING Wheelchair Normal INDEPENDENT LIVING 6. ADULT DAY HEALTHCARE Total additional residents on-site for Adult Day Health Care: Wheelchair Normal Adult Day Health Care: Wheelchair Normal INDEPENDENT LIVING HEALTH CARE Total additional residents on-site for Adult Day Health Care: Wheelchair Normal (bus,etc.) HEALTH CARE Passe provide us with the breakdown of nursing home patients, assisted living residents, residents and senior independent living residents to clarify the primary box in #1 and the pri	Total add	ditional residents on-site	e for Assisted L	_iving:				
Total additional residents on-site for Senior Independent Living: TOTAL SENIOR Wheelchair Accessible Bus 6. ADULT DAY HEALTHCARE Total additional residents on-site for Adult Day Health Care: Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus Wheelchair Accessible Bus TOTAL ADULT DAY HEALTH CARE Passe provide us with the breakdown of nursing home patients, assisted living residents, residented adult home residents and senior independent living residents to clarify the primary box in #1 and the pr				TOTAL ASSISTED LIVING				
Wheelchair Accessible Bus 6. ADULT DAY HEALTHCARE Total additional residents on-site for Adult Day Health Care: Wheelchair Normal (bus,etc.) Wheelchair Normal (bus,etc.) Wheelchair Accessible Bus Output Total Adult Day Health Care: Total ADULT DAY HEALTH CARE Wheelchair Normal (bus,etc.) Accessible Bus Wheelchair Accessible Bus Output Total Adult Day Health Care: Total Adult Day								
Wheelchair Accessible Bus 6. ADULT DAY HEALTHCARE Total additional residents on-site for Adult Day Health Care: Wheelchair Normal ADULT DAY HEALTH CARE Wheelchair Normal (bus,etc.) Wheelchair Accessible Bus For Adult Day Health Care: TOTAL ADULT DAY HEALTH CARE Wheelchair Normal (bus,etc.) Wheelchair Accessible Bus For Adult Day Health Care: TOTAL ADULT DAY HEALTH CARE For Adult Day Health Care: TOTAL DAY HEALTH CARE For Adult Day Health Care: TOTAL DAY HEALTH CARE For Adult Day Health	l otal addition	ai residents on-site for S	Senior Independ					
Total additional residents on-site for Adult Day Health Care: Wheelchair Normal ADULT DAY Accessible Bus (bus,etc.) HEALTH CARE ease provide us with the breakdown of nursing home patients, assisted living residents, residented adult home residents and senior independent living residents to clarify the primary box in #1.				SENIOR INDEPENDENT				
Total additional residents on-site for Adult Day Health Care: Wheelchair Normal ADULT DAY Accessible Bus (bus,etc.) HEALTH CARE ease provide us with the breakdown of nursing home patients, assisted living residents, residented adult home residents and senior independent living residents to clarify the primary box in #1								
Wheelchair Normal ADULT DAY Accessible Bus (bus,etc.) HEALTH CARE ease provide us with the breakdown of nursing home patients, assisted living residents, residented adult home residents and senior independent living residents to clarify the primary box in #1		6. ADULT DAY HEAL	THCARE					
Wheelchair Normal ADULT DAY Accessible Bus (bus,etc.) HEALTH CARE ease provide us with the breakdown of nursing home patients, assisted living residents, residented adult home residents and senior independent living residents to clarify the primary box in #1.	Total additional residents on-site for Adult Day Health Care							
Accessible Bus (bus,etc.) HEALTH CARE ease provide us with the breakdown of nursing home patients, assisted living residents, residented adult home residents and senior independent living residents to clarify the primary box in #1.			•	ſ				
adult home residents and senior independent living residents to clarify the primary box in #1								
	/adult home residents and sen	ior independent living resi						

Revised: February 2017 84

XV. eFINDS

Healthcare Incident Command (HICS) notifies the New York State Department of Health Regional Office of the evacuation, requests Evacuation Operation on eFINDS <or> the NYSDOH notifies facilities during a large-scale, planned evacuation that eFINDS will be used and the name of the eFINDS operation.



eFINDS is a secure and confidential **electronic or paper system** that provides real-time access to resident locations during an evacuation event. *LTC Mutual Aid Plan Member Facilities* will use this system to log and track residents during a full or partial evacuation as designated by the Healthcare Incident Command System (HICS).

Resident data can be entered, and location updated and tracked using hand-held scanners, mobile applications, or paper/handwritten tracking (in case of power outage, or time constraints). By using the eFINDS system of barcodes and wristbands, each resident is associated with a unique identification number that can then be updated with their personal data at the originating and/or destination facility. When the LTC facility is evacuating, the eFINDS wristband/barcode should be affixed to each resident including those discharged to home, and sheltering in place.

The eFINDS web application is located on the NYSDOH Health Commerce System (HCS) https://commerce.health.state.ny.us/public/hcs_login.html. In order to access and use the online aspects of eFINDS, an individual must: (1) have their own HCS account, and (2) be assigned to at least one of the two eFINDS roles in the HCS Communications Directory; "eFINDS Administrator" or "eFINDS Data Reporter". See the eFINDS Quick Reference Card for directions on HCS/e-FINDS access issues.

eFINDs Supplies and Equipment:

- a. List of supplies and equipment:
 - Handheld scanner issued by NYSDOH.
 - Other scanners identified as compatible by the LTC facility.
 - The LTC facility has wristbands equal to the <u>certified number of licensed beds</u> at the facility (for actual event use *i.e.*, *during evacuation*; and training), pre-printed with barcodes and the facility name.
 - Paper Barcode Log that includes a list of all assigned barcodes, facility name, and blank fields to enter resident data (name, DOB, gender, etc.).
 - Computer(s) with access to the internet/HCS, if the online application is used.
 - The e-FINDS Administrator or e-FINDS Data Reporter roles [or designee per LTC facility] will retrieve the equipment and deliver it to the designated locations (per LTC facility, Units, Evacuation Portals, or just-in-time).

Roles and Responsibilities for eFINDS:

- a. Healthcare Incident Command System (HICS):
 - Contacts the NYSDOH Western Region Office (585-423-8020) and requests an Evacuation Operation be created in eFINDS (if an evacuation operation is not already activated).
 - Activates the resident tracking according to LTC facility's Evacuation Plan.
 - Determines how the eFINDs system will be used and communicates to the Resident Tracking Unit:
 - Use eFINDs paper, and/or eFINDS online HCS components. The wristband with barcode is always applied.
 - Name of the LTC facility's Evacuation Operation in the eFINDs Application.
 - LTC facility location(s) where eFINDs will be implemented (such as on units, or at the evacuation staging/loading areas)

- b. Resident Tracking Unit Leader (RTUL) will:
 - Activate staff pre-assigned to eFINDS Reporting Administrator roles.
 - LTC facility staff names assigned to eFINDS Administrator roles can be found in the [LTC facility's Evacuation Plan, HICS chart, etc]. If these persons are not available, the Healthcare HCS Coordinator should <u>assign other staff to the</u> <u>eFINDS roles</u> in the HCS Communications Directory at the time of the emergency.
 - Communicate HICS decisions to the eFINDS Administrator roles.
 - Monitor eFINDS tracking of residents as they are updated at destination facilities and account for all residents.
- c. eFINDS Administrator role: Performs operations per the *eFINDS Quick Reference Card* under the direction of the RTUL.

Procedure for Resident Tracking with e-FINDs:

- a. HICS communicates which eFINDS functions (paper and/or electronic) will be used.
- b. eFINDS supplies and equipment are delivered to the operational areas as directed.
- c. Follow the designated eFINDS process. Use of functions with/without the scanner can be found on the *eFINDS Quick Reference Card*.

HICS will determine use of eFINDS based on the availability of power and internet access, and the ability to prepare residents:

- a. <u>Emergent evacuation procedure</u> (immediate exit from the facility due to an imminent threat/hazard, most likely to a stop-over point): **If used, the resident's existing wrist band issued on admission** will be the form of identification, and if able, a paper log of residents as they leave their unit and the facility is developed.
 - eFINDS should be initiated at the stop-over location if a stop-over location is used. The facility's command center will designate staff to deliver and implement e-FINDS supplies and equipment at the stop-over location as directed.
 - Every effort should be made to use eFINDS and the barcode numbers tracked when
 residents are being immediately evacuated to another facility, or to multiple locations
 that might include a non-healthcare stop-over. If the receiving location is not one that
 has access to eFINDS to record the evacuees it receives, then the sending LTC
 facility should use other communications with the receiving location, and use the
 paper log to track the barcode numbers on the bracelets of those evacuees received.

b. **<u>Urgent</u>** or **planned evacuation procedure**:

- No Power/ Internet access, or limited time situation: Affix pre-printed wrist bands to each resident and enter resident data (name, DOB, destination) to the Paper Barcode Log in the entry next to their wrist band number. A copy of the paper Log should be sent with each transport that is destined for a different facility.
- With Power/Internet access: HICS will direct the eFINDS online system be used and the pre-printed eFINDS wrist band or a barcode be affixed to each resident. Using the eFINDS application for resident data entry:
 - 1. A computer with internet/HCS access is accessible where resident data entry will occur.

- 2. <u>Single resident entry with a scanner:</u> use eFINDS or compatible scanner to scan resident wrist band barcode and enter resident data one at a time into eFINDS; minimum data entered should include first and last name, date of birth, gender, destination if known.
- 3. <u>Single resident entry without scanner</u>: manually enter the resident's wrist band barcode and data one at a time into eFINDS; minimally resident first and last name, date of birth, gender, destination if known.
- 4. <u>Multiple barcodes and residents' demographic data</u> may be entered manually to a fillable spreadsheet on the eFINDS system, or;
- 5. Multiple residents' demographic data can be entered to a fillable Excel barcode spreadsheet that has been downloaded to a file on the LTC facility's computer. The Excel sheet can then be uploaded into the eFINDS system and will populate residents' data into the system. Note: The Excel file name cannot be changed or the upload will fail.
- c. As residents arrive at receiving facilities, their destination information is updated in eFINDS by the receiving facility.
- d. Resident destination follow-up is conducted with receiving facilities per the LTC facility's evacuation plan and via eFINDS if this application has been used. The evacuating LTC facility's Resident Tracking Unit monitors and records residents' final destinations.

Revised: February 2017 88

eFINDS Administrator Job Action Sheet

Mission: Implementing, tracking, and managing an electronic resident tracking system for evacuating residents from the facility, and receiving evacuated resident(s) from another facility. Your personal information must be entered into the eFINDS Administrator role in the facility's Communications Directory on the NYSDOH Health Commerce System (HCS) in order to access e-FINDS. Contact the facility's HCS Coordinator if you need access to eFINDS. Refer to the eFINDS Quick Reference Card, "Getting Started".

Date: Start: End: Position Assigned to: Position Reports to: Resident Tracking Unit Leader (RTUL)	Initial:	
Signature:		
Facility's Command Center (HCC) Location: Telephone:		
Fax: Other Contact Info: Radio Title:		
Task	Time	Initial
Coordinate activities with Healthcare Incident Command System (HCS) and the RTUL.		
If EVACUATING implement the steps below for eFINDS as directed.		
Retrieve the eFINDS supplies and equipment located: [add location]		
Deliver to the designated area(s):		
- Pre-printed eFinds barcoded wrist bands; pre-printed Bar Code Log		
Equipment: Hand-held scanners, computers with internet accesseFINDS "Go-Bags" (if used)		
Assure a wristband or barcode has been affixed to all residents, including those		
who will evacuate, shelter-in-place, or return home.		
Paper Process (NO power, NO internet, NO Time): manually enter resident data		
including first and last name, birth date, and gender onto the eFINDS paper Bar		
Codes Log in the fields next to their assigned bar code.		
eFINDS online Health Commerce System (HCS):		
1. Refer to the eFINDS Quick Reference Card for step-by-step procedures.		
2. Turn on computer, attach scanner, access the internet via your Browser.		
3. Log onto the HCS at https://commerce.health.state.ny.us .		
For a log on issue / forgotten password, call the Commerce Accounts		
Management Unit (CAMU) at 1-866-529-1890.		
4. Click eFINDS in the My Applications panel (left side of Homepage), or click on		
the Applications bar at the top, click on "e", and scroll down to eFINDS. 5. Select <i>Your Facility's Name</i> from the dropdown list and click Submit ,		
Reminder: VERIFY your location, if you are affiliated with more than one		
location!		
6. Pull up the facility's Evacuation Operation * on the HCS		
7. Proceed to the choice for resident data entry as determined by the HICS .		
See steps A. B. C for choices: enter resident one-at-a-time with or without		

Revised: February 2017 89

create upon request by the facility, or during a large-scale event.

* The Evacuation Operation is required. The facility can create its own, or NYSDOH can

scanner; or in multiple batches.

Task	Time	Initial
Register resident/supervise registration with a scanner, one resident at a time. Refer to eFINDS Quick Reference. - Scan the resident's wrist band or affixed barcode one resident at a time, and enter their personal data in the eFINDS screen fields as time allows. The resident's destination can be updated as needed when determined.		
 Register Resident or supervise registration without a scanner, one resident/resident at a time. 1. Select "Register Patient / Resident without Scanner". A list of barcodes available to the facility will appear. 2. Click on the bar code assigned to the resident. A screen will appear. 3. Then follow steps 3-10 eFINDS Quick Reference for "Registering the Resident with Scanner". 		
Register multiple residents without a scanner, in multiple batches. Refer to eFINDS Quick Reference. a. Generate Barcoded PDF Log. A Fillable Spreadsheet of barcodes for printing will be generated on the eFINDS system. The PDF bar code log cannot be uploaded to populate the eFINDS as the Excel sheet can. However, residents' data can be manually entered on the printed log next to their assigned barcode, and sent with transport. If time allows, data from the log can be manually entered to the online eFINDS system. The log barcodes could be scanned into eFINDS at that time. Assure that the resident data entered into eFINDS is correctly associated to the barcode that has been assigned to that resident. b. Generate Uploadable Barcode Excel Spreadsheet. Refer to eFINDS Quick Reference. An Excel sheet of available barcodes can be generated on eFINDS and uploaded to a facility computer. Data for multiple residents can be entered in the fields next to their assigned barcodes. The spreadsheet can be uploaded and will populate resident data into the eFINDS system corresponding to their barcode. Do not change the name of the excel file when saving. Follow File upload instructions under "c". c. Uploading Multi Patient/Resident Excel File. Refer to eFINDS Quick Reference. If the Excel file has no resident or resident information, the file cannot be uploaded.		
Update Resident - Releasing Resident from this location. Refer to eFINDS Quick Reference. Use this procedure to update the resident's destination location in eFINDS one-at-a-time or in multiples. In the event of a second evacuation and/or additional barcodes are needed, generate a PDF or Excel spreadsheet of used and unused barcodes, and a spreadsheet that can be populated with resident information and uploaded to eFINDS. (The Administrator role only can do this).		

90

Revised: February 2017

Task	Time	Initial
e-FINDS procedures for RECEIVING evacuated residents:		
Quick Search: Refer to eFINDS Quick Reference. Scan a barcode, enter a barcode number, OR enter first or last name in Quick Search (located top right).		
If necessary click Quick Search . If a person has never been to your facility, you will NOT be able to search for them. If they have been assigned to your facility AND you have their barcode number, you can scan or manually enter the barcode number to search for them.		
Receiving Facility: Updates Resident with Scanner Refer to eFINDS Quick Reference		
Receiving Facility: Updates Resident without Scanner Refer to eFINDS Quick Reference		
Provide status reports on resident census and tracking as requested by the Facility's Command Center.		

91

Revised: February 2017

FINDS Evacuation of Facilities In Disaster Systems

Getting Started

The **eFINDS** Data Reporter and **eFINDS** Administrator role have access to the patient tracking application. From the **My Account** link, on the menu bar (top right) of the Health Commerce System (HCS), click See what roles I hold to verify that you are in one of the eFINDS roles. If you are not in an eFINDS role, please contact your facility's HCS Coordinator. Locate your coordinators from **My Account** > Look up my coordinators. Click Update or verify my contact information to access and update your business and emergency contact information to receive communications.

Open eFINDS

- Log on to the HCS (https://commerce.health.state.ny.us). If you cannot remember your user id or password, please call Commerce Accounts Management Unit at 1-866-529-1890.
- Click eFINDS in the My Applications panel (left side). If you do not see eFINDS, then you are not in an eFINDS role (see Getting Started).
- 3. Select your current location from the dropdown list.
- 4. Click **Submit**, and proceed to one of the following actions.

Always VERIFY your location, if affiliated with more than one!

Evacuating Facility: Registers Multiple Patient/Resident

eFINDS Administrator Role Only

- 1. Click Register Patient/Resident > Multi Patient/Resident Input.
- 2. Verify Evacuation Operation and Current Location.
- 3. Select Intended Destination.
- 4. Enter the number of barcodes to be assigned.
- 5. Click Generate Fillable Spreadsheet.
- Enter known information, such as first name, last name, date of birth (mm/dd/yyyy), and gender.
- 6. Click Save all Patient/Resident.
- Verify message: Successfully saved {correct # being evacuated} Patient/Resident and click barcode to view or update the patient or resident information.

Evacuating Facility: Register Patient/Resident with Scanner

Evacuating facilities may not have time to complete the registration process, so multiple time saving options are available

- Scan a barcode
 OR click Register Patient/Resident > With Scanner.
- Confirm message: Barcode is located. You can register a new Patient/Resident with it.
- 3. **If time allows**, enter first name, last name, date of birth (mm/dd/yyyy), gender, etc.
- Verify the Evacuation Operation OR select another operation from the list.
- 5. Verify the patient/resident current location is correct.
- 6. Select the Intended Destination Organization type, if necessary.
- 7. Select the Intended Destination.
- 8. Enter the Bulk Group; such as bus no. or transportation description.
- Click Register. If the required fields are not complete, you will receive an error message. Click Override to bypass the error.
- 10. Confirm message: Patient/Resident info is updated.

Evacuating Facility: Updates Multiple Patient/Resident

eFINDS Administrator Role Only

- 1. Click Update Patient/Resident > Multi Patient/Resident Update.
- 2. Verify your location.
- 3. Select the Action Type:

Releasing Patient/Resident From this Location, OR Change Operation for Patient/Resident at this Location.

- 4. Select the Intended Destination.
- 5. Enter the Bulk Group, for example transport via bus.
- 6. Click Load All Patient/Resident.
- 7. Select All OR select Update for each patient/resident.
- 8. Click Release Selected Patient/Residents OR Change Operation for Selected Patient/Resident.
- 9. Verify Successfully updated {#} Patient/Resident.

For technical assistance call the Commerce Trainers at 518-473-1809

Evacuating Facility: Generates Barcoded PDF Log OR Uploadable Barcode Spreadsheet

eFINDS Administrator Role Only

- 1. Click Manage Barcodes > Generate Barcodes Spreadsheet.
- 2. Select or verify the current location.
- Enter Start and End barcode numbers, e.g., 4-13 for ten patient/ residents to be relocated.
- Select the PDF if you want a scannable barcode log OR select EXCEL for the upload patient/resident option.
- 5. Click Generate.
- 6. Print the PDF OR save the Excel spreadsheet to your computer.

Note: PDF files cannot be uploaded, but could be sent with transport. The Excel file can be updated with patient/resident information and uploaded to eFINDS. See upload instructions below.

Evacuating Facility: Uploads Multi Patient/Resident File

- 1. Click Register Patient/Resident > Patient/Resident Upload File.
- 2. Verify the Evacuation Operation and current Location.
- 3. Click Browse.
- Locate the Excel file with saved patient/resident information.
 Hint: search for nys_eFINDS file name with facility id, date and time.
- Click Open to add file.
- 6. Click Upload.
- Verify the patient/resident information is updated, and edit information as needed.
- 8. Click Save All Patients/Residents.

Note: If the Excel file has no patient or resident information, then the file cannot be uploaded.

Shelter-in-Place (SIP)

If an evacuating facility determines that a patient or resident would be safer if **not** moved to another location, then the patient or resident will shelter in place. If the patient or resident is already registered in eFINDS, then click Shelter-In-Place to change the Intended Destination to the current location.

Quick Search

- 1. Click Home on the eFINDS menu bar.
- Scan a barcode, enter a barcode number, OR enter first or last name in Quick Search (located top right).

If necessary click Quick Search.

- 3. Locate the correct patient/resident record.
- 4. Click the Barcode (Serial ID) link.
- 5. Verify: Patient/Resident is found. You can update the information.
- 6. View, Add, or change the necessary information.
- 7. Click Update Patient/Resident.

If a person has never been to your facility, you will NOT be able to search for them.

Receiving Facility: Updates Patient/Resident with Scanner

- 1. Click Update Patient/Resident > With Scanner
- 2. Scan a barcode and click Submit, if necessary.
- Confirm message: Barcode is located. You can register new Patient/ Resident with it OR Patient/Resident is found. You can update the information.
- 4. Enter or confirm information, including Evacuation Operation and the current patient/resident location.
- 5. Click Register, Update, or Override.
- 6. Confirm message: Patient/Resident info is updated.

Receiving Facility: Updates Patient/Resident without Scanner

- 1. Click Update Patient/Resident > Multi Patient/Resident Update.
- 2. Verify your location.
- 3. Select Checking in Patients/Residents into this location.
- 4. Verify the patient or resident is correct.
- Click Select All OR Update for each patient or resident being received.
- 6. Click Check in Selected Patient/Resident.
- Confirm Message: Successfully updated {correct #} of Patient/ Resident.

For technical assistance call the Commerce Trainers at 518-473-1809

EMS MUTUAL AID AGREEMENT

THIS EMS MUTUAL AID AGREEMENT (the "Agreement") entered into the 1st day of March 2015 (the "Effective Date"), by and between LaSalle Ambulance, Inc. and Towns Ambulance Service, Inc., New York corporations (collectively, "Rural/Metro"), and Lancaster Volunteer Ambulance Corp ("LVAC").

RECITALS:

- A. Rural/Metro provides emergency and non-emergency ambulance transportation and related services.
- B. LVAC provides emergency and non-emergency ambulance transportation and related services.
- C. Rural/Metro and LVAC desire to enter into a mutual aid agreement for emergency ambulance transportation services.

NOW THEREFORE, in consideration of the mutual covenants and promises hereinafter set forth, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties agree as follows:

- Provision of Services. Rural/Metro agrees to provide LVAC with ambulance transportation services and LVAC agrees to provide Rural/Metro with ambulance transportation services in accordance with the description and definitions the parties have mutually agreed upon and detailed in <u>Exhibit A</u> and in accordance with the terms and conditions set forth in this Agreement.
- 2. <u>Certifications and Licenses</u>. Each party shall maintain all certifications and licenses as required by all Applicable Law to perform its obligations hereunder.
- 3. Qualifications to Participate in Federal and State Healthcare Programs. Both parties represent and warrant that (a) neither it nor any employee, agent, or independent contractor provided under this Agreement is excluded from participation under any Pederal Health Care Program for the provision of items or services for which payment may be made under a Pederal Health Care Program; (b) neither it nor any employee, agent or independent contractor provided under this Agreement has been convicted of a felony relating to health care fraud as defined under 42 U.S.C. §1320a-7(a)(3); and (c) no final adverse action, as such term is defined under 42 U.S.C. §1320(a)-7(c) has occurred or is pending or threatened against either party or to its knowledge against any employee, agent or independent contractor engaged to provide items or services under this Agreement (collectively "Exclusions/Adverse Actions"). During the term of this Agreement, each party agrees to notify the other party in writing of any Exclusions/Adverse Actions within ten (10) days of learning of any such Exclusions/Adverse Actions and provide the basis of the Exclusions/Adverse Actions. Each party acknowledges that the exclusion of any employee, agent or independent contractor from participation in the Federal Health Care Programs shall result in his or her immediate removal from the performance of duties and responsibilities for the other party under the terms of this Agreement. Each party acknowledges and agrees that any Exclusions/Adverse Actions of or against it or any employee, agent or independent contractor utilized, directly or indirectly, in the performance of this Agreement may serve as the basis of an immediate termination of this Agreement by the other party. For

purposes of this Agreement, a "Federal Health Care Program" shall mean any plan or program providing health care benefits, whether directly through insurance or otherwise, that is funded directly, in whole or part, by the United States Government (other than the Federal Employees Health Benefits Program), or any State health care program and shall include, by way of example, the Medicare and Medicaid programs. LVAC acknowledges that it has received copies of Rural/Metro's Code of Ethics and Business Conduct and Anti-Kickback Statute Policies.

- 4. <u>Insurance</u>. Each party shall maintain at all applicable times, at its own expense, comprehensive general liability, professional liability and automobile liability insurance.
- 5. Ownership of Records and Confidential Information. In addition to Protected Health Information, as defined by the Health Insurance Portability and Accountability Act of 1996 (HIPAA") and the Health Information Technology for Economic and Clinical Health Act of 2009 ("HITECH Act"), during the course of performing this Agreement, each party may from time to time receive confidential information about the other including but not limited to information about the party's customers, patients, patient records, practices, procedures, strategies, organization, financial and other related information. Neither party shall use or disclose any such confidential information for any purpose other than the limited purpose of performing its obligations under this Agreement, without the prior express written permission of the supplying party. All documents and records prepared, maintained, handled or otherwise related to Rural/Metro's performance of services hereunder are and shall be the property of Rural/Metro. Rural/Metro's copyrighted materials and procedures shall be and remain the sole property of Rural/Metro. If a party is served with a subpoena or other legal process concerning confidential information of the other party, that party shall immediately (not more than 48 hours after the receipt) notify the supplying party and shall cooperate with it in any lawful effort to contest the legal validity of such process the supplying party may wish to pursue.
- 6. Availability of Information. During the term of this Agreement and pursuant to any record retention law or regulation either party is subject to, each party shall make available upon written request of the other, to the Secretary of the Department of Health and Human Services, or to the Comptroller General of the United States, or of any duly authorized representatives of any government agency, this Agreement and the books, documents and records of the party that are necessary to certify the nature and extent of the costs of this Agreement and/or compliance with the law.

7. Warranties and Representations.

a) Rural/Metro warrants and represents (i) that it shall perform its services in accordance with industry standards; (ii) that to the best of its knowledge all goods and services reflected in its billing have been furnished to such patient; and (iii) it shall perform all its obligations and maintain all records and patient information used for the performance of services under this Agreement in compliance with all Applicable Law. "Applicable Law" shall include all federal, state and local laws, statutes, regulations, codes, ordinances, rules and /or Executive Orders, as amended, including but not limited to the Fair Debt Collection Practices Act, 15 U.S.C. §§ 1601 et seq., as amended, any applicable state Consumer Protection laws, as amended, the Bankruptcy Code, 11 U.S.C. §§ 101 et seq., as amended, and HIPAA, 42 U.S.C. §§ 1320d through d-8, as amended, and the HITECH Act, 45 CFR Parts 160, 162 and 164.

v3 08/10 2

- b) Each party represents and warrants to the other that (i) it has the right to enter into this Agreement, to grant the rights granted in this Agreement and to perform fully all of the services and obligations contemplated by this Agreement; (ii) all necessary laws, consents, resolutions, and corporate/political actions have duly authorized the execution and performance of this Agreement, and this Agreement constitutes a valid and enforceable obligation of each of the parties; (iii) the person entering into this Agreement is authorized to sign this Agreement on behalf of the party; and, (iv) the parties have reviewed this Agreement with their respective legal counsel to the party's satisfaction or voluntarily waived their right to do so. The parties acknowledge that HIPAA and the HITECH Act apply to the activities described in this Agreement, and that both parties are "covered entities" as that term is used in HIPAA. In that regard, the parties acknowledge and warrant to each other that their respective activities undertaken pursuant to this Agreement shall conform to HIPAA and the HITECH Act no later than the effective date of each such requirement.
- c) LVAC warrants and represents (i) that it shall perform its services in accordance with industry standards; and (ii) that to the best of its knowledge all goods and services reflected in its billing have been furnished to patient; (iii) it shall perform all its obligations and maintain all records and patient information used for the performance of services under this Agreement in compliance with all Applicable Law. "Applicable Law" shall include all federal, state and local laws, statutes, regulations, codes, ordinances, rules and for Executive Orders, as amended, including but not limited to the Fair Debt Collection Practices Act, 15 U.S.C. §§ 1601 et seq., as amended, any applicable state Consumer Protection laws, as amended, the Bankruptcy Code, 11 U.S.C. §§ 101 e. seq., as amended, and HIPAA, 42 U.S.C. §§ 1320d through d-8, as amended, and the HITECH Act, 45 CFR Parts 160, 162 and 164.
- 8. Payment for Services. The party performing services hereunder shall have the right to bill Medicare, Medicaid, third party payers, or the patient, including any co-payments or deductibles, for payment of the services, at its usual and customary rates. The parties shall use their best efforts to assist each other in obtaining patient and/or third party billing information.
- 10. Compliance with Anti-Kickback Statute. Each party shall comply with the Federal Health Care Programs' Anti-Kickback Statute (42 U.S.C. § 1320a-7b) and any applicable regulations promulgated thereunder. The parties further recognize that this Agreement shall be subject to the amendments of the Anti-Kickback Statute or any of its applicable regulations. In the event any applicable provisions of the Anti-Kickback Statute or its regulations invalidate, or are otherwise inconsistent with the terms of this Agreement, or would cause one or both of the parties to be in violation of the law, the parties shall exercise their best efforts to accommodate the terms and intent of this Agreement to the greatest extent possible consistent with the requirements of the Statute and its applicable regulations.
- 11. <u>Fair Market Value</u>. This Agreement has been negotiated at arms length and in good faith by the parties. Nothing contained in this Agreement, including any compensation paid or payable, is intended or shall be construed: (i) to require, influence or otherwise induce or solicit either party regarding referrals of business or patients, or the recommending the ordering of any items or services of any kind whatsoever to the other party or any of its affiliates, or to any other person, or otherwise generate business between the parties to be reimbursed in whole or in part

v3 08/10 3

- by any Federal Health Care Program, or (ii) to interfere with a patient's right to choose his or her own health care provider.
- 12. Term and Termination. This Agreement is for an initial term of one (1) year, commencing as of the Effective Date. The Agreement shall automatically renew for additional one-year periods unless otherwise terminated as provided herein. In addition, either party may terminate this Agreement without cause at any time by giving the other party thirty (30) days' advance written notice of termination and either party may terminate this Agreement for cause for a breach of any term of this Agreement upon providing five (5) days advance written notice to the breaching party, setting forth the nature of the breach, if the party receiving such notice does not cure the breach within the five (5) day period.
- 13. <u>Regulatory Changes.</u> Rural/Metro reserves the right to modify this Agreement, upon thirty (30) days notice to LVAC in the event any Applicable Law or government policy or program change is passed or adopted effecting Rural/Metro's rates and/or obligations.
- 14. Compliance with Applicable Law. Both parties agree to be in full compliance with all Applicable Law related to this Agreement and shall immediately notify the non-breaching party in the event it has failed to comply with this Section. In such an event, the non-breaching party may immediately terminate this Agreement. "Applicable Law" shall include all federal, state and local laws, statutes, regulations, codes, ordinances, rules and/or Executive Orders, as amended, applicable to the services and/or obligations of the parties hereunder.
- 15. Agreement to Meet. Both parties agree to meet with representatives of the other party upon request on a regular basis at mutually acceptable times, to review services provided under this Agreement and related policies, procedures, and quality issues.
- Indemnification. Each party, its officers, directors, and employees ("Indemnitor") shall indemnify and hold harmless the other, its officers, directors, and employees, ("Indemnitee") for, from and against all costs, claims, losses, liabilities, penalties, fines, citations, expenses, forfeitures or other damages, including but not limited to settlements, defense costs, judgments, court costs, expert(s) fees and reasonable fees of attorneys, incident to, and which it may incur, become responsible for, or pay out as a result of death or bodily injury to any person, destruction or damage to any property, contamination of or adverse effects on the environment, or any violation of any Applicable Law, to the extent that such damage was caused by, in whole or in part, incident to or arose out of this Agreement and the Indemnitor's: (i) breach of this Agreement; or (ii) negligent or willful act(s) or omission(s); (iii) violation of Applicable Law; or (iv) any employment, worker's compensation or other related claim by Indemnitor's employees, agents or subcontractors. Nothing in this section shall limit any right to contribution or other allocation of fault between the parties as determined by a court of competent jurisdiction and as permitted by all Applicable Law.
- 17. EXCLUSION OF CERTAIN DAMAGES. NOTWITHSTANDING ANY PROVISION IN THIS AGREEMENT TO THE CONTRARY, IN NO EVENT SHALL EITHER PARTY, ITS AFFILIATES OR ANY OF THEIR RESPECTIVE DIRECTORS, OFFICERS, MEMBERS, SHAREHOLDERS, EMPLOYEES, AGENTS OR SUBCONTRACTORS BE LIABLE TO THE OTHER PARTY FOR LOST PROFITS, SPECIAL, CONSEQUENTIAL, INCIDENTAL, OR PUNITIVE DAMAGES, REGARDLESS OF THE BASIS OF THE CLAIM, WHETHER IN CONTRACT, TORT, STRICT LIABILITY, OR OTHER LEGAL

v3 08/10 A

OR EQUITABLE THEORY, WHETHER OR NOT THE PARTY HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES.

- 18. <u>Waiver</u>. The failure by either party to insist on strict performance by the other party of any provision of this Agreement shall not be a waiver of any subsequent breach or default of any provision of this Agreement.
- 19. Independent Contractor. Each party is an independent contractor and nothing in this Agreement shall be construed as creating an employment relationship, agency, partnership, or joint venture between the parties. Each party shall control and direct the methods by which it performs its responsibilities hereunder. Except as provided herein, neither party is authorized to act on behalf of the other in any other matter whatsoever. In the event of medical necessity, either party may be requested to assist the requesting party in the continued medical care medically necessary for the care of the patient by accompanying the patient during transportation. Under no circumstances shall either party's employee be considered an employee of the other.
- 20. <u>Notices</u>. Any notice required or permitted to be given pursuant to any provisions of this Agreement shall be given in writing, and deposited with the United States Postal Service, postage pre-paid, registered or certified mail, return receipt requested, or by a nationally recognized overnight courier service, addressed as follows:

To Rural/Metro:	To LVAC:
Rural/Metro Corporation	
8465 N. Pima Road	
Scottsdale, Arizona 85258	
Attn: General Counsel	
With a copy to:	
Rural/Metro Medical Services	
481 William L. Gaiter Pkwy	
Ruffalo NY 14215	

Either party may change the notification addresses listed above with proper written notice.

- 21. Execution by Facsimile: Delivery of Original Signed Agreement. This Agreement may be executed by facsimile, and shall be deemed effectively executed upon the receipt by both parties hereto of the signature page of this Agreement duly executed by the other party. Each party to this Agreement agrees to deliver two original inked and signed Agreements within two days of faxing the executed signature page. This Agreement may be executed in several counterparts, each of which shall be an original, but all of which shall constitute one and the same instrument.
- 22. <u>Legal Fees</u>. In the event either party brings any action for any relief, declaratory or otherwise, arising out of this Agreement, or on account of any breach or default hereof, or to enforce the

v3 08/10 5

Attn: General Manager

Dispute Resolution section, the prevailing party shall be entitled to receive from the other party reasonable attorneys' fees, costs, and expenses.

- 23. <u>Publicity Provision.</u> Neither party shall use any trademarks, service marks, visual product representations, trade names, logos or other commercial or product designations of the other party, or disclose such without said party's express prior written consent. In particular, neither party shall identify or make reference to the other party in any advertising or other promotional modality regardless of its form without explicit prior written consent from said party.
- 24. <u>IP Provision</u>. Nothing in this Agreement is intended to grant a license or any rights of any nature whatsoever to Rural/Metro's intellectual property which may include but is not limited to its any of its patents, mask work rights, trademarks, trade names, service marks, logos, copyrights, derivatives, software or any other intellectual property rights of Rural/Metro. In addition the same would pertain to LVAC.
- 25. Governing Law. This Agreement shall be subject to and governed according to the laws of the State of New York, regardless of whether either party is or may become a resident of another state. The parties agree that the venue and jurisdiction shall be exclusively in the state and federal courts located in the County of Erie in the State of New York.
- Assignment. Neither party may assign its rights or obligations under this Agreement to a third party without the prior written consent of the other party, which shall not be unreasonably withheld, and any attempted assignment without such consent shall be null and void. Notwithstanding the above, Rural/Metro may assign or subcontract its obligations under this Agreement to its affiliates and/or subsidiaries. This Agreement shall be binding upon and for the sole benefit of the parties hereto and their respective successors and permitted assigns.
- 27. Severability. If any portion or portions of this Agreement shall be for any reason invalid or unenforceable, the remaining portion(s) shall be valid and enforceable and carried into effect unless to do so would clearly violate the present legal and valid intention of the parties hereto.
- 28. <u>Headings</u>. The headings used in this Agreement are for convenience only and do not limit the contents of this Agreement.
- 29. <u>Variations of Pronouns</u>. All pronouns and variations thereof will be deemed to refer to the masculine, feminine, or neuter, singular or plural, as the identity of a person, persons, or entity may require.
- 30. <u>Force Majeure</u>. Either party shall be excused for failures and delays in performance of its respective obligations under this Agreement due to any cause beyond its control and without fault, including without limitation, any act of God, war, riot or insurrection, law or regulation, strike, flood, fire, terrorism, explosion or inability due to any of the aforementioned causes to obtain labor, materials, roadways or facilities. In addition to the above, Rural/Metro shall be excused for failures and delays in performance of its obligations under this Agreement due to adverse weather conditions, natural physical barriers, such as mountains, hills or washes, traffic conditions, natural disasters and/or other limitations of access to the person requiring Services. Such conditions may impede or effect or block Rural/Metro's efforts to provide Services and/or ability to utilize some or all of its Services' equipment. Nevertheless, each party shall use its

v3 08/10 6

best efforts to avoid or remove such causes and to continue performance whenever such causes are removed, and shall notify the other party of the problem.

- No Duty to Respond. Although each party agrees to use its best efforts to respond to requests for mutual aid assistance from the other party, nothing herein shall be interpreted as imposing any duty or obligation to respond to any request for mutual aid. The determination to respond to a request for mutual aid shall be made solely by the party being requested to provide mutual aid, and shall be based upon its own evaluation of the circumstances, its available resources and any other relevant factors at the time the request is received. The party receiving the request shall promptly notify the requesting party as to whether it will and can respond. If the party can and will respond, it will provide the requesting party with an estimated time of arrival on scene. Neither party is in any way liable to the other nor to any other person, firm or corporation for giving or failing to give the mutual aid requested.
- 32. <u>Survival</u>. Any provisions of this Agreement creating obligations extending beyond the term of this Agreement shall survive the expiration or termination of this Agreement, regardless of the reason for such termination.
- 33. <u>Amendments.</u> Any amendments to this Agreement shall be effective only if in writing and signed by authorized representatives of both parties.
- 34. <u>Authorization for Agreement</u>. All necessary laws, resolutions, and corporate actions have duly authorized the execution and performance of this Agreement, and this Agreement constitutes the valid and enforceable obligations of the parties in accordance with its terms.
- 35. <u>Entire Agreement</u>. This Agreement constitutes the entire agreement and understanding between the parties with respect to the subject matter hereof and supersedes any previous agreements or understandings, whether oral or written.
- 36. No Third Party Beneficiary. Neither party intends in any manner whatsoever to create an interest or beneficiary in a third party.
- 37. <u>Exhibits.</u> All Exhibits referenced herein are incorporated into this Agreement in their entirety. Agreement when used throughout this Agreement shall include all referenced Exhibits.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their authorized representatives on the day and year first above written.

RURAL/METRO	AGENCY
TORUSTNIASTA TO	AGENCI

LaSalle Ambulance Inc.
Towns Ambulance Service. Inc.

By: Mark Lashley
Title: Division President

Lancaster Volunteer Ambulance Corp

By: Chesten Popicikowski Title: <u>President 1000-LVAC</u>

EXHIBIT A

Description of Services includes but are not limited to:

Rural/Metro shall provide mutual aid emergency and non-emergency ambulance transportation services. LVAC shall provide mutual aid emergency and non-emergency ambulance transportation services.

Each party's communication center shall have procedures for responding to a request for mutual aid. The requesting party shall specify the nature of the assistance requested, including the necessary units and the level of care. Upon receiving a request from the requesting party for mutual aid, the other party shall immediately evaluate whether it is able to respond to such request and shall immediately notify the requesting party as to whether it will respond.

When responding to requests for mutual aid from the requesting party, the responding party shall work under the direction of the authorized representative of the requesting party directing the medical emergency.

The requesting party shall be the sole judge of how much assistance shall be requested, and the other party providing the assistance shall then be the sole judge of how much of the requested assistance it shall furnish in any given instance.

It is agreed by the parties that requests for assistance shall only be made when the following circumstances exist:

- a. No other ambulance is available for appropriate response within the service area in which the patient is located, or
- b. A life threatening circumstance exists in which the invoking of a mutual aid response will be in the best interest of the patient(s) when no other providers are available or when an unreasonable response time would result.

Both parties agree that once the Communications center for the assisting company accepts the request for mutual aid that assisting company will complete the call and will not be cancelled because the requesting company resource has become available after assignment.

Other Definitions:

- "LVAC" shall mean the ambulance service provider contracting with Rural/Metro for mutual aid emergency and non-emergency transportation services. The meaning of LVAC shall include its affiliates, employees, officers, directors, principals, agents, representatives, successors, assigns and subcontractors.
- 2. "Rural/Metro" shall include its employees, officers, directors, principals, agents, representatives, and subcontractors.
- 3. "Services" means the Description of Services set forth above which shall be covered for payment by LVAC or a third party and subject to this Agreement.

v3 08/10 g

4. The words "claim," "invoice," "bill," "billing," "charges" or any derivative thereof shall be interchangeable with each other and for the purposes of this Agreement have the same meaning.

v3 08/10 9

Letter of Agreement

between	nt is made ar	nd entered into	this day , wh		, 201 resides	, by and at
(hereinafter "principal addi	OBSERVER")	and Twin Ci	ty Ambulance	Corp., a	corporation	with its
	ress at 365	Fillmore Ave.,	Tonawanda,	New York	: 14150 (he	ereinafter

RECITALS:

WHEREAS, TCA is a corporation which provides emergent, non-emergent, and stand-by ambulance service in Erie and Niagara Counties in the State of New York; and

WHEREAS, OBSERVER is an individual who wishes to gain experience through exposure to emergency medical services and / or wishes to closely observe and become familiar with TCA operations; and

WHEREA, TCA wishes to afford OBSERVER the opportunity to accompany a TCA ambulance crew during the course of the ambulance crew's scheduled shift.

It is hereby agreed as follows:

- 1. Ride Along shall be defined as an OBSERVER accompanying a TCA ambulance crew in the field while the TCA ambulance crew goes about its duties during the course of its scheduled shift.
- 2. Nothing herein shall be construed in such a way as to obligate TCA to provide OBSERVER with the opportunity to Ride Along.
- 3. Nothing herein shall be construed to create an employment relationship between TCA and OBSERVER.
- 4. OBSERVER shall be and at all times remain an independent party. OBSERVER shall not be deemed at any time an employee or agent of TCA.
- 5. OBSERVER shall adhere to all rules set forth in this Agreement and all requirements set forth by TCA.
- 6. TCA shall, prior to permitting OBSERVER to Ride Along, provide OBSERVER with training on HIPAA Privacy Practices, OSHA and Bloodborne Pathogens Safety, and any / all other applicable topics as deemed necessary by TCA. That

/TCA Observation Agreement Page 1 of 3

- training shall be documented as part of this Agreement. OBSERVER may not Ride Along until required training is completed and documented.
- 7. OBSERVER agrees to keep confidential all personal health information (PHI), personal identifying information (PII), and all other information protected by applicable statute or law with which OBSERVER comes into contact during the course of his or her Ride Along.
- 8. OBSERVER agrees to report to the location to which he or she is instructed to report at or before the time he or she is scheduled to report.
- 9. OBSERVER agrees to accompany the TCA ambulance crew to which it is assigned for the duration of that crew's scheduled shift.
- 10. OBSERVER acknowledges that the nature of TCA's operation is such that TCA is unable to guarantee that OBSERVER will be able to depart from his or her shift at the scheduled shift end time. TCA shall make best efforts to ensure OBSERVER is able to depart at the scheduled shift end time.
- 11. OBSERVER agrees to maintain a neat, professional appearance at all times during his or her Ride Along. Unless otherwise instructed by TCA, OBSERVER agrees to wear black boots / shoes, black pants, and a white, collared shirt which is free of printing and design. OBSERVER may wear outerwear as appropriate for the season, provided TCA approves the outerwear prior to the Ride Along.
- 12. OBSERVER shall not engage in patient care operations during his or her Ride Along.
- 13. OBSERVER shall not engage in patient movement operations during his or her Ride Along.
- 14. OBSERVER shall not operate a TCA vehicle during his or her Ride Along.
- 15. OBSERVER acknowledges that his or her conduct reflects on him or her, TCA, and the EMS community. OBSERVER agrees to conduct himself or herself in a professional, appropriate manner at all times during his or her Ride Along.
- 16.TCA may, at its option, terminate OBSERVER's Ride Along at any time and for any reason.
- 17. OBSERVER recognizes that emergency services, by its nature, is an unpredictable profession. OBSERVER further recognizes that he or she may be exposed to hazards and risks with which he or she would not normally come into contact as a member of the general public. OBSERVER agrees to abide by all instructions,

regulations, policies, procedures, practices, laws, and standards to ensure to the extent possible his or her own safety. OBSERVER further recognizes that, because TCA does not control the environment in which it operates, TCA is unable to guarantee OBSERVER's safety during the course of his or her Ride Along.

40	Tre		٠	
ı×	110	13 T	m	œ
			44.5	64

HIPAA

Date Completed:

TCA Instructor:

OSHA

ADSPONDO.

Date Completed:

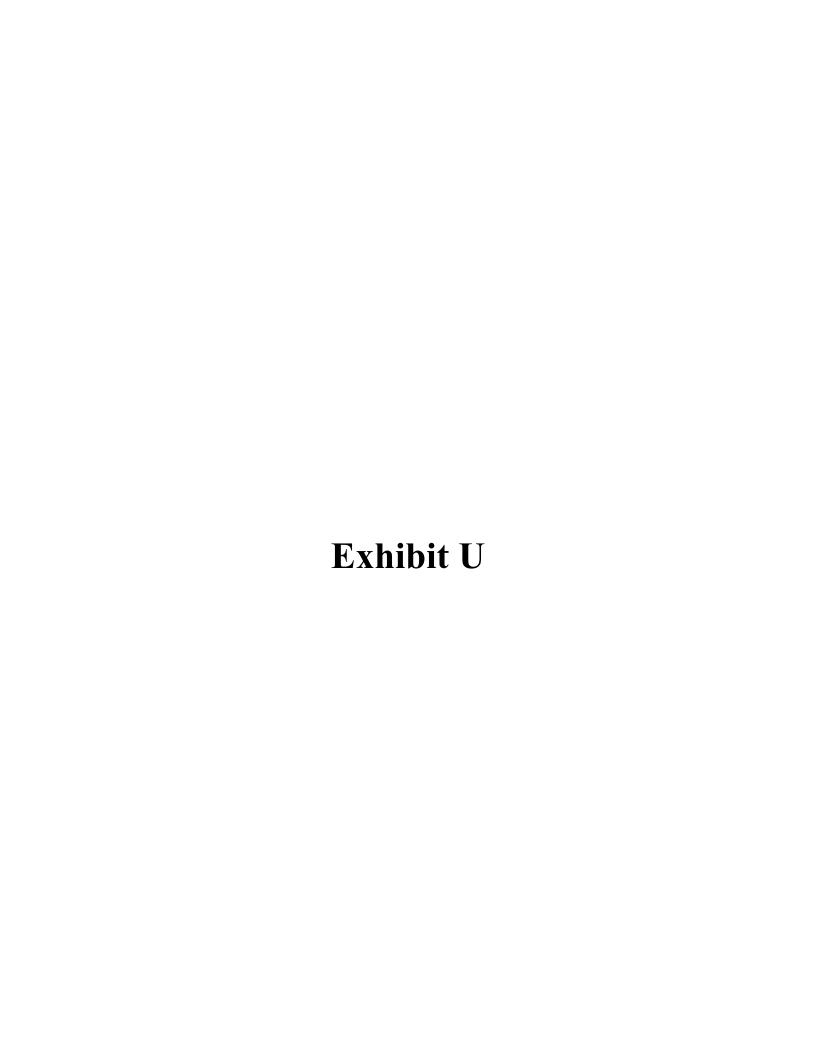
TCA Instructor:

Document any other training on the last page of this Agreement. Include with that note the date on which the training was completed and the instructor for that training.

- 19.OBSERVER shall schedule his or her Ride Along with TCA's scheduling coordinator. TCA's scheduling coordinator can be reached by phone at (716) 692-2342 ext. 125 or by e-mail at scheduling@tcaeme.com.
- 20. In the event OBSERVER must cancel his or her Ride Along at a time other than during business hours, OBSERVER shall contact TCA Dispatch at (716) 692-2342 and inform TCA's Dispatcher that OBSERVER is unable to report for his or her scheduled Ride Along.

OJJG.	mit a mit.	
Ву:		
-	Print OBSERVER Name	
TCA:		
Ву:		
•	Print TCA Manager Name	
its	Print IVIA Manager (Vala	

/TCA Observation Agreement Page 3 of 3



Medical Director Verification

Please identify the physician providing Quality Assurance oversight to your individual agency. If your agency provides Defibrillation, Epi-Pen, Blood Glucometry, Albuterol or Advance Life Support (ALS), you must have specific approval from your Regional EMS Council's Medical Advisory Committee (REMAC) and oversight by a NY state licensed physician. If you change your level of care to a higher ALS level, you must provide the NYS DOH Bureau of EMS a copy of your REMAC's written approval notice.

If your service wishes to change to a lower level of care, provide written notice of the change and the level of care to be provided, and the effective date of implementation, to your REMAC with a copy to the NYS DOH Bureau of EMS.

If your agency has more than one Medical Director, please use copies of this verification and indicate which of your operations or REMAC approvals apply to the oversight provided by each physician. Please send this form to your DOH EMS Central Office for filing with your service records.

Defibrillation / P.	AD Epi Autoinject	Albuterol	Blood Glucometry	Naloxone
СРАР	Check and Inject	12 Lead	Ambulance Transfusion Service (AT	' 5)
EMT Level of Care	AEMT Level of Care	Critical Care Level of Care	Paramedic Level of Care	Controlled Substances (BNE License on File)
THE CONTRACTOR OF THE CONTRACT				
Agency Name	Town of Alden EMS			
Agency Code Number	6259	Agency Type: Ambulance	ALSFR BLSFR	
Agency CEO	Richard Savage, Town	Supervisor		
Medical Director	Joseph Bart, DO, FAC	EP		
	Name 258856			
	NYS Physician's License Number			
Ambulance/ALSFR	Agency Controlled Substance Lice	nse # if Applicable: 03C —		
Ambulance/ALSFR	Agency Controlled Substance Licer	se Expiration Date:		
Quality Assurance/	'Quality Improvement progra		ncy. I am responsible for oversi s medical oversight on a regular cal care.	
	applicable State and Region concerning the level of care p		Committee treatment protocols,	policies and applicable
If the service I pro Provide Public Acco	vide oversight to is not gent ess Defibrillation (DOK 4.735)	fied EMS agency and provides A) and a completed Collaborative	ED level care, the service has fi e Agreement with its Regional E	led a Notice of Intent to MS Council.
Medical Direc	Signature	5/11/18		
	Date of Signature	7/1/10		

Title: Quality Assurance	Quality Improvement (QA/QI)	Section: 2 - Ger Number: 2.22	neral	
Author: J.Snaza Effective: 1 Jan 2017		Superd	cedes: NEW	Page 1 of 4
Approval: President	Approval: Director of Operati	ons	Revised:	•
Chester Popiolkowski	Timothy P. Marshall			

PURPOSE:

Quality Assurance/Quality Improvement (QA/QI) means the process, by which an individual/organization analyzes their job, service or product, collects data, analyzes for trends, implements improvement and then reassesses on an ongoing basis in order to be and demonstrate that they are always getting better.

SCOPE:

The LVAC has a strong commitment in continuously improving the quality of the patient care delivered by the LVAC. It is the policy of The LVAC to monitor the delivery of health care through QA/QI activities, which include weekly and monthly monitoring, and review of data.

POLICY:

All QA/QI records shall be maintained for a period of 2 years. The Executive Board shall designate a QA/QI committee. The designated QA/QI committee shall consist of three (3) individuals. Two (2) shall be current active members that are non-management field personnel with the third member being the Associate Medical Director. The committee shall be designated to participate in the review of Patient Care Reports (PCR's) for the LVAC. The President or Director of Operations shall act as a facilitator to this peer panel.

- 1) QA/QI Committee will perform two annual QA/QI projects that may include protocol and policy reviews.
- 2) Committee requirements:
 - a. In addition to any specific requirements instituted, the Committee shall identify trends associated with the delivery of care.
 - b. These trends shall be reported to Operations for evaluation.
 - c. It is the responsibility of the QA/QI members to attend and participate in Regional Committee meetings.
 - d. QA/QI Reports will be developed on a quarterly basis and presented at the Operations Staff meeting.
- 3) Release of Information:
 - a. Information (QA/QI data), analysis, findings, recommendations, conclusions and actions developed by or for performing QA/QI assessment or similar functions will not be available to unauthorized persons or organizations, or used for other than intended purposes as allowed for under state and federal law.

The basic steps in a quality assurance program are:

- Selecting a subject for study, which includes an operational definition of the condition or procedure under study and a definition of patients to be included;
- Developing criteria and standards, defining acceptable levels of quality;
- Collecting data;
- Comparing data to criteria and standards in order to identify deficiencies and areas of excellence;
- Determining causes of deficiencies and taking corrective action, including:

Title: Quality Assurance	/Quality Improvement (QA/QI)	Section: 2 - Ger Number: 2.22	neral	
Author: J.Snaza Effective: 1 Jan 2017		Super	cedes: NEW	Page 2 of 4
Approval: President	Approval: Director of Operati	ons	Revised:	
Chester Popiolkowski	Timothy P. Marshall			

- Determining who or what is expected to change;
- Determining who is responsible for implementing action;
- Determining what action is appropriate, and;
- Determining when it is expected to occur.

A successful Quality Improvement program requires the willing cooperation of all LVAC members. It must recognize their common needs for education, structured feedback, professionalism, mutual respect, and confidentiality of all quality improvement activities.

The QA/QI Committee shall:

- Conduct meetings on a regular basis
- Be responsible for reviewing selected PCRs for accuracy, completeness, and appropriateness of care as soon as possible after each call, but at least once a week.
- Review immediately all patient care related Incident Reports, and direct any required immediate action to the appropriate LVAC officer
- Take any immediate action required in consultation with the LVAC Board of Directors.
- Review all patient/family written comments as soon as they are received. Refer all
 comments to the crews involved. Refer any substantive negative comments or
 notations of problems immediately to the Director of Operations and President and
 medical director.
- At least annually review the LVAC SOGs and recommend any changes to the membership and officers.
- At least annually in November or December review the appropriateness and timeliness of the monthly in-service education programs as related to identified problems, and suggest a schedule of proposed in-service programs for the following year to the Operations Dept.
- Regularly review the appropriateness and adequacy of equipment and make recommendations for any upgrades or additional equipment needed. Assure that ambulance supplies and equipment meets or exceeds the requirements of Part 800 of the NYS EMS Code.
- Cooperate with the regional QI/Medical Advisory Committee/s and provide any information to the regional program as may be necessary or requested.
- Respond to any inquiries from other EMS services concerning performance reviews of current or former LVAC members.

QA/QI COMMITTEE:

LVAC agrees to participate with the Erie County Medical Center's Quality Improvement Committee for the purpose of planned and systematic monitoring of and enhancing the quality and appropriateness of patient care, clinical performance review, and administrative coordination and support activities of the service in regard to quality issues. The program will work to eliminate the causes of identified deficiencies by working toward resolving identified problems, improving EMS activities related to patient care, and reinforcing and enhancing positive attitudes, behaviors and practices of the LVAC and its members.

Title: Quality Assurance/Quality Improvement (QA/QI)					ction: 2 - Genera Imber: 2.22	al
Author: J.Snaza	Effect	tive: 1 Jan 2017 Super		ced	les: NEW	Page 3 of 4
Approval: President	•	Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

The LVAC will also actively participate in the Regional Quality Improvement program.

The following are the goals of participation in the Quality Improvement Committee:

- Recognition and acknowledgment of examples of excellent patient care or other components of service organization
- Identification of actual or potential problems concerning patient care and clinical performance;
- Assessment of the cause and scope of problems identified;
- Development and recommendation of proposed courses of action to address the problems identified
- Use of information gathered regarding problems identified, whenever service policies and procedures regarding patient care and support activities are revised;
- Implementation of actions necessary to correct the identified problems;
- Monitoring and evaluation of actions taken and the implementation of remedial action to ensure effectiveness;
- Referral to the regional medical advisory committee and the regional medical director or his/her designee, problems which have been identified by the agency but are beyond the agency's authority or ability to correct;
- Documentation of all measures taken pursuant to this QA/QI program.

The LVAC agrees that the following documents and parameters may be reviewed by the LVAC QA/QI Committee and may be furnished to the MEDICAL DIRECTOR:

- Letters of commendation and complaints or grievances raised by patients, their families, and other concerned parties;
- Recommendations received from hospitals to which the LVAC regularly transports patients;
- All incident reports
- PCRs as requested
- Standard Operating Procedures

The LVAC agrees that certain specific parameters regarding LVAC practice and the QA/QI committee may review performance periodically. These parameters include:

- Accuracy and completeness of the PCR
- Timeliness of response (measured from the time of call received to time on scene), including any communication and/or dispatch problems
- Completeness of patient assessment
- Appropriateness of care based on patient assessment, including evaluation of compliance with all appropriate protocols
- Appropriateness of time spent in patient care on scene
- Emergency Department diagnosis and outcome in selected cases, with the assistance of hospital providers

Title: Quality Assurance/Quality Improvement (QA/QI)					ction: 2 - Genera Imber: 2.22	al
Author: J.Snaza	Effective: 1 Jan 2017 Supe		Super	ced	les: NEW	Page 4 of 4
Approval: President	•	Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- The credentials and performance of all persons providing emergency medical care on behalf of the LVAC
- This credential review will, at a minimum, include:
 - A review to assure that the member is appropriately certified by the N.Y.S.
 Department of Health;
 - A review of the in-service education activity of the member in light of compliance with LVAC requirements;
 - A review to assure that each ALS provider is currently authorized to practice at the advanced level within the regional ALS system.
- The performance review will include, at a minimum:
 - Review of any compliments or complaints received concerning the care provided by the member, from patients, hospitals, medical control facilities, agency or system medical directors, etc.
 - Review to determine whether any recommendations or significant adverse actions concerning the individual member have been taken by any other health care provider for whom the member provides care, by the DOH, or, if the member practices as an Advanced EMT, by the medical director (s) of the WREMS System, or region.

The LVAC agrees:

- That the QA/QI committee shall prepare contemporaneous minutes or records of all activities. All such reports shall maintain patient confidentiality.
- That the committee will generally meet every other month and that the minimum number of meetings per year shall be four (4).
- That the QA/QI committee may recommend to the President the appointment of member teams to resolve specific identified problems or develop other improvements.

Title: Index				Section Number		
Author: J.Snaza Effective: 1 Jan 2017		Super	cedes:	NEW	Page 1 of 4	
Approval: President		Approval: Director of Operation	ons	Rev	ised:	
Chester Popiolkowski		Timothy P. Marshall				

Section 1 -- Overview

- 1.01 Outline
- 1.02 Introduction
- 1.03 Revision to SOG's

Section 2 -- General

- Officer Responsibilities 2.01
- House Captain Responsibilities 2.02
- 2.03 Member Responsibilities
- 2.04 Standard of Conduct
- 2.05 Chain of Command
- 2.06 Dress Code
- 2.07 House Rules
- 2.08 Ride-along Program
- 2.09 Media Relations
- **Public Relations** 2.10
- 2.11 Patient Confidentiality HIPPA
- 2.12 **Disciplinary Action**
- 2.13 Grievance
- 2.14 **Drug-Free Policy**
- Administrative Leave Policy 2.15
- 2.16 **Guidelines for Probationary Members**
- 2.17 Insurance – Worker's Compensation PSS
- Insurance Worker's Compensation 2.18
- 2.19 Insurance
- 2.20 **Funeral Service Practices**

2.21

2.22 Personnel File - All Members

2.23

2.24 2.25

2.26

2.27

2.28 CQI/CQA

2.29 2.30

2.31 Vehicle Maintenance

2.32 2.33

2.34

2.35 **Annual Physical Certification**

Firearms & Explosives 2.36

2.37

2.38 Sleeping

2.39

Title: Index			Section: Number:	
Author: J.Snaza Effective: 1 Jan 2017		Super	cedes: NEW	Page 2 of 4
Approval: President	Approval: Director of Operat	ions	Revised:	
Chester Popiolkowski	Timothy P. Marshall			

Section 3 -- Operations

- 3.01 Incident Management Systems
- 3.02 Emergency Responses
- 3.03 Motor Vehicle Crashes
- 3.04
- 3.05 Structural Fire Incidents
- 3.06 Incident Rehabilitation
- 3.07 Inter-hospital Transfers
- 3.08 Equipment Exchange
- 3.09
- 3.10 Stand-Bys
- 3.11 Public Service
- 3.12 Vehicle Operations
- 3.13 EASV Operations
- 3.14 Hospital Status
- 3.15 DOA Confirmation
- 3.16 Critical Incident Stress Management
- 3.17 Direct Response
- 3.18 Emergency Lights Green Lights
- 3.19 Emergency Lights Red Lights
- 3.20 Injuries and Accidents
- 3.21 Speedway Operations
- 3.22 Mechanical Failure
- 3.23 Fueling Ambulances and ASEV's
- 3.24
- 3.25 Supplies Medical Supplies
- 3.26
- 3.27 Qualifications to ride vehicles
- 3.28 Do Not Resuscitate Orders
- 3.29 Mass Casualty Incidents
- 3.30 Patient Destination Determination
- 3.31 Reporting Requirements Suspected Child Abuse

3.32 3.33

- 3.34 Refusal of Transport Adults and Minor
- 3.35
- 3.36 Psychiatric Emergencies
- 3.37 Hazardous Materials Incidents
- 3.38 Crime Scene Management
- 3.39 Helicopter Operations

3.40

3.41 Notification of Receiving Hospital

3.42

- 3.43 Seat Restraints
- 3.44 Patient Belongings
- 3.45 Recall of Covering EMS Units
- 3.46 Use of Lights & Sirens
- 3.47 Non-Emergency Responses

Title: Index					ction: ımber:	
Author: J.Snaza	Effective: 1 Jan 2017		Supercedes: NEW		les: NEW	Page 3 of 4
Approval: President		Approval: Director of Operati	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				
•				·		

3.48 3.49 3.50 3.51 3.52 3.53 Intersection Practices 3.54 Backing 3.55 Vehicle control and right-of-way 3.56 3.57 3.58 Patient Care Chain of Command 3.59 Jail/Holding Cell Responses

3.603.61 School Responses

Section 4 -- Communications

4.01 Unit Identification

4.02

4.03 Radio Procedures

4.04 Dispatch Communications

4.05

4.06

4.07 Phone calls to Squad Room

4.08 MERS Radio System

4.09 Portable Radios

4.10

Section 5 -- Training

5.01 Requirements

5.02 Course and Training Reimbursement

5.03 Attendant Criteria

5.04 Driver Criteria

5.05 Ride-Along Program

5.06 ALS CME Requirements

Section 6 -- Infection Control

6.01 Infectious Disease Control Policy

Section 7 – Paid Support Staff

7.01

7.02

Section 8 – Specific Protocols, Policies and Procedures

8.01 Controlled Substance Policy

8.02 ALS Release

8.03 BLS Protocols

8.04 ALS Protocols

Title: Index					ction: mber:	
Author: J.Snaza Effective: 1 Jan 2017		Super	cede	es: NEW	Page 4 of 4	
Approval: President		Approval: Director of Operation			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

Appendix "A" - Points of Reference

- A-01 Approved Service Centers
- A-02 Approved Towing Agencies
- A-03 Personal Injury/Illness Investigation Repot
- A-13 Notice of Privacy Practices
- A-14 Decision Tree for the transport by EMS of Minors
- A-15 Driver Training Qualification Packet
- A-16 New Member Qualification Packet
- A-17 Head Attendant Qualification Packet
- A-18 Patient Information Sheet
- A-19 CQI Review Worksheet

Appendix "B" - FORMS

- B-04 Infectious Exposure Form
- B-05 Incident Exposure Record
- B-06 Annual Medical Statement of Personnel
- B-07 Problem Found Form
- B-08 Supply Request Form
- B-09 Request to Travel Form
- B-10 Travel Expense Request Form
- B-11 Check Request Form
- B-12 Incident Report
- B-20 Annual ALS Special Procedures Form
- B-21 Medical Command Authorization Form
- B-22 Form DEA-106
- B-23 Driver Health Evaluation Form
- B-24 Vehicle Accident/Loss Investigation Report

A Message from the Director of Operations ...

The Lancaster Volunteer Ambulance Corps recognizes the importance of providing our personnel with the necessary tools and resources to carry out responsibilities that support the Organization's Mission and Charter. This manual will help provide you with established Organization Operating Guidelines. As you become immersed in your position, no doubt you will find that you have questions concerning the operating guidelines. This manual has been developed to anticipate and help answer your questions. It is my hope that this will be a useful resource to you, and I welcome any recommendations you may have regarding the usefulness of this manual.

David Marrocco

I look forward to we	orking with you.
-	
	Director of Operations Lancaster Volunteer Ambulance Corps

DISCLAIMER

The information in this manual is intended to be general in nature and does include all details of policies, procedures and instructions. This manual is intended to provide supplemental guidance to the Lancaster Volunteer Ambulance Corps Bylaws and does not supersede established organization policies except where applicable to the Lancaster Volunteer Ambulance Corps' operations.

In accordance with the Lancaster Volunteer Ambulance Corps bylaws, this manual is not a contract or agreement of any kind. All personnel of the Lancaster Volunteer Ambulance Corps are free to terminate membership at any time, for any lawful reason, without cause or notice.

This manual details established policies and procedures to aid the Lancaster Volunteer Ambulance Corps. The guidelines contained herein apply to all Lancaster Volunteer Ambulance Corps personnel, are intended to be summaries and are not all-inclusive.

The Officers of the Lancaster Volunteer Ambulance Corps must manage the dayto-day activities and make policy decisions where there are, at times, no strict guidelines. Personnel are encouraged to bring ideas for new policies to the attention of an officer. Questions regarding specific policies and procedures should be directed to an officer.

It is solely the responsibility of the member or employee to read and become familiar with the contents of this manual. All personnel shall maintain this manual in an up-to-date fashion. If information in the individual's manual differs from the most current policy, the most current policy shall take precedence. All Lancaster Volunteer Ambulance Corps policies and procedures may be accessed electronically and are located on the organization's website.

The Operations Committee, in coordination with the Executive Board, may revise, rescind or override any of the provisions in this manual ay any time at their sole discretion.

Mission Statement

The mission of the Lancaster Volunteer Ambulance Corps shall be to provide twenty-four hour emergency response, medical care and transportation to the injured and ill, to provide the temporary first aid and basic life support required to transport those in need of more advanced treatment to an approved and capable facility.

It shall also be the mission of the Lancaster Volunteer Ambulance Corps to promote safety, to provide training in first aid, to provide or assist in projects to promote a healthier way of life and to create good fellowship among members of the association and its local communities.

Vision

The Lancaster Volunteer Ambulance Corps is comprised of motivated, dedicated and trained professionals providing exceptional emergency medical care for residents and visitors of the municipalities it serves both primarily and secondarily.

YEARLY REVIEW

This verifies that all policies, procedures, and guidelines contained herein have been Reviewed and approved by the Lancaster Volunteer Ambulance Corps Operations Committee and the Lancaster Volunteer Ambulance Corps Executive Board.

This review is conducted at a minimum once a year, or as deemed necessary by either group.

Reviewed:		
President	Date	
Director of Operations	Date	
Approved:		
President	Date	
Director of Operations	 Date	
Witnessed:		
Secretary	 Date	

Title: Introduction			ection: 1 - Ov umber: 1.05	verview
Author: J.Snaza Effective: 1 Jan 2017		Superce	des: NEW	Page 1 of 1
Approval: President	Approval: Director of Opera	tions	Revised:	
Chester Popiolkowski	Timothy P. Marshall			

- 1. Nothing in these Standard Operating Guidelines (SOG's) is to be construed as creating neither any rights to continued membership nor any cause of action against the LVAC, its Officers or members. These SOG's may be modified, amended, or canceled at any time by the Board of Directors.
- Violation of the By-laws or the Standard Operating Guidelines of the LVAC may be sufficient cause for suspension and/or investigation by the Director of Operations, and/or by the Board of Directors up to and including termination of membership.
- While it is the intent of the Officers that progressive discipline is practiced, one gross act of unacceptable conduct may be sufficient cause for termination of membership.
- 4. Any member charged with a felony or any crime involving moral turpitude shall immediately report the same to the Director of Operations and will be automatically suspended effective the time of arrest. LVAC property shall be returned to the Operations Department pending resolution of the charge. The Operations Department shall thereafter make a recommendation to the Board of Directors as to the member status.
- 5. Drivers must report any conviction constituting a moving violation to the Operations Department. Any driver charged with Driving Under the Influence or Reckless Driving shall not drive any LVAC vehicle pending resolution of the charge or action by the Operations Department. Drivers who have been convicted of moving violations may have their driving status reviewed and changed by the Operations Department.
- 6. Because incidents do not always fit into the fixed categories of Standard Operating Guidelines, all members are empowered to undertake courses of action they deem necessary to handle the incident, SOG's not withstanding, so long as those actions are within the scope of training and the NYS DOH guidelines:
 - Safety
 - Team-Based (with regard to 1st Responders, other agencies and members)
 - Attentive to Human Needs (of patient, family) (Customer Service)
 - Respectful (to patient, family, public, 1st Responders)
 - Customer Accountability (Can you face the patient and say you did your best?)
 - Appropriate (*medically*)
 - Reasonable (what would others with your training and experience do?)
 - Ethical (fair and honest in every way)
- 7. Nothing in this document supersedes rules and regulations governing EMS issued by the New York State Department of Health, Office of EMS, or policy and guidelines established by the County of Erie or any other agency with jurisdiction over the Lancaster Volunteer Ambulance Corps. This document does not supersede the Lancaster Volunteer Ambulance Corps' bylaws. These SOG's should not be considered as all-inclusive.

Title: Revisions to SOG's			Section: 1 - Overview Number: 1.03		
Author: J.Snaza Effective: 1 Jan 2017		Super	rcedes: NEW	Page 1 of 1	
Approval: President	<u>.</u>	Approval: Director of Operation	ions	Revised:	•
Chester Popiolkowski		Timothy P. Marshall			

PURPOSE:

SCOPE:

POLICY:

- 1. An up-to-date copy of these SOG's shall remain in the Dispatch Room.
- 2. Except in cases of emergency, proposed changes to these SOG's shall be posted in the Squad Room for a minimum of one month.
- 3. Proposed changes require approval of a majority vote by the Board of Directors.
- 4. Except in cases of emergency, changes to the SOG's take full effect in the month following the month of approval by the Board of Directors.
- 5. Section 7 and the Appendix are not applicable to this policy. These sections may be altered as deemed necessary by the Operations Department.
- 6. The Operations Department and the Executive Board shall review every policy annually.
- 7. The Director of Operations and the President shall sign a statement of review annually.
- 8. The Director of Operations and the President shall "SIGN-OFF" and "Date" all SOG's acknowledging their acceptance.
 - a. The date of "Sign-Off" shall reflect the "Effective Date".
 - b. Revisions shall reflect the date of acceptance by the Board of Directors.
- 9. Supercedes column shall reflect one of the following:
 - a. NEW: If the SOG has been created to address a specific issue and no other SOG addresses that issue.
 - b. Dated: The date shall reflect the previous Effective Date, with the date of change becoming the New Effective Date

Title: Officer Responsibilities			Section: 2 - General Number: 2.01		
Author: T. Marshall	thor: T. Marshall Effective: 1 Jan 2017		edes: NEW	Page 1 of 1	
Approval: President	Approval: Director of Oper	ations	Revised:	•	
Chester Popiolkowski	Timothy P. Marshall				

- 1. The Director of Operations, 1st, 2nd, and 3rd Assistant Directors of Operations are considered Line Officers.
- 2. The Director of Operations assumes the role and responsibilities as the Infectious Control Officer.
- 3. Line officers shall strive to assist shift supervisors and Crew Members in any way necessary to provide the highest quality service to the community.
- 4. Line officers shall endeavor to set the example in the following areas:
 - a. Quality service to the community
 - b. Training
 - c. Provision of Patient Care
 - d. Public Relations
 - e. Assistance to members
 - f. Fairness and discretion
 - g. Appearance
- 5. Line officers shall strive to resolve all complaints and problems in the following priority:
 - a. To correct system problems to insure the highest quality public service.
 - b. To correct individual behaviors.
 - <u>Note:</u> This does not mean that individuals may act with impunity -- it means that problem resolution and continuous quality improvement are of higher priority.
- 6. Members are encouraged to share their concerns, seek information, provide input, and resolve problems/issues through any Officer. Officers are expected to listen to member concerns, to encourage their input, and to seek resolution to their problems/issues.
- 7. Members with suggestions or ideas they feel would benefit the LVAC or public are encouraged to tell an officer about them. Line Officers are always looking for suggestions, ways to reduce costs or errors, and ways to benefit the LVAC, its members and the public that is served.
- 8. Line officers shall report all activities to the Board of Directors on a monthly basis.
- 9. Ensure that personnel who are injured or who are the operator of LVAC equipment that has been involved in a moving violation receives appropriate care and mandatory drug screens as defined in SOG #2.14, paragraph 6.
- 10. Handle all media inquiries in accordance with SOG #2.09.
- 11. To carry out the responsibilities set out herein the Operations Directors shall have the authority to suspend an on-duty member for the remainder of the shift, and direct the member to leave the premises.
- 12. All such actions shall seek consultation with the Director of Operations and/or President.

Title: Line Officer/Shift S	Supervisor		Section: 2 - General Number: 2.02		
Author: T. Marshall Effective: 1 Jan 2017		Superce	edes: NEW	Page 1 of 1	
Approval: President	Approval: Director of Opera	ntions	Revised:	·	
Chester Popiolkowski	Timothy P. Marshall				

The shift Line Officer and /or supervisor is responsible for, and has the authority to:

- 1. Insure that all trucks are cleaned, stocked, and ready for service.
- 2. Assign crew members as needed and coordinate the performance of crew responsibilities.
- 3. Review and assure crew familiarity with "Notices, New Protocols, and Memos."
- 4. Review and assure crew familiarity with "equipment placement, inspection, use and reservicing."
- 5. Ensure that any special incidents are documented.
- 6. Ensure all injuries are reported on the Special Incident Form and that the Director of Operations, Secretary and the President are notified of the potential for an insurance claim.
- 7. Ensure the Infection Control Officer is notified of any infectious disease exposure.
- 8. Ensure that probationary member checklists and evaluations are completed.
- 9. Ensure compliance with SOG's during his/her shift, and to document violations.

Title: Member Responsibilities			Section: 2 - General Number: 2.03		
Author: T. Marshall Effective: 1 Jan 2017		Supercedes: NEW Page 1		Page 1 of 1	
Approval: President	Approval: Director of Operati	ons	Revised:	•	
Chester Popiolkowski	Timothy P. Marshall				

Members are expected to:

- 1. Participate in crew duties as directed by the Line Officer/Shift Supervisior, including:
 - a. Wash trucks and clean interior as needed and weather permitting.
 - b. Police building for glasses, newspapers, blankets, etc., anp place items in their proper place.
 - c. Clean dishes and pots and pans and store properly.
 - d. Empty building trash.
 - e. Strip beds and place linen in soiled linen containers.
 - f. Restock paper goods in bathrooms as needed and leave bathrooms clean.
 - g. Conform to the by-laws and Standard Operating Guidelines (SOG's).
 - h. Act in accordance with posted Notices to All Members as well as Safety Committee and QA/QI Committee reports.
 - i. Act in accordance with Standards of Conduct set out in SOP #2.4.
 - j. Practice in accordance with the rules and regulations of the Operating Medical Director, New York State Department of Health and the WREMS protocol and standing orders.
- 2. File a Special Incident Report in the following circumstances:
 - a. Accident involving a squad vehicle or equipment.
 - b. Injury to a member
 - c. Exposure to infectious disease
 - d. Unusual delay in response
 - e. Found property
 - f. Violation of SOG's by another member within five days of the occurrence.
 - g. Any other event or situation, which is in need of resolution by the executive or operations officers.
- 3. A copy of the Special Incident Report shall be filed at least with the Director of Operations, and with such persons within the organization as may be appropriate given the nature of the problem.
- 4. In the event a member has a complaint against supervisory personnel, the report may be filed with the Director of Operations. In the event a member has a complaint against the Director of Operations, the report may be filed with the President.
- 5. Deliver any personal property acquired on a call to the member in charge of the call (or, upon return, to the Operations Dept) who shall attempt to return it to the owner or law enforcement official on the scene.
- 6. Return all LVAC issued property to the Operations Dept upon resignation, termination.or when requested by the Director of Operations

Title: Standard of Conduct				Section: 2 - General Number: 2.04			
Author: T. Marshall Effective: 1 Jan 2017		Supercedes: NEW Pag		Page 1 of	f 2		
Approval: President	Approval: Director of Operati		ons		Revised:		
Chester Popiolkowski		Timothy P. Marshall					

PURPOSE:

Whenever people gather together to achieve goals, some rules of conduct are needed to help everyone work together efficiently, effectively, and harmoniously. The purpose of these rules is not to restrict one's rights, but rather to be certain that each member understands what conduct is expected and necessary.

SCOPE:

Generally speaking, each person is expected to act in a mature and responsible way at all times. However, to avoid possible confusion, some of the more obvious unacceptable activities (but not all circumstances) are noted below. Occurrences of any of the following may result in disciplinary action:

POLICY:

- 1. Willful violation of an LVAC rule; any deliberate action that is extreme in nature and is obviously detrimental to the LVAC's efforts to operate.
- 2. Willful violation of safety rules, tampering with LVAC equipment or safety equipment.
- 3. Negligence or any careless action, which endangers the life or safety of another person.
- 4. Being intoxicated or under the influence of alcohol or controlled substance while on duty.
- 5. Unauthorized possession of dangerous or illegal firearms, weapons or explosives on LVAC property or while on duty.
- Engaging in criminal conduct or acts of violence or making threats of violence toward anyone on LVAC property or when representing the LVAC; fighting or provoking a fight on LVAC property, or negligent damage of property.
- 7. Insubordination or refusing to obey instructions properly issued by LVAC Officers or Shit Supervisor pertaining to your crew duties as well as refusal to help out on a special assignment.
- 8. Threatening, intimidating or coercing fellow members on or off the premises -- at any time; for any purpose.
- 9. Engaging in an act of sabotage; willfully or with gross negligence causing destruction or damage of squad property, or the property of fellow members or visitors in any manner.

Title: Standard of Conduct			Section: 2 - General Number: 2.04			
Author: T. Marshall	Effect	Effective: 1 Jan 2017		Supercedes: NEW		Page 2 of 2
Approval: President		Approval: Director of Operations			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- 10. Theft of LVAC property or the property of fellow members;
 - a. Unauthorized possession or removal of LVAC property, including documents (printed or digital), from the premises without prior permission.
 - b. Unauthorized use of LVAC equipment or property for personal reasons.
- 11. Dishonesty; willful falsification or misrepresentation on your application for membership or other LVAC records; alteration of LVAC records.
- 12. Breach of confidential, personnel or patient information.
- 13. Immoral conduct or indecency on LVAC property.
- 14. Any act of harassment, sexual, racial, or other.
- 15. Excessive absences or lateness (more than 3 per month)(P.S.S)
- 16. Abusive language toward any officer, member, civilian, patient or the public.
- 17. Indifference or rudeness towards a patient or fellow member; any disorderly/antagonistic conduct on LVAC premises.
- 18. Speeding or careless driving of an LVAC vehicle.
- 19. Failure to immediately report damage to, or an accident involving LVAC vehicles or equipment.
- 20. Failure to maintain a neat and clean appearance in conformance with the Dress Code established in SOP #2.6.

Title: Chain of Command	d		Section: 2 - General Number: 2.05		
Author: J.Snaza	Effective: 1 ajn 2017	Superd	rcedes: NEW Page 1 of		
Approval: President	Approval: Director of Operat	ions	Revised:		
Chester Popiolkowski	Timothy P. Marshall				

- 1. The chain of command is as follows:
 - a. Director of Operations
 - b. 1st Assistant Director of Operations
 - c. 2_{nd} Assistant Director of Operations
 - d. 3rd Assistant Director of Operations
 - e. Shift Supervisor
 - f. Head Attendant (Senior On-Duty Crew Member On-Scene)
- 2. The Board of Directors maintains authority within the confines of the LVAC.
- 3. Members not in the chain-of-command shall refrain from giving unauthorized orders or directions other than those orders permitted in case of emergcies.
- 4. All concerns with regard to squad operations, policy or problems on calls are to be handled as follows:
 - a. Members having a problem on a call will document the nature and report the same to the Head Attendant. The Head Attendant will report the matter to a line officer who will determine any necessary action.
 - b. Concerns over crew operations are to be discussed first with the Head Attendant. Should the Head Attendant be unable to resolve the concern(s) raised, or if the member is not satisfied with the resolution, the member should document the concern(s) and report the same to a line officer.
 - c. Members receiving questions from the public with regard to crew policy or procedure should refer the same to a line officer.

Title: Dress Code			Section: 2 - General Number: 2.06		
AuthorT. Marshall	Effective: 1 Jan 2017	Supercedes: NEW		Page 1 of 1	
Approval: President: Chester Popiolkowski	Approval: Director of Operati Timothy P. Marshall	ons	Revised:		

- 1. Anyone representing the Lancaster Volunteer Ambulance Corps is expected to present him or herself with a neat, clean and professional appearance.
- 2. All uniform clothing worn by LVAC members shall be neat and clean in appearance, free from obvious stains and wrinkles, free of rips, tears and holes and shall not be missing any required parts such as buttons, patches and accessories.
- 3. On-duty members shall wear an officially approved uniform consisting of the following: squad shirt, polo shirt, EMS pants or jump suit.
- 4. Based on the weather, a squad sweatshirt or jacket may be worn.
- 5. Members on duty are prohibited from wearing shorts, tank tops, t-shirts, sandals, flip-flops or clothing bearing insignia not of Lancaster Volunteer Ambulance Corps unless otherwise specified due to the nature of the event.
- 6. EMS Shorts shall only be approved for wear by designated Bicycle Patrol members and shall only be worn while performing as such during designated events.
- 7. Members not on duty but are at the Squad Room with the intent of running calls are encouraged to be dressed as if they are on duty.
- 8. No person shall wear jewelry that presents a safety risk. Earrings may be worn; however no large hoops or pendants are permitted.
- 9. Jump Suits may at the discretion of Director of Operations be issued to personnel who are assigned radios and who are capable of responding to Page Calls.
- 10. Personnel are not permitted to alter their uniform in any way. All uniform items shall be purchased and maintained to LVAC specification.

Title: House Rules				Section: 2 - General Number: 2.07		
Author: J.Snaza	Effective: 1 June 2005		Supercedes: NEW		Page 1 of 1	
Approval: President		Approval: Director of Operations		Revised:	•	
Chester Popiolkowski		Timothy P. Marshall				

PURPOSE:

To promote a clean healthy enviorment for all staff of Lancaster Ambulance.

SCOPE:

POLICY:

Keep Squad Room in a neat, clean and respectable manner.

Clean up after yourself.

Rinse off dishes, pots, pans, utensils and place them smartly in the dish washer.

Please clean any messes made.

Change linens as needed on bedding.

Report any deficiencies in maintence to leadership.

				Section: 2 - General Number: 2.09		
Author: J.Snaza Effective: 1 Jan 2017 Su		Super	ced	les: NEW	Page 1 of 1	
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

MEDIA INQUIRIES -- ON SCENE:

- 1. Personnel shall take no action to encourage or discourage the media in photographing or televising anything within their view at an incident or other incidents. No member shall knowingly and unnecessarily obstruct news media representatives in the performance of their duties; however, media representatives are neither implicitly nor expressly exempt from any state or federal or city or county ordinance. The LVAC is not an arbiter of good taste. Restrictions on the news media should not be based on a member's view of what constitutes an acceptable standard of journalism or news photography.
- 2. At extended or unusual incidents a Public Information Officer (PIO)(Director of Operations) should be established to assist news media representatives in covering the incident.
- 3. All news media inquiries shall be referred to the Incident Command (IC) or PIO only.
- 4. If a member of the press interferes with the operation, report the same to the Incident Commander or Safety Officer and let them handle it.
- 5. If you have a complaint about the performance or behavior of a member of the media, write down the details of the situation, and report the same to a Line Officer.

MEDIA INQUIRIES -- OTHER THAN ON SCENE:

- 1. All media inquiries shall be referred to a Line Officer, the President or the PIO.
- 2. The following information may be released:
 - a. Number of victims
 - b. Number of vehicles involved
 - c. Whether extrication or specialized rescue was performed
 - d. Number of squad members involved
 - e. Number and type of squad vehicles involved
 - f. Location (no residential addresses).
 - g. Assisting organizations
- 3. The following information may NOT be released:
 - a. Names or addresses of victims or others involved in an Incident
 - b. Opinions on calls (i.e., causes of accident, intoxication of driver, extent of injuries).
 - c. Anything regarding squad policies or procedures. These questions should be referred to the Director of Operations.

				Section: 2 - General Number: 2.10		
Author: J.Snaza	Effect	ive: 1 Jan 2017	Super	ced	es: NEW	Page 1 of 1
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- Members who receive a request for demonstration or speaker should obtain the name and telephone number of the caller, the nature and date of the event, and shall state that you will have the appropriate officer contact them, and then forward the information to the Operations Department.
- 2. Generally speaking, public relations events are for thanking and educating the public and to show them what their donations have been used for and how it benefits them.

DURING EVENTS:

- 1. The Corps members' attention should be directed to the members of the public. You should be the first to greet them when they approach and show interest in our organization.
- 2. The Corps members' should be highly conscious of his/her speech and behavior while in public.
- 3. A Corps member should not smoke or use other tobacco products while engaged in the event.
- 4. A Corps member should not use vulgar language or slang or act loud and boisterous.
- 5. It is inappropriate to discuss patient information and squad operational issues with the public and during events. Please refer these individuals to the Operations Department.
- 6. Wear the LVAC uniform.
- 7. When engaging the public, sunglasses are discouraged, so that you can talk eye-to-eye.
- 8. Your contact with an individual might be the only contact that citizen has with the LVAC, so make it a good one. Members of the public are usually genuinely interested in what LVAC does and they love to hear about it.

,				ction: 2 - Genera mber: 2.11	al	
Author: J.Snaza Effective: 1 Jan 2017 Sup			Super	rcede	es: NEW	Page 1 of 3
Approval: President		Approval: Director of Operations			Revised:	
Chester Popiolkowski	''					

HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT – HIPAA PUBLIC LAW 104-191 -- 1996

Law requires the LVAC, to provide several specific safeguards to our patients. The LVAC is further obligated to notify its patients as to what those safeguards are. To meet those obligations the Board of Directors has adopted a compliance program. The LVAC is required to appoint a Privacy Officer and provide training as to how the LVAC manages health information on HIPAA. Training is mandated to all personnel without exception.

- 1. All patient information obtained by squad members is confidential and may only be shared with other health care providers or law enforcement personnel who are directly involved with the incident.
- 2. Requests for copies of call sheets shall be referred to the Privacy Officer or his/her designee.
- 3. All requests for copies of call sheets must be according to applicable law. This generally involves either a subpoena or a written request to the Privacy Officer.
- 4. All call sheets shall be kept in a locked compartment and secure file room.

SAFEGUARDING OF "PROTECTED HEALTH INFORMATION" (PHI):

Protected Health Information (PHI) can be defined as any and all information transmitted or maintained in any form by a covered entity (LVAC falls under the definition of a "covered entity" under HIPAA) including electronic, oral, and paper, relating to the health of an individual, the health care provided to the individual or the payment for health care provided to an individual. This includes any demographic information that identifies or can be used to identify an individual.

Specifically, any of one of the following pieces of information is considered PHI under HIPAA:

- Account numbers
- Addresses
- Biometric identifiers, including finger and voice prints
- Birth, admission, and discharge dates; date of death
- Certificate/license numbers
- Email addresses
- Full face photographic images and any comparable images
- Health plan beneficiary numbers
- Medical record numbers
- Names of relatives and household members
- Patient names
- Social Security Numbers
- Telephone and fax numbers
- URLs and IP addresses
- Vehicle identifiers and serial numbers, license plate numbers

Title: Patient Confidentiality – HIPAA and PHI				ection: 2 - Genera Imber: 2.11	al	
Author: J.Snaza Effective: 1 Jan 2017 S			Super	ced	les: NEW	Page 2 of 3
Approval: President		Approval: Director of Operations			Revised:	
Chester Popiolkowski Timothy P. Marshall						

METHODS OF PROTECTING PHI:

PHI must be protected at every stage within LVAC, from the initial dispatch of a call, through the writing of the patient care report, to sending the reports to our billing company, and finally to a third party vendor for archiving or archiving within our own facility.

As a health care provider, LVAC is permitted to use and disclose PHI for the purposes of treatment, payment, and health care operations. In general terms, this allows for the sharing of patient information with hospitals, other responders, insurance companies, etc. Additionally, while 911 emergency information can be transmitted freely, it is LVAC's policy to protect it in accordance with HIPAA guidelines once a call is complete.

THE FOLLOWING ACCESS RESTRICTIONS MUST BE IN-PLACE TO ENSURE LVAC'S HIPAA COMPLIANCE:

- Access to the building is restricted to LVAC members only.
- All visitors must sign in and out of a log and be escorted by a member or staff at all times.
- Access to the LVAC local area network is restricted to members only, with user ID's and passwords required to gain access.
- Completed patient care reports are to be placed in a locked drawer or cabinet until they are reviewed in preparation for billing.
- All run reports will be reviewed for billing and QA purposes in a secure room that is not accessible by the general membership or the public.
- All run reports and documentation for billing purposes shall be maintained in a locked drawer/cabinet.
- Run reports to be sent to a third party vendor for archiving will be kept in a locked drawer/cabinet or room until the archiving company picks them up.
- Shredders are to be made available at all times to all members for the destruction of PHI and other personally sensitive material.
- Locations of shredders are:
 - Library/conference room
 - Administration office
 - Operations office
- LVAC's only approved method of disposing of hard copies of PHI is shredding.
- If an ambulance call is received while writing/completing a patient care report and/or billing documentation, crew members must:
 - Place ALL hard copies containing PHI in a designated folder and secured in the members mail slot until the members return.
 - NO hard copies containing PHI are to be left out unattended (patient care reports, handwritten notes, etc.) at any time.
- Business agreements are signed with every vendor that handles our PHI.
- All visitors to LVAC must sign in and out and must be escorted at all times
- All members of LVAC must sign LVAC Acknowledgement Regarding Protection of Patient Information.
 - All ride-along candidates must meet with LVAC's Privacy Officer and sign an Acknowledgement Regarding Protection of Patient Information.

Title: Patient Confidentia	ality – HIPAA and PHI		Section: 2 - Ge Number: 2.11	neral
Author: J.Snaza Effective: 1 Jan 2017 Sup			edes: NEW	Page 3 of 3
Approval: President	Approval: Director of Operat	ions	Revised:	
Chester Popiolkowski	Timothy P. Marshall			

PATIENT'S RIGHTS UNDER HIPAA:

According to HIPAA, an organization must have a standing document specifying their information practices, namely, how information is stored, used, and the circumstances under which it is shared. LVAC must provide a Notice of Privacy Practices to EVERY patient treated, transported, or from whom a member of LVAC has received a sign-off. This applies to both ALS and BLS crews.

If the patient is stable and doing so would not interfere in any way with the treatment of the patient:

- The head attendant must hand the patient a notice of privacy practices (for the patient to keep)
- The head attendant must have the patient sign the appropriate box on the back of the run sheet acknowledging receipt of the Notice of Privacy Practices.

If the patient is unable to sign, or the notice of privacy practices can not be delivered to the patient due to the nature of the medical emergency:

- The head attendant must check the box on the back of the run sheet to indicate UNABLE TO DELIVER NOTICE OF PRIVACY PRACTICES
- The head attendant must provide on the back of the run sheet a brief reason why the notice was not delivered, for example: "PT FLOWN" or "PT UNCONSCIOUS", or "PT CONDITION UNSTABLE", etc.

The LVAC must then send the patient a notice of privacy practices via U.S. Mail:

 Billing does not have to be held up if the notice of privacy practices was not delivered to the patient at the time of the call. LVAC is simply obligated to deliver this notice of privacy practices "as soon as is reasonably practicable," according to HIPAA. A link to the text version of LVAC's notice of privacy practices will be prominently displayed on the www.lancasterambulance.org website with the title "HIPAA Notice of Privacy Practices."

Title: Disciplinary Action			Section: 2 - General Number: 2.12			
Author: J.Snaza Effective: 1 Jan 2017 Su			Super	rcede	s: NEW	Page 1 of 3
Approval: President		Approval: Director of Operation	ons	F	Revised:	
Chester Popiolkowski		Timothy P. Marshall				

The goal of this SOG is to define a policy and a system to insure the rights of the individuals as well as the best interests of the Lancaster Volunteer Ambulance Corps are upheld, no matter the offense.

GENERAL REGULATIONS:

- 1. No action on any individual may be taken without first receiving a written statement from the complainant. If another member of the Corps makes the charges, the accused has the right to question the Board of Directors, in the presence of the member making the charges, if he/she so desires.
- 2. Failure to appear before the Board of Directors without notification as to why the accused cannot appear shall be an admission of the correctness of the charges and the Board shall then take appropriate action.
- 3. If a Corps member is filing charges against another member and fails to appear or notify the Board as to why he/she cannot appear, charges shall be dropped with no further action taken. The filing Corps member may then be subject to disciplinary action as determined by the Board of Directors
- 4. Immediate action may be taken in cases of gross negligence, immediate threat to life and safety, or insubordination. Officers witnessing an infraction may take immediate action without a written statement.
- 5. Any officer may, for reasons of gross negligence, immediate threat to life and safety, or insubordination, suspend any member for a term not to exceed thirty (30) days, pending an investigation of the charges and a hearing thereof.
- 6. The suspending officer shall, immediately notify the Director of Operations and the President of the action taken.
- 7. Any suspended member shall not participate in any LVAC activity for the period of suspension or until such time as a final disposition is made. The only exception shall be the seventy-two hour (72) drivers' suspension.
- 8. It shall be the right of complainant to request, in writing, an investigation by the Operations Department.
- 9. The accused has a right to a decision by the Board at the disciplinary hearing at which the charges are acted upon. The Board of Directors may extend the suspension for up to an additional ninety-days (90), may implement a probationary period, may recommend expulsion or determine that the charges be dropped with no further action taken.

SPECIFIC PROCEDURES:

Disciplinary Chain of Command:

1. The start of any action with an Officer, other than the Director of Operations, will begin with the Director of Operations

Title: Disciplinary Action				Section: 2 - General Number: 2.12		
Author: J.Snaza Effective: 1 Jan 2017 Su			Super	rcede	es: NEW	Page 2 of 3
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

2. The start of any action with the Director of Operations will begin with the President.

LEVELS OF DISCIPLINARY ACTION:

Level One - Verbal Warning

Upon infraction of any LVAC SOG, where the member <u>did not</u> intentionally or with gross negligence violate said directives, a verbal warning shall be placed in the member's file after such warning has been discussed and signed with the individual. The warning will be removed from the member's file after a period of one (1) year from the date of the infraction and will have no bearing on any future infraction after that date.

Level Two – Written Warning

Upon a second infraction where there has been a prior verbal warning, or upon an infraction in which a member did intentionally and willfully violate LVAC SOG, but without the action of gross negligence, a written warning shall be placed in the member's file after such warning has been discussed and signed with the individual. The written warning shall be removed after a period of five (5) years from the date of the infraction and will have no bearing on any future infraction after that date. In such cases where a member receives a total of three (3) verbal warnings in the period of one year, a written warning will be placed in the member's file for "failure to follow LVAC SOG" and shall be placed in their file after such warning has been discussed and signed by the member. Such written warning will be removed after a period of five (5) years from the date of the infraction and will have no bearing on any future infraction after that date.

Level Three – Multiple Written Warnings or Gross Negligence

Upon an infraction where there are three (3) written warning in the member's file, or when gross negligence has been found, the member shall be suspended from all department activities for a period of sixty-days (60), including loss of all rights and privileges, and return all LVAC gear and equipment. The suspension will commence after the suspension statement has been discussed and signed by the member. Such suspension statement will be removed from the member's file after a period of ten (10) years from the date of suspension and will have no bearing on any future infraction after that date.

Level Four – Multiple Suspensions

Upon an infraction, which results in a second suspension within the period of ten (10) years, the member in question will automatically be brought before the Executive Board for a vote of expulsion. The Board will then forward it to the membership with its recommendation. In such cases where the infraction is of such severe nature that the Board of Directors, by majority vote, feels that the member in question should be recommended for expulsion, they will do so only after the recommendation has been discussed with the member. The motion will be forwarded to the next general membership meeting with a recommendation for approval.

Title: Disciplinary Action				Section: 2 - Ge Number: 2.12	neral
Author: J.Snaza Effective: 1 Jan 2017			Super	rcedes: NEW	Page 3 of 3
Approval: President		Approval: Director of Oper	ations	Revised:	
Chester Popiolkowski		Timothy P. Marshall			

PROBATION

At any time that a disciplinary action is in a member's file it is a probationary period for the member, and until such time as the action is removed, the member's actions are subject to closer review.

APPEALS

- 1. The Operational Committee consisting of the Director of Operations, President, One (1) Director and One (1) Regular Member who shall hear any and all cases appealed involving a Level One, Two or Three action.
- 2. Any aforementioned levels must be submitted to the Committee in writing within seven (7) days of the original action.
- 3. Level four cases shall be forwarded directly to the Executive Board, in writing, within seven (7) days from the original date of action.
- 4. The appeal hearing must take place no earlier than seven (7) and no later than fourteen (14) days from receipt of said request.
- 5. All appeal decisions are final and any action taken will either be rescinded or enforced immediately after such a decision.

Title: Grievance			Section: 2 - Ge lumber: 2.13	neral
Author: J.Snaza	Effective: 1 Jan 2017	Superce	edes: NEW	Page 1 of 1
Approval: President	Approval: Director of Operati	ons	Revised:	·
Chester Popiolkowski	Timothy P. Marshall.			

- 1. A grievance is defined as a complaint or dispute by a member/employee relative to his/her membership/employment including but not limited to:
 - a. Disciplinary actions
 - b. The application of policies, procedures, rules, and regulations.
 - c. Acts of retaliation for using the grievance procedure, participating in a grievance or by another employee.
 - d. Complaints of discrimination on the basis or race, color, creed, sex, age, disability, or national origin.
 - e. Acts of retaliation because the member has complied with any law of the Municipality, County, State of New York or United States.
- 2. The following complaints are not grievable under this procedure:
 - a. Establishment of general benefits offered to the member.
 - b. Work activity accepted by the member as a condition of membership or work activity that may reasonably be expected to be a part of the volunteering for an ambulance squad.
 - c. The contents of established policies, procedures, rules and regulations.
 - d. The recruitment, transfer, assignment, and retention of members.
- A Grievant must be personally and directly affected by an occurrence or condition, before he/she shall be permitted to pursue a grievance. Disputes as to a member's standing to file a grievance shall be determined, as shall any other dispute as to grievability.
- 4. All grievances must first be made in writing to the Director of Operations within twenty-one calendar days after the occurrence or condition-giving rise to the grievance.
- 5. Grievances must include the specifics of the grievance; any reference to established policies, rules, or regulations, and specific relief the Grievant expects to obtain through the use of this procedure.
- 6. Within two weeks of receipt of such written document, the Director of Operations must give a response to the individual or shall advise the individual that additional time is needed to respond. In that event, the Director of Operations shall respond to the individual within one week after notice of the need for an extension of time.
- 7. If a satisfactory resolution of the grievance is not reached at the Operations level, the Grievant shall notify the President of the Corps in writing to that fact and request a presentation to the Executive Board. The decision of the Executive Board is the final step available in the grievance procedure.
- 8. The Director of Operations or his/her designee shall implement any remedy that may be ordered by the Executive Board, provided that such decision is consistent with law and written policies.

Title: Drug-Free Policy					on: 2 - Genera oer: 2.14	al
Author: J.Snaza	Effect	ive: 1 Jan 2017	Super	cedes:	: NEW	Page 1 of 1
Approval: President		Approval: Director of Operation	ons	Re	vised:	
Chester Popiolkowski		Timothy P. Marshall				

- The LVAC is committed to maintaining a drug-free workplace. The unlawful manufacture, distribution, dispensation, possession of a controlled substance or use of alcohol on any LVAC property or in any LVAC equipment is specifically prohibited.
- 2. Violation of this policy is a serious offense and shall be subject to disciplinary action up to and including dismissal and may face criminal and civil prosecution to the fullest extent of the law.
- 3. Members shall not be under the influence of, nor have his/her ability to perform his/her task impaired by alcohol or any other drugs, whether legal or illegal, while on duty or on call, while on LVAC property or while off LVAC property in an official capacity, or at any time while operating an LVAC vehicle.
- 4. As a general rule of thumb, members should not consume any alcohol within 6 hours of the beginning of their shift.
- 5. Members shall not use alcohol while on duty or report to duty with the odor of alcohol on his or her breath.
- 6. Members are required to submit to a drug and alcohol-screening test (at the expense of the LVAC) when involved in an accident while operating LVAC equipment or injured while on-the-job. Members are required to provide within 72 hours a current valid prescription, medication bottles, and/or a physician or pharmacist signed affidavit for any controlled substance or drug found to be in the member's possession or identified in a positive drug screening analysis.
- 7. Failure to submit to a drug or alcohol screening test shall be considered a violation of standard operating guidelines and shall subject the member to immediate disciplinary action, up to and including possible termination.

Title: Administrative Leave					ection: 2 - Ge umber: 2.15	nera	al
Author: J.Snaza Effective: 1 Jan 2017 Super			rcedes: NEW Page 1 of 1				
Approval: President		Approval: Director of Operation	ons		Revised:		
Chesterpopiolkowski		Timothy P. Marshall					

- If a member/employee finds it necessary to suspend his or her active running status for other than health, military, or educational purposes, the Director of Operations may grant one leave of absence up to 30 days per calendar year and shall notify the Secretary of such leave.
- 2. Upon written request the Board of Directors may grant a leave of absence not to exceed 90 days per calendar year and leave time shall not exceed 120 days in any 18-month period.
- 3. If a member finds it necessary to suspend his or her active running status for health or medical reasons (including pregnancy) as verified by a physician, upon written request, the Director of Operations may grant a medical leave for the period required by the physician and shall notify the Secretary of such leave.
- 4. Any member, immediately following the birth of his or her child, may, upon written request to the Director of Operations be granted a leave of up to 90 days commencing on the child's birth date or the time the Doctor allows her to return to duty (whichever is longer).
- 5. Any member attending a post high school education program leading to a degree may request leave in writing to the Director of Operations. The member must be attending a school greater than 50 miles from the LVAC. Leave may only be granted for the time while actively in the program. Request for educational leave must be made annually.
- Any member called for active duty in the military may request leave in writing to the Director of Operations. Leave may only be granted for the time while actively serving.
 - a. Any member returning from Active Duty shall be granted an additional period of time ranging from seven (7) to thirty (30) days, depending on the duration of active duty and area of operations the member served in.
 - b. Active duty is considered service in a branch of the U.S. Military, Coast Guard, National Guard or Reserves under specific orders and exceeding fifteen (15) days in length.
 - c. A copy of the members' active duty orders must be submitted prior to the approval of leave.
- 7. The Executive Board must approve any request for leave greater than thirty (30) days.
- 8. Any cumulative leave of absence in excess of 90 days will be deducted from time accrued for life membership and other time-related rewards.
- One who is granted a leave of absence is still required to follow all rules and regulations of the LVAC. Administrative leave does NOT waive the individual of training and certification requirements mandated by the New York State DOH Office of EMS, WREMS or the Operational Medical Director.

Title: Probationary Members			Section: 2 - General Number: 2.16		
Author: T. Marshall Effective: 1 Jan 2017 Su			cedes: NEW	Page 1 of 1	
Approval: President	Approval: Director of Operat	ions	Revised:		
Chester Popiolkowski	Timothy P. Marshall				

Probationary members are those who:

- 1) Meet all of the requirements stated in Article 1 In General of the bylaws.
- 2) Have completed the official application process for membership and have been inducted into the LVAC by the general membership.
- 3) Have reached his or her eighteenth (18th) birthday.
- 4) Have successfully passed the inspection process of the Membership Investigation Committee including a criminal background check
- 5) Are serving a six-month (6 month) introductory period.
- 6) During the probationary membership period of six (6) months these members:
 - a) Shall have no vote in the affairs of The LVAC
 - b) Must become an active member of an administrative committee or must be enrolled in or have completed the necessary courses and training to become an ambulance attendant.
 - c) Probationary Members do not have the ability to operate green lights.
- 7) For training requirments see SOP 5.01.

Title: Workman's Comp	Insurance Career		Section: 2 - Ge Number: 2.17	eneral
Author: J.Snaza Effective: 1 Jan 2017 Super			edes: NEW	Page 1 of 1
Approval: President Chester Popiolkowski	Approval: Director of Operat Timothy P. Marshall	ions	Revised:	

Paid Support Staff members of the LVAC are covered under the Worker's Compensation insurance carried through the LVAC Insurance provider for work-related illness or injuries sustained while on LVAC business. In general, Worker's Compensation insurance provides payments for medical care and for the loss of income, up to certain limits.

The following procedures should be followed for Worker's Compensation Claims:

- 1. Seek immediate medical attention, if needed.
- 2. Notify the Director of Operations or senior most Line Officer and the Secretary of the injury.
- 3. Advise the medical facility that this is a Worker's Compensation Claim and provide them with the following information. The employer is:

Lancaster Vol. Ambulance 40 Embry Place Lancaster, NY 14086 (716) 683-3282

- 4. Copies of all bills and forms should be submitted to the LVAC Secretary, along with the following LVAC Forms:
- Incident Report Form
- Worker Injury Form

Title: Workman's Comp	Insurance Volunteer		Section: 2 - General Number: 2.18		
Author: J.Snaza Effective: 1 Jan 2017 Super			edes: NEW	Page 1 of 1	
Approval: President	Approval: Director of Operations		Revised:	·	
Chester Popiolkowski	Timothy P. Marshall				

Volunteer members of the LVAC are covered under the Worker's Compensation insurance carried by the Town of Lancaster for work-related illness or injuries sustained while on LVAC business. In general, Worker's Compensation insurance provides payments for medical care and for the loss of income, up to certain limits.

The following procedures should be followed for Worker's Compensation Claims:

- 1. Seek immediate medical attention, if needed.
- 2. Notify the Director of Operations or senior most Line Officer and the Secretary of the injury.
- 3. Advise the medical facility that this is a Worker's Compensation Claim. The employer is:

Town of Lancaster Central Ave. Lancaster, NY 14086 (716) xxx-xxxx

- 4. Copies of all bills and forms should be submitted to the LVAC Secretary who will file them with the Town.
- 5. The following LVAC Forms must also be filed:
 - a. Incident Report Form
 - b. Worker Injury Form

Title: Insurance			Section: 2 - Ge Number: 2.19	eneral
Author: D.Marrocco Effective: 1 Jan 2018 Su			edes: NEW	Page 1 of 1
Approval: President	Approval: Director of Operat	ions	Revised:	·
Chester Popiolkowski	Timothy P. Marshall			

 Any requests or questions regarding insurance information for the Lancaster Volunteer Ambulance Corps will be forwarded to the President or Vice President who have folder containing any and all insurance information.

Title: Personnel Files – Career and Volunteer				Section: 2 - General Number: 2.20		
Author: J.Snaza Effective: 1 Jan 2017 S			Super	ced	es: NEW	Page 1 of 2
Approval: President		Approval: Director of Operations			Revised:	
Chester Popiolkowski Timothy P. Marshall						

PAID SUPPORT STAFF (PSS) - CAREER

The Paid Support Staff Coordinator is responsible for maintaining personnel files on every career staff while s/he is actively serving the LVAC and for a period of seven years after s/he has left the service. Health Information Files are retained indefinitely.

Career Staff Personnel Files should contain, as a minimum:

- 1. A copy of the staff member's application for employment, if available.
- 2. A copy of all training certifications
- 3. Documentation of any disciplinary action taken against a staff member
- 4. A copy of all correspondence from the public or public safety officials that contain the staff member's name
- 5. A copy of the SOG acknowledgement form, signed by the staff member.
- 6. A copy of the annual medical command authorization form for ALS providers.
- 7. A copy of the annual skills verification form for ALS providers.

Health Information Files

- 1. Health Information Files should contain, as a minimum:
 - a. Exposure Incident Reports.
 - b. Injury Incident Reports filed by the staff member.
 - c. N-95 Mask Fit Testing documentation
 - d. Medical testing and immunization records or refusals
 - e. A copy of any Worker's Compensation claim information concerning the staff member.
- 2. ALL Health Information Files are retained indefinitely.
- 3. ALL Health Information Files are Confidential.

Information in Personnel and Health Information Files is classified as **Confidential** and shall only be revealed:

- 1. To a member of the Executive Board whose request is related to the Corps' operation.
- 2. As required by law, regulation, or a court of competent jurisdiction.
- 3. Directly to the staff member.
 - a. A staff member shall have the right to review their personnel file and to request that the Paid Support Staff Coordinator insert a written response to any material contained therein.
 - b. A staff member may only review their personnel file while in the presence of either the Paid Support Staff Coordinator and/or the Secretary of the LVAC.
 - i. At no time shall a staff member be allowed unaccompanied access to their personnel or medical file.

					Section: 2 - General Number: 2.20		
Author: J.Snaza Effective: 1 Jan 2017 Su			Super	rced	les: NEW	Page 2 of 2	
Approval: President		Approval: Director of Operations			Revised:		
Chester Popiolkowski		Timothy P. Marshall					

VOLUNTEER PERSONNEL

The Secretary is responsible for maintaining personnel files on every volunteer member while s/he is actively serving the LVAC and for a period of seven years after s/he has left the service. Health Information Files are retained indefinitely.

Volunteer Member Personnel Files should contain, as a minimum:

- 1. A copy of the member's application for membership, if available.
- 2. A copy of all training certifications
- 3. Documentation of any disciplinary action taken against a member
- 4. A copy of all correspondence from the public or public safety officials that contain the member's name
- 5. A copy of the SOG acknowledgement form, signed by the member.
- 6. A copy of the annual medical command authorization form for ALS providers.
- 7. A copy of the bi-annual skills verification form for all providers.

Health Information Files

- 1. Health Information Files should contain, as a minimum:
 - a. Exposure Incident Reports.
 - b. Injury Incident Reports filed by the staff member.
 - c. N-95 Mask Fit Testing documentation
 - d. Medical testing and immunization records or refusals
 - e. A copy of any Worker's Compensation claim information concerning the staff member.
- 2. ALL Health Information Files are retained indefinitely.
- 3. ALL Health Information Files are Confidential.

Information in Personnel and Health Information Files is classified as **Confidential** and shall only be revealed:

- 1. To a member of the Executive Board whose request is related to the Corps' operation.
- 2. As required by law, regulation, or a court of competent jurisdiction.
- 3. Directly to the member:
 - a. A volunteer member shall have the right to review their personnel file and to request that the Director of Operations insert a written response to any material contained therein.
 - b. A volunteer member may only review their personnel file while in the presence of either the Director of Operations and/or the Secretary of the LVAC.
 - i. At no time shall a volunteer member be allowed unaccompanied access to their personnel or medical file.

Title: Funeral Practices				Section: 2 - General Number: 2.21		
Author: J.Snaza Effective: 1 Jan 2017 Su			Super	cec	des: NEW	Page 1 of 1
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

1. See separate handbook in possession of President, Vice President, or Director of Operations.

Title: Quality Assurance	Quality Improvement (QA/QI)		Section: 2 - General Number: 2.22		
Author: J.Snaza Effective: 1 Jan 2017 Sup			cedes: NEW	Page 1 of 4	
Approval: President	Approval: Director of Operations		Revised:	•	
Chester Popiolkowski	Timothy P. Marshall				

PURPOSE:

Quality Assurance/Quality Improvement (QA/QI) means the process, by which an individual/organization analyzes their job, service or product, collects data, analyzes for trends, implements improvement and then reassesses on an ongoing basis in order to be and demonstrate that they are always getting better.

SCOPE:

The LVAC has a strong commitment in continuously improving the quality of the patient care delivered by the LVAC. It is the policy of The LVAC to monitor the delivery of health care through QA/QI activities, which include weekly and monthly monitoring, and review of data.

POLICY:

All QA/QI records shall be maintained for a period of 2 years. The Executive Board shall designate a QA/QI committee. The designated QA/QI committee shall consist of three (3) individuals. Two (2) shall be current active members that are non-management field personnel with the third member being the Associate Medical Director. The committee shall be designated to participate in the review of Patient Care Reports (PCR's) for the LVAC. The President or Director of Operations shall act as a facilitator to this peer panel.

- 1) QA/QI Committee will perform two annual QA/QI projects that may include protocol and policy reviews.
- 2) Committee requirements:
 - a. In addition to any specific requirements instituted, the Committee shall identify trends associated with the delivery of care.
 - b. These trends shall be reported to Operations for evaluation.
 - c. It is the responsibility of the QA/QI members to attend and participate in Regional Committee meetings.
 - d. QA/QI Reports will be developed on a quarterly basis and presented at the Operations Staff meeting.
- 3) Release of Information:
 - a. Information (QA/QI data), analysis, findings, recommendations, conclusions and actions developed by or for performing QA/QI assessment or similar functions will not be available to unauthorized persons or organizations, or used for other than intended purposes as allowed for under state and federal law.

The basic steps in a quality assurance program are:

- Selecting a subject for study, which includes an operational definition of the condition or procedure under study and a definition of patients to be included;
- Developing criteria and standards, defining acceptable levels of quality;
- Collecting data;
- Comparing data to criteria and standards in order to identify deficiencies and areas of excellence;
- Determining causes of deficiencies and taking corrective action, including:

Title: Quality Assurance	/Quality Improvement (QA/QI)	Section: 2 - General Number: 2.22		
Author: J.Snaza Effective: 1 Jan 2017 Supe			cedes: NEW	Page 2 of 4
Approval: President	Approval: Director of Operations		Revised:	
Chester Popiolkowski	Timothy P. Marshall			

- Determining who or what is expected to change;
- Determining who is responsible for implementing action;
- Determining what action is appropriate, and;
- Determining when it is expected to occur.

A successful Quality Improvement program requires the willing cooperation of all LVAC members. It must recognize their common needs for education, structured feedback, professionalism, mutual respect, and confidentiality of all quality improvement activities.

The QA/QI Committee shall:

- Conduct meetings on a regular basis
- Be responsible for reviewing selected PCRs for accuracy, completeness, and appropriateness of care as soon as possible after each call, but at least once a week.
- Review immediately all patient care related Incident Reports, and direct any required immediate action to the appropriate LVAC officer
- Take any immediate action required in consultation with the LVAC Board of Directors.
- Review all patient/family written comments as soon as they are received. Refer all
 comments to the crews involved. Refer any substantive negative comments or
 notations of problems immediately to the Director of Operations and President and
 medical director.
- At least annually review the LVAC SOGs and recommend any changes to the membership and officers.
- At least annually in November or December review the appropriateness and timeliness of the monthly in-service education programs as related to identified problems, and suggest a schedule of proposed in-service programs for the following year to the Operations Dept.
- Regularly review the appropriateness and adequacy of equipment and make recommendations for any upgrades or additional equipment needed. Assure that ambulance supplies and equipment meets or exceeds the requirements of Part 800 of the NYS EMS Code.
- Cooperate with the regional QI/Medical Advisory Committee/s and provide any information to the regional program as may be necessary or requested.
- Respond to any inquiries from other EMS services concerning performance reviews of current or former LVAC members.

QA/QI COMMITTEE:

LVAC agrees to participate with the Erie County Medical Center's Quality Improvement Committee for the purpose of planned and systematic monitoring of and enhancing the quality and appropriateness of patient care, clinical performance review, and administrative coordination and support activities of the service in regard to quality issues. The program will work to eliminate the causes of identified deficiencies by working toward resolving identified problems, improving EMS activities related to patient care, and reinforcing and enhancing positive attitudes, behaviors and practices of the LVAC and its members.

Title: Quality Assurance/Quality Improvement (QA/QI)				Section: 2 - General Number: 2.22		
Author: J.Snaza Effective: 1 Jan 2017 Su			Super	ced	les: NEW	Page 3 of 4
Approval: President	•	Approval: Director of Operations			Revised:	
Chester Popiolkowski Timothy P. Marshall						

The LVAC will also actively participate in the Regional Quality Improvement program.

The following are the goals of participation in the Quality Improvement Committee:

- Recognition and acknowledgment of examples of excellent patient care or other components of service organization
- Identification of actual or potential problems concerning patient care and clinical performance;
- Assessment of the cause and scope of problems identified;
- Development and recommendation of proposed courses of action to address the problems identified
- Use of information gathered regarding problems identified, whenever service policies and procedures regarding patient care and support activities are revised;
- Implementation of actions necessary to correct the identified problems;
- Monitoring and evaluation of actions taken and the implementation of remedial action to ensure effectiveness;
- Referral to the regional medical advisory committee and the regional medical director or his/her designee, problems which have been identified by the agency but are beyond the agency's authority or ability to correct;
- Documentation of all measures taken pursuant to this QA/QI program.

The LVAC agrees that the following documents and parameters may be reviewed by the LVAC QA/QI Committee and may be furnished to the MEDICAL DIRECTOR:

- Letters of commendation and complaints or grievances raised by patients, their families, and other concerned parties;
- Recommendations received from hospitals to which the LVAC regularly transports patients;
- All incident reports
- PCRs as requested
- Standard Operating Procedures

The LVAC agrees that certain specific parameters regarding LVAC practice and the QA/QI committee may review performance periodically. These parameters include:

- Accuracy and completeness of the PCR
- Timeliness of response (measured from the time of call received to time on scene), including any communication and/or dispatch problems
- Completeness of patient assessment
- Appropriateness of care based on patient assessment, including evaluation of compliance with all appropriate protocols
- Appropriateness of time spent in patient care on scene
- Emergency Department diagnosis and outcome in selected cases, with the assistance of hospital providers

Title: Quality Assurance/Quality Improvement (QA/QI)					Section: 2 - General Number: 2.22		
Author: J.Snaza Effective: 1 Jan 2017 Super			Super	ced	les: NEW	Page 4 of 4	
Approval: President	•	Approval: Director of Operations			Revised:		
Chester Popiolkowski	olkowski Timothy P. Marshall						

- The credentials and performance of all persons providing emergency medical care on behalf of the LVAC
- This credential review will, at a minimum, include:
 - A review to assure that the member is appropriately certified by the N.Y.S.
 Department of Health;
 - A review of the in-service education activity of the member in light of compliance with LVAC requirements;
 - A review to assure that each ALS provider is currently authorized to practice at the advanced level within the regional ALS system.
- The performance review will include, at a minimum:
 - Review of any compliments or complaints received concerning the care provided by the member, from patients, hospitals, medical control facilities, agency or system medical directors, etc.
 - Review to determine whether any recommendations or significant adverse actions concerning the individual member have been taken by any other health care provider for whom the member provides care, by the DOH, or, if the member practices as an Advanced EMT, by the medical director (s) of the WREMS System, or region.

The LVAC agrees:

- That the QA/QI committee shall prepare contemporaneous minutes or records of all activities. All such reports shall maintain patient confidentiality.
- That the committee will generally meet every other month and that the minimum number of meetings per year shall be four (4).
- That the QA/QI committee may recommend to the President the appointment of member teams to resolve specific identified problems or develop other improvements.

Title: Vehicle Maintenance				Section: 2 - General Number: 2.23			
Author: J.Snaza Effective: 1 Jan 2017 Supe			Super	cec	les: NEW	Page 1 of 1	
Approval: President		Approval: Director of Operation			Revised:		
Chester Popiolkowski Timothy P. Marshall							

- 1. The Director of Maintenance shall ensure all vehicles operated by this company are maintained.
- 2. It shall be the duty of the Director of Maintenance to schedule preventative maintenance as required per manufacturers specifications or sooner (oil changes, tune-ups, lubrications, etc.).
- 3. Any unscheduled maintenance that is required should be reported to the Director of Maintenance. In the event that s/he cannot be reached, all efforts should be made to reach the Assistant Director of Maintenance.
- 4. In the event that you are unsuccessful in reaching the above personnel contact should be made with one of the Operations Directors.
- 5. It shall be the duty of all crewmembers to report any deficiencies discovered during their shift to the Director of Maintenance.
- 6. Anytime the ambulance becomes inoperative on a call see SOG # 3.22
- 7. Warranty work shall be performed by the manufacturer or authorized service center.
- 8. Body/Collision repair shall be accomplished only after obtaining bids from multiple repair facilities.
- 9. Recommended Service Centers See Appendix A-1
- 10. Recommended Tow Agencies

Title: Facility Maintenance				Section: 2 - General Number: 2.24			
Author: T.Marshall	Author: T.Marshall Effective: 1 Jan 2017 S			cede	s: NEW		Page 1 of 1
Approval: President Approval: Director of Operations		ons	F	Revised:			
Chester Popiolkowski Timothy P. Marshall							

Building and Grounds:

It shall be the responsibility of the director of maintenance to:

- 1. Facilitate the proper maintenance an up keep of The LVAC building and grounds
- 2. Maintain all lighting fixtures interior and exterior
- Maintain all physical plant equipment ie: generators, HVAC units, Electrical Systems, Life Safety Systems, Fire Extinguishers, and all other physical plant equipment and furnishings.
- 4. Provide for emergency snow removal when government equipment is not available.
- 5. Maintain parking lot and driveways.
- 6. Oversee lawn care services
- 7. Oversee building cleaning services.
- 8. Advise the Director of Operations of any hazardous conditions that exist.
- 9. Maintain records of all maintenance activities

Title: Annual Physical Certification				Section: 2 - General Number: 2.25		
Author: J.Snaza	Effect	Effective: 1 Jan 2017		Supercedes: NEW		Page 1 of 1
Approval: President		Approval: Director of Operations		ons Revised:		
Chester Popiolkowski		Timothy P. Marshall				

It is the policy of Lancaster Ambulance to ensure all members and employees are physically capable of performing the job functions necessary to provide emergency medical care and safely operate emergency vehicles.

Annually, each member and staff person shall complete the following:

- Annual Medical Statement of Personnel
- Physical Agility Testing

Annual Medical Statement of Personnel

Each member shall annually complete this form (see Appendix A-6). The member shall accurately, truthfully, and completely complete all sections of this form. The form will then be given to the service Medical Director for review. Any deficiencies may result in the need for certification from a Physician the ability to perform the job functions.

Physical Agility Testing

Each member shall annually complete this test. Each member shall perform the following:

- 1. Ascend one flight of stairs carrying the "1st in" bag and descend the same flight of stairs in less than 90 seconds
- 2. Lift a stretcher containing 250 pounds with the assistance of a partner.
- 3. In the event a member fails the Physical Agility test they have the following options:
 - a. Attempt to complete the course again.
 - b. Continue to run on a crew; however, there must be a minimum of two people capable of passing the Physical Agility test in addition to that crewmember.
 - c. Resign their active status.

The Safety officer will be responsible for administering the Physical Agility Test each year.

In addition, new members must complete both the form and the Physical Agility Test prior to being appointed to the active crew.

Title: Firearms and Explosives				Section: 2 - General Number: 2.26		
Author: J.Snaza	Effective: 4 Jan 2017		Supercedes: NEW		: NEW	Page 1 of 1
Approval: President		Approval: Director of Operations		R	evised:	
Chester Popiolkowski		Timothy P. Marshall				

- 1. With the exception of law enforcement officers authorized sidearm; firearms, ammunition and explosives are not allowed on Lancaster Ambulance property.
- 2. Concealed weapons shall not be tolerated under any circumstance on Lancaster Ambulance property, with the sole exception of law enforcement officers.
- 3. No explosives or ordinances are allowed on Lancaster Ambulance property at any time. Fireworks, in all forms, are considered explosives under this policy.

Title: Incident Managem	ent System		Section: 3 - Operations Number: 3.01		
Author: T. Marshall	Effective: 2 Feb 2017	Supercedes: NEW		Page 1 of 1	
Approval: President Approval: Director of Operati Chester Popiolkowski Timothy P. Marshall		ons	Revised:		

- When dispatched to any MCI , ICS protocols will be followed.
 Refer to SOG. 2.05 Chain of command and 3.29

Title: Emergency Response				Section: 3 - General Number: 3.02		
Author: T. Marshall	Author: T. Marshall Effective: 28 Feb 2017 Supe			cec	les: NEW	Page 1 of 1
Approval: President		Approval: Director of Operations			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- It is important to establish from the information received from the dispatcher whether the response is emergency or non-emergency. It is the judgment of the Head Attendant in charge as to how to respond. When the decision is made to respond emergency, the driver must do so in compliance with the laws of the State of New York.
- 2. At no time, shall an ambulance or response vehicle respond to an emergency incident unless they have a Head Attendant (certified to at least the EMT level) on board or they have confirmation that one will meet them on the scene and be available to transport to the hospital. The driver of any LVAC equipment is required to hold a current Emergency Vehicle Operator's Certification (EVOC) or CEVO II.
- 3. Do not run four-way emergency flashers on private vehicles when responding to an emergency call or to the Squad Room. Emergency lights do not give you permission to proceed through a red light when in your personal vehicle.
- 4. No member at any time shall operate a piece of the LVAC's mobile equipment so as to violate the laws of the municipality, county or state. Nothing in these guidelines shall be construed to relieve the operator of an emergency vehicle from criminal or civil liability, resulting from failure to use due regard for life, limb, and property of others.
- 5. No member should use excessive speed on any call. At no time shall the apparatus be operated at a speed greater than ten miles per hour in excess of the posted speed limit.
- 6. Members should not try to follow apparatus to the scene or hospital in privately owned vehicles.
- 7. The Head Attendant is responsible for seeing that all documentation is completed on the EPCR, Head attendant should not leave the LVAC until EPCR and upload to server is completed. Refer to EPCR SOG
- 8. The driver of the apparatus should see that the fuel tanks read no less than ¾ full before returning the unit to quarters.
- 9. Apparatus shall be cleaned and restocked after each use.
- 10. Upon arriving on scene, a crewmember should assume incident command. The Incident Commander should be the only person communicating with dispatch and other responding or standby units/personnel.
- 11. Refusal of service must be obtained and documented by the Head Attendant (EMT or higher).

Title: Motor Vehicle C	rashes		Section: 3 - Operations Number: 3.03		
Author: J.Snaza	author: J.Snaza Effective: Immediately Supe		des: NEW	Page 1 of 1	
Approval: President	oval: President Approval: Director of Operations		Revised:	•	
Chester Popiolkowski Timothy P. Marshall			2 Feb 2017		

PURPOSE:

Although LVAC is a primary care giver of medical aid and transportation, coordination with fire department personnel to provide scene safety and patient extrication and disentanglement is mandated. Scene safety is paramount. Because incidents do not always fit into the fixed categories of this SOG, all members are empowered to undertake courses of action they deem necessary to handle the incident providing they remain within their scope of training and all appropriate guidelines.

SCOPE:

- 1. All LVAC Personnel (Volunteer and Career).
- 2. Two ambulances shall respond; first unit responds Hot, second unit responds Cold until otherwise instructed.

POLICY:

- All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in addition to wearing issued clothing with reflexive trim.
- 2. Safety helmets are provided on all ambulances and shall be worn while operating in any situation that exhibits the potential for harm to personnel. Helmets shall also be worn for the purposes of identification of members operating on-scene.
- 3. Upon approach, the driver should <u>NOT</u> enter the wrong lane of a divided highway to reach an incident unless access is blocked from behind, Police or other personnel are controlling traffic, and the driver is directed by them to do so.
- 4. LVAC personnel are not trained or equipped to direct/control traffic and shall not do so.
- 5. All units shall make every effort to park on the same side of the road, preferably the scene side, regardless of direction of travel.
- 6. Vehicles shall be parked a minimum of 100 feet from the hazard area.
- 7. The ambulance should be placed in front of the accident scene to allow easy exit, unless the ambulance is the first to arrive, in which case the ambulance will stop behind the scene to act as a barrier to oncoming traffic. If a Fire Officer directs the ambulance to park in a different place, the Fire Officer's instructions should be followed.
- 8. Upon arrival, the driver should make an assessment of the scene and make a radio transmission indicating the traffic situation, potential hazards, number of patients, and the need for additional equipment/resources.

Title: Structural Fire Incidents				Section: 3 - Operations Number: 3.04		
Author: J.Snaza	Effective: Immediately		Supercedes: NEW		s: NEW	Page 1 of 1
Approval: President Approval: Director of O		Approval: Director of Operation	ions Revised:		Revised:	
Chester Popiolkowski		Timothy P. Marshall		1	2 Feb 2017	

- 1. Upon dispatch for a stand-by for a working fire, a ambulance will immediately respond to the scene under emergency response. Do not delay response to accumulate rehab supplies.
- 2. A minimum assignment includes 1 ambulance (must be ALS) and 1 fly car (designated rehab vehicle). If a fast team is requested a ALS or BLS ambulance should be requested and will be dispatched if available. For multiple dwelling fires, schools in session, health care facilities, additional personnel shall be automatically dispatched based on resources needed at scene and nature of call.
- 3. Report to incident command area.
- 4. Ascertain estimated length of operations and the need for additional rehab resources. Locate and secure location for firefighter rehab if needed and notify Fire command of location.
- Once rehab begins, the unit and crew is considered dedicated and shall not leave. A minimum of 1 ambulance shall be staged within close proximity to the rehab area and serve as transport if necessary.
- 6. Medical evaluation of firefighters will be set forth in SOG 3.05.
- Once released by incident command the unit is back in service to return and restock if needed.
- 8. If extended rehab operations will be in place a LVAC dispatcher should staff LVAC dispatch center and provide POC for LVAC OIC requests.
- 9. All requests for additional apparatus and resources shall be made through the command post.
- 10. If a firefighter must be evaluated/treated in the ambulance, bunker gear and equipment shall be removed prior to entering the ambulance. This is an effort to limit contamination and exposure to carcinogens and other hazardous material.

Title: Carbon monoxide	with and without symptoms		Section: 3 - Operations Number: 3.03		
Author: J.Snaza	Effective: Immediately	Supercedes: NEW		Page 1 of 18	
Approval: President	Approval: Director of Operati	ons	Revised:	·	
G. Jankiewicz 29-Nov-04	Jeffrey F. Snaza, 29 Nov 04		15 April 2005		

CO with Symptoms:

1. When a call is dispatched ambulance shall be dispatched consistent with structure fire response. Crews are to make sure to have appropriate equipment (CO cord, rad meter).

Title: Carbon monoxide	with and without symptoms		Section: 3 - Operations Number: 3.03		
Author: J.Snaza	Effective: Immediately Supe		Supercedes: NEW Page 2		
Approval: President	Approval: Director of Operati	ons	Revised:	·	
G. Jankiewicz 29-Nov-04	Jeffrey F. Snaza, 29 Nov 04		15 April 2005		

2.	_bjbjU=U================================
	aÿÿaaaaaaaagÿaaaaaaaagÿaaaaaaaaaaaa <u>laa</u> a
	JJJJJ
	\$A
	000å000>000′000000000000000000000¦000000ö0000
	;;;;;
	00 2 0000000000000000000000000000000000
	a

, ,				Section: 3 - Operations Number: 3.03		
Author: J.Snaza	Effective: In	ective: Immediately Sup		Supercedes: NEW Pag		Page 3 of 18
Approval: President	Approv	Approval: Director of Operations		R	Revised:	
G. Jankiewicz 29-Nov-04	Jeffrey 1	Jeffrey F. Snaza, 29 Nov 04		1	5 April 2005	

aaraaaFaaaTaaa¦aaaaaaa¦aaaaaaaaaaaaaaaaa
Ö

Title: Carbon monoxide with and without symptoms				Section: 3 - Operations Number: 3.03		
Author: J.Snaza	Effective: Immediately	ediately Super		: NEW	Page 4 of 18	
Approval: President	Approval: Director of Operati	ons	Re	evised:		
G. Jankiewicz 29-Nov-04	Jeffrey F. Snaza, 29 Nov 04		15	5 April 2005		

Title: Carbon monoxide	e with and without symptoms		Section: 3 - Operations Number: 3.03			
Author: J.Snaza	Effective: Immediately	Superd	cedes: NEW	Page 5 of 18		
Approval: President	oval: President Approval: Director of Operati			Revised:		
G. Jankiewicz 29-Nov-04	Jeffrey F. Snaza, 29 Nov 04		15 April 2005			

]]
	x#	
	Í000000 00000 00000 000000	a¦====0
ппп F	PURPOSE:	•

Although LVAC is a primary care giver of medical aid and transportation, coordination with fire department personnel to provide scene safety and patient extrication and disentanglement is mandated. Scene safety is paramount. Because incidents do not always fit into the fixed categories of this SOG, all members are empowered to undertake courses of action they deem necessary to handle the incident providing they remain within their scope of training and all appropriate guidelines.

SCOPE:

All LVAC Personnel (Volunteer and Career).

Two ambulances shall respond; first unit responds Code 2, second unit responds Code 1 until otherwise instructed.

POLICY:

All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in addition to wearing issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

, , , , , , , , , , , , , , , , , , , ,
0000000000000000000\$000 Å 000
000å000>000′00000000000000000000¦000000ö0000
0000′0000002000000¦000000¦000000Ö000000000
000Ö000000É000000200000200000200000Ö000(0
;;
00 2 0000000000000000000000000000000000
$ \verb $

Title: Carbon monoxide	with and with	Section: 3 - Operations Number: 3.03			
Author: J.Snaza	Effective: I	Supercedes: NEW		s: NEW	Page 6 of 18
Approval: President	Appro	ons	s Revised:		
G. Jankiewicz 29-Nov-04 Jeffrey F. Snaza, 29 Nov 04				15 April 2005	

araooFaooTaoa¦aaooooa;oooooooooooooooooooooo
00000000000000000000000000000000000000

Title: Carbon monoxide	with and without symptoms	Section: 3 - Operations Number: 3.03		
Author: J.Snaza	naza Effective: Immediately Super			Page 7 of 18
Approval: President	Approval: Director of Operati	ons	Revised:	-
G. Jankiewicz 29-Nov-04	-04 Jeffrey F. Snaza, 29 Nov 04		15 April 2005	
G. Jankiewicz 29-NOV-04	Jenney F. Shaza, 29 Nov 04		TO APITI 2005	

Title: Carbon monoxide with and without symptoms				Section: 3 - Operations Number: 3.03		
Author: J.Snaza Effective: Immediately		Super	cedes: NEW	Page 8 of 18		
Approval: President		Approval: Director of Operati	ons	Revised:	·	
G. Jankiewicz 29-Nov-04		Jeffrey F. Snaza, 29 Nov 04		15 April 2005		

□□X□□□#□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□
Íonanana¦annana annana annana annana
PURPOSE:

Although LVAC is a primary care giver of medical aid and transportation, coordination with fire department personnel to provide scene safety and patient extrication and disentanglement is mandated. Scene safety is paramount. Because incidents do not always fit into the fixed categories of this SOG, all members are empowered to undertake courses of action they deem necessary to handle the incident providing they remain within their scope of training and all appropriate guidelines.

SCOPE:

All LVAC Personnel (Volunteer and Career).

Two ambulances shall respond; first unit responds Code 2, second unit responds Code 1 until otherwise instructed.

POLICY:

All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in addition to wearing issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

	, , , , , , , , , , , , , , , , , , , ,
3.	
	000000000000000000000\$000 Å 000
	000å000>000′0000000000000000000000¦000000ö0000
	ÖOO_2iiii
	00000000É000000²000002000000²0000000000
	$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\$

Title: Carbon monoxide with and without symptoms				Section: 3 - Operations Number: 3.03		
Author: J.Snaza Effective: Immediately		diately Sup	perced	es: NEW	Page 9 of 18	
Approval: President Approval: Director of Operations		ector of Operations		Revised:		
G. Jankiewicz 29-Nov-04 Jeffrey F. Snaza, 29 Nov 04				15 April 2005		

-00r000F000T000¦000000¦000000000000000	

Title: Carbon monoxide with and without symptoms				Section: 3 - Operations Number: 3.03		
Author: J.Snaza Effective: Immediately Sup			Super	rcec	les: NEW	Page 10 of 18
Approval: President		Approval: Director of Operation	ons		Revised:	
G. Jankiewicz 29-Nov-04 Jeffrey F. Snaza		Jeffrey F. Snaza, 29 Nov 04			15 April 2005	

Title: Carbon monoxide	with and without sy	Section: 3 - Operations Number: 3.03		
Author: J.Snaza Effective: Immediately			rcedes: NEW	Page 11 of 18
Approval: President Approval: Director of Operation G. Jankiewicz 29-Nov-04 Jeffrey F. Snaza, 29 Nov 04			Revised: 15 April 2005	·

□□X□□□#□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□
Íonanana¦annana annana annana annana
PURPOSE:

Although LVAC is a primary care giver of medical aid and transportation, coordination with fire department personnel to provide scene safety and patient extrication and disentanglement is mandated. Scene safety is paramount. Because incidents do not always fit into the fixed categories of this SOG, all members are empowered to undertake courses of action they deem necessary to handle the incident providing they remain within their scope of training and all appropriate guidelines.

SCOPE:

All LVAC Personnel (Volunteer and Career).

Two ambulances shall respond; first unit responds Code 2, second unit responds Code 1 until otherwise instructed.

POLICY:

All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in addition to wearing issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

]"]ÖÂ	

Title: Carbon monoxide with and without symptoms				Section: 3 - Operations Number: 3.03		
Author: J.Snaza Effective: Immediately Su			Super	rcec	les: NEW	Page 12 of 18
Approval: President		Approval: Director of Operation	ons		Revised:	
G. Jankiewicz 29-Nov-04 Jeffrey F. Snaza, 29		Jeffrey F. Snaza, 29 Nov 04			15 April 2005	

Title: Carbon monoxide with and without symptoms				Section: 3 - Operations Number: 3.03		
Author: J.Snaza Effective: Immediately			Super	ced	es: NEW	Page 13 of 18
Approval: President	•	Approval: Director of Operation	ons		Revised:	
G. Jankiewicz 29-Nov-04		Jeffrey F. Snaza, 29 Nov 04			15 April 2005	

□□X□□□#□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□
Íonanana¦annana annana annana annana
PURPOSE:

Although LVAC is a primary care giver of medical aid and transportation, coordination with fire department personnel to provide scene safety and patient extrication and disentanglement is mandated. Scene safety is paramount. Because incidents do not always fit into the fixed categories of this SOG, all members are empowered to undertake courses of action they deem necessary to handle the incident providing they remain within their scope of training and all appropriate guidelines.

SCOPE:

All LVAC Personnel (Volunteer and Career).

Two ambulances shall respond; first unit responds Code 2, second unit responds Code 1 until otherwise instructed.

POLICY:

All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in addition to wearing issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

4.	
	0000000"000000ö000000Â000

Title: Carbon monoxide with and without symptoms Section: 3 - Operations Number: 3.03					ions
Author: J.Snaza Effective: Immediately Super			cede	s: NEW	Page 14 of 18
Approval: President Approval: Director of Operation				Revised:	
G. Jankiewicz 29-Nov-04	Jeffrey F. Snaza, 29 Nov 04	Jeffrey F. Snaza, 29 Nov 04 15 April 2005		15 April 2005	
	_	•		_	-

Title: Carbon monoxide with and without symptoms				ection: 3 - Operat Imber: 3.03	ions
Author: J.Snaza Effective: Immediately Su			percec	les: NEW	Page 15 of 18
Approval: President	Approval: Director o	Approval: Director of Operations		Revised:	
G. Jankiewicz 29-Nov-04	Jeffrey F. Snaza, 29 N	ov 04		15 April 2005	

00000000000000000000000000000000000000	
□□: □□X□□□#□□□□□□□□"□□□□□□□ ² □□□□□□□□	
	J□□□Ù
□□□PURPOSE:	

Although LVAC is a primary care giver of medical aid and transportation, coordination with fire department personnel to provide scene safety and patient extrication and disentanglement is mandated. Scene safety is paramount. Because incidents do not always fit into the fixed categories of this SOG, all members are empowered to undertake courses of action they deem necessary to handle the incident providing they remain within their scope of training and all appropriate guidelines.

SCOPE:

All LVAC Personnel (Volunteer and Career).

Two ambulances shall respond; first unit responds Code 2, second unit responds Code 1 until otherwise instructed.

POLICY:

All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in addition to wearing issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

a.	000000"000 z 000#000000:
	□□X□□□#□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□
	`aaaÚaaaaaa¦aaaaaaa¦aaaaaaa¦aaaaaaa¦aaaaaa
	□□□PURPOSE:

Although LVAC is a primary care giver of medical aid and transportation, coordination with fire department personnel to provide scene safety and patient extrication and disentanglement is mandated. Scene safety is paramount. Because incidents do not always fit into the fixed categories of this SOG, all members are empowered to undertake courses of action they deem necessary to handle the incident providing they remain within their scope of training and all appropriate guidelines.

SCOPE:

All LVAC Personnel (Volunteer and Career).

Two ambulances shall respond; first unit responds Code 2, second unit responds Code 1 until otherwise instructed.

POLICY:

All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in addition to wearing issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

b. DDDDDDPURPOSE:

Although LVAC is a primary care giver of medical aid and transportation,

Title: Carbon monoxide with and without symptoms				ction: 3 - Opera imber: 3.03	tions	
Author: J.Snaza Effective: Immediately			Super	ced	les: NEW	Page 16 of 18
Approval: President		Approval: Director of Operations			Revised:	
G. Jankiewicz 29-Nov-04		Jeffrey F. Snaza, 29 Nov 04			15 April 2005	

coordination with fire department personnel to provide scene safety and patient extrication and disentanglement is mandated. Scene safety is paramount. Because incidents do not always fit into the fixed categories of this SOG, all members are empowered to undertake courses of action they deem necessary to handle the incident providing they remain within their scope of training and all appropriate guidelines.

SCOPE:

All LVAC Personnel (Volunteer and Career).

Two ambulances shall respond; first unit responds Code 2, second unit responds Code 1 until otherwise instructed.

POLICY:

All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in addition to wearing issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

ty and patient extrication and disentanglement is mandated. Scene safety is paramount.

Because incidents do not always fit into the fixed categories of this SOG, all members are empowered to undertake courses of action they deem necessary to handle the incident providing they remain within their scope of training and all appropriate guidelines.

SCOPE:

All LVAC Personnel (Volunteer and Career).

Two ambulances shall respond; first unit responds Code 2, second unit responds Code 1 until otherwise instructed.

POLICY:

All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in addition to wearing issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

5. y and patient extrication and disentanglement is mandated. Scene safety is paramount. Because incidents do not always fit into the fixed categories of this SOG, all members are empowered to undertake courses of action they deem necessary to handle the incident providing they remain within their scope of training and all appropriate guidelines.

SCOPE:

All LVAC Personnel (Volunteer and Career).

Two ambulances shall respond; first unit responds Code 2, second unit responds Code 1 until otherwise instructed.

POLICY:

All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in

Title: Carbon monoxide with and without symptoms			Section: 3 - Ope Number: 3.03	rations
Author: J.Snaza Effective: Immediately \$			cedes: NEW	Page 17 of 18
Approval: President	Approval: Director of Operati	Approval: Director of Operations		•
G. Jankiewicz 29-Nov-04	Jeffrey F. Snaza, 29 Nov 04		15 April 2005	

addition to wearing issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

shall respond; first unit responds Code 2, second unit responds Code 1 until otherwise instructed.

POLICY:

All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in addition to wearing issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

6. shall respond; first unit responds Code 2, second unit responds Code 1 until otherwise instructed.

POLICY:

All personnel shall wear high visibility safety vests during highway incidents, night operations, multiple agency operations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in addition to wearing issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

ations, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in <u>addition to wearing</u> issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

7. tions, inclement weather and when parked in any roadway where the crew is subject to oncoming traffic. This is in <u>addition to wearing</u> issued clothing with reflexive trim.

Safety helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.

- a. helmets are provided on all ambulances and shall be worn whichemicals by taking appropriate action to cover or control the spill/leak.
- b. A minimum of one manned and charged hand-line is required to be in place before LVAC personnel may enter the scene.
- c. If LVAC personnel must enter the scene during disentanglement or during an extended extrication, they will enter with the explicit intent of accomplishing their needed task and then immediately withdrawing.
- d. Absolute necessity shall include but not be limited too:
 - 1. Life saving intervention required.
 - 2. Immediate evaluation of the patient is needed.

Title: Carbon monoxide	with and without symptoms		Section: 3 - Ope Number: 3.03	rations
Author: J.Snaza Effective: Immediately Sup			cedes: NEW	Page 18 of 18
Approval: President	Approval: Director of Operation	Approval: Director of Operations		·
G. Jankiewicz 29-Nov-04	Jeffrey F. Snaza, 29 Nov 04		15 April 2005	

e. Use of power tools should be stopped or severely limited to provide for better evaluation/intervention of the patient and to reduce the potential danger of the LVAC personnel.

Title: Incident Rehabilitation				ection: 3 - Gen umber: 3.06	eral	
Author: J.Snaza Effective: 1 Jan 2017 Su			Super	cec	les: NEW	Page 1 of 4
Approval: President	Approval: Director of Operation	ons			•	
Chester Popiolkowski		Timothy P. Marshall				

LOCATION:

The Incident Commander will normally designate the location for the Rehabilitation Area. If a specific location has not been designated, the Rehab Officer shall select an appropriate location based on the site characteristics and designations below.

Site Characteristics

- 1. It should be in a location that will provide physical rest by allowing the body to recuperate from the demands and hazards of the emergency operation or training evolution.
- 2. It should be far enough away from the scene that members may safely remove their turnout gear and SCBA and be afforded mental rest from the stress and pressure of the emergency operation or training evolution.
- 3. It should provide suitable protection from the prevailing environmental conditions. During hot weather, it should be in a cool, shaded area. During cold weather, it should be in a warm, dry area.
- 4. It should enable members to be free of exhaust fumes from apparatus, vehicles, or equipment (including those involved in the Rehabilitation Sector/Group operations).
- 5. It should be large enough to accommodate multiple crews based on the size of the incident.
- 6. It should be easily accessible by EMS units.
- 7. It should allow prompt reentry back into the emergency operation upon complete recuperation.

Site Designations

- 1. A nearby garage, building lobby, or other structure.
- 2. Several floors below a fire in a high rise building.
- 3. A school bus, municipal bus, or OEM vehicle...
- 4. Fire apparatus, ambulance, or other emergency vehicles at the scene or called to the scene.
- 5. An open area in which a rehab Area can be created using fans, etc.

GUIDELINES:

Rehabilitation Sector Group Establishment

Staff officers should consider rehabilitation during the initial planning stages of an emergency response. However, the climatic or environmental conditions of the emergency scene should not be the sole justification for establishing a Rehabilitation Area. Any activity/incident that is large in size, long in duration and/or labor intensive will rapidly deplete the energy and strength of personnel and therefore merits consideration for rehabilitation. Climatic or environmental conditions that indicate the need to establish a Rehabilitation Area are a heat stress index above 90 or wind chill index below 10 F.

Title: Incident Rehabilitation			Section: 3 - Ger Number: 3.06	neral
Author: J.Snaza Effective: 1 Jan 2017 S			edes: NEW	Page 2 of 4
Approval: President Approval: Director of Operations				·
Chester Popiolkowski	Timothy P. Marshall			

Resources

The Rehab Officer shall secure all necessary resources required to adequately staff and supply the Rehabilitation Area. Fire Company Auxiliary personnel need to be utilized within the rehab area and not allowed to wonder the fire ground or scene.

The supplies should include the items listed below:

- 1. Fluids water, activity beverage, oral electrolyte solutions and ice.
- 2. Food soup, broth, or stew in hot/cold cups.
- 3. Medical blood pressure cuffs, stethoscopes, oxygen administration devices, cardiac monitors, intravenous solutions and thermometers.
- 4. Other The pop up tent may be deployed to offer shelter also, fans, tarps, smoke ejectors, heaters, dry clothing, extra equipment, floodlights, blankets and towels, (to identify the entrance and exit of the Rehabilitation Area).

Hydration

A critical factor in the prevention of heat injury is the maintenance of water and electrolytes. Water must be replaced during exercise periods and at emergency incidents. During heat stress, the member should consume at least one quart of water per hour. The rehydration solution should be a 50/50 mixture of water and a commercially prepared activity beverage and administered at about 40 F. Rehydration is important even during cold weather operations where, despite the outside temperature, heat stress may occur during firefighting or other strenuous activity when protective equipment is worn. Alcohol and caffeine beverages should be avoided before and during heat stress because both interfere with the body's water conservation mechanisms. Carbonated beverages should also be avoided.

Nourishment

The department shall provide food at the scene of an extended incident when units are engaged for five or more hours. A cup of soup, broth, or stew is highly recommended because it is digested much faster than sandwiches and fast-food products. In addition, foods such as apples, oranges, and bananas provide supplemental forms of energy replacement. Fatty and/or salty foods should be avoided.

Rest

The 'two air bottle rule, or 45 minutes of work time, is recommended as an acceptable level prior to mandatory rehabilitation. Members shall rehydrate (at least eight ounces) while SCBA cylinders are being changed. Firefighters having worked for two full 30-minute rated bottles, or 45 minutes, shall be immediately placed in the Rehabilitation Area for rest and evaluation. In all cases, the objective evaluation of a member's fatigue level shall be the criteria for rehab time. Rest shall not be less than ten minutes and may exceed an hour as determined by the Rehab Officer. Fresh crews, or crews released from the Rehabilitation Sector/Group, shall be available in the Staging Area to ensure that fatigued members are not required to return to duty before they are rested, evaluated, and released by the Rehab Officer.

Recovery

Title: Incident Rehabilita	tion		Section: 3 - Ger Number: 3.06	neral
Author: J.Snaza Effective: 1 Jan 2017			cedes: NEW	Page 3 of 4
Approval: President	Approval: Director of Operati	ions		·
Chester Popiolkowski	Timothy P. Marshall			

Members in the Rehabilitation Area should maintain a high level of hydration. Members should not allow their system to shut down in response to the external cooling. An airconditioned environment is acceptable after a cool-down period at ambient temperature with sufficient air movement. Certain drugs impair the body's ability to sweat and extreme caution must be exercised if the member has taken antihistamines, such as Actifed or Benadryl, or has taken diuretics or stimulants.

MEDICAL EVALUATION:

Emergency Medical Services (EMS)

EMS should be provided and staffed by the most highly trained and qualified EMS personnel on the scene (at a minimum of BLS level). They shall evaluate vital signs, examine members, and make proper disposition (return to duty, continued rehabilitation, or medical treatment and transport to medical facility). Continued rehabilitation should consist of additional monitoring of vital signs, providing rest, and providing fluids for rehydration. Medical treatment for members whose signs and/or symptoms indicate potential problems, should be provided in accordance with local medical control procedures. EMS personnel shall be assertive in an effort to find potential medical problems early.

The first step in rehab evaluation: Obtain entry vital signs, including BP and pulse. Rehab staff should rapidly question crew members about their medical history and current symptoms. Rehab personnel must watch for potentially life-threatening complaints, such as chest pains or shortness of breath. Remember, the goal of the entry medical evaluation is to identify illnesses or injuries, not to keep firefighters from rest and rehydration.

Table 1: Entry Evaluation Findings Evaluation/Treatment Area	Mandating Triage to the Medical
Heart Rate	>120
Blood Pressure	> 200 systolic < 90 systolic >110 diastolic

Heart Rate and Temperature

The heart rate should be measured for 30 seconds as early as possible in the rest period. If a member's heart rate exceeds 110 beats per minute, an (oral) Ear temperature should be taken. If the member's temperature exceeds 100.6F, he/she

Title: Incident Rehabilitation					ction: 3 - Ge ımber: 3.06	neral	
Author: J.Snaza	Effect	ive: 1 Jan 2017	Super	rced	les: NEW	Pa	ge 4 of 4
Approval: President		Approval: Director of Oper	ations				
Chester Popiolkowski		Timothy P. Marshall					

should not be permitted to wear protective equipment. If it is below 100.6 F and the heart rate remains above 110 beats per minute, rehabilitation time should be increased. If the heart rate is less than 110 beats per minute, the chance of heat stress is negligible.

Patients with abnormal vital signs require ongoing vital-sign assessment while they rest, drink and eat. At a minimum, **reassess these patients 20 minutes after entering** the rehab sector/group. Log each patient"s sequential vital signs and assessments on a flow sheet.

After 20 minutes of cool down with rest and rehydration, most crew members" vital signs will return to normal levels. Some patients may still have elevated heart rates (greater than 100 beats per minute) or other abnormal vital signs after 20 minutes (see Table 2). **These patients should then receive a 12 Lead EKG and Gluctose Fingerstick (if not already done)**. Some EIR SOPs prohibit such personnel from returning to duty for the remainder of the incident or shift.

Table 2: Reevaluation Findings Mar Rehabilitation Sector	ndating Continued Time in the
Heart Rate	> 100
Blood Pressure	> 160 systolic < 100 systolic > 90 diastolic

Documentation

All medical evaluations shall be recorded on standard forms along with the members name and complaints and must be signed, dated and timed by the Rehab Officer or his/her designee.

Accountability

Members assigned to the Rehabilitation Sector/Group shall enter and exit the Rehabilitation Area as a crew. The crew designation, number of crew-members, and the times of entry to and exit from the Rehabilitation Area shall be documented by the Rehab Officer or his/her designee on the Company Check-In/Out Sheet. Crews shall not leave the Rehabilitation Area until authorized to do so by the Rehab Officer.

Title: Inter-Hospital Transfers					ction: 3 - Genera mber: 3.07	al
Author: J.Snaza	Author: J.Snaza Effective: 1 Jan 2005 Supe				es: NEW	Page 1 of 1
Approval: President Approval: Director of Operations				Revised:		
Chester Popiolkowski Timothy P. Marshall						

- 1. At times, the LVAC may be requested for inter-hospital transfers. Inter-hospital transfers will be handled permitted adequate personnel and resources are available.
- 2. As much information as possible must be gathered:
 - a. Point of Contact (POC).
 - b. Call back numbers.
 - c. Maps
 - d. Special equipment needs.
 - i. 12 or 120-volt power supply.
 - ii. Ability to secure additional equipment.
 - e. Destination
 - i. To and From.
 - ii. Method of return for hospital staff
 - 1. Will we be responsible for their return?
 - 2. Will they have an alternate means?
 - 3. Will we be returning any equipment?
- 3. On-duty PSS personnel should not handle inter-hospital transfers unless no other alternative is available.
- 4. The Director of Operations and/or President must be notified immediately and approve the inter-hospital transfer request.
- 5. An "Unusual Incident Report" must also be filed with the Operations Department as soon as the call is completed.

Title: Equipment Exchange					ction: 3 - Genera mber: 3.08	al
Author: T Marshall	Effect	tive: 28 Feb 2017	Super	ced	es: NEW	Page 1 of 1
Approval: President Approval: Director of Operations				Revised:		
Chester Popiolkowski Timothy P. Marshall					28 Feb 2017	

First Responder Agencies:

- 1. The only equipment that will be replaced to another responding agency will be non-rebreather masks and nasal cannulas (1) per patient
- 2. Equipment will only be replaced provided it does not reduce the unit below part 800 levels.
- 3. Hardware such as BP Cuffs, stethoscopes, etc. will not be replaced.
- 4. If any question arises as to whether equipment should be replaced the Director of Operations should be contacted.

Police Departments:

- 1. Any equipment or supplies available for restock at the LVAC will be replaced out of existing inventory for the designated police agency.
- 2. Hardware such as BP Cuffs, stethoscopes, etc. will not be replaced.
- 3. Oxygen cylinders will be refilled/replaced on a 1 for 1 basis for Depew Police.
- 4. If any question arises as to whether equipment should be replaced the Director of Operations should be contacted.

Title: Unusual Incident Responsibilities					ction: 3 - Opera mber: 3.09	ations
Author: J.Snaza	Author: J.Snaza Effective: 1 Jan 2017 Supe				es: NEW	Page 1 of 1
Approval: President Approval: Director of Operations				Revised:	•	
Chester Popiolkowski Timothy P. Marshall						

RESPONSIBILITIES OF PATIENT CARE STAFF WHEN:

- PATIENT CANNOT BE LOCATED LVAC personnel will make every reasonable effort to
 locate a patient. The LVAC will enlist the assistance of law enforcement personnel as
 deemed necessary. Town of Lancaster Police Department dispatchers are instructed to
 record a callback number in every possible incident, and if one is available, the
 dispatcher will re-call the person who reported the incident and get further directions and
 details.
- ENTRY CANNOT BE GAINED TO THE SCENE OF AN INCIDENT If the location of the patient is locked, the appropriate law enforcement agency will be contacted. If all possible means of gaining entry to the scene are exhausted and the patient cannot be contacted by phone though the dispatcher, the police agency should make alternate access decisions. The Police Department is responsible for access to a scene by forced entry. The circumstances of the call will be fully documented on the PCR and on an incident report to include time required to gain entry.
- A PATIENT JUDGED TO BE IN NEED OF MEDICAL ASSISTANCE REFUSES
 TREATMENT AND/OR TRANSPORTATION Patients who refuse treatment or
 transportation who are in need of medical attention should encouraged by the
 EMS crew to seek evaluation. However, if the patient still refuses, the crew
 should alert the police officer on scene to help with convincing the patient in being
 evaluated. If the patient still refuses, medical direction should be contacted and
 the crew and police officer should consider placing the patient on 941 papers.
- TREATING MINORS Minors will be treated in emergent situations regardless of the
 presence of a parent or guardian following the legal doctrine of implied consent. The
 LVAC crew or law enforcement should make every reasonable effort to contact the child's
 parent/guardian. Treatment or transportation should not be delayed while doing so. If the
 minor is refusing treatment and/or transport and the crew feels that the minor is in need
 of such care/transport, the police department and Medical Control will be contacted
 immediately.
- A CRIME IS SUSPECTED If an ambulance crew suspects that criminal activity has
 occurred, the crew must report their suspicions to the local law enforcement agency. If
 the dispatcher suspects that a crime has been involved while dispatching a call, s/he will
 notify law enforcement before the arrival of the ambulance crew on scene. The LVAC
 crew should make every attempt to preserve evidence while providing whatever patient
 care/transportation is necessary without delay.

Title: Stand-Bys					ection: 3 - Genera Imber: 3.10	al
Author: J.Snaza	Effect	t ive: 1 Jan 2017	Super	cec	les: NEW	Page 1 of 1
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- 1. Stand-bys are to be handled by a Line Officer or his/her designee.
- 2. Stand-bys should be scheduled as far in advance as possible and shall not take precedence over handling emergency calls.
- 3. The crew on duty should not handle stand-bys unless they are free to leave the event to run emergency calls.
- 4. A Line Officer or his/her designee shall determine the adequate number of vehicles and personnel necessary to adequately handle the stand-by.
- 5. Stand-bys outside of the primary service area should only be considered if it would not deplete resources in the primary area.

Title: Public Service Calls				Section: 3 - General Number: 3.11			
Author: T. Marshall Effective: 1 Jan 2017 Super				rcede	es: NEW	Page 1 of 1	
Approval: President		Approval: Director of Operati	ons		Revised:		
Chester Popiolkowski		Timothy P. Marshall					

1. LVAC has instituted a new call type called PUBLIC SERVICE.

This applies to calls for assistance involving a patient that is reportedly not injured, and only requires assistance in being moved from one location to another (i.e. chair to bed, toilet to chair). These calls will be dispatched in the same fashion as any other emergency call by the Dispatch Center. Crews are expected to treat these calls in the same manner as all other responses with regards to the promptness in responding and the courtesy shown towards the patient.

2. Response Mode to the Scene

These calls are to be responded to in a NON-EMERGENCY manner (no lights or siren). Upon arrival, the patient is to be treated as you would on any other call. Assess the scene and the patient for injuries or illness and provide the appropriate care.

3. Release from the Scene

Should the patient be uninjured and only require assistance from one location to another, you may release from the scene once the required assistance has been rendered without obtaining a refusal of care signature. Should the patient be injured or suffering an obvious illness, you must try to convince them to seek medical attention and transport to the hospital. The patient may of course refuse such care, but must be competent to do so after being advised of the potential risks of such an action. In these cases, a refusal of care signature is required prior to release. In cases where the stations call volume is high, responses to these incidents can be preempted at the discretion of the head attendant.

4. A EPCR must be generated for all calls regardless if the patient is transported or not.

Title: Vehicle Operations					Section: 3 - General Number: 3.12			
Author: J.Snaza	Author: J.Snaza Effective: 1 Jan 2005 Supe				les: NEW	Page 1 of 1		
Approval: President	•	Approval: Director of Operation	ons		Revised:			
Chester Popiolkowski Timothy P. Marshall								

- 1. LVAC Vehicles shall only be operated by members of the LVAC with the following minimum credentials:
 - a. Valid Driver's License with no convictions of the following charges within the past five years; DUI, reckless driving, hit and run, or driving while license is suspended or revoked.
 - b. 21 years of age or older
 - c. Current Emergency Vehicle Operator's Certification (EVOC) or CEVO II
- Members with the credentials listed above must be approved by the Director of Operations prior to driving on emergency calls. Head Attendants should observe ambulance operations of these individuals in non-emergency situations and make recommendations to the DO.
- 3. The head attendant is responsible for and has the authority to direct the location, condition and availability of all vehicles and equipment.
- 4. When transporting to the hospital, the Head Attendant should determine based on the patient's condition whether the response should be emergency (with lights and siren) or non-emergency.
- 5. There is to be no smoking in any squad vehicle at any time.
- 6. All front seat occupants in the vehicle shall wear seat belts at all times while the vehicle is in motion.
- 7. Patient care providers should wear seat belts when practical.
- 8. Please refer to SOP #3.2 for response to emergency calls
- 9. Please refer to SOP #3.47 for response to non-emergency calls.

Title: Emergency Response Vehicle Operations (ERV)					tion: 3 - Genera nber: 3.13	al
Author: J.Snaza	Author: J.Snaza Effective: 1 Jan 2017 Superc			cede	s: NEW	Page 1 of 1
Approval: President Approval: Director of Operations			F	Revised:		
Chester Popiolkowski Timothy P. Marshall						

No member shall be authorized to utilize this vehicle unless In-Serviced and approved by the Operations Department. Such authorization may be revoked as necessary and at any time.

Members must meet one (1) of the following criteria:

- 1. Emergency Medical Technician Defibrillation certified under New York State and having been granted medical direction by WREMS protocol and receiving On-Line status by the LVAC.
- 2. LVAC Board of Directors
- 3. Approved Corps Business

Members shall be responsible for and expected too:

- 1. Be signed in for squad time.
- 2. Complete the inspection form(s) for the vehicle, place the completed forms in the PCR drop box.
- 3. Ensure the vehicle is stocked in compliance with the inventory sheet.
- 4. The mileage log must be completed.
- 5. The vehicle must be cleaned and left clean upon return.
- 6. The vehicle must be refueled when less then ¾ full; it shall not be left in need of fuel.
- 7. Complete a PCR for every call response.

Responsibilities:

- 1. Personnel shall notify Dispatch that they are "on the air available" and shall state their Level.
- 2. Any time the member is away from the vehicle, he/she shall have a portable radio on and maintain radio contact at all times.
- 3. Use of the ERV shall be based on the following priorities from highest to lowest:
 - a. ALS responses in the primary service area
 - b. First response to emergency calls by members in the primary response area
 - c. Response to provide additional personnel on the scene of an emergency
 - d. Provide mutual aid to other EMS agencies
 - e. Familiarization of primary response district
 - f. Transportation of members to training
 - g. Transportation of members to meetings.
 - h. Obtaining food within the primary response area.
- 4. Members wishing to use the vehicle for non-emergency response must have prior approval from the Paramedic for travel **within the district**. Non-emergency travel **outside of the district** must be approved by a line officer.
- 5. Prior to use a, line officer must approve any case of personal use of the vehicles other than for food.
- 6. Vehicles should spend the least amount of time possible out of the station. Upon completion of business or task, vehicles should be promptly returned to station.

Title: DOA/Confirmation					ection: 3 - Genera umber: 3.15	al
Author: T Marshall	Author: T Marshall Effective: 1 Jan 2005 Su				des: NEW	Page 1 of 1
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski Timothy P. Marshall						

- 1. Lancaster/Depew Police dispatches EMS to respond to a possible "DOA" or Confirmation call.
- 2. Upon arrival, EMS shall perform a full patient assessment.
- 3. Once it is determined that the patient shows no signs of life, and no life-saving measures will be performed, EMS shall notify the on-scene police officer.
- 4. If no police officer is on-scene, contact the appropriate police dispatch via radio and request an officer to respond.
 - a. EMS personnel shall remain on-scene and "out of service" until a police officer arrives, and is properly briefed on the situation.
- 5. Once the on-scene police officer has been notified of the patient outcome, request permission from the officer to return in service.
- 6. The Police Department shall be responsible for notification of the Medical Examiners office.
- 7. A private transport company shall be utilized to transport the body. The Medical Examiners office will handle arrangements for this transportation.
- 8. Medical Control shall be contacted for all DOA patients. An EPCR will be generated and the medical control Doctors name shall be recorded with times.

Title: Critical Incident Stress Management (CISM)					Section: 3 - General Number: 3.16		
Author: J.Snaza	Effect	ive: 1 Jan 2017	Super	rced	les: NEW	Page 1 of 1	
Approval: President Approval: Director of Operations				Revised:			
Chester Popiolkowski Timothy P. Marshall							

Critical Incident Stress Management (CISM) is defined as "early intervention strategy, often employed within hours of the traumatizing event..."

The Erie County Department of Emergency Services maintains a team of trained volunteers and professionals to help emergency service providers handle stress. Team members are mental health professionals, emergency services peers, and clergy. Each team member is trained and experienced in his/her own field and has undergone a specifically prescribed course of instruction in Emergency Service Stress Intervention.

The CISM process is NOT an operational critique, but a confidential, non-evaluative discussion of the involvement, thoughts, reactions and feelings from an incident. The need for CISM should be considered early on in an incident. CISM members are available to respond to the scene of a lengthy incident and begin the CISM process early. During, or immediately following each incident, a review for the need for CISM intervention should be made for all personnel participating in the incident.

Some criteria that should be considered in regards to that evaluation include:

- 1. Mass disaster (flood, fire, tornado, terrorism/weapons of mass destruction, etc)
- 2. Multiple injuries/fatalities
- 3. Death or injury to a child
- 4. Serious injury or line of duty death (LODD)
- 5. Prolonged Incident Operations
- 6. Excessive media attention
- 7. Outsiders or family members interfering with operations
- 8. Victim known to the members or personal identification
- 9. Members exhibiting signs/symptoms of traumatic stress
- 10. Member(s) requesting CISM intervention
- 11. Any incident grotesque by sight, smell, or other circumstance likely to produce an emotional (memory) input.

If it is determined that a CISM intervention is needed, the following procedure should be followed:

- 1. Head Attendant or person requesting CISM should contact the Director of Operations or other Line Officer.
- 2. The Director of Operations or other Line Officer shall contact MERS Control at (716) 898-3696.
- 3. Any callers should identify themselves with organization, name and title.
- 4. Request MERS to contact the CISM team.
- 5. Provide the MERS dispatcher with any requested information.
- The CISM team will be in contact.

NOTE: Any on scene requests for CISM shall be made through the Incident Commander.

Title: Direct Response					ection: 3 - Genera umber: 3.17	al
Author: J.Snaza	Effect	t ive: 1 Jan 2017	Superce		les: NEW	Page 1 of 1
Approval: President		Approval: Director of Operations			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- 1. No member shall directly respond to the scene of an incident without the prior approval of the Incident Commander or the Chief, unless:
 - a. The member must pass the incident to get to the station
 - b. The incident is within ½ mile radius of the member's location.
 - i. NOTE: When any member responds to the station or to the scene of an emergency in their private vehicle, each member must strictly adhere to all applicable motor vehicle laws. Privately owned vehicles are not provided with the same exemptions that are provided to emergency vehicles.
- 2. No member of the organization will be permitted to violate any motor vehicle laws, including but not limited to:
 - a. Speed limits
 - b. Going through traffic control devices
 - c. Passing in an unsafe manner
- 3. While it is recognized that timeliness in response to an emergency is important, it is imperative that all drivers understand that their private vehicles are not emergency vehicles and therefore are not afforded any exemptions or special privileges under any state law.
- 4. Any driver observed breaking any traffic laws or operating any vehicle in an aggressive or unsafe manner will be subject to disciplinary action including suspension, loss of driving privileges within the organization and withdrawal of courtesy light permit.

Title: Red Lights and Siren Authorization				Section: 3 - 0 Number: 3.1	
Author: J.Snaza	Effect	ive: 1 Jan 2017	Super	cedes: NEW	Page 1 of 1
Approval: President		Approval: Director of Operations		Revised:	·
Chester Popiolkowski		Timothy P. Marshall			

- 1. Red lights may be used by the positions listed below in accordance with New York State DOH rules and regulations.
- 2. These persons must register their vehicle with the Operations Department once a year. The Operations Department shall in turn, register the members vehicle with the Department of Health.
- 3. The registration list will be submitted to the New York State Department of Health annually.
- 4. Failure to register with the Operations Department will result in persons displaying and operating red lights illegally and are subject to the fullest extent of the law.
- 5. The following Line Officer Positions shall be authorized use of Red Lights and Siren. Line Officer vehicles shall also be considered an ERV and must be equipped and inspected as such.
 - a. Director of Operations
 - b. 1st Assistant Director of Operations
 - c. 2nd Assistant Director of Operations
 - d. 3rd Assistant Director of Operations

Members utilizing their privately owned vehicles as Emergency Response Vehicles (ERV's) shall abide by the following criteria and are subject to monthly inspections by the Operations Department

Title: Injuries and Accide	ents		Section: 3 - General Number: 3.20			
Author: T. Marshall	Effective: 1 Jan 2017	Supercedes: NEW		Page 1 of 3		
Approval: President	ent Approval: Director of Operations		Revised:	•		
Chester Popiolkowski	Timothy P. Marshall		28 Feb 2017			

INJURIES:

- 1. In the event a member or employee of the LVAC is injured while On-Duty, during LVAC approved training or LVAC approved activity, the member or employee is responsible for proper notification of officers.
- 2. Notification shall be made immediately to the Director of Operations, the President and the Secretary.
- 3. An incident report shall be completed as soon as possible and forwarded to the above-mentioned officers.
- 4. In the event any civilian is injured on LVAC property or by an LVAC vehicle, an incident report shall be completed and immediately submitted to both the Director of Operations and the President.

VEHICLE ACCIDENTS:

- 1. In the event an LVAC vehicle is involved in an accident where there is damage to any vehicle and/or injury, it shall be the duty of the crew to notify the Director of Operations, Director of Maintenance and the President.
- 2. An accident report must be filed as soon as possible.
- 3. The driver shall automatically receive a three-day (72 hour) driving suspension so that an investigation may be conducted. This period is also to afford the person involved time to cope with the events that just happened.
- 4. The Accident Investigation Review Board shall make the final determination as to whether or not, the driver shall remain on suspension or be released from suspension after completing the seventy-two (72) hour period.
- 5. During this time, the driver is not barred from the LVAC premises and may perform all other duties but may not drive any LVAC vehicle.
- 6. An Incident Report shall be completed and forwarded to the Director of Operations and the President, immediately upon return to the Squad Room.
- Any time there is an accident involving a LVAC vehicle, the driver of that vehicle shall be taken to ECMC for a drug test. The driver should be taken to ECMC by a line officer or supervisor.

REPORTABLE:

- 1. Any driver involved in a reportable accident (i.e., one involving personal injury or serious property damage) shall stop the ambulance immediately and call for a second ambulance to transport the patient or to respond to an emergency call.
- 2. The Driver shall immediately notify the Police and provide all requested information.
- 3. The Driver shall have the dispatcher notify the Director of Operations, President and the Director of Maintenance immediately. The Director of Operations or his designee will respond to the scene of the accident.
- 4. If necessary and possible, the crew of the damaged ambulance shall make arrangements for the ambulance to be towed.

Title: Injuries and Accidents				Section: 3 - General Number: 3.20			
Author: T. Marshall	or: T. Marshall Effective: 1 Jan 2017 Supe		Super	rcedes: NEW Page 2 of 3			
Approval: President		Approval: Director of Operations			Revised:		
Chester Popiolkowski		Timothy P. Marshall			28 Feb 2017		

NON REPORTABLE:

- 1. The driver of an LVAC vehicle involved in a non-reportable accident shall stop the vehicle and exchange information with the driver of the other vehicle and shall notify the local police in order to have an accident report on record.
 - a. An Accident Report shall be filed for ALL accidents. (It may be standard practice for police agencies not to file an accident report for certain accidents not involving injury or significant damage; The Head Attendant shall insist an accident report be filed for ALL accidents).
- 2. In the driver's discretion, a second ambulance may be called to transport at patient or respond to an emergency call.
- 3. The driver shall notify the Director of Operations or most senior line officer as soon as possible after the incident.

ACCIDENT INVESTIGATION:

- 1. Responsibility:
 - a. It shall be the responsibility of the accident review board to determine the cause of the accident or near accident.
- 2. The accident review board shall consist of the following:
 - a. Director of Operations
 - b. One Assistant Director of Operations
 - c. Two qualified drivers
- 3. The Director of Operations shall chair the accident review board.
- 4. The review of any accident or near accident shall occur within seventy-two (72) hours as to receive information and conduct interviews while easily obtainable and recollection is best.
- 5. The review shall consist of:
 - a. Obtain any written reports or statements associated with the incident. (Police accident report, etc.)
 - b. Interview or collect statements from all or any witnesses to the incident.
 - c. Interview the driver of the incident.
 - d. Interview the attendant involved.
 - e. Drug/Alcohol testing shall be required for the driver and done at an appropriate occupational health facility.
- 6. The investigation details shall be documented on the accident review board report as listed.
- 7. Upon completion of report all review board members shall review and sign the report.
- 8. A control number shall be assigned to each report. The control number shall consist of the year and the number of the report for the year. (Example, the first reports for 1993 would be 93.01, etc.)
- 9. Review board reports shall be distributed as follows:
 - a. Chairman, Board of Directors
 - b. Individual Drivers File

Title: Injuries and Accidents				Section: 3 - General Number: 3.20		
Author: T. Marshall	thor: T. Marshall Effective: 1 Jan 2017 Supe		Super	ercedes: NEW Page 3 of 3		
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall			28 Feb 2017	

c. Accident Review Log

Title: Speedway Operati	ons		Section: 3 - General Number: 3.21			
Author: J.Snaza	Effective: 20 April 2017	Super	cedes: NEW	Page 1 of 2		
Approval: President	Approval: Director of Operati	ons	Revised:	·		
Chester Popiolkowski	Timothy P. Marshall		7 July 2016			

- 1. No personnel, paid or volunteer, shall assume duties or responsibilities other than those of Ambulance Staff while under the auspice of the LVAC.
- 2. All personnel shall attend the mandatory Pre-Briefing before they are eligible attend any track functions.
- 3. A sign-up schedule shall be posted for the season.
 - a. The schedule shall include all special events and rain dates.
- 4. Volunteer personnel shall have priority over PSS to attend any scheduled track stand-by.
- 5. Volunteer personnel must sign-up No Later Than ten (10) days prior to the scheduled event if a PSS member is already signed-up for that date.
- 6. Hearing protection is provided and shall be worn anytime ambient noise levels increase.

CREW RESPONSIBILITIES:

- 1. Personnel shall report to the LVAC NLT one-half hour prior to start time.
- 2. Personnel shall thoroughly inspect the assigned ambulance prior to leaving the LVAC for the detail.
- 3. Personnel shall be In-Place at the designated time.
- 4. Upon arrival, personnel shall make contact with a designated track official.
- 5. Personnel shall maintain radio communications with track officials and dispatch.
- 6. The ambulance shall be parked in a designated area considered safe and not distracting to the drivers.
- 7. LVAC personnel shall stay with the vehicle at all times unless otherwise rendering care.
- 8. No crewmember shall direct the ambulance onto the track or any other area until it has been declared safe by track officials.
- 9. Track safety personnel shall first declare all accidents safe prior to LVAC personnel approaching any accident site.
- 10. Personnel may assist with extrication only when the use of power or hand tools has stopped.

LVAC PERSONNEL SHALL NOT:

- 1. Perform Firefighting operations.
- 2. Perform Vehicle Extrication or Disentanglement.
- 3. Clean up any fuels, fluids or spills.
- 4. Perform any track operations.
- Shuttle drivers.

TRACK RESPONSIBILITIES:

- 1. Safety personnel are responsible for victim extrication and disentanglement.
- 2. Safety personnel are responsible to deliver accident victims to the ambulance crew for evaluation/treatment/transport.

REFERENCE:

Operations SOG: 3.03 Motor Vehicle Crashes

Title: Speedway Operations				Section: 3 - General Number: 3.21			
Author: J.Snaza Effectiv		tive: 20 April 2017 Superced		rcedes: NEW	Page 2 of 2		
Approval: President		Approval: Director of Operat	ions	Revised:			
Chester Popiolkowski		Timothy P. Marshall		7 July 2016			

SPEEDWAY OPERATIONS ARE SUSPENDED UNTIL FURTHER NOTICE Effective 7/30/2016
Per 900

Title: Mechanical Failure				Section: 3 - Operations Number: 3.22			
Author: J.Snaza	Effect	tive: 1 May 2017	Superced		les: NEW	Page 1 of 1	
Approval: President		Approval: Director of Operations			Revised:		
Chester Popiolkowski		Timothy P. Marshall					

- 1. A driver should take an ambulance out of service whenever s/he observes any mechanical problem that s/he believes would interfere with safe operation.
- 2. The driver shall notify the Director of Maintenance as soon as possible and report the details of the problem.
- 3. The Director of Operations and/or the Director of Maintenance shall make the final determination on the status of the vehicle being out of service.
- 4. If an ambulance experiences mechanical failure while on a call:
 - a. If responding to the call (no patient)
 - i. The driver shall notify the dispatcher and request that another ambulance be dispatched to the location of the call.
 - ii. Available LVAC crew shall be called upon.
 - iii. If no LVAC crew is available then the most appropriate back-up agency shall be called.
 - b. If responding to hospital (patient on board)
 - i. The driver shall notify the dispatcher and request that another ambulance be dispatched to the location of the breakdown.
 - ii. Location and availability shall dictate the most appropriate backup ambulance to request, either an LVAC ambulance or the next appropriate agency.
- 5. The driver of the ambulance shall contact the Director of Maintenance and the Director of Operations and will remain with the failed vehicle to assure that it remains secure and is taken to the proper location.

					3 - Operat : 3.23	tions
Author: J.Snaza	Effect	ive: 1 May 2017	Super	cedes: N	ΞW	Page 1 of 1
Approval: PresidentChester Popio	pproval: PresidentChester Popiolkowski Approval: Director of Operation		ons	Revise	d:	
		Timothy P.Marshall		1 Feb 2	2017	

AMBULANCES:

- 1. The on-duty crews are responsible for checking fuel levels of all four ambulances at the start of each shift.
- 2. Vehicles should be refueled before fuel level reaches ½ full.
- 3. It is the responsibility of the driver to assure that all vehicles are fueled with the proper fuel, i.e. Diesel/Gasoline..
- 4. Except in an extreme emergency, fuel is to be obtained at the Lancaster Central School Bus Garage fuel island, located at the Bus Garage on Pleasant View Drive.
- 5. Refueling procedures:
 - a. Turn off engine.
 - b. Remove key from ignition
 - c. Use passkey to turn on fuel pump controller
 - d. Enter Fuel Code
 - e. Enter Mileage
 - f. Select appropriate pump
 - g. Begin dispensing fuel
 - h. Complete fueling, remove passkey from fuel pump controller, and replace fuel nozzle.

EMERGENCY RESPONSE VEHICLES (ERV)

- 1. The on-duty ALS provider is responsible for checking fuel levels of all responder vehicles at the start of each shift.
- Vehicles should be refueled before fuel level reaches ½ full.
 Except in an extreme emergency, fuel is to be obtained at the Lancaster Central School Bus Garage fuel island, located at the Bus Garage on Pleasant View Drive.
- 3. Refueling procedures:
 - a. Turn off engine.
 - b. Remove key from ignition
 - c. Use passkey to turn on fuel pump controller
 - d. Enter Fuel Code
 - e. Enter Mileage
 - f. Select appropriate pump
 - g. Begin dispensing fuel
 - h. Complete fueling, remove passkey from fuel pump controller, and replace fuel nozzle.

• • • • • • • • • • • • • • • • • • • •					n: 3 - Operat r: 3.25	tions
Author: J.Snaza	Effective: 1 Jan 2017 Su		Super	Supercedes: NEW Page 1 of		
Approval: President		Approval: Director of Operation	ons	Revis	ed:	
Chester Popiolkowski		Timothy P. Marshall				

MEDICAL SUPPLIES:

Upon completion of each call, replacement of medical supplies and oxygen shall be the crew responsibility.

Personnel should leave a note on the dry-erase board in the supply closet if they notice any item is running low in the supply room.

When items are nearing their expiration date (within 1 month) personnel shall notify Operations in writing of such impending expiration.

					ction: 3 - Op Imber: 3.26	erat	ions
Author: T.Marshall Effect		tive: 1 Jan 2017 Sup		Supercedes: NEW Page 1			Page 1 of 1
Approval: President		Approval: Director of Operation	ons		Revised:		
Chester Popiolkowski		Timothy P. Marshall					

OXYGEN:

Oxygen bottles are to be changed when:

- 1. Portable "D" and Jumbo "D" cylinders are at 700psi.
- 2. Onboard "M" cylinders are at 500psi.

ALL Oxygen cylinders shall be secured at all times as to prevent accidental damage and/or catastrophic failure.

- 1. In Vehicle:
 - a. Spare cylinders
 - i. Secured in appropriate holders with retaining strap securely fastened.
 - b. House O2:
 - i. Secured to the stretcher or bench seat by means of the lap-belt being ran through the bottle carrier handle and securely fastened to the receiving part of the lap-belt.
- 2. In Station:
 - a. "D" Cylinders;
 - i. Shall only be placed in the designated O2 bottle storage area.
 - ii. Full Bottles shall be placed with valve facing outward.
 - iii. Empty Bottles shall be placed with the valve facing inward.
 - b. "M" Cylinders;
 - i. Shall only be stored in the designated cylinder storage area.
 - ii. All retaining straps shall be in-place and secure at all times.
 - iii. ALL cylinders shall be stored in an upright position.
 - iv. After a cylinder has been replaced on a vehicle, it shall be secured in the designated area, in an upright position and with the tag indicating "EMPTY".
 - v. The green handcart shall be used any time cylinders are to be moved.
 - 1. The safety chain shall be properly secured around the cylinder when being moved.

ALL Oxygen Cylinders shall be maintained in accordance with all recognized safety standards and current hydrostatic testing. Refilling of oxygen bottles is only to be performed by those trained and authorized by the director of operations. Refer to oxygen filling SOG

					Section: 3 - Operations Number: 3.27		
Author: T. Marshall Effective: 1 Jan 2005 Supe			Super	cec	les: NEW	Page 1 of 1	
Approval: President		Approval: Director of Operation	ons		Revised:		
Chester Popiolkowski Timothy P. Marshall							

Requirements for LVAC members to ride in LVAC vehicles

- 1. Member must be an active member of LVAC
- 2. Member must have an active CPR card at all times
- 3. Member must have current LEAP day training fulfilled
- 4. Member must have completed Physical and Drug testing
- 5. Member must have completed their annual fit testing (N95 mask)

Prospective Member Requirements for Ride Along

- 1. Must have application on file.
- 2. Must have completed HIPPA Patient confidenality form.
- 3. Must only observe and may not participate in patient care.
- 4. Must wear Black or navy pants, white shirt, black foot wear no open toe or sandals permitted.
- 5. Must follow instructions of the crew without exception.

Title: Do Not Resuscita	te Orders		ection: 3 - Op lumber: 3.28	perations
Author: J.Snaza Effective: 1 Jan 2017 Super			des: NEW	Page 1 of 3
Approval: President	Approval: Director of Opera	tions	Revised:	•
Chester Popiolkowski	Timothy P. Marshall			

I. Purpose

This policy is to address how EMS personnel are to deal with orders or directions to not provide life-sustaining treatment, CPR, nutrition or hydration to a pregnant woman.

II. Definitions

The following words and terms, when used in this policy, have the following meanings, unless the context clearly indicates otherwise:

Advance directive – A directive for health care in a declaration issued by a patient.

Attending physician – A physician who has primary responsibility for the medical care and treatment of a patient. A patient may have more than one attending physician.

CPR—*Cardiopulmonary resuscitation*—Cardiac compression, invasive airway techniques, artificial ventilation, defibrillation and other related procedures used to resuscitate a patient or to prolong the life of a patient.

DNR—Do not resuscitate.

Invasive airway technique—Any advanced airway technique, including endotracheal intubation.

Life-sustaining treatment—

- 1. A medical procedure or intervention that, when administered to a patient, will serve only to prolong the process of dying or to maintain the patient in a state of permanent unconsciousness.
- 2. The term includes nutrition and hydration administered by gastric tube or intraveneously or any other artificial or invasive means if the order of the patient so specifically provides.

Medical command physician—A physician who is approved by a regional emergency medical services council to provide medical command.

Out-of-hospital DNR bracelet—A bracelet which signifies that an out-of-hospital DNR order has been issued.

Out-of-hospital DNR necklace—A necklace which signifies that an out-of-hospital DNR order has been issued.

Out-of-hospital DNR order—A written order, the form for which is supplied by the Department or its designee under this chapter, that is issued by an attending physician and directs EMS providers to withhold CPR from the patient in the event of cardiac or respiratory arrest.

Title: Do Not Resuscitate Orders					Section: 3 - Operations Number: 3.28		
Author: J.Snaza Effective: 1 Jan 2017 Supe			Super	cede	s: NEW	Page 2 of 3	
Approval: President		Approval: Director of Operations		F	Revised:		
Chester Popiolkowski	''						

Out-of-hospital DNR patient—A patient for whom an attending physician has issued an out-of-hospital DNR order.

Patient—One of the following:

- 1. An individual who is in a terminal condition.
- 2. A declarant whose declaration has become operative under 20 Pa.C.S. § 5405(2) (relating to when declaration becomes operative) and which provides that no CPR be provided in the event of the declarant's cardiac or respiratory arrest if the declarant becomes permanently unconscious, or designates a surrogate to make that decision under those circumstances

Permanently unconscious—

- A medical condition that has been diagnosed in accordance with currently accepted medical standards and with reasonable medical certainty as total and irreversible loss of consciousness and capacity for interaction with the environment.
- 2. The term includes, without limitation, a persistent vegetative state or irreversible coma.

Person—An individual, corporation, partnership, association or Federal, State or local government or governmental agency.

Physician—An individual who has a currently registered license to practice medicine or osteopathic medicine in this Commonwealth.

Surrogate—An individual who has, or individuals who collectively have, legal authority to request an out-of-hospital DNR order for another individual or to revoke that order.

Terminal condition—An incurable and irreversible medical condition in an advanced state caused by injury, disease or physical illness which will, in the opinion of the attending physician, to a reasonable degree of medical certainty, result in death regardless of the continued application of life-sustaining treatment.

III. Procedure

- 1. Display of order, bracelet or necklace. An EMS provider may not provide CPR to a patient who is experiencing cardiac or respiratory arrest if an out-of-hospital DNR order, bracelet or necklace is displayed with the patient or the patient's surrogate presents the EMS provider with an out-of-hospital DNR order for the patient, and neither the patient nor the patient's surrogate acts to revoke the order at that time. When an EMS provider observes an out-of-hospital DNR order without also observing an out-of-hospital DNR bracelet or necklace, the EMS provider shall implement the out-of-hospital DNR order only if it contains original signatures.
- 2. Discovery after CPR initiated. If after initiating CPR an EMS provider becomes aware of an out-of-hospital DNR order that is effective under subsection (a), the EMS provider shall discontinue CPR.

Title: Do Not Resuscitate Orders				Section: 3 - Operations Number: 3.28		
Author: J.Snaza Effective: 1 Jan 2017 Suj			Super	ced	les: NEW	Page 3 of 3
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski Timothy P. Marshall						

- 3. Prehospital practitioner uncertainty. If a prehospital practitioner is uncertain as to whether an out-of-hospital DNR order has been revoked for a patient who is experiencing cardiac or respiratory arrest, the prehospital practitioner shall provide CPR to the patient subject to the following:
 - a. If the prehospital practitioner is in contact with a medical command physician prior to initiating CPR, the prehospital practitioner shall initiate or not initiate CPR as directed by the medical command physician.
 - b. If the prehospital practitioner is in contact with a medical command physician after initiating CPR, the prehospital practitioner shall continue or not continue CPR as directed by the medical command physician.
- 4. Discontinuation of CPR not initiated by prehospital practitioner. If CPR had been initiated for the patient before a prehospital practitioner arrived at the scene, and the prehospital practitioner determines that an out-of-hospital DNR order is effective under subsection (a), the prehospital practitioner may not discontinue the CPR without being directed to do so by a medical command physician.
 - a. AED good Samaritan. If an individual who is given good Samaritan civil immunity protection when using an automated external defibrillator (AED) under 42 Pa.C.S. § 8331.2 (relating to good Samaritan civil immunity for use of automated external defibrillators) is uncertain as to whether an out-of-hospital DNR order has been revoked for a patient who is experiencing cardiac arrest, the individual may provide CPR to the patient as permitted by 42 Pa.C.S. § 8331.2, but shall discontinue CPR if directed by a medical command physician directly or as relayed by a prehospital practitioner.
 - b. Providing comfort and alleviating pain. When a prehospital practitioner complies with an out-of-hospital DNR order, the prehospital practitioner, within the practitioner's scope of practice, shall provide other medical interventions necessary and appropriate to provide comfort to the patient and alleviate the patient's pain, unless otherwise directed by the patient or the prehospital practitioner's medical command physician.
 - c. If a patient with cardiac or respiratory arrest has both an advance directive directing that no CPR be provided and an out-of-hospital DNR order, an EMS provider shall comply with the out-of-hospital DNR order as set forth in § 1051.51 (relating to compliance with an out-of-hospital DNR order).
 - d. Notwithstanding the existence of an order or direction to the contrary, lifesustaining treatment, CPR, nutrition and hydration shall be provided to a pregnant patient by a health care provider unless, to a reasonable degree of medical certainty as certified on the patient's medical record by the patient's attending physician and a second physician who is an obstetrician who has examined the patient, life-sustaining treatment, nutrition and hydration will have one of the following consequences:
 - They will not maintain the pregnant patient in such a way as to permit the continuing development and live birth of the unborn child.
 - ii. They will be physically harmful to the pregnant patient.
 - iii. They will cause pain to the pregnant patient which cannot be alleviated by medication.

Title: Mass Casualty Incidents				Section: 3 - Operations Number: 3.29		
Author: J.Snaza Effective: 1 Jan 2017 Su			Super	rced	es: NEW	Page 1 of 1
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

Mass Casualty Incidents (MCIs) present unique challenges to EMS responders. Any time the number of patients out-numbers the available EMS resources, an MCI exists. In order to effectively manage an MCI, proper command must be established early on in the incident. Additionally, traditional EMS management rules need to be modified to allow for the complexities introduced by a large number of patients. This standard operating guideline addresses some of the issues critical to the successful mitigation of an MCI.

PROCEDURE:

- 1. Upon arrival at an MCI, the first arriving unit shall perform a rapid scene size-up to ascertain scene safety, the nature of the incident, and an approximate number of patients.
- 2. This information shall be relayed to the Dispatcher and an MCI declared. Additional mutual-aid units shall be requested.
- 3. Additionally, the dispatcher should be requested to notify the hospitals of the MCI and to prepare hospitals to receive patients.
- 4. The first unit on scene shall assume command and implement the Incident Command System (refer to SOG #3.01 for additional information).
 - a. The first arriving unit shall not initiate any treatment or transport of patients.
 - b. This unit shall focus on establishing command, developing structure and providing order to a chaotic scene.
- 5. The Incident Commander shall assign additional incoming units to various functions.
- 6. These include, but are not limited to:
 - a. Triage Officer
 - b. Transportation Officer
 - c. Staging Officer
 - d. Operations Officer
 - e. Public Information Officer
 - f. Safety Officer
- 7. All ambulances contain a MCI kit designed for use during an MCI. These include triage tags, sector arm bands, and other equipment. These items shall be deployed as early on during an incident as possible.
- 8. Triage of patients is critical during an MCI. The Lancaster Ambulance Corps shall utilize the "START" triage system and issue a triage-tag to each patient. Patients shall be sorted based upon the universal four-color triage system (Red, Green, Black, Yellow).
- 9. Whenever possible, the county's mass casualty trailer should be requested.

					Section: 3 - Operations Number: 3.30		
Author: T. Marshall Effective: 1 Jan 2017 Su			Super	ced	les: NEW		Page 1 of 2
Approval: President	•	Approval: Director of Operation	ons		Revised:		
Chester Popiolkowski	• • • • • • • • • • • • • • • • • • • •						

- The Lancaster Volunteer Ambulance Corps will transport patients to one of the hospitals listed below if injury or illness is deemed minor, and no protocols contradict the transport.
- 2. Certified EMS providers shall reserve the right to dictate a destination facility based upon protocol, patient condition, on-line medical direction, weather conditions, and MCI protocols.
- 3. Whenever an alternate facility is selected, the patient and/or family should be informed as to the reason the alternate facility was selected.
 - a. In the event that a patient or family doesn't agree with the destination determination made by the EMS crew, the patient should be transported to the most appropriate medical facility (as deemed by the crew) and the reasons and circumstances surrounding the disagreement shall be documented on the Patient Care Report.
 - b. It is preferred to transport to the nearest facility and crew availability should be considered. Again it is ultimately the EMS providers decision. If in doubt the EMS crew should contact the Director of Operations or the shift supervisor.

Approved Medical Facilities Approved Specialized Facilities:

Buffalo General Medical Center Sisters of Charity South Buffalo Mercy Mercy Ambulatory Care Center Women's and Children's Hospital Kenmore Mercy Millard Fillmore Suburban Sisters of Charity-St. Joseph's Campus Bertrand Chaffee Hospital Lakeshore Memorial Veterans Administration Medical Center Degraff Memorial Niagara Falls Memorial Medical Center Mount St. Mary's Hospital Eastern Niagara-Lockport Medina Memorial Hospital United Memorial Medical Center Wyoming County Community Hospital University of Rochester Medical Center-Strong University of Rochester Medical Center-Highland Unity Hospital Rochester General Hospital

Erie County Medical Center

The list of specialized facilities is not all-inclusive and provider discretion should be used.

			Section: 3 - Operations Number: 3.30		
Author: T. Marshall Effective: 1 Jan 2017 Supe			cedes: NEW	Page 2 of 2	
Approval: President Chester Popiolkowski	Approval: Director of Operational Timothy P. Marshall	ations	Revised:	·	

1 0 1					Section: 3 - Operations Number: 3.31		
Author: J.Snaza Effective: 1 Jan 2005 Supe			Super	rced	les: NEW	Page 1 of 2	
Approval: President		Approval: Director of Operation	ons		Revised:		
G. Jankiewicz		Jeffrey F. Snaza,					

Suspected Child Abuse:

All EMS providers shall report any case of suspected child abuse or maltreatment to the Attending Emergency Department Physician immediately upon arrival at the receiving Emergency Department. This should be documented on the patient care report as well as the reasons child abuse was suspected.

 All Mandated-reporting procedures as outlined in the NYS DOH Operating Guides must be followed

Suspected Elder Abuse:

All Head Attendants shall report any case of suspected elder abuse or maltreatment to the Attending Emergency Department Physician immediately upon arrival at the receiving Emergency Department. This should be documented on the patient care report as well as the reasons elder abuse was suspected.

Suspected Neglect:

All Head Attendants shall report any case of suspected neglect, maltreatment, or poor living conditions to the Attending Emergency Department Physician immediately upon arrival at the receiving Emergency Department as well as the Department of Aging or Children and Youth Services as appropriate. This should be documented on the patient care report as well as the reasons neglect, maltreatment or poor living conditions were suspected.

SUSPECTED ABUSE/NEGLECT:

In the case of suspected abuse/neglect, the crew should immediately initiate all appropriate treatment, protect the patient from further abuse, and transport the patient to an appropriate hospital. All objective findings should be documented on the PCR (the observed conditions which raised the suspicion of abuse) including:

An <u>objective</u> description of the scene, actions and statements of those present, as witnessed by the LVAC crew. Suspicion of the abuse/neglect, and the reasons for that suspicion shall be reported to the physician or nurse at the receiving emergency department and/or to the local law enforcement agency.

If patient or guardian refuses care and/or transportation for the patient, the crew shall report the suspected abuse/neglect to the police department. The LVAC crew shall cooperate with law enforcement personnel.

REPORTING INSTRUCTIONS

The following Agencies shall be notified immediately and without exception no matter who was told when and what documentation has taken place:

- 1. Local Police having jurisdiction
- 2. NYS Mandated Reporter hot line (800)635-1522

					Section: 3 - Operations Number: 3.31		
Author: J.Snaza Effective: 1 Jan 2005 Supe			Super	rced	es: NEW	Page 2 of 2	
Approval: President	Approval: President Approval: Director of Operations		ons		Revised:		
G. Jankiewicz Jeffrey F. Snaza,							

3. Immediately upon returning to base Fill out NYS abuse reporting form #DSS-2221-A located in dispatch and fax to the number on the form.

4. These procedure MUST be completed immediately upon return to the base.

·					Section: 3 - Operations Number: 3.34		
Author: J.Snaza Effective: 1 Jan 2017 Sup			Super	ced	les: NEW	Page 1 of 1	
Approval: President	Apı	proval: Director of Operation	ns		Revised:		
Chester Popiolkowski Timothy P. Marshall							

Adult:

Adult patients who are deemed to be of sound mind (e.g., not under the influence of drugs or alcohol, not hypoglycemic, etc.) have the right to refuse care once the risks of doing so have been explained to them. Patient refusals account for a high number of patients encountered by EMS. In addition, refusals constitute over 90% of the lawsuits filed against EMS agencies. This policy outlines the steps to be taken when an adult patient refuses care. It attempts to standardize the steps taken by EMS providers to reduce liability and protect patients.

Policy:

When an EMS provider is confronted with a patient who refuses treatment and/or transportation, the following procedures shall be followed:

- 1. Explain to the patient what may be wrong with them and what the consequences might be if they don't seek medical attention.
- 2. Obtain a complete set of vital signs [pulse, respiration and blood pressure]. If the patient refuses to allow you take them, document the patient's refusal on the Patient Care Report.
- 3. If the patient still refuses medical treatment/transport after you have explained your concerns, have the patient sign the Lancaster Volunteer Ambulance Corps Refusal of Treatment Form on the EPCR.. Have a witness (preferably someone other than a crew member e.g., police officer) sign the refusal form as a witness.
- 4. Contact the dispatcher and inform them that the patient refused treatment and/or transportation.
- 5. Give the patient a copy of the Notice of Privacy Practices as outlined in SOG #2.11 In the event that a patient is not deemed to be competent to make an informed decision (i.e., under the influence of drugs or alcohol, hypoxic, mentally disturbed, etc.), discuss the circumstances with the police and request that the patient be placed "in protective custody" and forced to go to the hospital. If the police refuse to commit the patient for treatment, document so on the PCR. At any time, medical control can be contacted to aid in the determination of mental capacity and the need for medical treatment/hospitalization.

Minor:

If a minor (under 18) does not appear to be incapacitated, and is refusing to go to the hospital, the following guidelines shall be followed before making the decision to transport.

The following actions need to be taken when refusal of transport is presented to the provider:

- 1. Contact the parents of the minor for approval to transport.
- 2. Contact Medical Command and explain the situation.
- 3. Ask the Police Officer to sign the refusal form, with the patient.
- 4. Make a statement and attach it to become part of the record.

As in all patient care, remember to document all information and any actions that take place on all calls. It is not only for the protection of the provider, but also for the patient if they need this documentation at a later time.

, o					Section: 3 - Operations Number: 3.36		
Author: T. Marshall Effective: 1 Jan 2005 Sup			Super	rced	les: NEW	Page 1 of 1	
Approval: President		Approval: Director of Operation	ons		Revised:		
Chester Popiolkowski	'''						

Whenever a psychiatric patient is encountered, the following procedures shall be followed:

- 1) If the patient is at risk of harming themselves or others, the Dispatch shall be contacted and verify that the Police are on location and the scene is safe.
- 2) If Police are not on location the responding unit will stage in the area and wait for police. .
- 3) In the event that a patient is being sent to the hospital under a 941 police order, the police officer issuing the order shall accompany the patient in the ambulance or follow behind. The determination of whether the police officer rides or follows shall be made at the discretion of the EMT in charge of patient care.
- 4) If the patient has to be restrained, the patient may be restrained in accordance with the NYS Part 800 protocols. Additionally, on-line medical direction may direct the restraint of a patient. The Police shall assist in any patient restraint attempts whenever possible.
- 5) At no time should the EMS crew place themselves in danger.
- 6) Patients being transported under a 941 police order shall be transported to the Eire County Medical Center.. If a psychiatric patient suffered any traumatic injuries, they shall be transported to the appropriate facility for trauma services.

941 papers

945 papers

2109

Public health law

Title: Hazardous Materia	Section: 3 - Operations Number: 3.37			
Author: J. Snaza Effective: 1 Jan 2017 Super			cedes: NEW	Page 1 of 1
Approval: President	Approval: Director of Operati	ons	Revised:	•
Chester Popiolkowski	owski Timothy P. Marshall			

Whenever a hazardous materials incident is encountered, the following procedures shall be followed. The Lancaster Volunteer Ambulance Corps desires to protect the life safety of its members and the general public as well as protect property and the environment.

- 1. When confronted with a hazardous materials incident, efforts shall be initially directed towards performing a scene size-up to ascertain the hazardous materials involved, the associated hazards and the presence of any patients requiring evacuation and/or EMS care.
- 2. All LVAC vehicles are equipped with an Emergency Response Guide (ERG). All personnel are to be familiar with this Guide Book and how to properly use all sections of it.
- 3. This scene size-up shall be performed from a distance so that no EMS providers are exposed to the hazardous materials.
- 4. As soon as it is recognized that a hazardous material is involved, the dispatch center shall be notified and a hazardous materials response team shall be requested to respond.
- 5. In addition, the Incident Command System shall be implemented in accordance with company policy (see SOG 3.1).
- 6. After the scene size-up has been completed, vehicles and personnel shall be staged at a safe distance from the hazard, preferably up-wind.
- 7. A "hot zone" shall be established and entry to/from the "hot zone" shall be prohibited.
- 8. Upon the arrival of the hazardous materials response team, all pertinent information shall be relayed to them.
- 9. The hazardous materials response team shall be responsible for dealing with the decontamination of patients and the associated hazardous material mitigation.
- 10. No patients shall be treated or transported by EMS providers until such time that they have been decontaminated by the hazardous materials response team.
- 11. After proper decontamination, EMS providers shall provide all appropriate care and rapidly transport patients to an appropriate hospital for definitive treatment.
- 12. In the event that the patient presents a continued threat to EMS providers and/or their equipment, all necessary precautions shall be taken including the donning of protective clothing or self contained breathing apparatus.
- 13. Subsequent to the call, all equipment shall be decontaminated prior to being returned to service.

As part of their orientation, all new members of the LVAC will be required to attend a Hazardous Materials Awareness Orientation.

This program will include information on how to use the Material Safety Data Sheets on file. If any member notices a chemical in use that does not have an MSDS, s/he should notify the Director of operations who will in turn obtain the sheet.

If, upon response to an EMS incident, the crew suspects that hazardous materials are involved and pose a potential threat to responding personnel, the crew will stay at a safe distance, upwind, and will notify Lancaster Dispatch to have the appropriate agency respond

Title: Crime Scene Management			Section: 3 - Op Number: 3.38	erations
Author: J.Snaza	Author: J.Snaza Effective: 1 Jan 2017			Page 1 of 1
Approval: President	Approval: Director of Operat	ons	Revised:	·
Chester Popiolkowski	Timothy P. Marshall			

- 1. The law enforcement officer is in charge of a crime scene.
 - a. The officer will make a determination of status of the scene (see below) and make this information available to responding police, fire, and medical units. In the absence of being notified units should not assume the scene is secure and take precautions to protect themselves from danger.
 - b. It is the responsibility of all units to be aware of the important evidence that can be damaged or destroyed upon entering a crime scene.
 - c. Fire and medical personnel shall consult with police officers before disturbing items that may be evidence of a crime.
 - d. All involved should take precautions not to disturb crime scene evidence (e.g., weapons, bloodstains, vehicles, skid marks, etc.) or other evidence that can be vital to investigators to reconstruct the crime or accident scene.
 - e. Deceased patients fall under the jurisdiction of the Erie County Medical Examiners office .
 - f. All patient belongings (clothing, jewelry, etc) shall be placed in a brown paper bag that is carried on the ambulance. At no time should patient belongings be placed in a plastic bag. This is to preserve evidence.
- Closed Access to Unsecured Crime Scene (Hazard still exists) Hostage situation, suspect(s) still on scene, environmental hazards present Limited access crime scenes:
 - a. EMS personnel will take direction from the officer in charge who will direct entrance and arrange appropriate escort.
 - b. Life saving considerations will take precedence.
 - c. EMS to confirm death on obvious suicides/homicides.
- 3. Examples of a Limited access crime scene:
 - a. Critical Evidence could be destroyed or compromised.
 - b. Hazard may still be present, Environmental hazards present.
- 4. Open Access Crime Scene:
 - a. Evidence still has to be collected but personnel have access to entire
 - b. Consult with police officers before disturbing any physical evidence.
 - c. Critical evidence could still be destroyed or compromised.

Title: Helicopter Operations					ction: 3 - Ope mber: 3.39	erati	ions
Author: J.Snaza	Author: J.Snaza Effective: 1 Jan 2017			ced	es: NEW		Page 1 of 1
Approval: President		Approval: Director of Operation	ons		Revised:		
Chester Popiolkowski		Timothy P. Marshall					

- 1. Upon arrival at the scene, if the head attendant or paramedic determines that the patient's condition warrants an air medical response, the head attendant or paramedic shall inform the officer in charge that air medical is required.
- 2. In the event the need arises and other responding fire equipment has not arrived, the head attendant shall:
 - a. Request the air medical
 - b. Request one engine for standby, Set up of Landing Zone will be the responsibility of the responding Fire Agency.
- 3. All requests for air medical should be according to NYS protocols.
- 4. While enroute to an incident, if you have reason to believe air medical may be necessary based on additional information received, request that air medical be put on standby. Once on the scene, assess the need for air medical and request they be dispatched or canceled.
- 5. When calling for air medical, a safe, suitable landing zone is to be established by fire personnel on the scene. In the event the ambulance is alone, either the head attendant or his designee will coordinate the landing zone.
- 6. Landing zones should be as close to the scene as possible. The landing zone must be free of any obstacles (trees, power lines, etc) and be as level as possible.
- 7. It is preferable that the ambulance be no closer than 100 feet to the landing zone. At no time will the ambulance be any closer than 50 feet to the landing zone.
- 8. No ambulance personnel will approach the helicopter unless instructed by helicopter personnel to do so.
- 9. Whenever approaching the helicopter, always approach from the front where you are in full view of the pilot or other helicopter personnel.
- 10. At no time will any ambulance personnel approach the helicopter from the rear.
- 11. Allow the helicopter to depart the scene before moving the ambulance unless the situation dictates otherwise.
- 12. Turn all white lights OFF. Do not shine any white lights at the helicopter when it is approaching, landing, or departing the scene.

				ection: 3 - Operatumber: 3.41	tions	
Author: T.Marshall	Effect	t ive: 1 Jan 2017	Super	cec	les: NEW	Page 1 of 1
Approval: President		Approval: Director of Operati	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- 1. Medical Control is an acceptable and encouraged practice. This practice promotes direct contact between field personnel and the physician. Medical Control is available to assist the EMS provider ALS and BLS.
- 2. Medical Control shall be contacted when required by established protocols.
- 3. Medical Control shall be contacted on all calls where a confirmation exists.

Title: Seat Restraints					ction: 3 - Operati mber: 3.43	tions
Author: J.Snaza Effective: 1 Jan 2017 Supe			Super	ced	es: NEW	Page 1 of 1
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- 1. Upon entrance to and prior to movement of the EMS vehicle, all personnel will utilize the available seat restraints.
- 2. All personnel sitting in the front seat of the EMS vehicle will utilize the lap/shoulder restraints.
- 3. Personnel sitting in the rear seat or crew bench will utilize the available lap restraints to the extent that it does not interfere with patient care.
- 4. EMS personnel will ensure that all passengers in the EMS vehicle (students, patient's family members, etc...) utilize available seat restraints while in the EMS vehicle.

Title: Patient Belongings			Section: 3 - Ope Number: 3.44	rations
Author: T. Marshall Effective: 1 Jan 2005 Sup			edes: NEW	Page 1 of 1
Approval: President Chester Popiolkowski	Approval: Director of Operation Timothy P. Marshall	ons	Revised:	

- 1. Whenever possible, the patient's belongings shall remain with the patient.
- 2. Any belongings that require removal from the patient, by reason of their interference with a medical procedure, or by virtue of their presenting a potential hazard to the patient or EMS personnel, shall be noted on the EPCR..
- 3. Property belonging to the patient will be turned over to the nurse caring for the patient at the destination hospital. The name of the nurse receiving the property and a description of the property shall be noted on the patient care report.
- 4. Any weapons removed from a patient shall be turned over to the appropriate law enforcement agency, including a description of the weapon at the earliest opportunity. Such disposition shall be noted on the EPCR including a description of the weapon. The signature and badge number of the officer receiving the property shall appear on the EPCR

Title:Intentionally Blank				ection: 3 - Operatumber: 3.45	ions	
Author Effective: Sup			Super	cec	des:	Page 1
Approval: President		Approval: Director of Operation	on		Revised:	

1. Intentionally Blank

Title: Use of Lights and Sirens					ection: 3 - Operat Imber: 3.46	ions
Author: J.Snaza Effective: 1 Jan 2017			Super	rced	les: NEW	Page 1 of 2
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

Operators of EMS vehicles have the privilege of using emergency warning lights and siren (L & S) when responding to or transporting from an incident involving a patient who presents, or is in good faith perceived to present, in a condition that requires immediate emergency medical care. The operation of EMS vehicles utilizing L & S, under certain circumstances, increases the risk of being involved in an EMS vehicle accident, which have a higher rate of injury and death as compared to non-EMS vehicle accidents. Studies have shown that L & S may only decrease the response/transport times by a few minutes in most EMS systems, and by less than one minute in many EMS systems. Therefore, every decision to utilize L & S must be based on the patient's current medical condition, the estimated time saved by an L & S response/transport mode, and the increased risk of being involved in an EMS vehicle accident during an L&S response/transport.

POLICY:

All LVAC personnel will operate their emergency vehicles in accordance with the specific procedures listed herein. THE USE OF EMERGENCY LIGHTS AND SIREN DOES NOT RELIEVE THE OPERATOR OF LIABILITY. EXTERME CAUTION IS TO BE USED WHENEVER EMERGENCY EQUIPMENT IS IN USE.

PROCEDURE:

- L & S may only be utilized when responding to or transporting from an incident involving a patient who presents, or is in good faith perceived to present, in a condition that requires immediate emergency medical care. Responses to nonemergency incidents (stand-by/relocate, DOA, public service) shall not utilize L & S.
- 2. The highest medically trained practitioner engaged in patient care will determine the mode of transportation based upon the patient's presenting medical condition. This practitioner will communicate with the transporting EMS vehicle's operator and advise him/her as to the transport mode to be utilized.
- 3. L & S should **both** be utilized when appropriate upon exercising any moving privilege granted to an EMS vehicle operating under emergency conditions (i.e. proceeding through a red light, after stopping and securing the right of way).
- 4. L & S may be utilized by a BLS unit in specific situations where ALS is indicated including:
- 5. It is recommended that low beam headlights shall be on (functioning as daytime running lights) at all times while the EMS vehicle is in operation regardless of mode.
- 6. All non-transporting EMS vehicles returning from a call, including ALS vehicles following the transporting unit, shall operate in a non-emergency (without L & S) mode
- 7. The dispatch nature/type code that justifies an L & S response shall be documented on the patient care report. The justification for utilizing L & S during transport shall also be documented on the patient care report.

Title: Use of Lights and Sirens					ction: 3 - Operat Imber: 3.46	ions
Author: J.Snaza Effective: 1 Jan 2017			Super	rced	les: NEW	Page 2 of 2
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- 8. L & S must be used only as an adjunct to expedite care of the emergency patient and not as a permissive authorization for reckless driving, excessive speeding or any other unsafe driving practices.
- 9. Exceptions to this policy may also be made under extraordinary circumstances (i.e. disaster situations or backlog of high priority calls without sufficient resources available). This requires notification of Chester County Department of Emergency Services and documentation of the justification.

MEDICAL CRITERIA:

The following specific medical criteria should be used to determine when transport utilizing L & S may be appropriate:

- 1. L & S transport mode should be utilized in any situation in which the highest medically trained EMS practitioner believes that the patient's condition will be worsened by a delay equivalent to the time that can be gained by a L & S transport, as the patient's current medical condition exceeds the capabilities of the EMS providers in attendance.
- 2. Vital signs outside of the listed parameters, with related acute illness and/or injury:
 - a. Systolic B/P <90mmHg.,
 - b. Respiratory rate >32/min. or <10/min.
- 3. Airway
 - a. Inability to establish or maintain a patent airway,
 - b. Upper airway stridor.
- 4. Breathing
 - a. Severe respiratory distress unresponsive to BLS/ALS therapy.
- Circulation
 - a. Cardiac arrest (includes refractory ventricular fibrillation, hypothermia, OD/poisoning and pediatric),
 - b. Severe, uncontrolled hemorrhage.
- 6. Trauma
 - a. Any patient who meets the medical criteria described in the Prehospital Trauma Triage protocol.
- 7. Neurological
 - a. Generalized seizure activity unresponsive to BLS/ALS therapy,
 - b. Glasgow Coma Score <13 with related acute illness/injury.
- 8. Pediatric
 - a. All patients < 8 years of age should be evaluated individually based on the history, degree of distress and the EMS providers experience with patients of this age.

Title: Non-Emergency Response			Section: 3 - Ope Number: 3.47	erations
Author: T. Marshall Effective: 1 Jan 2017			edes: NEW	Page 1 of 1
Approval: President	Approval: Director of Opera	ntions	Revised:	•
Chester Popiolkowski	Timothy P. Marshall			

It is the policy of the LVAC to respond to the following incidents at a non-emergency rate:

- 1. Stand-bys
- 2. Public Service Calls
- 2nd unit responding to MVC unless requested by !st unit responding or Dispatch.
- 4. Working fire Rehab unit
- 5. All Non-emergent functions.

Title: Non-Emergency Response			Section: 3 - Ope Number: 3.50	erations
Author: T. Marshall Effective: 1 Jan 2017			edes: NEW	Page 1 of 1
Approval: President	Approval: Director of Operat	ions	Revised:	·
Chester Popiolkowski	Timothy P. Marshall			

- 1. If a unit is recalled or cancelled, units shall acknowledge such over the radio and become available for another incident.
- 2. Units should turn off all audible and visual warning devices and return to a normal traffic flow as soon as safely possible.
- 3. If when responding to an accident and the police department advise there are "no injuries" or the incident is "property damage", units shall go available.
- 4. All recalls, cancels, no injuries, or property damage calls shall be documented accordingly in the EPCR as to who advised of such.
- 5. If upon arrival of the unit it is determined that a resource that is responding is not needed, the unit shall cancel that responding resource. (i.e. ALS is responding for a patient that does not need ALS in the head attendants eyes.)

Title: Intersection Practices			Section: 3 - Op Iumber: 3.53	perations
Author: J.Snaza	Author: J.Snaza Effective: 1 Jan 2017			Page 1 of 2
Approval: President	Approval: Director of Opera	tions	Revised:	·
Chester Popiolkowski	Timothy P. Marshall			

Extreme care should be taken when approaching any intersection, as intersections are the locations responsible for a large percentage of major accidents involving emergency vehicles. Drives are required to practice the organizations intersection operating guidelines during all emergency responses.

UNCONTROLLED INTERSECTIONS:

- 1. Any intersection that does not offer a control device (stop sign, yield or traffic signal) in the direction of travel of the emergency vehicle or where a traffic control signal is green upon the approach of the emergency vehicle all drivers should do the following:
 - a. Scan the intersection for possible hazards (right turns on red, pedestrians, vehicles traveling fast, etc.). Observe traffic in all 4 directions (left, right, front, rear)
 - b. Slow down if any potential hazards are detected and cover the brake pedal with the drivers' foot.
 - c. Change the siren cadence not less than 200' from the intersection
 - d. Avoid using the opposing lane of traffic if at all possible.
- 2. Drivers should always be prepared to stop. If another vehicle operator fails to yield the right of way to an emergency vehicle, the driver cannot force the right of way, nor can they assume the right of way, therefore they do not have the right of way until the other vehicle yields to them.

CONTROLLED INTERSECTIONS:

- Any intersection controlled by a stop sign, yield sign, yellow traffic light or a red traffic light requires prudent action by the driver. The following steps should be taken:
 - a. Do not rely on warning devices to clear traffic
 - b. Scan the intersection for possible hazards (right turns on red, pedestrians, vehicles traveling fast, etc.) as well as driver options
 - c. Begin to slow down well before reaching the intersection and cover the brake pedal with the drivers' foot, continue to scan in 4 directions (left, right, front, back)
 - d. Change the siren cadence not less than 200' from intersection
 - e. Scan intersection for possible passing options (pass on right, left, wait, etc.) avoid using the opposing lane of traffic if at all possible
 - f. If all visible traffic in all lanes cannot be accounted for, the driver should bring the vehicle to a complete stop. If the driver proceeds past a control device with a negative right-of-way without coming to a complete stop, both the driver and EMT should be required to complete an incident report providing an explanation of circumstances that permitted them to do so
 - g. Establish eye contact with other vehicle drivers; have partner communicate all is clear; reconfirm all other vehicles are stopped

Title: Intersection Practices			Section: 3 - Op Number: 3.53	erations
Author: J.Snaza	Author: J.Snaza Effective: 1 Jan 2017			Page 2 of 2
Approval: President	Approval: Director of Opera	ions	Revised:	
Chester Popiolkowski	Timothy P. Marshall			

h. Account for traffic one lane of traffic at a time treating each lane of traffic as a separate intersection

RAILROAD INTERSECTIONS:

- 1. At any time a driver approaches an unguarded rail crossing they shall bring the vehicle to a complete stop before entering the grade crossing. In addition the driver shall perform the following prior to proceeding:
 - a. Turn off all sirens and air horns
 - b. Operate the motor at idle speed
 - c. Turn off any other sound producing equipment or accessories
 - d. Open the windows and listen for a train's horn

Title: Vehicle Control and Right of Way			Section: 3 - Operations Number: 3.55		
Author: J.Snaza	Effective: 1 Jan 2017	Superce	des: NEW	Page 1 of 1	
Approval: President	Approval: Director of Opera	ations	Revised:		
Cheter Popiolkowski	Timothy P. Marshall				

- 1. All drivers shall maintain control of the vehicle that they are operating in such a manner as to provide the maximum level of safety for both their passengers and the general public.
- 2. Drivers should be aware that the civilian vehicle operator may not react in the manner in which is expected or felt to be appropriate.
- 3. An attempt should be made to have options available when passing or overtaking vehicles.
- 4. If another vehicle operator fails to yield the right of way to an emergency vehicle, the emergency vehicle driver can not force the right of way, nor can you assume the right of way, therefore you do not have the right of way until the other vehicle yields to you.
- 5. The emergency vehicle driver shall be aware of their rate of closure on other vehicles and pedestrians at all times to make sure that a safe following distance is established and maintained.
- 6. All drivers shall follow the rule for safe following distance and allow 1 second of following distance for every 10 feet of vehicle length for speeds under 40 MPH and add 1 additional second for each 10 MPH for speeds over 40 MPH.

RESPONSE SPEEDS:

When responding to a true emergency only, drivers shall operate the vehicle they are driving at as close to the posted speed limit as possible, but not to exceed ten (10) miles per hour over the posted speed limit, conditions permitting. Examples of conditions requiring slower response speeds include but are not limited to:

- 1. Slippery road conditions
- 2. Inclement weather
- 3. Poor visibility
- 4. Heavy or congested traffic conditions
- 5. Sharp curves

ORDINARY TRAVEL PROCEDURES

All drivers shall obey all traffic laws and traffic control devices when driving any association vehicle under ordinary travel conditions. Any driver observed breaking any traffic laws or driving any vehicle in an aggressive manner will be subject to disciplinary action including, suspension of driving privileges.

Title: Patient Care Chain of Command			Section: 3 - Operations Number: 3.58		
Author: T. Marshall	Effective: 1 Jan 2017		edes: NEW	Page 1 of 1	
Approval: President	Approval: Director of Operati	ons	Revised:		
Chester Popiolkowski	Timothy P. Marshall				

- 1. The chain of command is as follows:
 - a. Medical Command Physician
 - b. Paramedic
 - c. EMT
 - d. First Responder
- 2. All concerns with regard to patient care on calls are to be handled as follows:
 - a. Members having a problem on a call will document the nature and report the same to the Head Attendant.
 - b. The Head Attendant will report the matter to a Director of Operations who will determine any necessary action.
 - c. Members receiving questions from the public with regard to patient care should refer the same to the Director of Operations Under no circumstances should any information be divulged that would in any was violate HIPPA policies..

Title: Jail Response (Holding Cells)			Section: 3 - Operations Number: 3.59			
Author: J.Snaza	Effect	Effective: 1 Jan 2017		Supercedes: NEW		Page 1 of 1
Approval: President		Approval: Director of Operation		Re	evised:	
Chester Popiolkowski		Timothy P. Marshall				

When responding to a jail, the stretcher and all appropriate equipment should be removed from the ambulance and taken to the patient, in order to eliminate unnecessary traffic.

The Ambulance should be turned off, all doors locked, and the keys should remain with the ambulance personnel.

Any equipment brought into the jail facility shall not be left unattended in prisoner access areas.

EMS personnel are to be familiar with jails in our service area, knowing where to park and enter or leave the facility.

- a. Check with police personnel as to the exact location of the patient.
- b. In most cases, you will be escorted to the patient.

Any prisoners requiring transportation shall be thoroughly searched by a police officer prior to loading the patient on the stretcher. The police agency shall also provide an escort to the hospital. The escort may either follow the ambulance or ride within, depending on the circumstance and risk posed to the crew.

Prisoner Medications

When a police agency has a prisoner who has medications in their possession and the prisoner claims to be in need of that medication, the police agency is required to first verify that the medication is required and secondly verify that the medication is what it is said to be.

Should this need arise to verify and determine the need for prisoner medications, a request will be made for the LVAC to respond to the prisoner holding area. It will be the responsibility of the lead attendant to gather all pertinent information about the patient:

- Medical necessity
- Dosage
- Last intake
- Next required intake
- Proper/accurate consumption
- Other medications or substances consumed
- Complete Vital Signs
- Presenting condition of the patient
- Any other relevant information

Upon gathering all appropriate information, the lead attendant shall seek medical direction via cell phone or if appropriate, a recorded phone line within the facility. It shall be the determination of the medical staff of ECMC on the appropriate course of action that will be taken.

All appropriate information shall be documented on a EPCR to include Physicians name, time and control number..

'			Section: 3 - Operations Number: 3.61			
Author: T. Marshall	Effective: 1 Jan 2017		Supercedes: NEW		des: NEW	Page 1 of 1
Approval: President		Approval: Director of Operations			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- 1. When responding to any school .unit will request a location of the patient and which entry to use.
- 2. The stretcher and all appropriate equipment should be removed from the ambulance and taken to the patient, in order to eliminate unnecessary traffic.
- 3. The Ambulance should be turned off, all doors locked, and the keys should remain with the ambulance personnel.
- 4. EMS personnel are to be familiar with the schools, knowing where to park and enter or leave the facility.
- 5. Check with security personnel as to the exact location of the patient.
- 6. In most cases, you will be escorted to the patient.
- 7. In the event of an active shooter or other life threating event unit will stage and await orders from the police agency having jurisdiction.

Title: Unit Identification			Section: 4 - Communications Number: 4.01			
Author:T. Marshall	Effective: 1 Jan 2017 S		Supercedes: NEW		des: NEW	Page 1 of 1
Approval: President		Approval: Director of Operations			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- 1. Officers of the squad will use the following unit number designations when communicating on two-way radios:
 - a. 900 Director of Operations

 - b. 901 1st Assistant Director of Operations
 c. 902 2nd Assistant Director of Operations
 d. 903 3rd Assistant Director of Operations
- 2. Ambulances of the squad will use the following unit number designations when communicating on two-way radios:
 - a. 800
 - b. 801
 - c. 824
 - d. 825
 - e. 826
 - f. 827
- 3. Emergency Response Vehicles (ERV's) of the squad will use the following unit number designations when communicating on two-way radios:
 - a. 700

Title: Radio System					ction: 4 - Comm mber: 4.03	nunications
Author: T.Marshall	Effective: 1 Jan 2017		Supercedes: NEW		es: NEW	Page 1 of 6
Approval: President	•	Approval: Director of Operation			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

Operation:

- 1. Be sure the radio is on, select the proper channel, and adjust the volume to a comfortable level. Attempt to reduce any background noise.
- 2. Listen to the channel to ensure it is clear before beginning a transmission. Monitor the channel for at least five seconds before transmitting.
- 3. Be sure that the microphone is fully keyed before beginning to talk. It is easy to "chop-off" the first word if the mic is not properly keyed.
- 4. Speak with lips about 2-3 inches from the microphone.
- 5. When calling dispatch, state: "LANCASTER DISPATCH" followed by your "Unit Number" await acknowledgement from dispatch then begin your transmission.
- 6. Speak clearly and slowly
- 7. Keep all transmissions brief

8.

- 9. Avoid meaningless phrases such as "Be advised"
- 10. Courtesy is always assumed. There is no need to continually say please or thank you.
- 11. When giving a number that may be confused, give the individual digits.
- 12. Try not to use patient names on the radio.
- 13. Avoid words that are difficult to hear, such as "yes" and "no"; instead say "affirmative" and "negative".

Digital Radio System (primary dispatch)

The Following channels are for the Digital Primary radio system and are located on

Zone 1

Ch 1 LVAC Dispatch

Ch 2 LVAC Scene Tac

Ch 3 LVAV Private

Ch 4 LVAC All call

Zone 2

Ch 1 Lanc Police (recv only)

Ch 2 Depew Police (Recv only)

Ch 3 Lanc Fire Disp

Ch 4 Lanc Fire Comnd

Ch 5 Lanc Fire Gnd 3

Ch 6 Lanc Fire Gnd 4

Ch 7 Lanc Fire Gnd 5

Ch 8 Lanc Fire gnd 6

Ch 9 Depew Fire Disptch

Ch 10 Depef Fire Gnd 1

Ch 11 Depew Fire Gnd 2

Ch 12 Depew Fire Gnd 3

Ch 13 OEM Repeater

Ch 14 OEM F1

Title: Radio System

Section: 4 - Communications
Number: 4.03

Author: T.Marshall

Approval: President
Chester Popiolkowski

Approval: Director of Operations
Timothy P. Marshall

Section: 4 - Communications
Number: 4.03

Page 2 of 6

Revised:
Revised:

Ch 15 OEM F2

Ch 16 OEM F3

Zone 3:

Ch 1 ADI Primary

Ch 2 ADI Secondary

Ch 3 Mercy Flight

Ch 4 Twin City Amb

Ch 5 AMR Interop 1

Ch 6 AMR Interop 2

Ch 7 Orchard PK F1

Ch 8 Orchard Pk F3 EMS

Ch 9 Erie County Fire

Ch 10 Erie Cty Interop 1

Ch 11 Erie Cty Interop 2

Ch 12 Erie Cty Interop 3

Ch 13 MEDTAC 1

Ch 14 MEDTAC 2

Ch 15 MED 32

Ch 16 MED 42

Ch 17 MED 5

Ch 18 MED 52

Ch 19 MED 6

Ch 20 MED 92

Ch 21 Gen County Interop

Zone 4

Ch 1 Cheek F1

Ch 2 Cheek F2

Ch 3 Cheek F3

Ch 4 Amherst Dispthc

Ch 5 Amherst F2

Ch 6 Amherst F3

Ch 7 Amherst F4

Ch 8 Amherst Fire Police

Ch 9 Amherst Fire b/u

Ch 10 EA fire

Ch 11 EA Tac

Ch 12 EA Fire Gnd 3

Ch 13 EA Fire Gnd 4

Ch 14 EA Fire Gnd 5

Ch 15 EA Fire Gng 6

Ch 16 EA Fire Gnd 7

Ch 17 West Seneca Fire

Ch 18 West Seneca Fire F2

Ch 19 West Seneca Fire F3

Ch 20 Marilla Fire F1

Zone 5

Ch 1 NC2 Call

Ch 2 IR 10

Title: Radio System			section: 4 - Comm lumber: 4.03	nunications
Author: T.Marshall	Author: T.Marshall Effective: 1 Jan 2017		edes: NEW	Page 3 of 6
Approval: President	Approval: Director of Operati	ons	Revised:	
Chester Popiolkowski	Timothy P. Marshall			

Ch 3 IR 11 Ch 4 IR 12 Ch 5 IR 13 Ch 6 IR 15 NC2D Ch 7 IR 16 10D Ch 8 IR 17 Ch 9 IR 18

NOTE: The digital radios are equipped with an orange man down button. The man down feature is ONLY TO BE USED IN AN EMERGENCY/CREW LIFE THREAT. Abuse will result in disciplinary action.

_	ADIO SETUP		Dower
CHANNEL NAME	Frequency	PL/DPL	Power
LVAC MAIN	tx 151.0025	dpl 152	20watt max
	rx 155.3025	dpl 152	
LVAC TACTICAL	tx 155.3025	dpl 152	75watt max
	rx 155.3025	dpl 152	
LVAC F-2	tx 155.160	pl 71.9	75watt max
	rx 155.160	pl 71.9	
POLICE 969/400	tx 153.755	pl 103.5	75watt
	rx 155.655	pl 103.5	
MERS 340	tx 155.340	open	75watt
	rx 155.340	open	
MERS 325	tx 155.325	open	75watt
	rx 155.325	open	
MERS 715	tx 155.715	open	75watt
	rx 155.715	open	
Depew Fire	tx 155.100	open	75 watt
	rx 155.100		
RMA 280	tx 155.280		75watt
	rx 155.280		

Portable Radio setup shall follow the same format as mobiles and be set to 5 watts.

Under NO circumstance shall any other agency be granted permission to utilize the LVAC Primary Operating (repeater) frequencies.

Identification of Unit and Base Radios

- 1. Police Dispatch shall be identified as Lancaster Dispatch
- 2. Lancaster Base shall be identified as **862 Base**

The Line Officers shall be identified using the following number designations:

- a. LVAC 900 Director of Operations
- b. LVAC 901 1st Assistant Director of Operations
- c. LVAC 902 2nd Assistant Director of Operations

Title: Radio System					ection: 4 - Comm umber: 4.03	unications
Author: T.Marshall	thor: T.Marshall Effective: 1 Jan 2017		Supercedes: NEW Page 4		Page 4 of 6	
Approval: President	•	Approval: Director of Operations			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

d. LVAC 903 3rd Assistant Director of Operations

Ambulance Designations shall be identified as:

- e. LVAC 800
- f. LVAC 801
- g. LVAC 802
- h. LVAC 803

Emergency Response Vehicles Shall be identified as:

- i. LVAC 700
- j. LVAC 701

This is in an effort to maintain all the units of the LVAC, under one uniform numbering system, as well as to better distinguish LVAC units from Fire Company units.

LVAC Radio Frequencies and Usage

This Policy is to clarify when and how specific frequencies licensed to the LVAC shall be utilized.

All agencies that have a specific need are granted permission to utilize the below listed frequency as a direct communication with LVAC units responding to, or already on-scene, of an incident.

Effective 1 November 2004, the operating frequency of 155.160 with 71.9tpl shall become LVAC "F-2". LVAC "F-2" shall be assigned for interagency communications with ALL Agencies the LVAC operates with.

Under no circumstance shall any agency be granted permission to operate on the LVAC Repeater frequency.

Agencies wishing to utilize the "F-2" frequency shall purchase, install and maintain the appropriate radios in accordance with all applicable FCC rules and regulations and shall do so at its sole expense. Under no circumstance shall any frequencies assigned to the LVAC be utilized in any type of radio other than a mobile or portable. Base Station radios or configurations there of, are strictly forbidden.

Agencies utilizing the LVAC assigned frequency for the purpose of transmitting shall provide documentation to the LVAC Director of Operations of all radios (mobile and portable), as well as the vehicle call sign, that the frequency is installed.

Portable Radios

1. Each ambulance is equipped with two portable radios. Each crewmember shall utilize a portable whenever they are away from the vehicle even if the crewmembers are together.

Title: Radio System					ection: 4 - Communication: 4.03	unications
Author: T.Marshall	Effective: 1 Jan 2017		Supercedes: NEW		les: NEW	Page 5 of 6
Approval: President		Approval: Director of Operations			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- 2. Ambulance portables are not to be removed for any other purpose unless permission is received from the Director of Operations or designee.
- 3. At no time will these portables be removed by anyone other than duty crewmembers operating on that vehicle.

Issue Portable Radios

Portable radios are available for issue to members. (VHF) (Digital Portables may be signed out when on shift and returned at shift end)

Members wishing to be issued a portable radio shall contact the Operations Department for consideration.

Consideration will be based on:

Availability of radios Reasonable response time to the squad room Level of care Issue of Red Lights and Siren

All personnel issued portable radios shall be evaluated every ninety days (90) to determine whether or not the radio is being used to its best advantage.

It shall be at the discretion or the Operations Dept to recall any issued radio at any time.

Misuse of issued portable radios shall call for immediate recall of the radio and appropriate disciplinary action to take place.

All personnel having issued or personally owned radios shall have the proper identifier programmed in the radio and shall be operating within all guidelines set forth under the issued FCC license.

Digital Voice Recorder

All frequencies operated by the LVAC are recorded.

The Hotline to the Town Center is recorded.

All recordings include date, time, channel and unit identity.

- 1. Each person who is actively involved in the emergency medical services of this Corps and who resides or works within a reasonable response area shall be considered for issue of a portable radio.
- 2. Issue Portable Radios shall be programmed with the following channels:
 - a. LVAC Repeater Tx/Rxb. Tactical Tx/Rx

Title: Radio System			Section: 4 - Co Number: 4.03	mmunications
Author: T.Marshall	Author: T.Marshall Effective: 1 Jan 2017		cedes: NEW	Page 6 of 6
Approval: President Chester Popiolkowski	Approval: Director of Opera	tions	Revised:	

C.	LVAC F-2	TX/RX
d.	Lanc/Depew PD	RX
e.	MERS 340	Tx/Rx
f.	MERS 325	Tx/Rx
g.	MERS 715	Tx/Rx
ĥ.	Depew FD	Rx
i.	Squad 4	Pager
j.	Night Page	Pager

- 3. In the event there are not sufficient portables for all active personnel, the following will be used to determine the distribution criteria:
 - a. Call Volume
 - b. Availability
 - c. Response Time
 - d. Level of Certification
 - e. Crew Status (driver, aid, trainee).
- 4. The Director of Operations and/or their designee shall have the authority to recall any portable radio for maintenance at any time.
- 5. The Director of Operations and/or their designee shall have the authority to recall any portable radio.
- 6. Any person who meets the qualifications to be issued a portable and is denied by the Director of Operations may appeal to the LVAC Board of Directors.
- 7. In the event a portable radio is lost or stolen, the company will pay the deductible specified for the first time loss only. Any subsequent losses, the individual is responsible for any such deductible, provided all provisions of this procedure are met.
- 8. All radios (issued and personal) shall be programmed with member Squad Number as the radio identifier.
- 9. All personnel wishing to operate personally owned radios on any LVAC licensed channels shall first receive authorization by the Director of Operations. The radio and user must comply with all applicable FCC licensing requirements and shall be held accountable for any actions that may impose any fines against or jeopardize the operating license of the LVAC.

Title: Dispatch Communications					Section: 4 - Communications Number: 4.04		
Author: T.Marshall	Effective: 1 Jan 2017		Supercedes: NEW		les: NEW	Page 1 of 1	
Approval: President	Approval: Director of Operati		ons		Revised:		
Chester Popiolkowski		Timothy P. Marshall					

- 1. Once you receive a call, acknowledge the call and make note of address and directions.
- 2. Notify the dispatch when:
 - a. Enroute "LVAC 826 (appropriate unit number) responding, level and ETA.
 - b. On scene "LVAC 82-X on location"
 - c. Provide a status report "LVAC 82-X on location, two vehicle accident blocking traffic, all occupants appear to be out"
 - d. Transporting (BLS) "LVAC 82-X transporting to [brief name of facility]"
 - e. Transporting (ALS) "LVAC 82-X transporting to [brief name of facility], ALS"
 - f. Arriving at hospital "LVAC 82-X out at [brief name of facility]"
 - g. Clear from the hospital LVAC 827-X available" "Chester, Ambulance 87-X available, patient refusal" etc, etc.

Title: Phone Calls - Squa	ad Room		Section: 4 - Communications Number: 4.07		
Author: T. Marshall Effective: 1 Jan 2005 Supe			edes: NEW	Page 1 of 1	
Approval: President	proval: President Approval: Director of Operations		Revised:		
Chester Popiolkowski Timothy P. Marshall					

- 1. Members will answer the squad phones by stating, "Lancaster Ambulance Corps" and giving either their first or last name.
- 2. Callers will be placed on hold if the member answering needs assistance; the phone should never be left off the hook while assistance is obtained.
- 3. Personal calls should be limited to five minutes. It is inappropriate to receive nonemergency calls after 22:00 hours.
- 4. Squad member's phone and pager numbers shall not be given out to callers who are not members of the squad. Instead, the caller's number and a message will be taken to give to the member.
- 5. No unauthorized toll calls shall be made from squad phones.
- 6. If an emergency call comes in, obtain the following information:
 - a. First, the address at which the ambulance is needed
 - b. The nature of the emergency
 - c. The phone number from which the caller is calling
 - d. The caller's name
 - e. Then, tell the caller to dial 9-1-1.
 - f. Call the Lancaster Dispatch, advise them of the information, and ask them to dispatch the incident.
- 7. If a non-emergency or transport call comes in on the business phone, it will be referred to the head attendant, or the highest-ranking provider in the station.
- 8. Any phone calls reporting or regarding complaints will be referred to the Director of Operations(Without exception). The caller's name and number should be taken, and they should be told that an officer should be contacting them. Members taking such calls shall not enter into debate with the caller or offer opinions about the situation. They should assure the caller that an officer will handle their concerns.
- 9. No information regarding calls shall be given out over the phone except to Police and assisting companies. Refer such calls to the Head Attendant or Chief.

Title: Training Requirements			Section: 5 - Training Number: 5.01		
Author: J. Snaza	Author: J. Snaza Effective: 1 Jan 2017 Sup			Page 1 of 4	
Approval: President	Approval: Director of Operati	ons	Revised:		
Chester Popiolkowski Timothy P. Marshall					

GENERAL:

- 1. New Lancaster Volunteer Ambulance Corps employees and volunteers will complete a structured orientation program of policies, procedures, standards and protocols.
- 2. The Operations Committee shall be comprised of all Line Officers and the Director of Training.
- 3. The Operations Committee shall utilize a QA/QI process for evaluating trainees and their status.
- 4. All training records shall be maintained within the Operations Office.
- 5. The Operations Committee will be responsible for coordination and evaluation of the orientation process for new volunteer members as well as any other duty so stated in the Standard Operating Guidelines of the LVAC.
- 6. Even though the LVAC will assist as much as possible, members (other than those considered new) are responsible for getting their own training, including staying abreast of new trends and procedures in EMS.
- 7. The New York State Department of Health establishes minimum training guidelines. Members are required to maintain training levels within the guidelines established by the Western Regional EMS (WREMAC) Council and the Operational Medical Director.
- 8. Drivers of LVAC apparatus must have a valid Operator's License and a current Emergency Vehicle Operator's Certification (EVOC) or CEVO IV..
- 9. All members must successfully complete any additional training required by the LVAC, which may or may not be for disciplinary reasons.
- 10. Each member will perform the following training/evaluation as prescribed:
 - a. CPR (annually or biannually)
 - b. Hazardous Materials/WMD Awareness (annually)
 - c. Physical Agility Evaluation (annually)
 - d. TB Test (annually)
 - e. Skills review (Bi-annually)
- 11. Drivers must complete the above requirements as well as:
 - a. Submit to a record check of their driver license (annually)
 - b. Operate one LVAC vehicle at least once on an emergency basis (annually)
- 12. ALS Providers must complete the above requirements as well as:
 - a. Skills review/Medical Direction Authorization with Medical Director (semi-annually)
 - b. ACLS (every 2 years)
 - c. PALS/PILS (every 2 years)
 - d. BTLS (2 years)

Returning Members:

Returning members with greater than one year of absenteeism will be subject to new member requirements as noted previously.

Title: Training Requirements				Section: 5 - Training Number: 5.01		
Author: J. Snaza	Author: J. Snaza Effective: 1 Jan 2017 Su			ced	les: NEW	Page 2 of 4
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski Timothy P. Marshall						

Pre-Induction to Membership

- 1. Potential member completes the following:
 - a. Initial Orientation and Safety Training
 - i. Scheduled by Operations
 - ii. Required before any person shall be allowed to perform Ride-Alongs.
 - iii. Shall be documented on a cover sheet.
 - iv. This cover sheet shall be submitted with the application
 - b. Ride-Alongs shall be scheduled upon completion of orientation.
 - i. A total of eight (8) hours shall be accomplished for ride-alongs.
 - ii. Shall be completed prior to the individual submitting his/her application.
 - iii. Shall be documented on a cover sheet.
 - iv. This cover sheet shall be submitted with the application.
- 2. The membership committee shall begin the processing of all applications upon receipt and only after items A and B above have been accomplished.
 - a. Back ground checks, interviews, reference checks etc. shall be accomplished prior to induction to membership.
- 3. No applications shall be accepted or processed until the Initial Orientation and Safety Training and required Ride-Along hours have been completed.

Newcomers Structured Orientation and Training Program

- 1. Newly accepted members will be required to complete a Structured Orientation and Training Program. This program will consist of the following:
 - a. Module training sessions.
 - i. All modules must be attended regardless of previous training.
 - ii. Missed sessions must be rescheduled with the Director of Operations/Director of Training and may delay achieving "On-Line" status if not completed.
 - b. Must attend either a CEVO II or EVOC course prior to being moved up as a driver.
 - i. *Note if member is active with another agency and has completed either course, documentation may be submitted to the Director of Training and the Director of Operations in place of attending EVOC/CEVO II.
 - ii. All new personnel will be required to attend EVOC/CEVO II.
 - c. Must attend all scheduled classes and have each session signed off by the appropriate preceptor.
 - d. All members attending the Structured Orientation and Training Program shall perform ride-alongs at a minimum of every two weeks during the duration of the program.

Title: Training Requirements			Section: 5 - Training Number: 5.01			
Author: J. Snaza	Author: J. Snaza Effective: 1 Jan 2017 Su			rced	les: NEW	Page 3 of 4
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski Timothy P. Marshall						

Preceptor Training:

- 1. Upon completion of the Structured Orientation and Training Program, new members will be assigned to a preceptor.
- 2. Designated preceptors may only supervise trainees.
- 3. Training evaluations by anyone other than preceptors will not be accepted as documentation for purposes of receiving "On-Line" status but will reflect trainees involvement and desire to learn.
- 4. To be considered a successful call, evaluation forms must reflect positive performance with trainees achieving a good (4)or excellent (5) in all applicable categories.
- 5. Evaluations should show a progression of improvement as experience progresses.
 - a. Continued poor (1) or fair (2) performance in the same category(s) shall be an indicator that the trainee/preceptor needs further evaluation by the Operations Committee to determine appropriate measures needed.
- 6. Call evaluation forms are to be turned in to the Director of Training.
- 7. Incomplete or unsigned forms will not be considered.
- 8. Refer to SOG #503 for Attendant Criteria and SOG #504 for Driver Criteria for appropriate requirements that will be evaluated.
- 9. A letter of intent and all training material must be submitted to the Director of Training.
- 10. The Operations Committee shall review all trainee requests for status change.
- 11. Upon favorable outcome, the member will then be notified by mail or Email of their status.
- 12. Once moved up, members may take calls unsupervised, respond to page calls and are expected to participate in all training activities required of full members.

Required Training:

- 1. Bi-annual skills:
 - a. Full members are required to attend a minimum of one (1) semi-annual skills update every six months and submit verification of skills to the Director of Training.
- 2. Failure to comply with mandatory training will result in loss of "On-Line" status and all associated privileges (ex. Responding to page calls, red lights and siren) until the skills verification has been submitted.
- 3. Any member involved with another agency may complete skill sessions with that agency and submit documentation to the Director of Training.
- 4. Drills:
 - a. Members are required to attend two drills per year.
- 5. In services:
 - a. Mandatory in services (ex. OSHA blood born pathogens, WMD) shall be run periodically throughout the year.
- 6. Attendance is expected at all mandatory sessions unless proof of attendance from another agency is provided for the appropriate time frame

Title: Training Requirements				Section: 5 - Training Number: 5.01		
Author: J. Snaza Effective: 1 Jan 2017 Sup			Super	rced	les: NEW	Page 4 of 4
Approval: President		Approval: Director of Operat	ions		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

General Training:

- 1. All members not classified as "Probationary, New or Inactive" must attend 4 scheduled training sessions of various and unique (none identical) titles during the years eleven months (January-November).
- 2. No more than 1 General Session may be attended during the same month (for credit).
- 3. Drills will not count as General Training sessions.
- 4. General Session's will be advertised in advance of at least two weeks on the LVAC bulletin board, and may be included in I am responding, text message, and/or website.
- 5. Failure to attend the above required training will result in that member being placed on inactive status during the month of December and thus being ineligible for election (Office) or have a vote.
- 6. This action will be automatic.
- 7. The member thus placed on this inactivity status may face further action by the Board of Directors.
- 8. If no action is taken by the Board of Directors, the member will return to **returning member** training status in January.
- 9. All guidelines are subject to periodic review and revision as seen fit by the Board of Directors.

			Section: 5 - Training Number: 5.02		
Author: J.Snaza Effective: 1 Jan 2017 Sup			des: NEW	Page 1 of 2	
Approval: President	Approval: Director of Opera	tions	Revised:		
Chester Popiolkowski	Timothy P. Marshall				

It is the policy of the Lancaster Volunteer Ambulance Corps to encourage members and staff to seek training relevant to EMS activities that are available outside of the department. In accordance with this policy, the LVAC shall pay the course tuition in full upon registration, with the following restrictions and limitations:

- 1. The person must have completed 6 months of active service with the organization. Active service is considered to be at a minimum of one 4-hour shift per week or 16-hours per month for volunteers assigned to the Lancaster Volunteer Ambulance Corps.
- 2. The person's training file has copies of current certification information, has completed the physical agility testing, and has up-to-date immunizations and records.
- 3. The person remains in active service upon completion of the course for an additional 6 months.
- 4. The person completes the course successfully resulting in certification or issuance of a certificate of attendance and provides a photocopy of such certification. The company agrees to reimburse all travel/lodging expenses when site of class/conference/test is greater than 50 miles from the Lancaster Volunteer Ambulance Corps. The company also agrees to reimburse textbooks, or any other supplies/equipment required for a course. Personnel must submit a Travel Reimbursement Worksheet (attachment A) with original receipts attached for all expenses. Meals will be reimbursed at the maximum allowed Federal IRS Per Diem Rate for the region traveled to. Gratuity up to 20% will be reimbursed as well. No alcohol related expense will be reimbursed. All of reimbursement amounts will be determined by budget constraints. All reimbursement amounts will be reduced by the amount of reimbursement paid by any other organization. Lancaster Volunteer Ambulance Corps may pay up to 100% of the tuition cost for qualified personnel for the following courses, conferences & tests (if funding is available):
 - American Red Cross Emergency Response
 - Instructor Courses (American Red Cross, American Heart Association)
 - CPR
 - Emergency Vehicle Operator Course
 - Advanced Cardiac Life Support
 - Pediatric Advanced Life Support
 - Neonatal Advanced Life Support
 - International and Advanced Trauma Life Support
 - JEMS EMS Today
 - PEHSC Annual Conference
 - EMS Magazine EMS Outlook
 - EMS Update EMS Conference
 - National Registry Exams
 - Vital Signs Conference
- 5. The Executive Board, upon the recommendation of the Director of Operations, may also authorize reimbursement for personnel's tuition, registration fees, travel, and lodging costs for training seminars, classes or conferences that provide benefit to the Corps.

· ·				Section: 5 - Training Number: 5.02		
Author: J.Snaza	Author: J.Snaza Effective: 1 Jan 2017 Su			rced	les: NEW	Page 2 of 2
Approval: President Approval: Director of Operations		ons		Revised:		
Chester Popiolkowski Timothy P. Marshall						

- 6. Lancaster Ambulance provides or sponsors training available to all personnel including, but not limited to: CPR (Basic and Recertification), first aid training, Emergency Vehicle Operator training, and Hazardous Materials courses.
- 7. There is no charge to LVAC personnel participating in such training. Lancaster Ambulance conducts a course on Exposure Control and Blood Borne Pathogen Protection at least annually.
- 8. Lancaster Ambulance also sponsors periodic training courses that satisfy continuing education requirements for all members.
- All members must make application to the Director of Operations at least 30 days prior to the registration deadline of the class on the prescribed form (Appendix A-9). Exceptions will be granted on a case-by-case basis.
- 10. The Company will not pay the tuition of personnel who have not yet achieved Active Service status, but those members can apply for reimbursement once they have achieved such status.
- 11. It will be the responsibility of personnel to reimburse the Corps if they are unable to complete the course or do not satisfy the course requirements resulting in no issuance of certification or being awarded a certificate of attendance.
- 12. Failure to provide reimbursement to the Corps will result in legal action to the fullest extent allowed by law.
- 13. Applications will be graded based upon number of courses and conferences previously attended within the fiscal year.
- 14. Applicants agree to provide a deposit in the form of a check in the amount of the registration fee to LVAC.
 - a. This check will be returned upon presentation of a certificate or proof of completion of the program.
 - b. Failure to produce such documentation within 90 days of the end of the course will result in the check being cashed.
- 15. All applicants agree to sign a copy of this policy for each course they register for.

Title: Attendant Criteria

Section: 5 - Training
Number: 5.03

Author: J.Snaza

Approval: President
Chester Popiolkowski

Approval: Director of Operations
Timothy P. Marshall

Section: 5 - Training
Number: 5.03

Page 1 of 3

Revised:

1. Qualifications:

- a. Shall be certified as a minimum of Emergency Medical Technician by the New York State Dept of Health;
- b. Shall successfully complete the FTO program;
- c. Shall be approved by the Operations Committee;
- d. Shall be able to pass the Physical Agility requirements:
- e. Is free of any physical or mental defect that may impair his or her ability to provide patient care.

2. Responsibilities:

- Shall apply for and obtain certification from the New York State Dept of Health;
- b. Safe and efficient operation of the call, including patient care;
- c. Accurate documentation of the call;
- d. Restocking/readying ambulance for next call;
- e. Training new personnel;
- f. Attend monthly meetings, training, and furthering their knowledge;
- g. Notifying line officers of where equipment is left (i.e. Backboards, collars & straps);
- h. Shall have knowledge of and be proficient in:
 - i. Operation of radios, portables, and cellular phones;
 - ii. Standard Operating Guidelines;
 - iii. First due area and map books;
 - iv. Special Operations (ie, helicopter operation, etc);
 - v. Documentation:
 - vi. Incident command and triage;
 - vii. Trouble shooting and maintenance procedures;
 - viii. Location of and use of medical equipment;
 - ix. Applicable state and local protocols.
- i. Transfer members or those members with prior fire/EMS experience are required to meet the above qualifications. They should obtain letters of recommendation verifying their qualifications and experience. The Director of Operations/Training will determine whether or not to modify the head attendant training program based on their experience. The Operations Committee will make final determination of head attendant status.
- 3. Head Attendant Training Program -- The head attendant trainee must perform this training process with the same preceptor.
 - a. Patient Care
 - i. Patient Assessment:
 - 1. Shall perform and document at least fifteen (15) patient assessments in the field
 - 2. At least five (5) trauma assessments
 - 3. At least five (5) medical assessments
 - b. Assessments Shall include:
 - i. Scene safety
 - ii. Primary assessment
 - iii. Secondary assessment and vital signs
 - iv. Reassessment during transport

Title: Attendant Criteria

Section: 5 - Training
Number: 5.03

Author: J.Snaza

Approval: President
Chester Popiolkowski

Approval: Director of Operations
Timothy P. Marshall

Section: 5 - Training
Number: 5.03

Page 2 of 3

Revised:

- c. Documentation of assessment
 - i. Chief Complaint
 - ii. History of present illness
 - iii. Past medical history
 - iv. Current medications
 - v. Known allergies to medications
 - vi. Patient assessment
 - vii. Treatment
- d. Initial Patient Care
 - i. Need for additional personnel
 - ii. Advanced Life Support
 - iii. Man power, CPR Assist, Fire Co., Rescue
 - iv. Law Enforcement
 - v. Initial intervention
 - 1. Airway, breathing, circulation
- e. Oxygen
 - i. Amount
 - ii. Device
- f. Scene time
 - i. Load and go
 - ii. Stay and play
- g. Scene Safety
- h. Hospital destination (closest appropriate facility)
- 4. Care during transport
 - a. Monitor vital signs
 - i. Blood pressure
 - ii. Pulse
 - iii. Respirations
 - iv. Times
- 5. Transfer of information
 - a. To nurse at hospital
 - b. To advanced life support provider/intercept
- 6. Practical skills (refer to the skills evaluation)
 - a. Documentation
 - i. Patient Care reports
 - b. Patient transport
 - c. Patient refusal
 - i. Format
 - d. Radio communications
 - i. Lancaster Dispatch
 - ii. Depew Police
 - iii. MERS Radio System
 - e. Dispatch procedures
 - i. Notification
 - ii. Medical Direction
- 7. Pre and Post trip checks
 - a. Pre
 - Check oxygen

Title: Attendant Criteria

Section: 5 - Training
Number: 5.03

Author: J.Snaza

Approval: President
Chester Popiolkowski

Effective: 1 Jan 2017

Approval: Director of Operations
Timothy P. Marshall

Section: 5 - Training
Number: 5.03

Page 3 of 3

Revised:

ii. Check for all needed equipment

- b. Post
 - i. Check oxygen
 - ii. Check cleanliness interior and exterior
- 8. Regulations
 - a. Regional SOGs/Protocols
 - b. Medical protocols
- 9. Department SOGs
 - a. First due area
 - b. Map books
 - c. Special Operations
 - d. Fire rehab
 - e. Aviation
 - f. Mass casualty
 - g. Stand-by

				tion: 5 - Trainin nber: 5.04	g	
Author: J. Snaza Effective: 1 Jan 2017 Supe			Super	cede	s: NEW	Page 1 of 3
Approval: President		Approval: Director of Operation	ons	F	Revised:	
Chester Popiolkowski		Timothy P. Marshall				

1. This procedure outlines the duties and responsibilities of the ambulance driver. This position carries with it enormous responsibility to the patient, fellow crewmembers, the general public and to the driver himself. Good judgment and conscientiousness are imperative for safe operation.

Driver Qualifications:

- a. Shall be at least twenty-one years of age.
- b. Shall have a valid New York State driver's license.
- c. Shall be an active member of the Lancaster Volunteer Ambulance Corps.
- d. Is not addicted to nor will drive under the influence of drugs or alcohol.
- e. Is free from any physical/mental defect/disease that may impair his/her ability to drive an ambulance.
 - This may be subject to periodic medical examination
- f. Has not been convicted within the last four years of driving under the influence of alcohol/drugs
- g. Has not been convicted within the last two years of reckless driving or had his/her driver's license suspended under the point system*
- h. Shall be certified at a minimum training level of CPR for Professional Rescuer and Certified First Responder.
- i. Shall successfully complete an Emergency Vehicle Operators Course (EVOC) or CEVO II.
- j. Transfer members or those members with prior fire/EMS experience are required to meet the above qualifications. They should obtain letters of recommendation verifying their qualifications and experience. The Director of Operations/Training will determine whether or not to modify the driver's training program based on their experience. The Operations Committee will make final determination of driving status.
- k. Shall be able to pass the physical agility requirements.
- I. Shall be approved by the Operations Committee

3. Driver Responsibilities:

- a. Is responsible for safe transportation of the sick and injured, preventing injury to the general public, and the protection of the ambulance and its equipment. The driver must be extremely alert to the safety of others.
- b. Shall be proficient in/have knowledge of the following:
 - Driving controls (including battery and master switches, siren, gauges, computer control panel, etc.)
 - Applicable state motor vehicle laws regarding the operation of emergency vehicles.
 - Radio operations and communication center(s) policies.
 - Running procedures
 - Equipment location
 - Road locations and use of map books and GPS.
 - Hospital locations
 - Special operations (i.e., helicopter operations, etc)
 - Documentation
 - Routine maintenance procedures

					ction: 5 - Trainin mber: 5.04	g
Author: J. Snaza	Effect	ive: 1 Jan 2017	Super	ced	es: NEW	Page 2 of 3
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- c. Any member who has their driving privileges suspended by the Operations Committee shall complete the driver's training program again at the committee's discretion.
- d. Shall inform the ambulance officers if they meet any of the criteria in Section 2.E, 2.F, or 2.G above.
- e. Will successfully complete an EVOC/CEVO II training class if convicted of any of the criteria in section 2.E, 2.F, or 2.G.
- f. Shall assist other crew members with patient care as necessary; be responsive to commands of the head attendant regarding total operation of the call.
- g. Shall be responsible for the exterior appearance of the ambulance and refueling as necessary.
- h. Shall provide driver training for approved driver trainees.

4. Driver Trainees:

- a. Shall be appointed by the Operations Committee
- b. Shall meet the above driver qualifications with the exception of age, a trainee can be under the age of 21 but will not receive status until age 21.
- c. Shall meet the following training standards:
 - One hour ambulance/SOP familiarization with a line officer or designee.
 - Ten ambulance calls riding in the patient compartment to become familiar with the head attendant's functions and concerns.
 - Actual driving time:
 - 1. Seven return trips from the hospital.
 - 2. Up to five hours should be on the road time for familiarization with first due response area, hospital locations.
 - 3. One hour shall be night driving experience.
 - 4. Seven calls to the scene at emergency rate.
 - 5. Seven calls to the hospital with a patient on board.
 - 6. Three complete calls.
- d. Records of each individual's training shall be kept in the Driver Training Evaluation Folder by the driver trainee. After completing the above requirements, the Director of Operations/Training may approve the driver as a probationary driver or require him/her to complete more calls.
- e. A probationary driver can drive on any emergency call without another driver on board. The purpose of a probationary period is to allow a longer time frame for driver evaluation. The probationary period will be for a minimum of three months. After three months, the ambulance officers will review the driver's performance and recommend action to the ambulance committee.
- 5. Department of Motor Vehicle Driving Record Checks: **
 - a. Shall be done annually for all trainees and drivers.
 - b. Drivers and trainees shall report in writing to the Director of Operations any personal motor vehicle convictions received.

Title: Driver Criteria					ction: 5 - Trainir mber: 5.04	ng
Author: J. Snaza	Effect	ive: 1 Jan 2017	Super	ced	es: NEW	Page 3 of 3
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- c. An individual who has a Class A violation within the past three (3) years normally receives a license suspension from the Department of Motor Vehicles which issued the license. In addition, anyone with a Class A violation shall have a suspension of driving privileges for a period of eighteen (18) months. Additionally, any of these individuals would also be required to attend an approved driver-improvement program, or equivalent training, and be re-certified to operate emergency vehicles.
 - Class A violations:
 - 1. Driving while intoxicated
 - 2. Driving under the influence of drugs/alcohol
 - 3. Negligent homicide arising out of the use of a motor vehicle (gross negligence)
 - 4. Operating under a period of suspension/revocation
 - 5. Using a motor vehicle for the commission of a felony
 - 6. Aggravated assault with a motor vehicle
 - 7. Operating a motor vehicle without owner's authority
 - 8. Permitting an unlicensed person to drive
 - 9. Reckless driving
 - 10. Hit and run driving
- d. Any individual who has a combination of two (2) class B moving violation convictions and/or chargeable accidents in a three (3) year period will be issued a warning letter from the Director of Operations of the emergency service organization. Any individual who has a combination of three (3) moving violation convictions and/or chargeable accidents in a three (3) year period will be issued a suspension of driving department vehicles for a period of ninety (90) days by the Director of Operations of LVAC. Any individual who has more than three (3) moving violation convictions or three (3) chargeable accidents or any combination of more than three (3) of the formerly state violations in a three (3) year period will be issued a suspension of driving department vehicles for a period of one (1) year. In addition, the same individual would be required to complete an approved driver improvement program and be re-certified to operate emergency vehicles.
 - Class B Violations: All moving violations not listed above (i.e., exceeding posted speed limit).
- e. May be conducted through the LVAC's insurance carrier.
 - ** Includes insurance carrier mandates
 - 1. Regular Driver Training
- f. Each driver of the association shall participate in regular driver safety training.
 - Training will be annual
 - Training will cover the vehicle operations requirements within the SOGs.
 - Training material will also be issued throughout the calendar year developed by VFIS and Lancaster Ambulance.
 - Every 3 years complete an EVOC/CEVO II refresher course

Title: Ride-Along Program				Section: 5 - Training Number: 5.05		
Author: J.Snaza	Author: J.Snaza Effective: 1 Jan 2017 Sup			ced	es: NEW	Page 1 of 1
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski Timothy P. Marshall						

- 1. All potential new members must first complete the required orientation/safety briefing prior to scheduling of ride-alongs. This is part of the new comers structured orientation and training program and shall be followed with no exception.
- 2. All ride-alongs shall have each session documented and verified by the assigned preceptor. This shall be conducted as each session occurs. This documentation shall become a permanent part of the individuals' membership application and file.
- 3. All copies of information as well as the waiver will be kept on file for 7 years.
- 4. All ride-alongs must have prior written expressed permission from Operations or their designee in order to ride. Ride-Alongs will only be allowed to ride if there are no other riders that day (i.e., medic/intermediate students, trainees, etc.)
- 5. All ride-alongs will be assigned to a member or full-time staff member for the shift and must follow their direction at all times; if not, the ride-along will be asked to leave the premises.
- 6. All ride-alongs are to be considered a representative of the Lancaster Volunteer Ambulance Corps and will conduct themselves appropriately at all times.
- 7. All ride-alongs shall wear appropriate dress similar to that of members and staff (dark blue pants, white/dark blue shirt). Jeans are not permitted.
- Protective gear will be worn under the direction of the crew.
 NOTE: At no time will the ride-along enter or be subjected to a hazardous or potentially dangerous situation.
- 9. Under extenuating circumstances only, ride-alongs will be allowed to function to the maximum level of their certification.
- 10. Ride-Alongs will not drive any vehicle owned by Lancaster Volunteer Ambulance Corps to an emergency nor will they be allowed to drive back from a receiving hospital.
- 11. All ride-alongs must be cleared and approved through the Director of Operations if wishing continued visits unless participating in the Newcomers Structured Orientation and Training Program.
- 12. All ride-a-longs must complete the Ride-Along Brochure & Waiver. Any person under the age of 18 must have their parent's signature on the waiver and will be subject to time limitations on when and how long they are allowed to ride. The minimum age for ride-alongs shall be 16.

Title: ALS and CME Red	quirements		Section: 5 - Tra Number: 5.06	aining
Author: J.Snaza	Effective: 1 Jan 2017	Superc	edes: NEW	Page 1 of 2
Approval: President Chester Popiolkowski	Approval: Director of Operation Timothy P. Marshall	ons	Revised:	

TRAINING/CONTINUING EDUCATION

- 1. The Director of Training or their designee will conduct periodic training sessions, and any additional special sessions as may be required.
- Members wishing to enroll in ILS certification courses have to be active members fulfilling their commitment to the LVAC (ie.: satisfactory completion of monthly squad time), off attendant training status, and have been a <u>practicing</u> EMT-B for at least six months.
- Members wishing to enroll in Paramedic certification courses have to be active members fulfilling their commitment to the LVAC (ie.: satisfactory completion of monthly squad time), off attendant training status, and have been a <u>practicing</u> EMT-B for at least one year.
- 4. All paid and volunteer ALS Providers in the Lancaster Volunteer Ambulance Corps must complete a series of skill requirements, two times a year.
- The first reporting period (First Semester) begins January 1st of each year, and ends June 30th of each year. The Second Semester begins on July 1st and ends on December 31st. The skill requirements for each level are listed on this page.
- 6. All ILS/ALS Providers must also complete didactic, or classroom time each year. The time can be submitted any time during the first or second semester. The required hours are also listed on this page. Remember, at least 50% of the required hours must be ALS.
- 7. The LVAC needs to have a current copy of your AEMT, CPR, BTLS, PALS, & ACLS cards on file. If an ILS or ALS provider does not maintain the required skills and/or didactic time, the provider's ILS/ALS privileges will be suspended and that person may not practice above the level of a Basic EMT until the CME requirements have been met.
- 8. Refer to SOG 501 Training Requirements; for further direction and requirements.

Title: ALS and CME Red	quirements	Section: 5 - Tra Number: 5.06	ining	
Author: J.Snaza	Author: J.Snaza Effective: 1 Jan 2017		rcedes: NEW	Page 2 of 2
Approval: President Chester Popiolkowski	Approval: Director of C Timothy P. Marshall	perations	Revised:	•

CME REQUIREMENT BY LEVEL:

All Advanced Providers must submit current copies of their AEMT and CPR cards.

AEMT -- INTERMEDIATE:

- 12 Hours of Classroom Time per Year. (50% ILS/ALS)
- 3 Field or 1 Classroom IV
- 1 Field or 1 Classroom Adult Intubations
- 1 Classroom EJV
- 1 Classroom Defibrillation

AEMT -- PARAMEDIC:

- 24 Hours of Classroom Time per Year. (50% ALS)
- 3 Field or 1 Classroom IV
- 1 Field or 1 Classroom Adult Intubation
- 1 Classroom Infant Intubation
- 1 Classroom EJV
- 1 Classroom Defibrillation
- 1 Classroom External Cardiac Pacing
- 1 Classroom Intraosseous
- 1 Classroom Chest Decompression
- 1 Classroom Nasogastric Tube Insertion
- 1 Classroom Needle Cricothyroidotomy

Title: Infectious Disease Control Policy					Section: 6 – Infectious Control Number: 6.01		
Author: J. Snaza	I. Snaza Effective: 1 Jan 2017		Supercedes: NEW		les: NEW	Page 1 of 8	
Approval: President	•	Approval: Director of Operation			Revised:	•	
Chester Popiolkowski		Timothy P. Marshall					

I. EXPOSURE DETERMINATION

- 1. The following tasks can be reasonably anticipated to involve exposure to blood, body fluids, or other potentially infectious materials:
 - i. Provision of emergency medical care to injured or ill patients; rescue of victims from hostile environments (including burning structures or vehicles, water, contaminated atmospheres or oxygen deficient atmospheres); rescue of victims from drowning; recovery and/or removal of bodies from any situation previously cited; and response to hazardous material emergencies, both transportation and fixed-site, involving potentially infectious substances.
- 2. The following job classifications are reasonably anticipated to involve exposure to blood, body fluids, or other potentially infectious substances in performance of their duties:
 - i. Paramedic
 - ii. Drivers
 - iii. Aides
 - iv. Emergency Medical Technician

II. HEALTH MAINTENANCE

- 1. All persons will be offered immunizations against hepatitis B, tetanus and such other immunizations as may become necessary from time to time.
- 2. The risks and benefits of immunizations will be explained to all persons and informed consent will be obtained prior to immunization.
 - i. Any person may request serologic testing prior to hepatitis B immunization to determine if previous immunity exists.
 - ii. Any person may refuse immunizations, or may submit proof of previous immunizations.
 - iii. Persons who refuse immunization against hepatitis B will be counseled on the occupational risks of communicable disease, and required to sign a refusal of immunization form.
 - iv. Members who initially refuse immunization may later request immunization upon written request.
- 3. Any person who suffered a debilitating injury or illness or communicable disease (occupational or non-occupational) will be cleared by a Physician prior to resuming emergency response duties.
- The Corps will maintain records in accordance with OSHA CFR 29, Part 1910.1030. All persons participation in the Infectious Control Program will be documented, including:
 - i. Name and SSN
 - ii. Immunization records
 - iii. Circumstances of exposure to communicable disease
 - iv. Post-exposure medical evaluation, treatment and follow-up

Title: Infectious Disease Control Policy			Section: 6 – Infectious Control Number: 6.01		
Author: J. Snaza	thor: J. Snaza Effective: 1 Jan 2017		Supercedes: NEW Pa		
Approval: President	Approval: Director of Operat	ions	Revised:		
Chester Popiolkowski	Timothy P. Marshall				

- 5. Infectious control records will become a part of each persons personal health file and will be maintained for duration of membership or employment plus (30) years.
- 6. Medical records are strictly confidential.
- 7. Medical records under this SOG will be maintained by the LVAC in such a way that they are safeguarded in accordance with OSHA and Protected Health Information (PHI) requirements and will not become part of any personnel file.
- 8. There will be no exceptions to this policy other than such records may be made available to the Secretary of Labor pursuant to OSHA regulations.
- 9. Any person may examine their own medical records and may request that copies be sent to their personal physician.
- 10. Release of medical records will only be made with the signed consent of the person affected.
- 11. Abstracts of medical records without personal identification may be made for quality assurance, compliance monitoring or program evaluation purposes, as long as the identity of the individual cannot be determined from the abstract.

III. INFECTION CONTROL TRAINING

- 1. All persons shown in Section I A, and B will be required to complete:
 - a. Initial infection control training at the time of assignment to tasks where occupational exposure may occur.
 - b. Refresher infection control training at least annually thereafter.
 - c. All infection control training materials will be appropriate in content and vocabulary to the educational level, literacy and language of the people being trained.
 - d. Training will be in compliance with NFPA Standard 1581 and OSHA Regulation 29 CFR Part 1910.1030 and shall include:
 - i. An accessible copy of 29 CFR Part 1910.1030 and an explanation of its contents.
 - ii. A general explanation of the epidemiology and symptoms of blood borne disease;
 - iii. An explanation of the modes of transmission of blood borne pathogens;
 - iv. An explanation of the Department's exposure control plan and informed that any person can obtain a copy.
 - v. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potential infectious materials;
 - vi. Information on the types, proper use, location, removal, handling, decontamination and disposal of PPE;
 - vii. An explanation of the basis for selection of PPE:
 - viii. Information on the hepatitis B vaccine, including information on its efficacy, safety and the benefits of being vaccinated; notification that the vaccine will be provided at no charge;

Title: Infectious Disease Control Policy			Section: 6 – Infectious Control Number: 6.01		
Author: J. Snaza	uthor: J. Snaza Effective: 1 Jan 2017		Supercedes: NEW Pag		
Approval: President	Approval: Director of Operati	ons	Revised:		
Chester Popiolkowski	Timothy P. Marshall				

- ix. Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials:
- x. An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that the Department is required to provide following an exposure incident.
- xi. An explanation of the signs and label and/or color coding required for biohazard materials; information on the proper storage and disposal of biohazard materials.
- xii. Opportunity for interactive questions and answers.
- 2. Infection control trainers shall be knowledgeable in all program elements listed above, particularly as they relate to emergency services provided by the people shown in Section I.
- 3. Written records of all training sessions will be maintained by the LVAC for three years after the date on which the training occurs.
- 4. Training records will include:
 - i. Dates of training session;
 - ii. Contents or summary of the training session;
 - iii. Names and qualifications of persons conducting the training; and
 - iv. Names and level of all personnel attending the training sessions.

IV. STATION ENVIRONMENT

- 1. Patient care equipment shall be stored in separate closets and away from any work clothes, or soiled or dirty or contaminated PPE or equipment.
- 2. Under no circumstances will kitchens, bathrooms, day rooms or meeting rooms be used for decontamination or storage of equipment, contaminated PPE, clothing or infectious waste.
- 3. All non-disposable contaminated PPE, including washable linens, towels and gear shall be placed in the designated containers.
- 4. All disposable infectious waste, with the exception of sharps, is to be placed in the Red Biohazard bags. These bags are to be closed, tied and placed in the appropriate closed containers.
- 5. All sharps will be kept in the sharps containers found on each ambulance until such time as the container can be properly disposed of at a hospital.
- 6. Any wet items that present a possibility of leaking should be double bagged.
- 7. All Biohazard containers shall be plainly marked and identified.
- 8. These containers are to be kept closed at all times.
- 9. Only biohazard materials are to be placed in these containers.
- 10. A sink and shower area for hand washing and personal showers, will be maintained.
- 11. No equipment or clothing is to be washed or cleaned in these showers.
- 12. Soiled or contaminated work clothes will be laundered by National Safety Clean.
- 13. No soiled or contaminated clothing should be cleaned or laundered at home.

Title: Infectious Disease Control Policy				Section: 6 – Infectious Control Number: 6.01		
Author: J. Snaza	: J. Snaza Effective: 1 Jan 2017		Supercedes: NEW		es: NEW	Page 4 of 8
Approval: President	Appro	Approval: Director of Operatio			Revised:	
Chester Popiolkowski	Timo	thy P. Marshall				

- 14. All cleaning and disinfecting of PPE, gear, and equipment shall be conducted in accordance with product/manufacturer's instructions.
- 15. Only EPA approved cleaning/disinfecting agents will be used.
- 16. All cleaning and disinfecting operations shall take place in designed areas only and in accordance with pre-approved protocols and procedures designed to minimize the spread of contamination and reduce risk to personnel.
- 17. All personnel shall wear appropriate protective clothing while conducting cleaning or disinfecting operations.
 - i. At a minimum heavy rubber gloves will be required.
 - ii. Splash proof aprons or coveralls, and eye protection may be required.
- 18. NO smoking, eating, drinking, applying of cosmetics or lip balms, or the handling of contact lenses is allowed in the cleaning/disinfecting area or while performing any cleaning/disinfecting operations.

V. PERSONAL PROTECTIVE EQUIPMENT (PPE)

- 1. The LVAC is responsible for the supply, repair, and safe disposal of infectious control PPE.
- 2. The Operations Dept. will ensure that each respective station stock of PPE is adequate.
- 3. Available PPE will include disposable gloves, rubber gloves for disinfection purposes, eye protectors/full face shields, protective gowns, sharps containers, leak-proof disposable bags and such other PPE as may be appropriate for emergency response personnel.
- 4. Disposable gloves will be constructed of latex (or other suitable substitute) rather than plastic, since latex is more durable during on-scene operations.
- 5. Sharps containers will be closable, puncture resistant and leak-proof.
- 6. Sharps containers will be color coded, labeled as a biohazard and immediately accessible.
- 7. Assume that all body fluids are infectious.
- 8. When responding to emergency situations, chose PPE that will provide an adequate barrier of protection against all body fluids.
- 9. Anticipate the potential of spills and splashes.
- 10. Use common sense when selecting the PPE to be used in a given situation.
- 11. When in doubt, select maximal rather than minimal PPE.
- 12. Disposable latex gloves will be worn during any patient contact when potential exists for contact with blood, body fluids, non-intact skin, or other potentially infectious material.
- 13. All persons will carry extra pairs of disposable gloves in EMS pants, and/or EMS jackets/kits.
- 14. Each ambulance will carry an adequate supply of extra disposable gloves.
- 15. Gloves will be replaced as soon as possible when soiled, torn, or punctured.
- 16. Wash hands after glove removal.
- 17. Disposable latex gloves will not be reused.
- 18. Where possible, gloves should be changed between patients in multiple casualty situations.

Title: Infectious Disease	Control Policy		Section: 6 – Infectious Control Number: 6.01		
Author: J. Snaza Effective: 1 Jan 2017		Supercedes: NEW Pag		Page 5 of 8	
Approval: President Chester Popiolkowski	Approval: Director of Operati Timothy P. Marshall	ons	Revised:		

- 19. Heavy-duty utility gloves may be used for the handling, cleaning and decontamination of patient care equipment.
- 20. Facial protection will be used in any situation where splash contact with the face is possible.
- 21. Face protection may be afforded by using both a face mask and eye protection or by using a full face shield.
- 22. Face shields and/or goggles on safety helmets shall not be used for infection control purposes.
- 23. When near a patient with known or suspected airborne transmissible disease, face masks shall be used.
- 24. Fluid resistant gowns are designed to protect clothing from splashes.
- 25. Gowns may interfere with, or present a hazard to some responders in certain circumstances and the decision to use barrier protection to protect clothing, and the type of barrier protection used will be left to the individual responder.
- 26. However, personnel must wear adequate barrier protection in all instances except in those rare circumstances that are life threatening.
- 27. An extra supply of gowns will be carried in all ambulances.

Summary:

- i. If it's wet, it's infectious use gloves.
- ii. If it could splash onto your face, use eye shields and a mask.
- iii. If it's airborne, mask the patient or yourself
- iv. If it can splash on your clothes, use a gown.

VI. SCENE OPERATIONS

- 1. The blood, body fluids and tissues of all patients are considered potentially infectious and Universal Precautions will be used for all patient contact.
- 2. The choice of personal protective equipment (PPE) is specified outlined above.
- 3. Each person is encouraged to use maximal rather than minimal PPE for each situation.
- 4. While complete control of the emergency scene is not possible, scene operations as much as possible will attempt to limit splashing, spraying or aerosolization of body fluids.
- 5. **The minimum number of persons** required to complete the task safely will be used for all on-scene operations.
- 6. All persons not immediately needed shall remain a safe distance from operations where communicable disease exposure is possible or anticipated.
- 7. The Fire Department Incident Commander shall be in charge of all scene operations in order to ensure compliance with this practice.
- 8. Where the Fire Department is not at the scene, the Director of Operations, Assistant Director of Operations, Lead Attendant or senior member shall function as the Incident Commander).
- 9. Hand washing is the most important infection control procedure.
- All persons will wash hands after removing PPE, after each patient contact, after handling potentially infectious material, after cleaning or

Title: Infectious Disease Control Policy			Section: 6 – Infectious Control Number: 6.01		
Author: J. Snaza	Author: J. Snaza Effective: 1 Jan 2017		des: NEW	Page 6 of 8	
Approval: President	Approval: Director of Operati	ons	Revised:		
Chester Popiolkowski	Timothy P. Marshall				

decontaminating equipment, before and after using the bathroom, before eating, and before handling or preparing food.

- 11. The correct procedure for hand washing is to use soap and water and to scrub for at least fifteen seconds.
- 12. If soap and water is not available (at the scene), a waterless hand-wash will be provided. However, soap and water wash is to be performed immediately upon return to the station or hospital.
- Eating, drinking, smoking, handling contact lenses, or applying cosmetics or lip balm is prohibited both at the scene of operations and while riding in any ambulance.
- 14. Used needles and other sharps shall be disposed of in approved containers.
- 15. Needles will not be recapped, re-sheathed, bent, broken or separated from disposable syringes.
- 16. Sharps containers will be easily accessible on-scene in each ambulance.
- 17. Disposable resuscitation will be used whenever possible.
- 18. For CPR the order of preference is:
 - i. Disposable bag-valve mask.
 - ii. Disposable pocket mask with one-way valve.
 - iii. Mouth-to-mouth resuscitation.
- 19. Mouth-to-mouth resuscitation will be performed only as a last resort if no other equipment is available.
- 20. Disposable resuscitation equipment will be kept readily available during onscene operations.
- 21. Patients (suspects/prisoners) with suspected airborne communicable diseases will be transported wearing a face mask or particulate respirator whenever possible.
- 22. Vehicle windows will be kept open and ventilation systems turned on full whenever possible.
- 23. Any contaminated PPE will be removed as soon as possible and placed in a leak-proof bag, color coded and marked as a biohazard.
- 24. The contaminated PPE, Biohazard waste and trash shall be disposed of at the receiving hospital.
- Only under extreme circumstance shall contaminated PPE, Biohazard waste and trash be transported back to the station for decontamination and/or disposal.
- 26. Each ambulance shall carry a supply of leak-proof bags for transportation/disposal of contaminated PPE, equipment, waste and trash.
- 27. No medical information will be released on scene.
- 28. For Media inquires refer to the Media Protocol.
- 29. Patient confidentiality will be maintained at all times.
- 30. At the conclusion of on-scene operations, all potentially contaminated care equipment will be removed from service and it will either be decontaminated or disposed of.

Title: Infectious Disease Control Policy			Section: 6 – Infectious Control Number: 6.01				
Author: J. Snaza	: J. Snaza Effective: 1 Jan 2017		Supercedes: NEW Pag		Page 7 of 8		
Approval: President	•	Approval: Director of Operation			Revised:		
Chester Popiolkowski		Timothy P. Marshall					

VII. POST-RESPONSE

- 1. Upon completion of on-scene operations or upon return to the station, contaminated equipment will be removed and replaced with clean equipment, supplies and PPE on response units will be replenished.
- 2. Contaminated equipment, disposable PPE and other biohazard waste will be stored only in properly labeled and secured decontamination containers and/or in an area of the station that is designed for storage of such equipment.
- 3. Cleaning and decontamination will be performed as soon as practical.
- 4. To the extent possible, the ambulance and its equipment will be cleaned and decontaminated at the hospital prior to returning in service.
- 5. Gloves will be worn for all contact with contamination equipment or material.
- 6. Other PPE will be used depending on splash or spill potential.
- 7. Heavy duty utility gloves may be used for cleaning of equipment.
- 8. There will be no eating, drinking, smoking handling contact lenses or applying cosmetics or lip balms during cleaning or decontamination procedures.
- 9. Disinfection will be performed with an approved disinfectant or with a solution of bleach and water (1 part bleach per 100 parts water).
- 10. All disinfectants will be tuberculocidal and EPA approved.
- 11. All damaged equipment will be properly cleaned and disinfected before it is sent out for repair.
- 12. Follow the manufactures guidelines when cleaning/disinfecting all equipment, except:
 - i. Durable equipment (backboards, splints, MAST pants) will be washed with hot soapy water, rinsed with clean water, disinfected and allowed to air dry.
 - ii. Delicate equipment (radios, cardiac monitors, etc.) will be wiped clean of any debris using hot soapy water, wiped with clean water then wiped with a disinfectant. Equipment will be allowed to air dry.
 - iii. All work surfaces and any other portion of any response vehicle (interior or exterior) that may have been contaminated with blood or potentially infectious material (or may have come in contact with body fluids from soiled PPE) will also be disinfected upon return to the station.
- 13. Contaminated boots will be brushed and scrubbed with hot soapy water, rinsed with clean water and allowed to air dry.
- 14. Any work clothes (uniforms, jumpsuits, t-shirts, etc.) will be removed and exchange for clean clothing.
- 15. All persons will shower if body fluids were in contact with skin under the work clothes
- 16. No contaminated gear/work clothes should be laundered at home.
- 17. Any contaminated gear/clothes should be laundered/disposed of at the station.
- 18. Any infectious waste that may be generated during cleaning/decontamination will be properly bagged and placed in a designed storage area.

Title: Infectious Disease Control Policy				Section: 6 – Infectious Control Number: 6.01		
Author: J. Snaza	Effective: 1 Jan 2017		Supercedes: NEW		es: NEW	Page 8 of 8
Approval: President		Approval: Director of Operations			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

VIII. POST-EXPOSURE PROTOCOLS

- 1. Any person who is exposed to potentially infectious material will immediately wash the exposed area with soap and water (water if eyes are involved).
- 2. Any person who is exposed to a communicable disease (as shown below) will immediately report the exposure to the Infection Control Officer.
- 3. That individual will also complete a confidential "Communicable Disease Exposure Report" as soon as possible and deliver it to the Infection Control Officer.
- 4. The following exposure should be reported:
 - i. Needle stick injury.
 - ii. Break in skin caused by potentially contaminated object.
 - iii. Splash of blood or other potentially infectious material onto eyes, mucous membranes or non-intact skin.
 - iv. Mouth-to-mouth resuscitation without barrier device such as a pocket mask with one way valve
 - v. Any other exposure that you feel is significant
- 5. The Infection Control Officer will evaluate the report for exposure hazard.
- 6. If a possible exposure occurred, medical evaluation by a Physician will be arranged.
- 7. Such evaluation shall be made no later that 48 hours post exposure.
- 8. In the event that a Physician is not available to complete the medical evaluation within the prescribed time, the affected person will be sent to the hospital emergency room.
- 9. The Physician or hospital will provide appropriate diagnostic work-up and treatment of persons with communicable disease exposures.
- 10. Services will include long-term follow-up and counseling for exposed and their spouses.
- 11. Under the Ryan White Act, medical treatment facilities will notify the Infectious Control Officer of any patient transported, if that patient has a diagnosis of an airborne transmissible disease.
- 12. When so notified, the Infectious Control Officer will contact any persons involved and schedule medical evaluation with a Physician.
- 13. Although not required by the Ryan White Act, medical treatment may provide similar notification of diagnosis of blood borne or other potentially communicable diseases, if any person provided care or transportation to the source patient, and if disease transmission could have taken place.

CLEANING PROCEDURES:

Title: Attendance Po	blicy		Section: 7 – Paid Support Staff Number: 7.01		
Author:T. Marshall	Effective: 1 Jan 2005	Supercedes: NEW		Page 1 of 1	
Approval: President	Approval: Director of Operation	ns	Revised:		
Chester Popiolkowski	Timothy P. Marshall				

<u>PURPOSE</u>: To order to maintain an exceptional working environment Lancaster Volunteer Ambulance Corps recognizes the importance of Paid Support Staff arriving for work in a timely manner. Occasionally circumstances may necessitate an employee being late for their work assignment. It is the intent of this policy to define unacceptable behavior in reporting late or being absent for their scheduled work assignment.

<u>POLICY:</u> Any Paid Support Staff that is absent from their work assignment for three days without notification to the Paid Support Staff Coordinator or his designee will be assumed to have voluntarily resigned from your position with Lancaster Volunteer Ambulance Corps.

Paid Support Staff are not allowed to clock in or clock out anyone aside from themselves. Any PSS member found clocking in or clocking out anyone aside from themselves will face suspension and possible termination.

Any Paid Support Staff member will receive a verbal warning and initiate/continue the progressive disciplinary process whenever any of the following events occur:

Three or more occurrences of tardiness occur within any three month period.

- ☐ A Paid Support Staff member reports off sick prior to or following scheduled time off without proper documentation from a physician
- ☐ A Paid Support Staff member reports off sick on a scheduled shift for which they were denied a time off request without proper documentation from a physician.
- ☐ A Paid Support Staff member reports off sick on a Holiday without proper documentation from a physician

Title: Shift Exchange		Section: 7 – Pa Number: 7.02	id Support Staff	
Author: M.Mazurowski	rowski Effective : 1 Jan 2017		cedes: NEW	Page 1 of 1
Approval: President	Approval: Director of Operati	ons	Revised:	
Chester Popiolkowski	Timothy P. Marshall			

<u>PURPOSE:</u> Paid Support Staff members may have the option of exchanging shifts with another PSS member in order to better accommodate their schedule and assist Lancaster Volunteer Ambulance Corps in avoiding overtime

POLICY: In order to exercise this option, Paid Support Members must forward a completed (including signatures) "PSS Employee Shift Change Authorization" form to the PSS Coordinator a minimum of 24 hours in advance for approval.

Any Shift Exchange must be with a PSS Member of the same or equal capabilities (i.e. Paramedic Attendant with a Paramedic Attendant) to be eligible for approval. Every attempt must be made to maintain the Level of Care that is scheduled. Administration reserves the right to approve or disapprove a shift exchange based upon staffing requirements or considerations. All Shift Exchanges must be approved by the Paid Support Staff Coordinator prior to being initiated.

In the event of a sudden need (less than 24 hours) for a Shift Exchange, the PSS Coordinator may verbally authorize a Shift Exchange after speaking with both affected parties.

A Shift Exchange must be on an hour for hour basis. Any member not complying with actually working the approved exchange will loose the privilege of conducting Shift Exchanges for a period of six months.

Shift Exchanges will be approved or disapproved and returned with a reason for denial to both parties requesting the Shift Exchange.

Title: Wages and Benefits				Section: 7 – Career Staff Number: 7.03		
Author: J.Snaza	Effective: 1 Jan 2005	Su	Supercedes: NEW		Page 1 of 10	
Approval: President	Approval: Director of	of Operations		Revised:		
Chester Popiolkowski	Timothy P. Marshall					

HOURLY WAGE SCALE

The Board of Directors shall establish the hourly wage scale. The approved hourly wage changes shall be entered into the executive Board minutes.

PAY RAISES

An employee may be eligible for an adjustment in his/her wages depending on the employee's performance and the LVAC budget constraints. Salary adjustments shall generally be made during annual review of the employee and shall be based on the employee's performance appraisal.

The Personnel Committee of the Board of Directors shall base its recommendations for pay raises on the results of the job evaluations carried out in accordance with Section 7.08 of this policy. The Committee's recommendations shall be sent to the Board of Directors for approval.

SHIFT DIFFERENTIAL

A shift differential of \$1.00/hour shall be added for every hour worked on the following shifts:

- Overnight shifts Sunday Thursday, 23:00 hours to 06:00 hours.
- Overnight shifts Friday & Saturday, 23:00 hours to 08:00 hours.

TIME CARDS

All non-exempt employees shall utilize a time clock to record their hours of work. Each employee is responsible for his/her own timecard. Each employee (full-time or part-time) is required to have a time card and "punch-in" and "punch-out" at the beginning and end of their workday.

- Each employee is required to sign his or her timecard, attesting to its accuracy, prior to submitting it at the end of the pay period.
- At the end of the pay period, each employee shall submit his or her timecard to the Coordinator. Time cards can be inserted into the mail box of the Coordinator if the Coordinator is not present. The time card is to be submitted no later than the last Sunday of the pay period.
- If the administrator finds errors on the time card, he/she shall make a copy of the time card showing the error, notify the employee as soon as possible after detecting the error, make the necessary change and submit the corrected time. The employee shall have the opportunity to dispute the change in the following pay period.
- The Director of Operations shall have the responsibility of verifying the time card of the Coordinator.
- The Coordinator shall then submit all approved time cards to the Treasurer for processing. The Treasurer shall then compile proper documentation of the hours worked and submit the necessary documentation for payroll processing.
- Employees shall document on their time card: sick time, vacation time and personal time off. Employees shall document the day and amount of hours to be credited to their various time off banks.

Title: Wages and Benefits			Section: 7 – Career Staff Number: 7.03		
Author: J.Snaza Effective: 1 Jan 2005 Su			cedes: NEW	Page 2 of 10	
Approval: President	Approval: Director of Operati	ons	Revised:	·	
Chester Popiolkowski	Timothy P. Marshall				

Employees are paid for all hours worked. For any hours worked outside scheduled work hours, the following shall apply:

- Employees may punch in up to fifteen minutes before the beginning of their assigned shift.
- For early or late emergency calls, the employee must document the LVAC PCR # on the Time Card.
- For any other time worked outside scheduled hours, the Coordinator must authorize the extra time worked. Employees who work unscheduled or unauthorized overtime shall be subject to discipline, up to and including discharge.

Any employee who believes that he or she has had any portion of his or her salary improperly deducted under this policy should file a complaint with the Coordinator or, in the case of the Coordinator, with the Personnel Committee. In making such a complaint, the employee should specify the reason that they believe that they were improperly paid. The Coordinator or the Personnel Committee shall investigate every complaint and, if the complaint is valid, will reimburse employees for improper deductions. The LVAC recognizes the importance of its employees and appreciates the effort expended on its behalf; as a result, we do our best to ensure that all employees are properly paid for all time spent working. In order to ensure that all employees are properly paid, we encourage employees to come forward with any complaints or questions that they may have regarding their pay.

NORMAL WORK WEEK

The normal work week shall be from 06:00 hours Monday to 05:59 hours on the following Monday, with the possibility of overtime. Due to the nature of the LVAC business, we serve the community 24 hours a day, 7 days a week. The work schedule may vary depending on your job.

VACATION TIME

The LVAC shall provide paid vacation to Full-Time Career Personnel according to the following schedule:

- 40 hours in the first year of employment
- 80 hours in the second through fifth years of employment
- 120 hours after completion of the fifth year of employment
- 160 hours after the completion of the tenth year of employment

Part-Time employees do not accrue any vacation time.

SCHEDULING OF VACATION TIME

Vacation time may be granted upon request of the Career Staff employee however the LVAC reserves the right to limit the number of full time employees on vacation at one time. All requests shall be directed through the Coordinator or his/her designee.

All vacation requests shall be in writing and submitted by the 15th of the month for the following months vacation request.

The Coordinator may approve any vacation request submitted after the 15th of the month after the employee has found acceptable shift coverage.

Title: Wages and Benefits			Section: 7 – Career Staff Number: 7.03		
Author: J.Snaza Effective: 1 Jan 2005 Sup			cedes: NEW	Page 3 of 10	
Approval: President	Approval: Director of Operati	ons	Revised:		
Chester Popiolkowski	Timothy P. Marshall				

VACATION PAY UPON LEAVING LVAC

Upon termination of employment, Career Personnel who have completed one or more years of service with the LVAC shall receive pay for any earned, unused vacation.

MANDATORY VACATION

Vacation time is Mandatory and earned. Unused vacation time may not be carried over from year to year. If by October 15th of the calendar year, a full-time employee has not taken vacation time, the Coordinator shall schedule that employee for vacation time off.

UNUSED VACATION TIME

Full-Time personnel are entitled to place up to forty (40) hours of unused vacation time into their LVAC sponsored deferred compensation account. Any request to do so must be submitted in writing and submitted to the Coordinator prior to December 1st of that calendar year. If the employee fails to meet the above deadline, unused vacation time shall be forfeited for the year.

COMPENSATION FOR OVERTIME

All hourly, non-exempt employees shall receive overtime pay at a rate of "one and one half" their hourly rate for all hours worked in excess of 40 hours per week.

Full-Time exempt administrative employees may be provided with compensatory time when the employee has put in additional time in completing his or her job duties.

Comp-Time shall be accredited at the equivalent of "one and one half" hours for each hour of work performed **after 42** hours per workweek. Exempt employees are only allowed to accrue a **total of 48** hours of compensatory time at any one time. Exempt employees may take comp-time as time off with pay. Cash payouts shall be allowed upon the exempt employee's resignation or termination with the LVAC.

SICK LEAVE

Sick Leave is granted to Full-Time employees for illness and non-job related injuries and shall not be abused. Abuse of sick leave shall result in disciplinary action or discharge.

Notification Of Sick Leave

All Career Personnel shall call the Coordinator to inform him/her of their absence due to illness as soon as possible or a minimum of one hour before the start of their assigned shift.

In the event the employee notifies the Coordinator with less than six (6) hours before their assigned shift, the current on-duty employee may be mandated to stay past the end of their assigned shift to cover until a relief for the sick employee has been obtained. The mandated employee shall not be required to work more than six (6) hours of the mandated shift.

Title: Wages and Benefits			Section: 7 – Career Staff Number: 7.03		
Author: J.Snaza Effective: 1 Jan 2005 Sup			cedes: NEW	Page 4 of 10	
Approval: President	Approval: Director of Operati	ons	Revised:		
Chester Popiolkowski	Timothy P. Marshall				

Verification Of Illness

Career personnel who are absent for three or more days are required to produce a physician's note verifying the employee's absence and ability to return to work. This physician's note must be to the attention of the Staff Coordinator and faxed to the LVAC from the physician's office.

A failure to produce satisfactory verification of an illness shall result in nonpayment of sick leave pay and may result in discipline for misusing or abusing sick leave.

Ability To Perform

An employee who has been out of work for an extended period of time due to illness or injury must provide satisfactory proof of his or her ability to return to work and to perform the essential functions of his or her job.

The Coordinator shall require proof of ability to perform expected job tasks prior to allowing the employee to return from sick leave. If an employee is unable to provide a doctors release to return to work, the LVAC, at its own expense, shall have the individual evaluated by an LVAC approved physician. This physician may be the employee's primary care physician.

Sick Leave Pay

The LVAC shall provide sick leave pay to all full-time employees based on the following schedule:

- First year: 24 hours paid sick leave
- Second through fifth year: 40 hours paid sick leave
- After completion of fifth year: 80 hours paid sick leave

Any unused sick leave can be accumulated to a long-term sick/disability bank for non-work related illness/injury. This bank shall not exceed a total of 160 hours. Once the employee has established his or her long-term sick/disability bank and accumulated 160 hours in the bank, additional sick leave shall not be accrued.

In the event of resignation or termination from full-time status, unused sick leave is not paid.

LEAVE OF ABSENCE

Personal Time Off

Full-Time Career employees are entitled to personal time off with pay after completion of probation. This is a benefit for full-time employees for situations that cannot be handled in off duty hours.

Examples of acceptable personal reasons for such leave use include, but are not limited too:

- Doctors appointments
- Legal issues
- Family emergencies.

Title: Wages and Benefits				Section: 7 – Career Staff Number: 7.03		
Author: J.Snaza Effective: 1 Jan 2005			Supercedes: NEW Page 5		Page 5 of 10	
Approval: President	: President Approval: Director of Operati		ons		Revised:	
Chester Popiolkowski Timothy P. Marshall						

Requests for Personal Time must be in writing and approved in advance by the Coordinator or designee. Due to service requirements of the LVAC, the Coordinator may deny personal leave. All requests for personal time must be submitted by the 15th of the month for the following month in which the personal time is to be used.

- Personal Time cannot be used for additional vacation time.
- Personal leave shall not amount to more than twenty-four (24) hours per year.
- In the event of resignation or termination from full-time status, unused personal leave is not paid.

Bereavement

All Full-Time employees shall be granted up to twenty-four (24) leave, with pay, for any scheduled time missed due to the death of a member of the employee's immediate family. In cases where the death is out of state requiring significant travel time, the Coordinator may grant additional bereavement leave.

Immediate family is defined as:

Husband, wife, son, daughter, mother, father, stepfather, stepmother, mother-in-law, father-in-law, grandmother, grandfather, brother, sister, step brother, step sister, brother-in-law, sister-in-law, ward, adopted child or domestic partner.

To receive compensation, the employee shall furnish a death notice issued by the funeral director. This shall serve as documentation for payroll and be submitted with the employees time card.

Jury Duty

All Full-Time employees shall be granted leave of absence with pay, when they are required to report for Jury Duty or Grand Jury Duty. All employees must notify the Coordinator no later than his/her first scheduled shift following the receipt of notice of selection for Jury Duty.

All employees are required to work all available reasonable hours outside of those actually required for Jury Duty in accordance with the employee work schedule. An employee working a night shift who must report for Jury Duty the following day shall be released at 23:00 hours.

The employee must provide proof of the summons of duty.

An employee on Jury Duty shall receive his/her regular pay for the duration of Jury Duty.

To receive compensation, the employee shall furnish a certificate of attendance as a juror. This shall serve as documentation for payroll and be submitted with the employees time card.

Title: Wages and Benefits				Section: 7 – Career Staff Number: 7.03		
Author: J.Snaza Effective: 1 Jan 2005			Super	cec	les: NEW	Page 6 of 10
Approval: President	Ap	Approval: Director of Operations			Revised:	
Chester Popiolkowski	Ti	imothy P. Marshall				

HOLIDAYS

The following are considered to be holidays approved by the LVAC:

- New Years Day
- Easter
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Eve (6pm)
- Christmas Day

Any Full-Time employee working an approved holiday shall receive "one and one half" times normal pay for the hours worked on that holiday.

If an approved LVAC holiday occurs during the same calendar week as an employee's vacation, the employee shall receive holiday pay in lieu of vacation pay for that day.

Any Part-Time employee working an approved LVAC holiday shall receive "one and one half" times normal pay for the hours worked on that holiday.

Floating Holidays (Exempt)

Any one of the LVAC approved holidays may be used as a floating holiday.

A full-time employee may opt to float the holiday to give him/her another day off within the same pay period.

If the holiday is floated, the employee shall receive "one and one half" times normal pay for the actual holiday worked. Employees shall receive regular pay for the day to which the holiday was floated.

A written request must be submitted and approved by the supervisor at least fourteen (14) days in advance of the appropriate holiday.

HEALTH INSURANCE

The LVAC shall make available Group Health Insurance Benefits to full-time employees and their eligible dependents. This benefit shall be based on the plan selected by the employee from those offered by the LVAC.

Coverage becomes effective on the first of the month after the employees date of hire.

Coverage shall end on the last day of the month in which the employee's employment is terminated for any reason. Employees and their covered dependents may choose to extend their coverage under the LVAC group health plan by electing COBRA coverage at the time of termination. The cost of COBRA coverage shall be the responsibility of the employee. Information regarding this coverage is provided.

The LVAC shall pay 80% of the premium from approved LVAC selected plans. The 80% also applies to a family or two-person plan if so chosen by the full-time staff. Employees are responsible for 20% of the premium.

Title: Wages and Benefits					ction: 7 – Caree mber: 7.03	r Staff
Author: J.Snaza Effective: 1 Jan 2005			Super	ced	es: NEW	Page 7 of 10
Approval: President		Approval: Director of Operations			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

Part-time employees may enroll in any health care plan offered by the LVAC, but do so at their own expense. The LVAC shall not pay any portion of the plan for part-time staff.

The contracted payroll provider shall deduct any costs for medical coverage from the paycheck on a bi-weekly basis.

COBRA/ Group Health Insurance

To comply with federal mandates requiring continuation of group health care benefitsand offer employees an extension of their health care benefits.

This applies to all employees covered by the group health plans.

It is the LVAC's policy to comply with the Consolidated Omnibus Budget Reconciliation Act of 1986 (COBRA), which requires employers to offer personnel and their families the opportunity for a temporary extension of health care coverage at LVAC rates when otherwise coverage under the plan would cease.

Should an employee and his/her eligible dependants lose coverage of group health insurance due to termination of employment, or leave of absence, he/she would be eligible for continuation of coverage. Should the employee's spouse and/or dependents lose coverage due to death of the employee, divorce or legal separation, eligibility for Medicare or loss of dependent status, the spouse and/or dependent may be eligible for continued coverage.

Should the employee and his/her dependants elect to continue coverage as members of the LVAC plan, the employee will be charged 100% of the entire premium, plus an additional 2% to cover administrative fees.

Premiums are subject to change if the rates being charged to the LVAC are increased or decreased.

Continuation of coverage may end in the event of any of the following:

- Failure to make timely payment of all premiums
- Assumption of coverage under another group plan or Medicare entitlement
- Termination of LVAC group health insurance plan
- If this election for continuation coverage is made, the employee shall also have the right to convert this coverage to an individual policy with the insurance carrier at the end of the allowable continuation period as provided by HIPPA regulations.

In the event of any of the qualifying situations listed above, the employee or his/her dependants are responsible for notifying the LVAC to discuss their continuation rights. Appropriate paperwork shall be compiled and presented to the employee and/or spouse and dependants (as necessary) for the signature indicating acceptance of denial of COBRA benefits.

In the event that the individual cannot be present to receive and sign the necessary documents, the documents shall be sent via US Postal Service to the appropriate individuals.

Title: Wages and Benefits				Section: 7 – Career Staff Number: 7.03		
Author: J.Snaza Effective: 1 Jan 2005			Supercedes: NEW Page 8		Page 8 of 10	
Approval: President	oval: President Approval: Director of Operati		ons		Revised:	
Chester Popiolkowski Timothy P. Marshall						

TUITION REIMBURSEMENT

Continuing education in EMS is encouraged. Therefore the LVAC shall reimburse Career Staff for any continuing education required in performing his or her duties at the LVAC, or any class that will enhance the skills of the employee in performing his or her duties at the LVAC.

LVAC employees may attend special seminars; special training offered by qualified persons in EMS fields or has a benefit to the LVAC operations.

Employees may request such training by submitting a written request to the Coordinator at least thirty (30) days in advance of the scheduled training whenever possible.

The Coordinator shall issue a written reply to the employee stating whether such training has been approved or denied. If approved, the LVAC shall pay for fees associated with the training.

The Coordinator at his/her discretion may grant paid or unpaid leave for the employee requested, job related training.

The Coordinator shall have final authority to determine who shall attend such training, how many employees shall attend, when those employees shall attend and which courses are deemed appropriate. Furthermore, shall determine if financial compensation is applicable.

The Coordinator shall submit the request to the Board of Directors with his/her recommendation. For certain courses, the employee may be asked to sign a promissory note and an agreement for payroll deduction and/or length of service contract.

Any course or seminar costing more than \$350.00 must be approved, in advance, by the Board of Directors to be eligible for reimbursement.

The employee must successfully complete the course to receive reimbursement. For courses that are graded, successful completion of the course requires a grade of "C" or higher. In some cases, employees may have to pay taxes on tuition reimbursement benefits.

Employees are not compensated for time spent in training, except for mandatory training or areas otherwise noted in this document.

Title: Wages and Benefits			Section: 7 – Career Staff Number: 7.03		
Author: J.Snaza Effective: 1 Jan 2005 Su			edes: NEW	Page 9 of 10	
Approval: President	Approval: Director of Operati	ons	Revised:		
Chester Popiolkowski	Timothy P. Marshall				

UNIFORM ALLOWANCE

Each full-time employee shall receive two (2) complete uniform sets at the start of their service with the LVAC. Upon successful completion of the clearing process, the full-time employee shall receive one (10 additional set for a total of three (3) uniforms.

A uniform set consists of the following:

- Long EMS Pants
- Long Sleeve Uniform Shirt
- Short Sleeve Uniform Shirt
- Long Sleeve Polo Shirt (optional)
- Short Sleeve Polo Shirt (optional)
- LVAC tee-shirt or the employee may substitute, at his or her expense, a plain navy or white tee-shirt.
- LVAC Collar Brass
- Picture ID

Upon successful completion of the clearing process, the LVAC shall issue the employees with the following items:

- OSHA Certified EMS Coat
- Job Shirt or Sweater

The Coordinator shall receive three (3) uniform sets.

Part-time employees shall receive one (1) uniform set unless they have committed to s regularly scheduled shift, then they shall receive two (2) sets.

All of these items shall be in accordance with the style, color and type specified in the uniform policy.

Uniform Requirements

Full uniform shall be worn while on duty. A full uniform is defined as proper foot wear, long pants (EMS style), either the short or long sleeved uniform shirt or polo, job shirt or sweater, LVAC tee-shirt or equivalent as stated above and picture ID issued by the LVAC.

Proper headgear shall be defined as the LVAC authorized baseball style cap and or watch cap.

Exceptions shall be:

An authorized tee-shirt and or turtleneck shirt may be worn as the sole undergarment in combination with the Job Shirt or Sweater.

During cleaning details or vehicle maintenance, the LVAC tee-shirts may be worn.

Maintenance of Uniforms

Career personnel are responsible for and must maintain their own uniforms. Worn out uniform items shall be replaced by the LVAC at the discretion of the Coordinator. Worn out items must be turned in prior to a purchase order being issued for replacement items.

Title: Wages and Benefits					ction: 7 – Caree Imber: 7.03	r Staff
Author: J.Snaza Effective: 1 Jan 2005 Sup			Super	rced	les: NEW	Page 10 of 10
Approval: President		Approval: Director of Operation			Revised:	
Chester Popiolkowski		Timothy P. Marshall				

PAY PERIODS AND PAY CHECK DISTRIBUTION

It is the policy of the LVAC to pay wages earned on a bi-weekly basis (every other week).

Title: Eligibility					on: 7 – Paid S er: 7.02	Support Staff
Author: J.Snaza	aza Effective: 1 Jan 2017		Super	cedes:	NEW	Page 1 of 1
Approval: President		Approval: Director of Operation	ons	Rev	vised:	
Chester Popiolkowski		Timothy P. Marshall				

ELIGIBILITY

Paid Staff shall hold and maintain active certification from the New York State Department of Health at the appropriate level as set forth in this policy and shall hold and maintain active certification in Cardiopulmonary Resuscitation (CPR).

Equal Opportunity Employer

The LVAC does not discriminate against employees or applicants in the hiring, promotion, compensation or any other term or condition of employment on the basis of race, color, religion, sex, age, disability, sexual orientation or any other protected category. As part of its prohibition on discrimination in the workplace, the LVAC has a strong policy prohibiting harassment of employees and applicants on the basis of race, color, religion, sex, age, disability, sexual orientation or any other protected category. The LVAC is committed to providing employees with equal opportunity in the workplace. In furtherance of this commitment to equal opportunity, the LVAC has a zero tolerance policy towards harassment on the basis of race, color, religion, sex, age, disability, sexual orientation or any other protected status by supervisors and/or co-workers. All aspects of employment within the LVAC will be governed on the basis of merit, competence and qualifications. The LVAC Board of Directors is the final determination of suitability of all candidates for employment.

Rights and Privileges

Career Personnel (CP) and Part-Time Personnel, collectively referred to as "Career Staff" shall have all the rights and privileges of employees as provided by law. However, due to the potential inherent conflicts of interest, Career Staff shall not vote, hold, be elected or appointed to the following positions: Director of Operations, President, Treasurer, Secretary, or hold a majority of seats elected or appointed by office respectively.

Title: Duties of Career Staff			Section: 7 - Ca Number: 7.07	reer Staff
Author: J.Snaza	Effective: 1 Jan 2005	Superd	cedes: NEW	Page 1 of 1
Approval: President	Approval: Director of Operati	ons	Revised:	
Chester Popiolkowski	Timothy P. Marshall			

Duties of Career Staff

In addition to answering calls for EMS in the Town of Lancaster, Village of Depew and Village of Lancaster, or area designated by LVAC Operations, such as MCI response, CS must perform other duties assigned to them. Any additional duties are always subordinate to responding to EMS calls in the LVAC response district.

Duties: ALS, ILS and BLS

- Report to work at scheduled time in appropriate uniform and ready for work.
- Check all equipment and supplies at beginning of assigned shift and complete appropriate documentation.
- Ensure that all LVAC ambulances and Fly-Cars are ready for service each day.
- Respond to emergency calls promptly and provide quality patient care in accordance with NYS, WREMS and OPC Standards of Care.
- Restock all equipment and supplies throughout assigned shift.
- Maintain all EMS units in a clean and orderly fashion throughout shift.
- Wash EMS unit prior to end of shift, and as necessary during the shift.
- Complete all required paperwork and EPCR's after each call. All paperwork is turned in prior to end of shift, or as required in policy.
- Perform all assigned daily and weekly duties as per checklist.
- · Perform special projects as directed.
- Perform activities for standard duty shifts, per LVAC policies, rules and regulations.
- Represent the LVAC in a positive, professional manner at all times, in all settings.
- Attend quarterly staff meetings.
- Attend Shift-Bid.
- Submission of one (1) Continuing Medical Education (CME) credit per month or twelve (12) per year.
- Perform at or above the standards established in the NYS DOH policy statement 2000-10 Functional Duty Description, EMT/AEMT.
- Additional duties as assigned by the Coordinator, Director of Operations or Personnel Committee.
- Shall provide training to members and employees as assigned.
- Maintain confidentiality of patient records, including names, treatment and condition of patients treated.

These duties are the minimum expected form both Full-Time and Part-Time Career Staff employees. Part-time personnel are required to follow the same duties and responsibilities as full-time personnel no matter what the duration of the shift being worked or frequency of shifts worked.

Title: Job Evaluations					ection: 7 – Caree umber: 7.08	er Staff
Author: J.Snaza	Effect	Effective: 1 Jan 2017		ced	les: NEW	Page 1 of 1
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

Job Evaluations

To provide a performance evaluation process by which the job performance of LVAC employees is evaluated for the purpose of individual and organizational development.

All LVAC employees shall be evaluated on a regular and ongoing basis.

The performance review process will be managed to accomplish the following objectives:

- To provide employees with information and feedback concerning their performance.
- To identify performance criteria in which employees do well, and those that require improvement.
- To establish plans to correct performance shortcomings and to create goals for the employee.
- To provide employees with the opportunity to ask questions and/or give feedback to their performance.

All employees shall have performance appraisals completed by the Coordinator in accordance with the schedule set forth below.

Evaluation Schedules are as follows:

- 1. At the end of 90 days of employment
- 2. At the end of the first six (6) months of service as a Career employee
- 3. Annually in the month of November

The administrator shall review this evaluation with the employee before forwarding it to the Board of Directors. The employee shall acknowledge that the performance appraisal was discussed with them. If the employee disagrees with the evaluation he/she may provide a written rebuttal. The employee may request to appear before the Personnel Committee to discuss his/her issues with the performance appraisal after completing a written rebuttal.

The Personnel Committee shall evaluate the Staff Coordinator and provide a written report of the Coordinators job performance.

The Chairman of the Personnel Committee shall review the Coordinators evaluation with him/her before forwarding it to the Board of Directors

Title: Controlled Substance			Section: 8 – ALS Number: 8.01	Specific
Author: J.Snaza	J.Snaza Effective: 1 July 2006		cedes: NEW	Page 1 of 6
Approval: President	Approval: Director of Operati	ons	Revised:	
Chester Popiolkowski	Timothy P. Marshall		3 March 2017	

CONTROLLED SUBSTANCE:

The LVAC shall maintain a "**Zero Tolerance**" Policy for neglect of Controlled Substance; Security, Storage, Use, Diversion or Documentation. This policy is all inclusive and shall not deviate between Volunteer or Career Personnel.

I. AUTHORITY

Only NYS DOH Certified Advanced Emergency Medical Technicians (AEMT-P and AEMT-CC) may handle these medications according to the provisions of Article 33 of the Public Health Law and the New York State EMS Code - Part 80.

Advanced Emergency Medical Technicians must be capable of the following:

- Utilizing all EMT-B and AEMT-Intermediate skills and equipment.
- Able to perform under Advanced Cardiac Life Support (ACLS) and Basic Trauma Life Support (BTLS) standards.
- Be knowledgeable and competent in the use of a cardiac monitor/defibrillator and intravenous drugs and fluids.

II. DEFINITIONS

"Emergency Medical Technician Paramedic" or "EMT-P" or "Paramedic" means:

- An individual who is educated and trained in all elements of pre-hospital Advanced Life Support,
- Who meets requirements of the DOH and State of New York as a Paramedic,
- Accredited by the Agency Medical Director,
- Shall be "On-Line" as an EMT-P with LVAC,
- A student participating in an accredited program and is so recognized by LVAC as such,
 - Students shall act in the custody of their preceptor and shall never act independently,
 - o Students shall not administer any narcotic medication,
 - o The preceptor is responsible for maintaining the chain of custody,

The LVAC shall maintain a "Hands-Off" Policy for all Paramedic Specific Equipment. More explicitly, No member shall be permitted to move, secure, inspect, inventory or retrieve such equipment if not already certified and practicing as an LVAC Paramedic.

All Paramedic Specific Equipment, when not properly secured within its designated cabinet shall be within arms reach of the Paramedic at all times. No Exceptions.

Any disciplinary actions addressed in this document shall supersede any other written policy or procedure of the Lancaster Volunteer Ambulance Corps.

It shall be the responsibility of the On-Duty Paramedic(s) to conduct an inspection of **ALL** controlled substances within his/her care when/at:

- Beginning Of Each Shift
- Vehicle Placed Back In-Service

"ALL" shall mean every controlled substance assigned to every equipped vehicle of the LVAC.

Title: Controlled Substa	Title: Controlled Substance				ection: 8 – ALS S umber: 8.01	Specific
Author: J.Snaza	Effect	Effective: 1 July 2006		percedes: NEW Page		Page 2 of 6
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall			3 March 2017	

INSPECTIONS

Inspections shall be conducted on a daily basis.

- All inspections shall be properly annotated on the appropriate LVAC issued form
- All physical inspections shall be witnessed

There is one recognized type of inspection:

• Physical "Hands-On" Inspection:

The Physical "Hands-On" Inspection shall be conducted on the *first shift* of the *first day* of the assigned vehicle rotation for career staff.

- Each Paramedic shall only be responsible for conducting this specific inspection on their respective ambulance.
- EASV's and any ambulance not in rotation for the current month shall be inspected by the on-duty medic who's shift falls on the *first day of the month*.

Each Paramedic SHALL conduct a Physical "Hands-On" Inspection only in the presence of a "witness". The "witness" shall be one of the following:

- Paramedic
- Line Officer
- Staff Coordinator
- Narcotics Control Officer
- Assigned Partner

Physical "Hands-On" Inspections shall be conducted for all subsequent inspections for the duration of the month.

• Every Paramedic shall be responsible for conducting this inspection on ALL vehicles in service immediately at the beginning of each shift.

PHYSICAL HANDS-ON INSPECTION PROCEDURES:

The Paramedic Shall:

- Unlock Safe using provider's ID card and individual PIN number entered on keypad
- Access Safe and retrieve NarcBox
- Unlock NarcBox by using Videx electronic key, then physically inspect the contents for:
 - Quantity
 - Contents Intact
 - Expiration Date
 - Accuracy with previous log entry
 - Signs of Tampering or Diversion
- Document log to reflect current inspection. Replace contents.
- Lock NarcBox.
- Secure NarcBox in Safe
- Check Safe to assure it is secured

Title: Controlled Substa	Title: Controlled Substance				ection: 8 - ALS S Imber: 8.01	specific
Author: J.Snaza	Effect	Effective: 1 July 2006		percedes: NEW Page		Page 3 of 6
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall			3 March 2017	

USE

The medication shall be administered as "So Ordered" by the "On-Line Physician" or as dictated by "Standing Orders".

- Medications shall be attended at all times by a paramedic when in use.
- Security of and access to controlled medications must be consistent with applicable Laws and Agency Rules.

Medication Use, the Paramedic shall:

- Unlock the Safe.
- Remove the NarcBox.
- If the Patient requires a Controlled Substance Medication (i.e. morphine, Valium)
 - o The Paramedic shall then open the box containing the medication.
- Medication is given only from clearly labeled containers.
 - If the integrity of the drug or drug package has been compromised, it may not be used.

Following administration of the drug:

- Document usage and waste in the log to reflect usage and current inventory,
- Lock NarcBox.
- Secure NarcBox in Safe
- Make proper notifications

DOCUMENTATION AND NOTIFICATION

The Paramedic shall be responsible for/to:

- Insure proper and timely documentation and notification of all inspections, usage and waste of controlled substances.
- Immediately upon return to quarters, Fax a copy of the Controlled Substance Administration and Waste Record (CSAWR) and corresponding PCR to the ECMC EMS Director.
- Immediately notify the Narcotics Control Officer and Director of Operations after any use and/or waste of any controlled substance.

The Narcotics Control Officer shall be responsible for/to:

- File all Controlled Substance Summary Sheets with the ECMC Controlled Substances Vault no later than the fifteenth day of the following month.
- Verify quantities, use and waste no later than 24 hours after notification.
- Immediately report in writing, any discrepancies of this policy, records, notification, security, use or waste.
- Conduct a monthly Physical Inspection of all controlled substances under the control of the LVAC.
- Conduct QA/QI sessions with personnel upon review of call information.
- Maintain accountability and accuracy of all documentation and stock
- Track Quantities and Expiration
- Waste and document any expired controlled substances

Article 33 of the New York State Public Health Law and the Federal DEA Code of Regulations require that all losses of controlled substances be reported promptly.

Title: Controlled Substance			Section: 8 – ALS 8 Number: 8.01	Specific
Author: J.Snaza	Effective: 1 July 2006	Superd	Supercedes: NEW Page 4	
Approval: President	Approval: Director of Operati	ons	Revised:	
Chester Popiolkowski	Timothy P. Marshall		3 March 2017	

ACCOUNTABILITY, SECURITY AND STORAGE

Paramedic's must safeguard their medications against loss, theft, or unauthorized use at all times. The Chain of Custody can only be maintained when all policies and procedures are followed.

All waste of medications shall be witnessed and documented by one of the following:

- Hospital Emergency Room Staff (Doctor, Nurse or PA)
- Narcotics Control Officer
- Operations Officer
- Staff Coordinator
- Another Paramedic

The Paramedic is personally responsible:

- Legally, Ethically and Morally for each drug administered,
- For using correct precautions and techniques,
- Observing and Documenting the effects of the drugs administered,
- Keeping one's own pharmacological knowledge-base current as to changes and trends in administration and use,
- Keeping abreast of all contraindications to administration of specific drugs to patients based on their constitutional make-up,
- Using drug reference literature,
- Safeguarding all medications and equipment under his/her control,

Medications must be kept secure by the following means:

- Maintaining and following a "Zero Tolerance" Policy,
- When stored in the ALS Unit, Controlled Medications (i.e. morphine, Valium) must be kept double-locked in a cabinet/compartment when not in use,
- When not stored in the ALS Unit, Controlled Medications (i.e. morphine, Valium)
 must be kept in the designated cabinet within the garage and most be double
 locked at all times,
- Physical Inspections conducted monthly, after each use, when returned to a vehicle for service and when ever a discrepancy in documentation is noted,
 - Utilization of "witnesses" to verify and document the accuracy of the inspections,
- Visual Inspections conducted daily to verify quantities match with the corresponding log book entries,
- Documentation of all Inspections
- Medications remain in the Paramedics physical custody any time they are not physically secured through the proper methods addressed within this document,
- If the ALS Unit will be out of service for more than one shift, the NarcBox and stored medications must be removed and secured by the On-Duty Paramedic or the Narcotics Control Officer. If the On-Duty Paramedic or NCO is unavailable, a member of the Operations Department may secure the NarcBox and medication bag providing another member is present to "witness" the move. This shall be documented.

All documentation and records shall be maintained and secured on premises.

Title: Controlled Substa	Title: Controlled Substance				ection: 8 – ALS S umber: 8.01	pecific
Author: J.Snaza	Effect	ective: 1 July 2006		Supercedes: NEW		Page 5 of 6
Approval: President	•	Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall			3 March 2017	

DISCREPANCIES:

At any time, if ANY member discovers ANY discrepancies concerning Security, Storage, Use, Loss, or Suspected Loss, or Diversion, that member shall **immediately** notify ALL the following personnel.

- Narcotics Control Officer
- Director of Operations
- ALS Supervisor
- President
- ECMC EMS Director (Office of Prehospital Care)

An attempt shall be made to notify ALL personnel listed above. If unable to make contact, a voicemail with a brief explanation shall be left.

• The on-duty medic shall then be contacted by one or all of the above listed personnel in an attempt to immediately rectify the discrepancy.

If unable to make contact with any of the above listed personnel, the individual shall then notify the on-duty paramedic of the situation who shall then attempt to immediately rectify the discrepancy.

The discrepancy shall then be documented by the member discovering such discrepancy as well as the on-duty paramedic.

A follow up investigation shall be conducted to determine the facts surrounding the discrepancy.

CONSEQUENCES OF ACTIONS:

Any member/employee deviating from this written policy shall be in strict violation and shall be held accountable. Failure to Safeguard and Abandonment are unacceptable practices which are punishable under the Public Health Law of the State of New York.

The magnitude of the incident shall determine any and all appropriate action. Such actions shall consist of part or all of the following:

- Final Written Warning
- Suspension
- Indefinite or extended suspension
- Immediate termination/expulsion
- Notification to NYS DOH

FIRST OFFENSE:

Any individual(s) found to be in violation of this or any other policy concerning controlled substances shall be issued the minimum of a final written warning that shall become a permanent document in their personnel file.

SECOND OFFENSE:

Any individual(s) found to be in violation of this or any other policy concerning controlled substances shall face the minimum of an immediate suspension of *not less than one week* and permanent documentation added to their personnel file.

Title: Controlled Substa	Title: Controlled Substance				ection: 8 – ALS S umber: 8.01	specific
Author: J.Snaza	Effect	fective: 1 July 2006		ercedes: NEW Page		Page 6 of 6
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall			3 March 2017	

THIRD OFFENSE:

Any individual(s) found to be in violation of this or any other policy concerning controlled substances shall face immediate termination/expulsion.

NYS-DOH shall be notified of all terminations/expulsions due to violation of this policy.

Title: ALS Release					ection: 8 – ALS S Imber: 8.02	pecific Policies
Author: J.Snaza	Effect	Effective: 1 Jan 2017		rced	les: NEW	Page 1 of 2
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

ALS units may be released from the scene after approval by the medical command physician for the following circumstances; DOA's, patient refusal of treatment/transport, patient not requiring ALS level of care, care transferred to another ALS unit/practitioner or air ambulance personnel functioning as a region approved ALS unit.

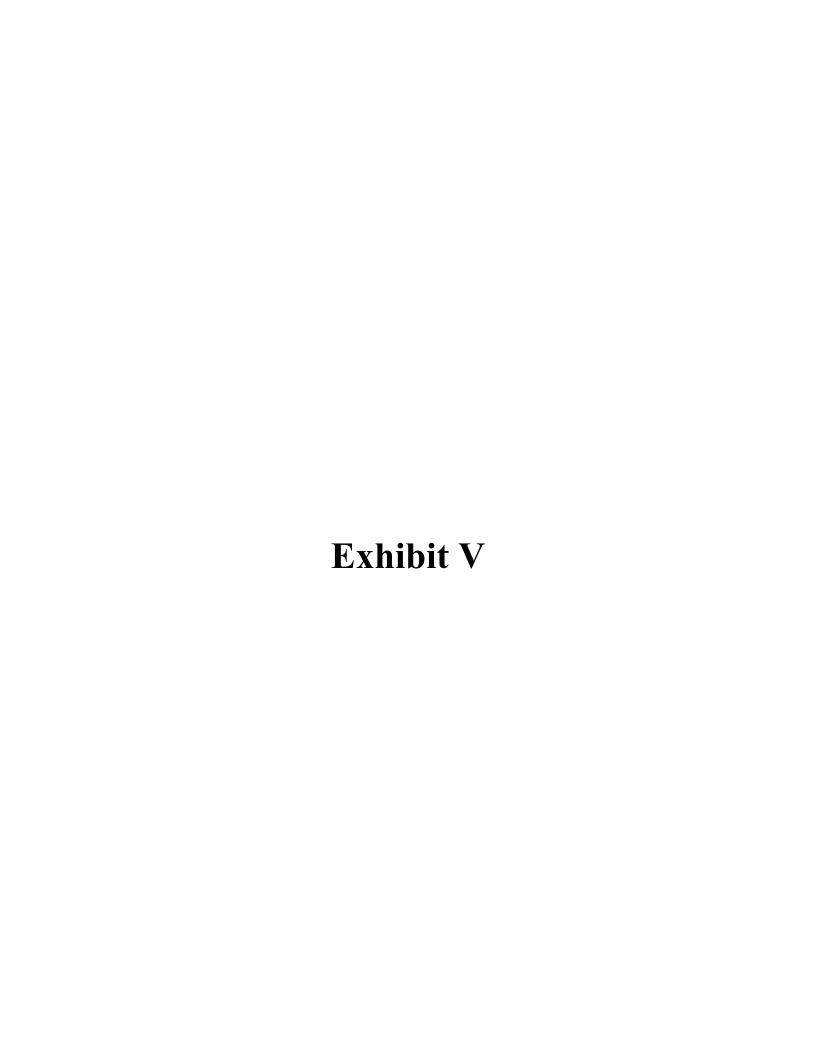
PROCEDURE:

The ALS practitioner will perform an assessment consistent with the "Standard ALS patient assessment" policy and relay those findings to the medical command physician. Specific situations involved may include:

- 1. DOA's: The ALS practitioner shall document the absence of vital signs, presence of lividity, asystole in two leads and ascertain that the patient has been without CPR for a prolonged time or that the patient has not been seen by family or bystanders for a considerable period of time.
- 2. Patient refusal of treatment/transport:
 - a. The ALS practitioner shall adhere to the "Refusal/Declination of Care" protocol.
- 3. Patient not requiring ALS level of care:
 - a. Any patient, who after an ALS assessment and authorization from a medical command physician, is found not to require ALS care, may be released to the BLS unit on scene.
 - b. The BLS practitioner(s) must be comfortable with the transfer of care.
 - c. Under certain conditions, the ALS practitioner may accompany and monitor the patient in the BLS unit, without obligation to initiate any further ALS care.
 - d. **Note:** After establishing rapport and visually assessing the patient the ALS practitioner is obligated to contact medical command.
- 4. Transfer of care to another ALS unit/practitioner:
 - a. There may be circumstances where two separate ALS units respond to the same incident (i.e. a MICU responding as a covering BLS unit with an ALS squad unit on location).
 - b. Under this type of circumstance, the following guidelines should be followed:
 - i. If the MICU arrives on scene first, they may recall the other ALS unit, if appropriate,
 - ii. If appropriate, the ALS squad ALS practitioner may transfer care to the MICU ALS practitioner for transport. If the ALS squad ALS practitioner has initiated patient care, medical command must approve the transfer,
 - iii. In certain situations, both ALS practitioners may accompany the patient in transit.
 - c. These may include, but not be limited to:
 - i. An unstable patient, patient in cardiac arrest, medical command request, at the request of either ALS practitioner.
- 5. ALS release to air ambulance personnel shall follow the guidelines as set forth in the "Air Ambulance Evacuation Policy".

Title: ALS Release					ction: 8 – ALS S mber: 8.02	pecific Policies
Author: J.Snaza	aza Effective : 1 Jan 2017		Super	ced	es: NEW	Page 2 of 2
Approval: President		Approval: Director of Operation	ons		Revised:	
Chester Popiolkowski		Timothy P. Marshall				

- 6. All ALS releases should be reviewed by the ALS coordinator and/or ALS service medical director for appropriateness and/or performance improvement purposes.
- 7. In the event of a multi-casualty incident, the triage officer may route patients appropriately without medical command but with receiving facility notification.



The Law Offices of Mark C. Butler, PLLC

5166 Main Street, Suite 302 Williamsville, New York 14221 mbutler@markcbutler.com

716.839.5411

716.839.5422 fax

June 29, 2018

VIA HAND DELIVERY

Kevin S. Mahoney, Esq. HoganWillig 2410 North Forest Road, Suite 301 Amherst, New York 14068

Re:

Town of Alden Muni-CON Conversion to Permanent CON

Dear Kevin:

Consistent with our prior communications whereby you would accept service of the referenced Application, on behalf of the Town of Alden, enclosed are two originally executed Applications for the conversion of the municipal ambulance service operating authority to a permanent operating authority.

Please note, the Affirmations of Fitness & Competency attached as Exhibit I to the Application have been redacted to remove the social security numbers and dates of birth.

Full, unredacted originally executed Affirmations of Fitness & Competency are enclosed in the attached sealed envelope.

Also attached is the Application fee in the amount of \$7,500.00.

Finally, enclosed is a CD with a digital version of the full Application for the convenience of the Council.

Thank you for your assistance.

Very ruly yours

Mark C. Butler, Esq.

MCB:dfs Enclosures

cc:

Town of Alden

REFERENCE	DATE	AMOUNT		
26575418	05/04/18	7,500.00	VCH 20180404; AMBULANCE CERTIFICATE APPLICATION FEE	
VENDOR NO. 0000002657	CHECK NO. 000365	50 CHECK DATE 05/04/18	*****7,500.00 PLEZ	EASE DETAC D RETAIN FO UR RECORD

"THIS CHECK IS PROTECTED BY A VOID PANTOGRAPH, MICROPRINT SIGNATURE LINE AND A HEAT SENSITIVE PADLOCK ICON. ADDITIONAL SECURITY FEATURES ARE LISTED ON BACK

PAYMENT ACCOUNT

TOWN OF ALDEN 3311 WENDE ROAD, ALDEN, NY 14004

ALDEN STATE BANK ALDEN, NEW YORK

50-961 223

036550

CHECK NUMBER 00036550 CHECK DATE

05/04/18

AMOUNT

\$****7,500.00

WYOMING-ERIE REGIONAL EMS COUNCIL C/O UBMD EMERGENCY MEDICINE EMS DIVISION **462 GRIDER STREET BUFFALO, NY 14215**

*SEVEN THOUSAND FIVE HUNDRED AND 00/100 DOLLARS***

TOWN OF ALDEN

AUTHORIZED SIGNATURE