



2006/2007 ANNUAL RECONCILIATION REPORT TABLE OF CONTENTS

Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

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Ministry of Health and Long-Term Care
Ministère de la Santé et des Soins de longue durée

2006/2007 ANNUAL RECONCILIATION REPORT

SECTION I: IDENTIFICATION

Line	
1	Official (Legal) Name of Corporation: <u>The Regional Municipality of York</u>
2	MOHLTC ID: <u>103283</u>
3	Service Provider Name: <u>The Regional Municipality of York - Supportive Housing</u>
4	Address: <u>17250 Yonge St.</u>
5	City: <u>Newmarket, Ontario</u>
6	Postal Code: <u>L3Y 6Z1</u>
7	Name and Title of individual who will respond to questions about this report: <u>Catherine Grimshaw Supervisor, Accounting - Health Services</u>
8	Telephone Number: <u>905-830-4444 x4059</u>
9	Fax Number: <u>905-954-4619</u>
10	For the Year Ended: <u>December 31, 2006</u>



Ministry of Health and Long-Term Care
Ministère de la Santé et des Soins de longue durée

2006/2007 ANNUAL RECONCILIATION REPORT
SECTION II, PART A
BUDGET VS. ACTUAL: EXPENDITURES AND REVENUES

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

EXPENDITURES / REVENUES	Approved Budget A	Actual B	(Over) Under C=A-B	% VARIANCE D = C/A
1. EMPLOYEE SALARIES AND WAGES (Proxy Pay Equity wages to be disclosed on line 14b)	\$ 1,869,781	\$ 2,625,855	\$ (756,074)	(40.44%)
2. EMPLOYEE BENEFITS	\$ 349,809	\$ 405,948	(56,139)	(16.05%)
3. STAFF TRAINING	\$ 4,501	\$ 8,126	(3,625)	(80.54%)
4. BOARD/VOLUNTEER TRAINING & RECOGNITION	\$ -	\$ -	-	
5. TRAVEL	\$ 8,236	\$ 8,557	(321)	(3.90%)
6. BUILDING OCCUPANCY	\$ 61,178	\$ 56,140	5,038	8.23%
7. OFFICE EXPENSES	\$ 25,865	\$ 32,832	(6,967)	(26.94%)
8. PURCHASED CLIENT SERVICES	\$ 47,661	\$ 23,590	24,071	50.50%
9. MEALS (Food Costs)	\$ 49,281	\$ 38,552	10,729	21.77%
10. SERVICE SUPPLIES/MEDICAL SUPPLIES & EQUIPMENT	\$ 18,600	\$ 34,539	(15,939)	(85.69%)
11. PURCHASED ADMINISTRATION SERVICES	\$ -	\$ -	-	
12. CENTRAL AGENCY CHARGES	\$ 325,176	\$ -	325,176	100.00%
13. OTHER OPERATING	\$ -	\$ -	-	
14a. OTHER - Insurance, Audit, Membership Fee	\$ 3,120	\$ 43,282	(40,162)	(1287.24%)
14b. OTHER	\$ 2,860	\$ -	2,860	100.00%
14c. Contribution from Reserve	\$ -	\$ (23,221)	23,221	
15. EXPENDITURE RECOVERIES	\$ (224,471)	\$ (203,791)	(20,680)	9.21%
18. TOTAL EXPENDITURES (Total lines 1 to 15)	\$ 2,541,597	\$ 3,050,409	\$ (508,812)	(20.02%)
19. REVENUES-CLIENT FEES	\$ -	\$ -	-	
20. REVENUES - OTHER	\$ 334,195	\$ 334,195	-	0.00%
21. MINISTRY BASE SUBSIDY REQUESTED (line 18 - line 19 - line 20)	\$ 2,207,402	\$ 2,716,214	\$ (508,812)	(23.05%)
22. ONE-TIME/NON-RECURRING EXPENDITURES			\$ -	
23. Total Subsidy Requested (Total lines 21 and 22)	\$ 2,207,402	\$ 2,716,214	\$ (508,812)	(23.05%)

Approved Budget: is the amount per Form 2 of signed Service Agreement, subject to amendments per MOHLTC approval letters.



2006/2007 ANNUAL RECONCILIATION REPORT

SECTION II, PART B

EXPLANATION OF VARIANCES > 5% OF BUDGET ITEMS

Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

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2006/2007 ANNUAL RECONCILIATION REPORT
SECTION II, PART C
ACTUAL EXPENDITURES, REVENUES AND UNITS BY SERVICES

Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

SERVICE:	11 A
TYPE:	SHU Supportive Housing
SITE:	ACL Genesis

EXPENDITURES / REVENUES	Approved Budget A	Actual B	(Over) Under C=A-B	% VARIANCE D = C/A
1. EMPLOYEE SALARIES AND WAGES	382,129	470,394	(88,265)	(23.10%)
2. EMPLOYEE BENEFITS	70,112	67,855	2,257	3.22%
3. STAFF TRAINING	508	793	(285)	(56.10%)
4. BOARD/VOLUNTEER TRAINING & RECOGNITION	0	0	-	
5. TRAVEL	1,237	823	414	33.47%
6. BUILDING OCCUPANCY	7,155	7,452	(297)	(4.15%)
7. OFFICE EXPENSES	4,360	4,656	(296)	(6.79%)
8. PURCHASED CLIENT SERVICES		1,418	(1,418)	
9. MEALS (Food Costs)	2,500	2,542	(42)	(1.68%)
10. SERVICE SUPPLIES/MEDICAL SUPPLIES & EQUIPMENT		5,130	(5,130)	
11. PURCHASED ADMINISTRATION SERVICES			-	
			-	
			-	
14a. OTHER Audit, Insurance Allocation		5,627	(5,627)	
14b. OTHER			-	
14c. OTHER Contribution to Reserve		-3,019	3,019	
15. EXPENDITURE RECOVERIES	-48,765	-26,493	(22,272)	45.67%
16. SUB-TOTAL SERVICE EXPENDITURES (Total lines 1 to 15)	419,236	537,178	(117,942)	(28.13%)
17. ALLOCATED ADMINISTRATIVE EXPENDITURES	49,554		49,554	100.00%
18. TOTAL EXPENDITURES	468,790	537,178	(68,388)	(14.59%)
19. CLIENT FEES			-	
20. REVENUES - OTHER	39,000	37,848	1,152	2.95%
21. MINISTRY BASE SUBSIDY REQUESTED (Line 18-line 19-line 20)	429,790	499,330	(69,540)	(16.18%)

Total for each line item Lines 1-21 (total for all services) must equal amounts reported in Section II, Part A.

EXPLANATION IF VARIANCE ON LINE 21 IS GREATER THAN 5%

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CCAC SERVICE AREA	Budget	ACTUAL	(Over) Under C=A-B	% VARIANCE D = C/A	ACTUAL
	Units	Units			client
	A	B			E
ACL - Genesis	14700	14,729	(29)	(0.20%)	28
			-		
			-		
			-		

EXPLANATIONS OF VARIANCES GREATER THAN 5% FROM APPROVED UNITS OF SERVICE:

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Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

2006/2007 ANNUAL RECONCILIATION REPORT
SECTION II, PART C
ACTUAL EXPENDITURES, REVENUES AND UNITS BY SERVICES

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

SERVICE:	11 A
TYPE:	SHU Supportive Housing
SITE:	ACL - Heritage East - Newmarket

EXPENDITURES / REVENUES	Approved Budget A	Actual B	(Over) Under C=A-B	% VARIANCE D = C/A
1. EMPLOYEE SALARIES AND WAGES	419,305	518,452	(99,147)	(23.65%)
2. EMPLOYEE BENEFITS	80,688	88,279	(7,591)	(9.41%)
3. STAFF TRAINING	760	671	89	11.71%
4. BOARD/VOLUNTEER TRAINING & RECOGNITION	0	0	-	-
5. TRAVEL	1,802	746	1,056	58.60%
6. BUILDING OCCUPANCY	9,500	8,520	980	10.32%
7. OFFICE EXPENSES	4,224	4,561	(337)	(7.98%)
8. PURCHASED CLIENT SERVICES	0	1,418	(1,418)	-
9. MEALS (Food Costs)	3,800	3,957	(157)	(4.13%)
10. SERVICE SUPPLIES/MEDICAL SUPPLIES & EQUIPMENT		5,044	(5,044)	-
			-	-
			-	-
			-	-
14a. OTHER Audit, Insurance Allocation		4,761	(4,761)	-
0			-	-
14c. OTHER Contribution to Reserve		-2,554	2,554	-
15. EXPENDITURE RECOVERIES	-50,246	-22,417	(27,829)	55.39%
16. SUB-TOTAL SERVICE EXPENDITURES (Total lines 1 to 15)	469,833	611,438	(141,605)	(30.14%)
17. ALLOCATED ADMINISTRATIVE EXPENDITURES	78,079		78,079	100.00%
18. TOTAL EXPENDITURES	547,912	611,438	(63,526)	(11.59%)
19. CLIENT FEES			-	-
20. REVENUES - OTHER	57,901	56,773	1,128	1.95%
21. MINISTRY BASE SUBSIDY REQUESTED (Line 18-line 19-line 20)	490,011	554,665	(64,654)	(13.19%)

Total for each line item Lines 1-21 (total for all services) must equal amounts reported in Section II, Part A.

EXPLANATION IF VARIANCE ON LINE 21 IS GREATER THAN 5%

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CCAC SERVICE AREA	Approved Budget	ACTUAL	(Over) Under C=A-B	% VARIANCE D = C/A	ACTUAL
	Number of Units	Number of Units			No. of individual client
	A	B			E
ACL - Heritage	18000	17,901	99	0.55%	46
			-	-	
			-	-	
			-	-	

EXPLANATIONS OF VARIANCES GREATER THAN 5% FROM APPROVED UNITS OF SERVICE:

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2006/2007 ANNUAL RECONCILIATION REPORT
SECTION II, PART C
ACTUAL EXPENDITURES, REVENUES AND UNITS BY SERVICES

Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

SERVICE:	11 A
TYPE:	SHU Supportive Housing
SITE:	ACL - Keswick Gardens

EXPENDITURES / REVENUES	Approved Budget A	Actual B	(Over) Under C=A-B	% VARIANCE D = C/A
1. EMPLOYEE SALARIES AND WAGES	440,295	615,665	(175,370)	(39.83%)
2. EMPLOYEE BENEFITS	70,688	95,521	(24,833)	(35.13%)
3. STAFF TRAINING	870	1,393	(523)	(60.11%)
4. BOARD/VOLUNTEER TRAINING & RECOGNITION	0	0	-	
5. TRAVEL	2,049	1,364	685	33.43%
6. BUILDING OCCUPANCY	9,200	9,186	14	0.15%
7. OFFICE EXPENSES	5,425	5,858	(433)	(7.98%)
8. PURCHASED CLIENT SERVICES	0	1,418	(1,418)	
9. MEALS (Food Costs)	3,900	4,698	(798)	(20.46%)
10. SERVICE SUPPLIES/MEDICAL SUPPLIES & EQUIPMENT		6,008	(6,008)	
			-	
			-	
			-	
14a. OTHER Audit, Insurance Allocation		9,522	(9,522)	
0			-	
14c. OTHER Contribution to Reserve		-5,109	5,109	
15. EXPENDITURE RECOVERIES	-49,710	-44,834	(4,876)	9.81%
16. SUB-TOTAL SERVICE EXPENDITURES (Total lines 1 to 15)	482,717	700,690	(217,973)	(45.16%)
17. ALLOCATED ADMINISTRATIVE EXPENDITURES	77,968		77,968	100.00%
18. TOTAL EXPENDITURES	560,685	700,690	(140,005)	(24.97%)
19. CLIENT FEES			-	
20. REVENUES - OTHER	81,955	81,104	851	1.04%
21. MINISTRY BASE SUBSIDY REQUESTED (Line 18-line 19-line 20)	478,730	619,586	(140,856)	(29.42%)

Total for each line item Lines 1-21 (total for all services) must equal amounts reported in Section II, Part A.

EXPLANATION IF VARIANCE ON LINE 21 IS GREATER THAN 5%

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CCAC SERVICE AREA	Approved Budget	ACTUAL	(Over) Under C=A-B	% VARIANCE D = C/A	ACTUAL
	Number of Units	Number of Units			No. of individual client
	A	B			E
ACL - Keswick Gardens	18000	18,213	(213)	(1.18%)	66
			-		
			-		
			-		

EXPLANATIONS OF VARIANCES GREATER THAN 5% FROM APPROVED UNITS OF SERVICE:

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2006/2007 ANNUAL RECONCILIATION REPORT
SECTION II, PART C
ACTUAL EXPENDITURES, REVENUES AND UNITS BY SERVICES

Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

SERVICE:	11 A
TYPE:	SHU Supportive Housing
SITE:	ACL - Kitchen Breedon Manor - SCHOMBERG

EXPENDITURES / REVENUES	Approved Budget A	Actual B	(Over) Under C=A-B	% VARIANCE D = C/A
1. EMPLOYEE SALARIES AND WAGES	64,601	88,759	(24,158)	(37.46%)
2. EMPLOYEE BENEFITS	6,206	12,716	(6,510)	(104.90%)
3. STAFF TRAINING	363	488	(125)	(34.44%)
4. BOARD/VOLUNTEER TRAINING & RECOGNITION	0	0	-	
5. TRAVEL	812	496	316	38.92%
6. BUILDING OCCUPANCY	5,256	4,560	696	13.24%
7. OFFICE EXPENSES	2,856	3,646	(790)	(27.66%)
8. PURCHASED CLIENT SERVICES	18,245	16,500	1,745	9.56%
9. MEALS (Food Costs)	185	26	159	85.95%
10. SERVICE SUPPLIES/MEDICAL SUPPLIES & EQUIPMENT		2,426	(2,426)	
			-	
			-	
			-	
14a. OTHER Audit, Insurance Allocation		3,463	(3,463)	
0			-	
14c. OTHER Contribution to Reserve		-1,858	1,858	
15. EXPENDITURE RECOVERIES	-8,714	-16,303	7,589	(87.09%)
16. SUB-TOTAL SERVICE EXPENDITURES (Total lines 1 to 15)	89,810	114,919	(25,109)	(27.96%)
17. ALLOCATED ADMINISTRATIVE EXPENDITURES	19,350		19,350	100.00%
18. TOTAL EXPENDITURES	109,160	114,919	(5,759)	(5.28%)
19. CLIENT FEES			-	
20. REVENUES - OTHER	33,115	32,442	673	2.03%
21. MINISTRY BASE SUBSIDY REQUESTED (Line 18-line 19-line 20)	76,045	82,477	(6,432)	(8.46%)

Total for each line item Lines 1-21 (total for all services) must equal amounts reported in Section II, Part A.

EXPLANATION IF VARIANCE ON LINE 21 IS GREATER THAN 5%

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CCAC SERVICE AREA	Approved Budget	ACTUAL	(Over) Under C=A-B	% VARIANCE D = C/A	ACTUAL
	Number of Units	Number of Units			No. of individual client
	A	B			E
ACL - Schomberg	3000	2,639	361	12.03%	22
			-		
			-		
			-		

EXPLANATIONS OF VARIANCES GREATER THAN 5% FROM APPROVED UNITS OF SERVICE:

Not able to take more complex care patient into Respite resulting in the under utilization of Respite.
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2006/2007 ANNUAL RECONCILIATION REPORT
SECTION II, PART C
ACTUAL EXPENDITURES, REVENUES AND UNITS BY SERVICES

Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

SERVICE:	11 A
TYPE:	SHU Supportive Housing
SITE:	ACL - Hadley Grange

EXPENDITURES / REVENUES	Approved Budget A	Actual B	(Over) Under C=A-B	% VARIANCE D = C/A
1. EMPLOYEE SALARIES AND WAGES	320,288	550,614	(230,326)	(71.91%)
2. EMPLOYEE BENEFITS	60,481	87,399	(26,918)	(44.51%)
3. STAFF TRAINING	1,000	2,215	(1,215)	(121.50%)
4. BOARD/VOLUNTEER TRAINING & RECOGNITION	0	0	-	
5. TRAVEL	1,000	2,918	(1,918)	(191.80%)
6. BUILDING OCCUPANCY	19,225	13,710	5,515	28.69%
7. OFFICE EXPENSES	4,500	8,650	(4,150)	(92.22%)
8. PURCHASED CLIENT SERVICES	0	1,418	(1,418)	
9. MEALS (Food Costs)	3,900	3,004	896	22.97%
10. SERVICE SUPPLIES/MEDICAL SUPPLIES & EQUIPMENT	9,300	6,728	2,572	27.66%
			-	
			-	
			-	
14a. OTHER Audit, Insurance Allocation		8,656	(8,656)	
0			-	
14c. OTHER Contribution to Reserve		-4,644	4,644	
15. EXPENDITURE RECOVERIES	-6,300	-40,758	34,458	(546.95%)
16. SUB-TOTAL SERVICE EXPENDITURES (Total lines 1 to 15)	413,394	639,910	(226,516)	(54.79%)
17. ALLOCATED ADMINISTRATIVE EXPENDITURES	75,234		75,234	100.00%
18. TOTAL EXPENDITURES	488,628	639,910	(151,282)	(30.96%)
19. CLIENT FEES			-	
20. REVENUES - OTHER	72,133	62,179	9,954	13.80%
21. MINISTRY BASE SUBSIDY REQUESTED (Line 18-line 19-line 20)	416,495	577,731	(161,236)	(38.71%)

Total for each line item Lines 1-21 (total for all services) must equal amounts reported in Section II, Part A.

EXPLANATION IF VARIANCE ON LINE 21 IS GREATER THAN 5%

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CCAC SERVICE AREA	Approved Budget	ACTUAL	(Over) Under C=A-B	% VARIANCE D = C/A	ACTUAL
	Number of Units	Number of Units			No. of individual client
	A	B			E
ACL - Hadley Grange	14700	14,924	(224)	(1.52%)	43
			-		
			-		
			-		

EXPLANATIONS OF VARIANCES GREATER THAN 5% FROM APPROVED UNITS OF SERVICE:

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2006/2007 ANNUAL RECONCILIATION REPORT
SECTION II, PART C
ACTUAL EXPENDITURES, REVENUES AND UNITS BY SERVICES

Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

SERVICE:	11 A
TYPE:	SHU Supportive Housing
SITE:	ACL - Armitage

EXPENDITURES / REVENUES	Approved Budget A	Actual B	(Over) Under C=A-B	% VARIANCE D = C/A
1. EMPLOYEE SALARIES AND WAGES	243,163	381,971	(138,808)	(57.08%)
2. EMPLOYEE BENEFITS	61,634	54,178	7,456	12.10%
3. STAFF TRAINING	1,000	2,566	(1,566)	(156.60%)
4. BOARD/VOLUNTEER TRAINING & RECOGNITION	0	0	-	
5. TRAVEL	1,336	2,210	(874)	(65.42%)
6. BUILDING OCCUPANCY	10,842	12,712	(1,870)	(17.25%)
7. OFFICE EXPENSES	4,500	5,461	(961)	(21.36%)
8. PURCHASED CLIENT SERVICES	29,416	1,418	27,998	95.18%
9. MEALS (Food Costs)	34,996	24,325	10,671	30.49%
10. SERVICE SUPPLIES/MEDICAL SUPPLIES & EQUIPMENT	9,300	9,203	97	1.04%
			-	
			-	
			-	
14a. OTHER Audit, Insurance Allocation	3,120	11,253	(8,133)	(260.67%)
14b. OTHER	2,860		2,860	100.00%
14c. OTHER Contribution to Reserve		-6,037	6,037	
15. EXPENDITURE RECOVERIES	-60,736	-52,986	(7,750)	12.76%
16. SUB-TOTAL SERVICE EXPENDITURES (Total lines 1 to 15)	341,431	446,274	(104,843)	(30.71%)
17. ALLOCATED ADMINISTRATIVE EXPENDITURES	24,991		24,991	100.00%
18. TOTAL EXPENDITURES	366,422	446,274	(79,852)	(21.79%)
19. CLIENT FEES			-	
20. REVENUES - OTHER	50,091	63,849	(13,758)	(27.47%)
21. MINISTRY BASE SUBSIDY REQUESTED (Line 18-line 19-line 20)	316,331	382,425	(66,094)	(20.89%)

Total for each line item Lines 1-21 (total for all services) must equal amounts reported in Section II, Part A.

EXPLANATION IF VARIANCE ON LINE 21 IS GREATER THAN 5%

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CCAC SERVICE AREA	Approved Budget	ACTUAL	(Over) Under C=A-B	% VARIANCE D = C/A	ACTUAL
	Number of Units	Number of Units			No. of individual client
	A	B			E
ACL - Armitage	12700	9,295	3,405	26.81%	46
			-		
			-		
			-		

EXPLANATIONS OF VARIANCES GREATER THAN 5% FROM APPROVED UNITS OF SERVICE:

The budget service units are overstated given the service agreement with the Newmarket Health Centre
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2006/2007 ANNUAL RECONCILIATION REPORT

SECTION II, PART D

BUDGET VS ACTUAL: PURCHASED SERVICES

Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

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2006/2007 ANNUAL RECONCILIATION REPORT
SECTION II, PART E
BUDGET VS. ACTUAL: OTHER REVENUE

Ministry of Health and Long-Term Care
Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

OTHER REVENUE	Approved Budget A	Actual B	(Over) Under C=A-B	% VARIANCE D = C/A
Fund Raising			\$ -	
Donations			-	
Municipal Grants/Subsidies	334,195	334,195	-	0.00%
Federal Grants/Subsidies			-	
United Way Grants			-	
Investment Income			-	
Other (Specify)			-	
Other (Specify)			-	
Other (Specify)			-	
Other (Specify)			-	
TOTAL OTHER REVENUE	\$ 334,195	\$ 334,195	\$ -	0.00%

Please provide a brief description of Approved and Actual Other Revenue. Note .
Total must agree with amounts reported in Section II, Part A, Line 20.

2006/2007 ANNUAL RECONCILIATION REPORT
SECTION II, PART F
ACTUAL ADMINISTRATIVE EXPENDITURES

Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

EXPENDITURES / REVENUES	Approved Budget A	Actual B	(Over) Under C=A-B	% VARIANCE D = C/A
1. EMPLOYEE SALARIES AND WAGES	241,540	241,540	-	0.00%
2. EMPLOYEE BENEFITS	36,790	36,790	-	0.00%
3. STAFF TRAINING			-	
4a. VOLUNTEER TRAINING & RECOGNITION			-	
4b. BOARD TRAINING & RECOGNITION			-	
5. TRAVEL			-	
6. BUILDING OCCUPANCY			-	
7. OFFICE EXPENSES	1,500	1,500	-	0.00%
11. Purchased Administration Services	2,500	2,500	-	0.00%
12. Central Agency Charges	15,585	15,585	-	0.00%
13. Other Operating	27,260	27,260	-	0.00%
14a. OTHER (specify)			-	
14b. OTHER (specify)			-	
14c. OTHER (specify)			-	
15a. EXPENDITURE RECOVERIES (Specify)			-	
15b. EXPENDITURE RECOVERIES (Specify)			-	
15c. EXPENDITURE RECOVERIES (Specify)			-	
16. TOTAL ADMINISTRATIVE EXPENDITURES (Total lines 1 to 15c)	325,175	325,175	-	0.00%

Amount in line 16 must equal sum of line 17 from all section II, Part C forms.

EXPLANATION IF VARIANCE ON LINE 16 IS GREATER THAN 5%



SECTION III

Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

DESCRIPTION OF APPROVED ITEMS/PROJECTS	APPROVED EXPENDITURE A	ACTUAL EXPENDITURE B	ELIGIBLE EXPENDITURE C
			\$ -
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
TOTAL:	\$ -	\$ -	\$ -

**ELIGIBLE EXPENDITURE: LESSER OF APPROVED OR ACTUAL
TOTALS MUST EQUAL SECTION II, PART A, LINE 22**



2006/2007 ANNUAL RECONCILIATION REPORT
SECTION IV
ACCRUAL REPORT

Ministry of Health and Long-Term Care
Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

		Opening Accrual Balance (1)	Payments/ Settlements in 2006/2007 (2)	Current Period Accrual (3)	Closing Accrual Balance (4)=(1)-(2)+(3)
Line 1	Salaries - Union Negotiation/Arbitration				-
Line 2	Salaries - Vacation Pay				-
Line 3	Salaries - (Proxy Pay Equity)				-
Line 4	Salaries - Other (Specify)				-
Line 5	Salaries - Other (Specify)				-
Line 6	Total Salaries Sum of Lines 1 through 5	-	-	-	-
Line 7	Employee Benefits (Total)				-
Line 8	Other - (Specify)				-
Line 9	Other - (Specify)				-
Line 10	Other - (Specify)				-
Line 11	Total Accrual Sum Lines 6 through 10	-	-	-	-

Details of Closing Accruals

	Closing Accrual Balance	Description/Details of Accruals (e.g. contract expiry date, estimated settlement %)
Salaries Accruals		
Expenditure Line (List by Union, etc.)		
Line 12		
Line 13		
Line 14		
Line 15		
Line 16		
Line 17		
Line 18		
Line 19	Total Sum of Lines 12 through 19	-

(equal to line 6,
column 4)

	Closing Accrual Balance	Description/Details of Accruals (e.g. % of estimated settlements if applicable)
Employee Benefits Accruals		
Individual list not required		
Line 20	Total	-

(equal to line 7,
column 4)

	Closing Accrual Balance	Description/Details of Accruals
Other Accruals		
Expenditure Line (specify) i.e. staff training, building occupancy etc.		
Line 21		
Line 22		
Line 23		
Line 24		
Line 25	Total Sum of Lines 21 through 24	-



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

2006/2007 ANNUAL RECONCILIATION REPORT
SECTION V
PROVINCIAL SUBSIDY CALCULATION

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

Provincial (Operating) Subsidy

1	Actual Total Expenditures before one-time [Section II, Part A, Col B, Line 21]		\$ 3,050,409
2	Adjustments (MOHLTC use only): - Inadmissible Expenditures -		\$
			\$
			\$
	- Other Adjustments -		\$
			\$
			\$
3	Total Ministry Approved Expenditures before one-time (line 1 plus 2)		\$ 3,050,409
	One-time Expenditures		
4 a)	Total One-time [Section II, Part A, Col B, line 22]	\$	-
4 b)	Adjustments (MOHLTC use only)	\$	
		\$	
4 c)	Total Ministry Approved one-time expenditures	\$	-
	Revenue :		
5 a)	Actual Client Fees [Section II, Part A, Col B, line 19]	\$	-
5 b)	Actual Revenue - Other [Section II, Part A, Col B, line 20]	\$	334,195
5 c)	Adjustments (MOHLTC use only)	\$	
		\$	
5 d)	Total Adjusted Revenue	\$	334,195
6	Adjusted Expenditure Less Revenue (Line 3 + Line 4c - Line 5d)	\$	2,716,214
7	Approved Budget (Section II, Part A, Col A, Line 23)	Fiscal	\$ 2,207,402
		Calendar	\$ 2,207,400
8	Total Approved Provincial Subsidy: Lesser of Line 6 and Line 7:	\$	2,207,400
	Payments (Cash Advances):		
9 a)	Total Cash Advances Received from the Ministry January to December 2006	\$	2,232,067
9 b)	Add: Prior Year Recoveries		
9 c)	Less: Prior Year Payments		
9 d)	Other Adjustments		
9 e)	Other Adjustments (MOHLTC use only)		
9 f)	Total Payments (for current period) [Sum of Line 9 (a) to Line 9 (e)]	\$	2,232,067
10	Provincial Subsidy Payable (Recoverable) [Line 8 - Line 9 (f)]	\$	(24,667)

MOHLTC use only
Financial Management Branch:
Reviewed By:
Approved By:
Date:



**2006/2007 ANNUAL RECONCILIATION REPORT
SECTION VI CERTIFICATION BY AGENCY**

Ministry of Health and Long-Term Care
Ministère de la Santé et des Soins de longue durée

MOHLTC recipient #:		Service Provider Name:
103283		The Regional Municipality of York - Supportive Housing

Section VI Certification by Agency

I hereby certify that, to the best of my knowledge, the data in the Annual Reconciliation Report to which this certification is attached, is true, correct and agrees with the books and records of the Agency and has been prepared in accordance with the Technical Instructions provided by the Ministry of Health.

(Signature of Agency Authority)

(Title)

(Date)

Receipt by Board of Directors

The above certification, together with the Annual Reconciliation Report, was received at a meeting held by the Board of Directors on _____ day of _____ 20 ____

(Chairperson of the Board of Directors)



2006/2007 ANNUAL RECONCILIATION REPORT
SECTION VII, PART A

Ministry of Health and Long-Term Care
Ministère de la Santé et des Soins de longue durée

RECONCILIATION of SECTION II, PART A to AUDITED (AGENCY) FINANCIAL STATEMENT

MOHLTC recipient #:	Service Provider Name:
103283	The Regional Municipality of York - Supportive Housing

1 Expenditures per the financial statements:

Adjustments for agencies with corporate year-end other than March 31st:

2 (a)	Less: total expenditures for the period prior to April 1, 2006:	0
2 (b)	Add: total expenditures for the period from the agency year-end to March 31, 2007	0
2 (c)	Equals: total expenditures for the period April 1, 2006 to March 31, 2007	0

Adjustments for "inadmissible expenditures" include in Line 2(c):

3 (a)	Less: depreciation expense:	
3 (b)	Less: other (specify):	
3 (c)	Less:	
3 (d)	Less:	
3 (e)	Less:	
		0

Adjustments for "admissible expenditures" not included in Line 2(c):

4 (a)	Add: one-time capital expenditures approved by long-term care:	0
4 (b)	Add:	
4 (c)	Add:	
4 (d)	Add:	
4 (e)	Add:	
		0

5 Total expenditures reported in the Annual Reconciliation Report (ARR)
(must equal actual expenditures Section II, Part A, Column B, Line 18 plus Line 22):

0

6 Revenues per the financial statements:

0

Adjustments for agencies with corporate year-end other than March 31st:

7 (a)	Less: total revenues for the period prior to April 1, 2006:	0
7 (b)	Add: total revenues for the period between the agency year-end to March 31, 2007:	0
7 (c)	Equals: total revenues for the period April 1, 2006 to March 31, 2007:	0

Adjustments for Revenues not to be included
in determining Ministry subsidy entitlement included in Line 7(c)

8 (a)	Less: long-term care subsidy re approved services	
8 (b)	Less: revenues in the income statement related to capital funding (including LTC):	
8 (c)	Less:	
8 (d)	Less:	
8 (e)	Less:	
		0

9 Total Revenues Reported in the Annual Reconciliation Report (ARR)
(must equal total of line 19 and 20 of Section II, Part A, Column B)

0

10 Net expenditures reported in the Annual Reconciliation Report
(must equal actual net expenditures Section II, Part A, Column B, Line 23):

0

2006/2007 ANNUAL RECONCILIATION REPORT
SECTION VII, PART B
AUDITOR'S REPORT

To the Ministry of Health and Long Term Care,

I (We) have examined the Section II, Part A, Column B, Section IV, Section VII, Part A and Section VIII of the Annual Reconciliation Report of

_____ (legal name of agency)

for the year ended_____.

My (our) examination was made in accordance with generally accepted auditing standards and accordingly included such tests and other procedures as I (we) considered necessary in the circumstances.

In my (our) opinion, the Section II, Part A, Column B, Section IV, Section VII, Part A and Section VIII of the Annual Reconciliation Report presents fairly the information contained therein for the year ended _____ in accordance with the Technical Instructions.

(City)

(Date)

(Licensed Public Accountant)



Ontario

2006/2007 ANNUAL RECONCILIATION REPORT

Section VIII

Ministry of Health and Long-Term Care

PROXY PAY EQUITY ANNUAL REPORT

Ministère de la Santé et des Soins de longue durée

This form is to be completed by transfer payment organizations who receive proxy pay equity funding from the ministry pursuant to the April 23, 2003 Memorandum of Settlement. It must be completed on an annual basis until an organization no longer has a pay equity obligation.

SECTION 1: BASIC PROGRAM INFORMATION

Name of Agency: _____

Recipient Number: 103283 Reporting Period: from _____ to _____

Contact Person: _____

Phone #: _____

SECTION 2: EXPENDITURE REPORT

Sources of Proxy Pay Equity Funds

Ministry of Health and Long-Term Care \$ _____ A

Other _____

Total _____

Expenditures

Actual Proxy Pay Equity Expenses (Including Current Outstanding Liabilities)

Surplus(Deficit) \$ _____ B
A-B

Current Outstanding Liabilities \$ _____

Total Number of Individuals Receiving Proxy Pay Equity _____

SECTION 3: CERTIFICATION

I _____ hereby certify that to the best of my knowledge the financial data is correct and it is reflected in the Annual Reconciliation Report.

(Signature of Agency Authority)

Title: _____

Date: _____