



BERLIN MAYOR AND COUNCIL

Monday, April 12, 2021

EFFECTIVE 04/01/2021: SPECIAL NOTICE: All Meetings of the Mayor and Council will be held in-person with NO public in attendance and will be streamed live on Facebook for viewing only.

Meeting packets will be posted by 5:00 p.m. on the Wednesday before the meeting.

- Advance questions will be accepted until 12:00 PM/NOON on the day of the meeting. Submit to:
 - Email: info@berlinmd.gov; please use Meeting Questions as your subject
 - Fax: 410-641-2316
 - Mail: Berlin Town Hall, Attn: Meeting Questions, 10 William St., Berlin, MD 21811. Mail should be posted no later close of business on the Friday before the meeting to help ensure delivery.
 - Drop boxes Town Hall – one is at the rear of the building on the parking lot, and the other is at the corner of Bay and Williams Street on the building.
- Questions and Comments during the meeting:
 - Unless a Public Hearing is being held, questions and comments will NOT be taken via Facebook.
 - Public Hearings: The Mayor will announce when Public Hearings are opened via Facebook and at that time questions will be accepted live via the comment section on Facebook.

Meeting attendance will be limited to Elected Official, authorized personnel, and presenters as appropriate.

To watch the Meeting on Facebook, please click on the blue Facebook icon at the top of any page on the Town website, www.berlinmd.gov, or type @berlinmd in the Facebook search bar.

Your patience and understanding as we work to meet the restrictions on gatherings while still conducting Town business is truly appreciated.

To receive future meeting notifications directly to your email, please sign-up at the bottom of any page on [our website](#).



BERLIN MAYOR AND COUNCIL Meeting Agenda

Monday, April 12, 2021

7:00 PM **REGULAR SESSION** [Livestream: Facebook](#) – No questions or comments accepted.

1. Approval of the Minutes for:
 - a. Regular Session 03.22.2021
 - b. Work Session 03.29.2021
2. Motions to Approve:
 - a. Motion 2021-07: Request to use Stephen Decatur Park for a Motherhood Walk on May 8, 2021 – Grace Center
 - b. Motion 2021-08: Request for use of Town Services for a Film Fest on June 11, June 12, and June 13 and an Interactive Play on October 16 – Berlin Heritage Foundation
3. Resolution 2021-03: Resolution approving the Town to apply for a USDA Grant for two police vehicles – Police Chief Arnold Downing
4. Proclamation 2021-30: Fair Housing Month – Deputy Town Administrator Mary Bohlen
5. Motion 2021-09: Motion Approving the PJM Risk Management Policy, Procedures, and Control Provisions – Town Administrator Jeffrey Fleetwood
6. Town Administrator's Report
7. Departmental Reports
8. Comments from the Council
9. Comments from the Mayor
10. Comments from the Public (Questions or comments must be submitted in writing before Noon on Monday, April 12, 2021.)
11. Comments from the Press (Questions or comments must be submitted in writing before Noon on Monday, April 12, 2021.)
12. Adjournment

Anyone having questions about the meetings mentioned above or needing special accommodations should contact Town Administrator Jeffrey Fleetwood at (410) 641-4002. Written materials in alternate formats for persons with disabilities are made available upon request.

*TTY users dial 7-1-1 in the State of Maryland.
TTY users outside Maryland dial 1-800-735-2258*



BERLIN MAYOR AND COUNCIL
Meeting Minutes
Monday, March 22, 2021

7:00 PM REGULAR SESSION – Via Zoom

Present: Mayor Zackery Tyndall, Vice-President Dean Burrell, Councilmembers Troy Purnell, Jack Orris, Shaneka Nichols, and Jay Knerr.

Staff Present: Town Administrator Jeff Fleetwood, Deputy Town Administrator Mary Bohlen, Finance Director Natalie Saleh, Police Chief Arnold Downing, Economic and Community Development Director Ivy Wells, Planning Director David Engelhart, Public Works Superintendent Jimmy Charles, Town Attorney David Gaskill, and Administrative Manager Kelsey Jensen.

Due to the Coronavirus/Covid-19 State of Emergency, this meeting was broadcast live via Facebook with limited public attendance. Following a moment of silence and the Pledge of Allegiance, Mayor Tyndall called the meeting to order at approximately 7:00 PM.

1. Approval of the Minutes for:

a. Regular Session of 03.08.2021:

On the motion of Councilmember Orris, second by Councilmember Knerr the Regular Session Minutes of March 8, 2021, were approved by the following vote:

Name	Counted toward Quorum			Recused		Absent
	Aye	No	Abstain			
Dean Burrell, VP	X					
Troy Purnell	X					
Jack Orris	X					
Shaneka Nichols	X					
Jay Knerr	X					
<i>Voting Tally</i>	5					

b. Listening Session of 03.15.2021:

Councilmember Orris noted a correction, he said Marie Velong would like the sale of parcels added to her position statement.

On the motion of Councilmember Orris, second by Councilmember Knerr the Listening Session Minutes of March 15, 2021, with the correction noted, were approved by the following vote:

Name	Counted toward Quorum			Recused		Absent
	Aye	No	Abstain			
Dean Burrell, VP	X					
Troy Purnell	X					
Jack Orris	X					
Shaneka Nichols	X					
Jay Knerr	X					
<i>Voting Tally</i>	5					

2. Proclamation: Proclaiming April 1st as Child Abuse Prevention Day

Mayor Tyndall presented Wendy Myers with the Cricket Center the Proclamation.

Town Administrator Jeffrey Fleetwood took a moment to introduce and welcome the new Public Works Superintendent Jimmy Charles.

3. Resolution 2021-02: Town's Reserve Policy

Town Administrator Jeffrey Fleetwood and Finance Director Natalie Saleh presented the reserve policy.

On the motion of Councilmember Knerr, second by Vice-President Burrell, Resolution 2021-02 was approved by the following vote:

Name	Counted toward Quorum			Recused	Absent
	Aye	No	Abstain		
Dean Burrell, VP	X				
Troy Purnell	X				
Jack Orris	X				
Shaneka Nichols	X				
Jay Knerr	X				
<i>Voting Tally</i>	5				

4. Ordinance 2021-01: Tax Rate Ordinance Public Hearing

Mayor Tyndall read an opening statement and stated that it is his position not to increase the tax rate. Town Administrator Jeffrey Fleetwood read the Ordinance on the record.

Mayor Tyndall opened the Public Hearing at 7:14 PM. Resident Marie Velong said she is glad to hear that it is being proposed at the same rate of \$.80. Town Administrator Jeffrey Fleetwood said it is a long process and his loyalty is with the Mayor and Council, Department Heads, Employees, and the citizens. Resident Gina Velong said it is great that it will remain the same, the Town needs to tighten the belts and evaluate important needs and table wants. Resident Robert Johnson asked when the citizens can review the budget(s) that were submitted to the Council. Mayor Tyndall said there is a time when the budget will go public, but that time is not yet. Resident Marie Velong said she resents what Mr. Fleetwood said, citizens should carry the most weight; she also said most employees do not even live in Town so they cannot care about it as the citizens do, their interest is only in their department, not the budget. Resident Carol Rose said she has worked with every employee here and they always have the best interest of the Town at heart regardless of where they live. Ms. Rose said she still has not seen a draft budget and thinks it is important to leave funding for improvements to roads; Mayor Tyndall said the discussion is about the tax rate, not the budget, but items that address flooding would fall in the Utility Budget. Ms. Rose then asked what was cut from the budget to balance it; Mayor Tyndall said salary increases and several other things; Ms. Rose said staff needs a COLA increase because the staff is important. Resident Jim Meckley said there should be no tax increase because there was a big increase two years ago, he feels the stimulus funds will help employees because he is sure most employees got it; the economy will get better, and maybe next year would be better. Lastly, a comment was made by Geraldine Rhock who said Germantown flooding needs addressed, the church is in Town; this comment was not addressed because it is unrelated to the topic. With no further comments, the Public Hearing ended at 7:30 PM.

Councilmember Knerr asked if the Department Heads can speak up and let them know if the requests, needs, and wants are in the budget they received. Mr. Fleetwood said Finance Director Natalie Saleh meets with all of the departments and gets a separate list of needs and wants, but he will allow them to speak up and say if those items were included. Planning Director David Engelhart said none of his wants are in this budget, he felt the budget was balanced on the backs of the employees. Vice-President Burrell asked if what he needed was in there; Mr. Engelhart said the needs are, but nothing more. Economic and Community Development Director Ivy Wells said

she has many concerns about the budget and proposed tax rate, her needs are in there, but nothing more, she wishes she was more involved in the budget process. Chief Downing said he wants to be sure he is speaking up for his staff and showing them support when they need it, he said many people leave other Towns to come work here because they get what they deserve. Chief Downing said education and training are a necessity and when it is not offered the employees take the hit, no one knows his budget needs like he does, so when cuts are made he feels that he should have had more of a say in where those cuts were made. Finance Director Natalie Saleh said she is proud of the employees and the Town and how well they work as a team to present a budget they worked hard on, the Council needs to look at the future, if they skip an increase this year then what about next year, they will need to keep tightening while costs continue to increase and each year it becomes harder to do. Public Works Superintendent Jimmy Charles said they need a street sweeper, and if they skip vital equipment it snowballs into future years. Deputy Town Administrator Mary Bohlen said her budget is relatively unchanged since it is related to the Parks, but feels it is important to note that we have very little turnover for a reason.

Councilmember Knerr said he has serious concerns with how the process was conducted and employee benefits shouldn't be cut. Mr. Fleetwood said the budget may still change because Health and Workers Compensation Insurance numbers are estimates. Administrative Manager Kelsey Jensen said it is important to know that employees used to receive a holiday one-time pay and that has decreased annually since she started, and then over the past few years it was no longer in the budget, she said she did write a letter requesting a \$100 one-time payment for employees last year because it was such a tough year for so many and thought it would boost morale, but it did not happen. Ms. Jensen also added that when she started the annual COLA was higher and it has gotten smaller over the years. Ms. Jensen said lastly, health insurance went up last year, so most employees' net pay went down.

Resident Rose Zollinger asked why the rate needs to be set before a feasible budget has been determined. Ms. Saleh said they need that tax rate to determine the revenues for producing the budget, it needs to come first. Councilmember Knerr said he thinks they need to take a long look at \$.80. Councilmember Orris said he found the process to be flawed, he expected to be more informed during the process. Mayor Tyndall said he keeps hearing people say two budgets, but that's not it, there is one budget, the one he has balanced, he said it is not an easy decision to make and that he disagrees that things are done on the backs of the employees. Mayor Tyndall said he reduced cell phone allowances, removed pay increases, and cut car allowances for three employees.

Vice-President Burrell said in a negotiation there is a conversation, he did not feel Mayor Tyndall was receptive enough to get others points of view, and only considered his own, he feels that the Council has always been very fair to the employees. Mayor Tyndall said he took an oath to the citizens and he has presented no increase in tax rate along with a balanced budget. Councilmember Knerr said he was never asked for his opinion and they did not get the budget until 9:00 PM on Friday so had three days to review it which is unacceptable. Mayor Tyndall said that is when the budget was updated and he wanted Council to have the most up-to-date budget, he feels he has gone above and beyond in answering all questions and responding quickly. Councilmember Knerr said they want to be helpful and involved in the process. Councilmember Nichols said it sounds like cuts were made to salaries, cell phones, vehicle allowances, and training; Mayor Tyndall said not training completely, but no national conferences and because of COVID, so many are held virtually now. Councilmember Nichols said so many of those trainings are vital for staff, the future is unknown so she is reluctant to put off a tax increase for another year. Resident Gina Velong said asked How does an examination of department line budget items affect promises made by elected Councilmembers? Keeping the tax rate as is was one of your

promises. Councilmember Nichols said she doesn't know how we can maintain the level of service and keep the rate where it is. Councilmember Purnell said not doing incremental increases was the biggest mistake made in the past and cutting the rate years ago was an even bigger mistake, he does not want this to affect employees and they need to have a capital budget for the roads. Councilmember Purnell said every penny generates \$47,657 a year, lastly, he mentioned that they adopted a reserve policy that tries to put \$100,000 away a year and that will not happen in this budget. Mayor Tyndall said that there is a line item in the budget for Highway User Revenue (HUR) funds which are funds passed through from the State that are used for streets and sidewalks, he cut Graham Ave and Stevenson Ln to purchase the new street sweeper. Councilmember Purnell said more cuts this year means more coming from the taxpayers later to make up for what we put off. Councilmember Knerr said they have a lot of work ahead of them and thinks a slow increase is important, therefore it is not too much to take on at once; he suggested \$.815, which is about \$60 annually to the average homeowner in Town. Ms. Saleh displayed a rate comparison for review. Mayor Tyndall added that \$.815 still will not cover the shortfall, it would need to be at least \$.83.

Resident Marie Velong said many citizens like her are on a fixed income and she knows they will probably increase water and stormwater rates. Vice-President Burrell wanted to hear other local tax rates; Ms. Jensen read the following from the County site: Worcester County collects the Real Property Tax for the towns of Berlin, Snow Hill, Pocomoke, and Ocean City. The current Berlin town tax rate is \$0.80 per \$100 of assessed value. The current Snow Hill town tax rate is \$0.86 per \$100 of assessed value. The Pocomoke town tax rate is \$0.9375 per \$100 of assessed value for owner-occupied property and \$1.1311 per \$100 of assessed value for all other properties. The tax rate for Ocean City is \$0.4559 per \$100 of assessed value. Mr. Fleetwood added that the Town is one of the few that doesn't charge for trash too.

Vice-President Burrell said that it is the Mayor's responsibility for presenting the budget, but they are responsible for setting the rate and voting. Mayor Tyndall said the Town has language when the Council needs to receive the budget, but he is not sure if there is language on when to receive the tax rate. Town Attorney David Gaskill said there is no language on when they need to receive the tax rate, but the budget is 32 days ahead of the fiscal year. Ms. Saleh added that the State needs the tax rate by June 1st, it drives the budget. Vice-President Burrell said that what was presented puts the Town in jeopardy and impacts the quality of service the Town can provide, the longevity of employees directly correlates with the quality of service. Councilmember Knerr said he presented \$.815, Councilmember Purnell presented \$.89, he takes citizens' concerns to heart. Mr. Gaskill read section C3-10 from the Charter titled "Adoption of Ordinances". Based on what Mr. Gaskill read, Vice-President Burrell said so it does not need to be decided tonight, we have 60 days from the introduction. Mayor Tyndall said his recommendation will not change to remain at \$.80 and he is confident that we can move forward with that rate. Councilmember Orris said from a timing perspective he would prefer to wait to set the rate. Councilmember Purnell said \$.80 is going backward.

Councilmember Knerr made a Motion to amend the tax rate from \$.80 to \$.815. Mayor Tyndall said that would not cover the shortfall. With no second the Motion died.

Vice-President Burrell said that the projected income is not promised and how will we handle it if incomes are not as expected. Mr. Fleetwood said we have also budgeted grants going out, \$20,000 to Atlantic General Hospital, \$40,000 to Worcester Youth and Family, and \$400,000 to Berlin Fire and Berlin Emergency Services. Mayor Tyndall said that if grant revenues are directly related to projects and do not come through, then the project would not happen. Councilmember Orris asked why Berlin would pay for all the costs associated with Rails to Trails if it connects to

Snow Hill; Mayor Tyndall said because it is in Berlin, but when it comes to connecting in the future, he has spoken with the Mayor and Town Administrator in Snow Hill and after their elections, he will speak to the new Mayor, but if the funding does not come through then the project will not be completed. Councilmember Nichols asked if we agree on \$.815 where will the money go; Mr. Gaskill said it is the Mayor's budget, but the Council has the right to amend. Mr. Fleetwood commented that the \$450,000 grant from the County is a general fund grant that comes to the Town unrestricted for General Fund purposes. Also, Mr. Fleetwood mentioned that the employee pay increases are just shy of \$50,000. Colin Zimmer with Coastal Association of Realtors suggested incremental increases over the next few years, so citizens can budget for the future, he suggests incremental or better yet, keep it the same. Mr. Gaskill said this Council cannot bind future Councils to a set rate. Councilmember Purnell said \$.80 is going backward and snowballing future increases.

Councilmember Purnell made a Motion to amend the tax rate from \$.80 to \$.86. With no second the Motion died.

Vice-President Burrell made a Motion to amend the tax rate from \$.80 to \$.83. With no second the Motion died.

Councilmember Purnell asked what happens if they reject it; Mr. Gaskill said they would need to take a look and make a new plan.

Councilmember Orris made a Motion to postpone this decision until there is a more solid idea on revenues and funding. Gaskill said the Charter requires a specified future date. Ms. Bohlen added that the First Reading of the Budget is May 10th, and the Public Hearing would be on May 24th. Ms. Saleh said the budget meetings are further out than 60 days so it would need to be addressed before then which may mean creating a special meeting. Mayor Tyndall said without this rate being set we cannot come up with a firm budget, this is as firm as it will be. Councilmember Orris withdrew his Motion.

Resident Marie Velong asked what is needed to give employees raises; Mr. Fleetwood said \$.01.

Mayor Tyndall said you need \$.83 to close the gap; Vice-President Burrell asked why he did not set the rate at that amount if that is what we need to close the gap. Mayor Tyndall said he found a way to make \$.80 work. Vice-President Burrell said they need to stop playing politics and do what is best for the Town. Ms. Saleh said in her professional opinion she recommends and stands by \$.83; Mayor Tyndall respects that but disagrees. Councilmember Purnell said \$.83 still will not get us ahead in any way.

On the Motion of Councilmember Nichols, second by Vice-President Burrell, a Motion to amend the tax rate from \$.80 to \$.83 was not approved by the following vote:

Name	Counted toward Quorum				
	Aye	No	Abstain	Recused	Absent
Dean Burrell, VP	X				
Troy Purnell		X			
Jack Orris		X			
Shaneka Nichols	X				
Jay Knerr		X			
<i>Voting Tally</i>	2	3			

On the motion of Councilmember Orris, second by Councilmember Knerr, Ordinance 2021-01 with a tax rate of \$.815 was approved by the following vote:

Name	Counted toward Quorum			Recused	Absent
	Aye	No	Abstain		
Dean Burrell, VP	X				
Troy Purnell		X			
Jack Orris	X				
Shaneka Nichols	X				
Jay Knerr	X				
<i>Voting Tally</i>	4	1			

5. Town Administrator's Report – Jeffrey Fleetwood

Mr. Fleetwood reported that tomorrow there will be a pre-construction meeting with State Highway regarding the 113/376 expansion project. April 3rd there will be a meeting to discuss the solar project on Schoolfield Street. Lastly, on March 29th at noon at the Public Works Yard, there will be a retirement ceremony for Public Works Superintendent Dave Wheaton.

6. Departmental Reports:

a. Economic and Community Development Director – Ivy Wells

Ms. Wells said she is working on a COVID Grant and has 40 applicants.

b. Public Works Superintendent – Jimmy Charles

Mr. Charles said he is working to beautify the Town this week they will begin focusing on the parks. Mayor Tyndall complimented the new flags at Stephen Decatur Park.

c. Administrative Manager – Kelsey Jensen

Ms. Jensen said she sent an advertisement to the local paper for a seasonal part-time general laborer.

7. Comments from the Mayor:

Mayor Tyndall thanked everyone for the concerns and discussions regarding the tax rate ordinance. He also mentioned that he is following the American Relief Act funding and is optimistic about receiving it.

8. Comments from the Council:

Councilmember Nichols said she appreciates the hard work that is put into the budget and tax rate and is not happy with how things progressed this evening.

Councilmember Knerr said this entire process seems backward and wanted to make a motion that in future years when a tax rate is presented, a balanced budget will be provided at that same time. Mayor Tyndall said this requires more than a Motion, it is a change to the Charter. Town Attorney David Gaskill said the State requires the Tax Rate by June 1st and the Mayor does not have to submit the budget until May 29th (32 days before July 1), and this would be the first reading. Deputy Town Administrator Mary Bohlen said a Resolution was passed in 2019 that outlines this procedure, she would suggest that at the next meeting it be provided for review, and at that point, you can determine how to change that process because they have the right and ability to change that process. Mr. Gaskill said it would be beneficial to review that process and the required dates and guidelines before making any changes. Councilmember Knerr asked if they are suggesting he take this up at future meeting; Ms. Bohlen said she can send it to him tomorrow and then he can determine if he would like to amend it.

Councilmember Orris thanked everyone for their work on the budget/tax rate and said it is not an easy decision to make, but it was a reasonable compromise.

9. Comments from the Public – none.

10. Comments from the Press – none.

11. Adjournment:

Councilmember Burrell made a comment that he is not satisfied with the way things happened tonight, but feels it is a legitimate compromise, it is important to put Berlin first, Elected Officials, Town Staff, and Citizens.

On the motion of Vice-President Burrell, second by Councilmember Purnell, the Mayor and Council meeting was adjourned at approximately 9:36 PM.

Name	Counted toward Quorum				
	Aye	No	Abstain	Recused	Absent
Dean Burrell, VP	X				
Troy Purnell	X				
Jack Orris	X				
Shaneka Nichols	X				
Jay Knerr	X				
<i>Voting Tally</i>	5				

Respectfully Submitted,



Kelsey Jensen
Administrative Manager



BERLIN MAYOR AND COUNCIL
BERLIN FIRE COMPANY WORK SESSION
Meeting Minutes
Monday, March 29, 2021

6:00 PM COUNCIL ORIENTATION BERLIN FIRE COMPANY WORK SESSION
Berlin, Maryland

Present: Mayor Zackery Tyndall, Councilmembers Orris, Nichols, and Knerr.

Staff Present: Town Administrator Jeff Fleetwood

Mayor Tyndall called the work session to order at 6:00 PM.

Berlin Fire Company President took all present on a tour of the Administrative Building (old library) and explained how the building was renovated and what it is used for now. Basically, the building is used for training and meetings. All present then proceeded to the main fire station and President Fitzgerald discussed a number of topics. Topics discussed were what equipment a fire fighter needed to do their job, the types of training required for all personnel, a description of each piece of equipment and then a general description of what is needed to respond to all different types of calls.

Council members and the mayor asked a number of questions to gain clarity on what had been presented to them.

The work session adjourned at 8:00 PM.

Respectfully Submitted,

Jeff Fleetwood
Town Administrator



MOTION OF THE MAYOR AND COUNCIL 2021-07

A MOTION OF THE MAYOR AND COUNCIL OF THE TOWN OF BERLIN TO APPROVING THE GRACE CENTER FOR MATERNAL & WOMENS HEALTH TO USE STEPHAN DECATUR PARK ON SATURDAY, MAY 8, 2021 FROM 8 AM- 1 PM FOR A MOTHERHOOD WALK AND THE REQUEST TO WAIVE ANY FEES RELATED TO PARK USE.

APPROVED THIS ____ DAY OF _____, 2021 BY THE MAYOR AND COUNCIL OF THE TOWN OF BERLIN, MARYLAND BY AFFIRMATIVE VOTE OF ____ TO ____ OPPOSED, WITH ____ ABSTAINING, AND ____ ABSENT.

Dean Burrell, Sr. Vice President

Approved this ____ day of _____, 2021 by the Mayor of the Town of Berlin.

Zackery Tyndall, Mayor

ATTEST: _____
Jeffrey Fleetwood, Town Administrator



TOWN OF BERLIN SPECIAL USE OF PARK FORM



Note: This form is to be completed by/with Town staff. It will be the determination of Town staff if additional services are required for the event/activity. Based on that determination additional forms and meetings with Town staff may be required to insure a successful event.

TODAY'S DATE: January 7, 2021

EVENT/ACTIVITY DATE: 5/8/21 TIME FROM: 8 TO: 1

NAME: Jasmine Dennis

Anticipated # of attendees 100
ADDRESS: 10226 Old Ocean City Blvd

PHONE: 443-513-4124
443-994-1857

Unit 2

EMAIL: jdennis@gracematernalth.org

ORGANIZATION: Grace Center for Maternal & Womens Health
(IF APPLICABLE)

WILL EVENT INVOLVE FEES PAID BY ATTENDEES AND/OR SALE OF GOODS OR SERVICES? ☒ YES ☐ NO

DESCRIPTION OF EVENT/ACTIVITY: Motherhood Walk (walk to celebrate Motherhood)

PARK REQUESTED

<input checked="" type="checkbox"/> Stephen Decatur Park, Tripoli Street <input checked="" type="checkbox"/> Pavilion <input type="checkbox"/> # of _____ Tennis Courts (max 3) <input type="checkbox"/> Other _____	<input type="checkbox"/> Dr. William Edward Henry Park, Flower Street <input type="checkbox"/> Pavilion <input type="checkbox"/> # of _____ Basketball Courts (max 2) <input type="checkbox"/> Other _____
<input type="checkbox"/> Heron Park	

PLEASE CHECK ALL THAT APPLY BELOW:

- ☐ More than one consecutive date;
☒ More than 50 people;
☒ Any event/activity that charges attendees a fee and/or involves the sale of goods or services;
☒ Use of areas other than the pavillon

Fees: \$50.00 per day per amenity, plus \$10 for electric (if applicable). \$25.00 will be refunded when facility is left in good condition. Failure to adhere to the parks rules and/or leave the facility in good condition may result in the forfeit of that \$25.00 and/or refusal by the Town of Berlin to permit the user to reserve the park in the future.

Office Use Only:

Fee calculation:

\$50.00 X 2 (number of facilities requested) = \$ 100.00 X 1 (number of days) = (a) \$ 100.00
 \$10.00 for electric X 1 (number of days) = (b) \$ 10.00

(a) + (b) = \$ 4560 Total fee to be paid

Does activity require any additional Town services?

- ☐ Additional trash cans
☐ Additional picnic tables
☐ Road Closure
☐ Other _____
☐ Referral to another department/additional forms to be completed

Notes/Comments:

I, the undersigned acknowledge and agree to the following:

1. PARKS RULES: I have been provided with a copy of the Park rules and regulations and I understand that I must adhere to these rules. If I fail to adhere to the Park rules and regulations, the Town of Berlin reserves the right to refuse to reserve the park in my name in the future. I further understand that the rules and regulations provided herewith are an excerpt of Chapter 22 of the Code of the Town of Berlin and other sections of that chapter and of the Town Code as a whole may also apply to use of the park(s).
2. VEHICLES STRICTLY PROHIBITED ON PARKS' GROUNDS. I understand that vehicles are not permitted in the parks beyond the parking lots. ABSOLUTELY NO EXCEPTIONS without prior express authorization.
3. RESERVATION OF FACILITY(IES). I understand that this reservation is only for the facility(ies) indicated above; all other areas of the park are open to the public and may be in use during my event.
4. LIABILITY INSURANCE/RELEASE OF LIABILITY: I certify that I or the organization which I represent possesses appropriate liability insurance and that, upon request, I will provide the Town of Berlin with verification of such insurance. If I do not possess such insurance, I understand that purchase of insurance may be required for this event/activity. The Town of Berlin and its agents are released from all liability associated with damage or injury resulting from the improper use of any equipment provided by the Town of Berlin and from damage or injury associated with the use of any equipment or items brought into the park by me or anyone associated with this event.

Signature: _____

Date: January 7, 2021

Clerk: _____ Fee Pd: \$ _____ Date: _____ Refund: ☐ YES ☐ NO Date: _____

**BUSINESS USE OF PARK APPLICATION**

This form is required when sale of goods or services is being requested in connection with an event or activity within a Town of Berlin Park, or on a recurring basis within a Town of Berlin Park. A Vendor's Application and Certification for Peddling and Soliciting may also be required.

Name of Business/Organization: Grace Center for Maternal & Women's Health Agent/Responsible Party: Jasmine Dennis
(Individual Person must be identified)

Address 10226 Old Ocean City Blvd unit 2 Phone #: (W) 443-513-4124 (C) 443-944-1857

Berlin MD 21811 Email: jdennis@gracematerialhealth.org

Park where activity or event will occur: ☒ Stephen Decatur Park ☐ William Henry Park ☐ Heron Park

Purpose of Facility Use: Motherhood Walk

Requested Days/Times of Use: May 8, 2021

of Persons Expected to participate in activity/event 100

List all individuals/employees who may/will conduct the business activity:

1) <u>Jasmine Dennis</u>	6) <u>Amelia Mike</u>
2) <u>Kay Windsor</u>	7) <u>Geoff Failla</u>
3) <u>Kia Hallett</u>	8) <u>Jan Kolesky</u>
4) <u>Jackie Failla</u>	9) <u>Kathi Thompson</u>
5) <u>Amanda Clark</u>	10) <u>Lauren Nagy</u>

Please add any other information relevant to this application, including a description of items to be sold, services to be performed and/or fees to be charged:

We will be charging a participant fee to cover cost of participant lanyard, name tag/number, and welcome packet. There will be a walk to celebrate motherhood/families, resources tables pertaining to motherhood/families as well as activities for children.

Reverse must be completed and signed.

AGREEMENT

By signing below, the agent/responsible party understands that, until approval by the Mayor and Council, this form is an application for use of the parks for the aforementioned purposes, and not a permit for use. He/She further assumes full responsibility for complying with the rules and regulations set forth in the Town of Berlin Code of Ordinances and, specifically, Chapter 22, "Parks and Recreation", Sec. 22.48-50, as well as any additional terms and conditions imposed by the Mayor and Council of the Town of Berlin. He/She understands that failure to comply may result in:

1. The imposition of limitations to this permit; and/or
2. Withdrawal of this permit; and/or
3. Refusal by the Mayor and Council to authorize future use by the entity.

A copy of this permit must be in the possession of the person conducting the business activity and shown upon request.

I, further acknowledge and agree to the following:

- 1) The Mayor and Council of the Town of Berlin reserves the right to refuse approval of any permit for any reason at their discretion.
- 2) I am responsible for application for and payment of a Town of Berlin Business License Fee or Vendor Permit as applicable under the Code of the Town of Berlin, Chapter 8.
- 3) If the nature of the business activity involves the sale or provision of food or drink to be prepared on site and/or prior to sale and to be sold to and/or consumed by the public, I am responsible for obtaining any and all applicable permits from any other agencies including, but not necessarily limited to, agencies of Worcester County and the State of Maryland. The Mayor and Council of the Town of Berlin reserves the right to deny approval of this permit pending verification of appropriate permits obtained from any other agency as applicable. Alcohol sales are prohibited under any circumstance.
- 4) That, if applicable, I am responsible for completion and submission of road closure permit forms to the State Highway Administration.
- 5) The Town of Berlin is in no way responsible for my adherence to the above conditions and that any fees associated with this permit, including the Town of Berlin Business License Fee and/or Vendor Permit, paid to the Town of Berlin, are separate from and unrelated to any fee charged for any other purpose by any other agency.
- 6) I will maintain insurance appropriate to the activity proposed and will provide proof of said insurance upon request.
- 7) If appropriate to the activity proposed, I will have my customers/clients sign documents acknowledging that the Town of Berlin holds no responsibility for any loss/injury/damage incurred by their participation in my business activity.
- 8) I will be responsible for any damage to Town of Berlin owned or leased property incurred as a result of my use of the facility under this permit.
- 9) Under NO circumstance are motorized vehicles permitted on parks' grounds, except those areas designated for parking of motor vehicles, without express written approval by an authorized representative of the Town of Berlin.

Signature: _____

Date: January 11, 2021

Printed Name: Jasmine Dennis

Office Use Only: Date Rec'd: _____ Initials: _____ Approved: ☐ Yes ☐ No

Non-profit organizations: ☐ Proof of Non-profit certification submitted and verified.

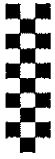
By _____ Date: _____

All others:

Mayor and Council of the Town of Berlin on the _____ day of _____.

_____ For to _____ Opposed with _____ Abstaining

Additional Conditions/Notations: _____



Jan. 7. 2021 3:38PM

No. 0535 P. 1



January 7, 2021


Mary Bohlen-

Hi -

Thank you so much for sending us the form for special use of park form.

Jasmine Dennis, our Executive Director has filled out the form.

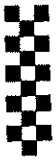
Thank you for helping us and we look forward to our Motherhood Walk for
2021 - May 8, 2021

Take Care 
Kay J. Windsor
Administrative Assistant

Our Mission

A safe haven dedicated to the improvement in health and well-being of women in the community

10226 Old Ocean City Blvd., Unit 2 / Berlin, MD 21811 / Ph. 443-513-4124 Fax 443-513-4115

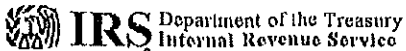


Grace Center for Maternal and Women's Health: Motherhood Walk COVID Plan

Tentative Date: May 8, 2021

- 1.) Participants will be pre-registering before morning of the event to cut back on the length of the line when arriving. They will be given the option to pick up participant packages prior to the day of the walk from the Grace Center. Upon arrival All registered participants who did not choose the pre pickup option will have their items set out pre bagged with their names. (There will be marker lines on the ground 6ft apart to ensure social distancing)
- 2.) A table with Individual hand sanitizers, gloves, and disposable masks will be available should anyone need PPE.
- 3.) All tables will be placed at minimum 8 ft apart along the walking path to not only allow for social distancing but to allow for multiple people to gather an Individual table.
- 4.) All activities items (ie. Children's' crafts, games) will be pre bagged rather than communal and the tables in the pavilion where crafts will take place will be distancing.
-Children will be given hula hoops to help maintain distancing.
- 5.) All food and beverages will be packaged according to Worcester County Health Department guidelines.
- 6.) All staff that is handling items that is given out will be wearing gloves.
- 7.) There will be hand sanitizing station set up around the area.

We will be following protocol recommended by CDC guidelines and the Local Health Department



OGDEN UT 84201-0046

In reply refer to: 0423258262
Aug. 15, 2019 LTR 3064C 0
27-2789189 000000 00
Input Op: 0423258262 0.0020672
BODC: TE

GRACE CENTER FOR MATERNAL AND
WOMENS HEALTH INC
% GEOFFREY FAILLA
10226 OLD OCEAN CITY BLVD UNIT 2
BERLIN MD 21811

339425

Taxpayer identification number: 27-2789189

Dear Taxpayer:

Thank you for the inquiry of June 12, 2019, to resolve your account with us.

Our records indicate that your organization is currently in good status with the Internal Revenue Service and is exempt under Section 501(c)3 of the Internal Revenue Code.

If you need any forms, schedules, or publications mentioned in this letter, you can get them by visiting our website at www.irs.gov/formspubs or by calling toll-free at 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500.

If you prefer, you can write to the address at the top of the first page of this letter.

When you write, include a copy of this letter, and provide your telephone number and the hours we can reach you in the spaces below.

Telephone number () _____ Hours _____

Keep a copy of this letter for your records.

Thank you for your cooperation.



**NON-PROFIT ORGANIZATION
REQUEST FOR WAIVER OF PARKS FEES**



This Request for Waiver of Parks Fees is only for use by certified Non-Profit Organizations/. PROOF OF NON-PROFIT STATUS IS REQUIRED WITH SUBMISSION. FORM MUST BE SUBMITTED AT LEAST 30 DAYS BEFORE EVENT DATE.

Name of Organization: Grace Center for Maternal & Womens Health

Contact Person: Jasmine Dennis

Address: 10226 Old Ocean City Blvd #2 Berlin MD 21811
Street Address City State Zip Code

Phone Number: 443-513-9124 Email Address: jdennis@gracematernalhealth.org EIN: 27-2789189

Park where activity or event will occur: ☒ Stephen Decatur Park ☐ William Henry Park

Requested Days/Times of Use: 5/8/21

of Persons Expected to participate in activity/event 100

With the exception of government entities, Information/Forms which MUST accompany this form:

1. Non-profit (501(c)(3)) Letter of Determination from the IRS; OR
2. Copy of information from irs.gov website.

Request will not be considered without the above information.

AGREEMENT

By signing below, the agent/responsible party understands and acknowledges:

1. That this is a request to waive fees associated with the reservation of the facilities of the Town of Berlin Park indicated above; any other costs or fees associated with the event, including those imposed by other agencies are not part of this waiver.
2. This form does not exempt the organization(s) from the applicability of any Town Code, other rules, regulations or policies associated with use of the parks. He/She further assumes full responsibility for complying with the rules and regulations set forth in the Town of Berlin Code of Ordinances and, specifically, Chapter 22, "Parks and Recreation", Sec. 22.48-50, as well as any additional terms and conditions imposed by the Mayor and Council of the Town of Berlin, as well as any applicable laws, regulations or codes imposed by the State of Maryland or Worcester County.
3. He/She understand that failure to comply may result in:
 - a. The imposition of limitations to use for the organization; and/or
 - b. Withdrawal of approval of this waiver; and/or
 - c. Refusal to authorize future use by the entity.
4. If this Request for Waiver is approved, such approval is applicable only to the date(s) specified above; additional waiver(s) must be requested for any future reservations of a Town of Berlin Park(s) by the organization.

Signature: [Signature]

Date: 3/29/21

Printed Name: Jasmine Dennis

Office Use Only: Date Rec'd: _____ Initials: _____

☐ Verification of Non-Profit Status received. Non-profit ID # _____ OR ☐ Government Entity
Request ☐ Approved ☐ Denied If denied state reason: _____

Comments: _____



MOTION OF THE MAYOR AND COUNCIL 2021-08

A MOTION OF THE MAYOR AND COUNCIL OF THE TOWN OF BERLIN TO APPROVING THE BERLIN HERITAGE FOUNDATIONS REQUEST FOR ELECTRIC AND PORTA-POTTIES ON JUNE 11, JUNE 12, AND JUNE 13 FROM 5 PM- 9 PM FOR A FILM FEST AND THE REQUEST FOR PORTA-POTTIES ON OCTOBER 16 FROM 2 PM- 5 PM FOR AN INTERACTIVE PLAY.

APPROVED THIS ____ DAY OF _____, 2021 BY THE MAYOR AND COUNCIL OF THE TOWN OF BERLIN, MARYLAND BY AFFIRMATIVE VOTE OF ____ TO ____ OPPOSED, WITH ____ ABSTAINING, AND ____ ABSENT.

Dean Burrell, Sr. Vice President

Approved this ____ day of _____, 2021 by the Mayor of the Town of Berlin.

Zackery Tyndall, Mayor

ATTEST: _____
Jeffrey Fleetwood, Town Administrator



SPECIAL EVENT
REQUEST FOR ELECTRIC



This form is in addition to the "Town Street Closure/Request for Services form. This form must be completed if electric service is required for any vendor/activity for an event. It is the event organizer's responsibility to coordinate with vendors regarding their electric needs; Berlin Electric Department staff will be glad to assist with any questions. Form must be signed and appropriate contact information provided to be considered. "Same as last year" will not be accepted for any category.

Today's Date: 3/23/2021

Event start time: 5:00 pm

Date(s) of the event: 6/11, 6/12, 6/13/2021

Event end time: 9:00 pm

Name of Event: Sundays at the Museum / Film Fest

Number of vendors/activities needing electric service: 1

Contact Name: Heather Nottingham

Contact Phone (Day): 410-422-0945

Sponsoring Organization Berlin Heritage Foundation

Email: info@taylorhousemuseum.org

Signature: Heather Nottingham

Date: 3/23/2021

Printed Name: Heather Nottingham

Side 2 must be completed.

NOTE: Electric service is available only in specific locations.

1. Complete the reverse of this form to determine vendors' electric needs. Your vendors should know their requirements.
2. Contact the Berlin Electric Department to discuss needs and to assist in determining the best location for specific vendors/activities requiring electric service.

Electric Utility Director Tim Lawrence
410-629-1713
tlawrence@berlinmd.gov

Reviewed by the Electric Utility Department: Date: _____ Initials: _____

Comments _____

DETAILS OF EVENT: Please copy this page as needed.

<p>Vendor: <u>Fun Flicks</u> Phone: <u>410-353-5684</u></p> <p>Primary Contact: _____</p> <p>Vendor Type: <u>Inflatable Movie Screens</u></p> <p>Load Information</p> <table style="width: 100%;"> <tr><td>Lighting</td><td>_____</td><td>KW</td></tr> <tr><td>Cooking</td><td>_____</td><td>KW</td></tr> <tr><td>Water Heating</td><td>_____</td><td>KW</td></tr> <tr><td>Miscellaneous</td><td>_____</td><td>KW</td></tr> <tr><td>Specify Unusual Motors</td><td>_____</td><td>KW</td></tr> <tr><td>Other: <u>Blower fan</u></td><td>_____</td><td>KW</td></tr> <tr><td>Total Load</td><td>_____</td><td>KW</td></tr> <tr><td>Specify Voltage</td><td>_____</td><td>KW</td></tr> </table> <p>Location of Service: _____ (determined w/Electric Department)</p>	Lighting	_____	KW	Cooking	_____	KW	Water Heating	_____	KW	Miscellaneous	_____	KW	Specify Unusual Motors	_____	KW	Other: <u>Blower fan</u>	_____	KW	Total Load	_____	KW	Specify Voltage	_____	KW	<p>Vendor: _____ Phone: _____</p> <p>Primary Contact: _____</p> <p>Vendor Type: _____</p> <p>Load Information</p> <table style="width: 100%;"> <tr><td>Lighting</td><td>_____</td><td>KW</td></tr> <tr><td>Cooking</td><td>_____</td><td>KW</td></tr> <tr><td>Water Heating</td><td>_____</td><td>KW</td></tr> <tr><td>Miscellaneous</td><td>_____</td><td>KW</td></tr> <tr><td>Specify Unusual Motors</td><td>_____</td><td>KW</td></tr> <tr><td>Other: _____</td><td>_____</td><td>KW</td></tr> <tr><td>Total Load</td><td>_____</td><td>KW</td></tr> <tr><td>Specify Voltage</td><td>_____</td><td>KW</td></tr> </table> <p>Location of Service: _____ (determined w/Electric Department)</p>	Lighting	_____	KW	Cooking	_____	KW	Water Heating	_____	KW	Miscellaneous	_____	KW	Specify Unusual Motors	_____	KW	Other: _____	_____	KW	Total Load	_____	KW	Specify Voltage	_____	KW
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SPECIAL EVENT APPLICATION



This form must be completed in order to hold an event in the Town of Berlin on public streets or property. Additional documents from the Town of Berlin, or another entity, may be required. Please provide as much information as possible. Form must be signed and appropriate contact information provided to be considered. "Same as last year" will not be accepted for any category.

Today's Date: 3/23/2021		Event Start time: 5 pm End time: 9 pm	Road Closure Start: N/A End:
Requested Date(s) of the event: 6/13 previously requested 6/11/21 6/12/21		Name of Event: Sunday Evening at the Museum/Film Fest	
Estimated number of attendees: 150		*Location of Event: Taylor House Museum 208 N. Main St. Berlin, MD *If activity is in a Town park, a Parks Reservation form must be complete.	
Applicant Name: Heather Nottingham		Applicant Cell Phone: 410-422-0945	
Sponsoring Organization or Business Name: Berlin Heritage Foundation		Email: info@taylorhousemuseum.org	
Person(s) to Contact Day of Event: Heather Nottingham	Name: Heather Nottingham Cell # 410-422-0945 Name: , Cell #		
Description of event: Fri 6/11 - Guest speaker discussing work on Tuck Everlasting w/artifacts displayed on lawn. Sat 6/12 - Movie - Tuck Everlasting Sun 6/13 - Movie - Runaway Bride If fundraiser, please indicate the beneficiary: Fri is free to members/\$20 Sat/sun are free to public			
How many and what types of vendors (ex. Food, craft, art, kids activity, etc.): No vendors. Museum will sell slushies.			
Will there be live music or a DJ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, what type of music What is your plan for the following: Marketing/Advertising: Social Media			
Parking/Shuttle: No			
Inclement weather: No Rain Date			
The event sponsor hereby agrees to the following conditions: 1. The Town of Berlin, its representative(s) and/or agent(s) will be held harmless for any loss, damage, or liability incurred in connection with the event. 2. The event sponsor is appropriately insured. Proof of insurance may be required; if the event sponsor does not possess the appropriate insurance, the Town of Berlin may require the purchase of one-time event insurance through the Town of Berlin's insurance carrier. 3. The event sponsor will be responsible for any costs incurred by the Town as a result of damage done during the course of the event to Town-owned, rented, or leased properties. 4. The event sponsor and/or its participating vendors are responsible for obtaining any licenses, permits, rights-of-way, etc. for the event, including any permits required by the Worcester County Health Department, the State Highway Administration or any other agencies as appropriate. Any fees or other conditions associated with such will be the sole responsibility of the event sponsor and/or its participating vendors. 5. Activities must occur within the time frame(s) specified. It is the sponsoring organization's responsibility to ensure that vendors, performers, etc. do not set-up earlier than agreed, and will begin break-down of booths, equipment, etc. promptly. Vendors, etc. must be clear of the street/area within one hour of event ending. Private property remaining beyond one hour will be removed from the street.			
By my signature below I identify myself as the representative of the above-named organization and/or the individual responsible for adherence to the conditions as set forth.			
Signature: Heather Nottingham		Date: 3/23/2021	
Printed Name: Heather Nottingham			

DETAILS OF EVENT:

Shaded areas for office use only

Street Closure	Note: Location map is required detailing streets to be blocked. Additionally, a State Highway Administration Request for Road Closure may be required.		
Street closure?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Barricade locations must be marked on map.	
Blockage/Closure Time:	Start:	End:	State Highway Form submitted if applicable? <input type="checkbox"/>
Will on-street parking need to be cleared?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Notes: # of barricades _____	No-Parking signs to be placed: _____
Will parking areas need to be cleared/closed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Barricades to be dropped off: _____	Time/date _____
		Time/Date _____	Must be placed 24 hours prior to event.

Electric	Note: The Electric Department will assist with completion of Service Form.		
Will there be vendors or activities requiring access to electricity?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Request for Electric Service form required including information from each vendor/activity requiring electric.	
Will there be banners to be hung?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Request for Electric Form submitted? <input checked="" type="checkbox"/>	
		If yes, Request to Hang Banner form needed. Banner Form submitted? <input type="checkbox"/>	

Other Items/Services:		If applicable, items listed are in addition to those normally in place.	
Trash cans	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	# Required _____	Trash cans to be placed: _____
Picnic Tables	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	# Required _____	Time/date _____
Stage	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Maximum: 5	To be placed: _____
Temporary Fencing	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Location must be marked on map.	Stage to be placed: _____
Porta-potties	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Location must be marked on map.	Time/date _____
Signs: Other than banners or parking	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	# Standard <u>1</u>	Extensions needed: <input type="checkbox"/>
		# Accessible <u>1</u>	Fencing to be placed: _____
		Informational signs during the event not applicable.	Time/date _____
Will there be vendors/individuals selling goods or services as part of the event?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Porta-potties will be placed in the alley on Pitts Street: 6 pm 6/11/21 thru 6/14/21 any time	
		Sign Permit may be required. Planning Office review _____ Date _____	
		Sign Permit needed/submitted? <input type="checkbox"/>	
		Vendor's Application and Certification for Peddling and Soliciting will be required for EACH vendor participating in the event.	
		If event/activity is in a municipal park a Business Use of Park Application will be required IN ADDITION to Vendor's Application and Certification for Peddling and Soliciting.	
		Vendor's Permit(s) needed/submitted? <input type="checkbox"/>	

Additional Forms Required:				Yes	No	N/A	Date Rec'd	Initials
State Highway Administration Request for Road Closure					<input checked="" type="checkbox"/>			
Park Reservation Application and Permit					<input checked="" type="checkbox"/>			
Request for Electric Service					<input checked="" type="checkbox"/>			
Request for Banner Placement					<input checked="" type="checkbox"/>			
Sign Permit					<input checked="" type="checkbox"/>			
Vendor's Application and Certification for Peddling and Soliciting					<input checked="" type="checkbox"/>			
Business Use of Park Application					<input checked="" type="checkbox"/>			
Proof of Insurance					<input checked="" type="checkbox"/>			
Other:					<input checked="" type="checkbox"/>			

Approved by the Mayor and Council on the _____ day of _____, 20____. For _____ Opposed _____ Abstain.



SPECIAL EVENT APPLICATION



This form must be completed in order to hold an event in the Town of Berlin on public streets or property. Additional documents from the Town of Berlin, or another entity, may be required. Please provide as much information as possible. Form must be signed and appropriate contact information provided to be considered. "Same as last year" will not be accepted for any category.

Today's Date: 3/23/2021		Event Start time: 2:00 pm End time: 5:00 pm		Road Closure Start: N/A End:	
Requested Date(s) of the event: Saturday 10/16/2021					
Name of Event: Ocean Pines Players present "Clara Barton" (interactive play)		*Location of Event: 208 N. Main St. Taylor House Museum			
Estimated number of attendees: 100		*If activity is in a Town park, a Parks Reservation form must be complete.			
Applicant Name: Heather Nottingham		Applicant Cell Phone: 410-422-0945			
Sponsoring Organization or Business Name: Taylor House Museum		Email: info@taylorhousemuseum.org			
Person(s) to Contact Day of Event: Heather Nottingham Museum Administrator		Name: _____, Cell # 410-422-0945 Name: _____, Cell # _____			
Description of event: Ocean Pines Players will perform an original theater production about the life of Clara Barton.					
If fundraiser, please indicate the beneficiary:					
How many and what types of vendors (ex. Food, craft, art, kids activity, etc.): Museum will sell slushies					
Will there be live music or a DJ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, what type of music					
What is your plan for the following: Marketing/Advertising: Social Media					
Parking/Shuttle: N/A					
Inclement weather: N/A					
The event sponsor hereby agrees to the following conditions: 1. The Town of Berlin, its representative(s) and/or agent(s) will be held harmless for any loss, damage, or liability incurred in connection with the event. 2. The event sponsor is appropriately insured. Proof of insurance may be required; if the event sponsor does not possess the appropriate insurance, the Town of Berlin may require the purchase of one-time event insurance through the Town of Berlin's insurance carrier. 3. The event sponsor will be responsible for any costs incurred by the Town as a result of damage done during the course of the event to Town-owned, rented, or leased properties. 4. The event sponsor and/or its participating vendors are responsible for obtaining any licenses, permits, rights-of-way, etc. for the event, including any permits required by the Worcester County Health Department, the State Highway Administration or any other agencies as appropriate. Any fees or other conditions associated with such will be the sole responsibility of the event sponsor and/or its participating vendors. 5. Activities must occur within the time frame(s) specified. It is the sponsoring organization's responsibility to ensure that vendors, performers, etc. do not set-up earlier than agreed, and will begin break-down of booths, equipment, etc. promptly. Vendors, etc. must be clear of the street/area within one hour of event ending. Private property remaining beyond one hour will be removed from the street.					
By my signature below I identify myself as the representative of the above-named organization and/or the individual responsible for adherence to the conditions as set forth.					
Signature: <u>Heather Nottingham</u>		Date: 3/23/2021			
Printed Name: <u>Heather Nottingham</u>					

DETAILS OF EVENT:

Shaded areas for office use only

Street Closure		Note: Location map is required detailing streets to be blocked. Additionally, a State Highway Administration Request for Road Closure may be required.	
Street closure?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Barricade locations must be marked on map.	
Blockage/Closure Time:	Start: _____ End: _____	State Highway Form submitted if applicable? <input type="checkbox"/>	
Will on-street parking need to be cleared?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Notes: # of barricades _____	No Parking signs to be placed: _____
Will parking areas need to be cleared/closed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Barricades to be dropped off: _____ Time/Date _____	Must be placed 24 hours prior to event.

Electric		Note: The Electric Department will assist with completion of Service Form.	
Will there be vendors or activities requiring access to electricity?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Request for Electric Service form required including information from each vendor/activity requiring electric.	
Will there be banners to be hung?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Request for Electric Form submitted? <input type="checkbox"/>	
		If yes, Request to Hang Banner form needed. Banner Form submitted? <input type="checkbox"/>	

Other Items/Services:		If applicable, items listed are in addition to those normally in place.			
Trash cans	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	# Required _____	Trash cans to be placed: _____ Time/date _____		
Picnic Tables	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	# Required _____ Maximum: 5	To be placed: _____ Time/date _____		
Stage	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Location must be marked on map.	Stage to be placed: _____ Time/date _____		
Temporary Fencing	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Location must be marked on map.	Extensions needed: <input type="checkbox"/>		
Porta-potties	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	# Standard <u>2</u> <input checked="" type="checkbox"/> 1	Fencing to be placed: _____ Time/date _____		
Signs: Other than banners or parking	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	# Accessible <u>1</u>	Porta-potties will be placed in the alley on Pitts Street: <u>Noon 10/14/21 - anytime 10/17/21</u> Time/date _____		
Will there be vendors/individuals selling goods or services as part of the event?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Informational signs during the event not applicable.	Sign Permit may be required. Planning Office review _____ Date _____		
		Sign Permit needed/submitted? <input type="checkbox"/>			
		Vendor's Application and Certification for Peddling and Soliciting will be required for EACH vendor participating in the event. If event/activity is in a municipal park a Business Use of Park Application will be required IN ADDITION to Vendor's Application and Certification for Peddling and Soliciting.			
		Vendor's Permit(s) needed/submitted? <input type="checkbox"/>			
Additional Forms Required:					
State Highway Administration Request for Road Closure	Yes	No	N/A	Date Rec'd	Initials
Park Reservation Application and Permit		<input checked="" type="checkbox"/>			
Request for Electric Service		<input checked="" type="checkbox"/>			
Request for Banner Placement		<input checked="" type="checkbox"/>			
Sign Permit		<input checked="" type="checkbox"/>			
Vendor's Application and Certification for Peddling and Soliciting		<input checked="" type="checkbox"/>			
Business Use of Park Application		<input checked="" type="checkbox"/>			
Proof of Insurance		<input checked="" type="checkbox"/>			
Other:		<input checked="" type="checkbox"/>			
Approved by the Mayor and Council on the _____ day of _____, 20____. For _____ Opposed _____ Abstain.					



RESOLUTION NO. 2021-03

A RESOLUTION OF THE MAYOR AND COUNCIL OF THE TOWN OF BERLIN AGREEING TO APPLY FOR FINANCIAL ASSISTANCE WITH THE UNITED STATES DEPARTMENT OF AGRICULTURE, RURAL DEVELOPMENT TO FINANCE THE PURCHASE OF TWO POLICE VEHICLES. BE IT FURTHER RESOLVED THAT THE MAYOR AND COUNCIL OF THE TOWN OF BERLIN AUTHORIZES THE MAYOR TO SIGN ALL DOCUMENTS RELATING TO THE USDA RURAL DEVELOPMENT LOAN AND/OR GRANT. THE APPLICANT POINT OF CONTACT SHALL BE ARNOLD DOWNING, CHIEF OF POLICE.

APPROVED THIS ____ DAY OF _____, 2021 BY THE MAYOR AND COUNCIL OF THE TOWN OF BERLIN, MARYLAND BY AFFIRMATIVE VOTE OF ____ TO ____ OPPOSED, WITH ____ ABSTAINING, AND ____ ABSENT.

Dean Burrell, Sr. Vice President

Approved this ____ day of _____, 2021 by the Mayor of the Town of Berlin.

Zackery Tyndall, Mayor

ATTEST: _____
Jeffrey Fleetwood, Town Administrator



Mayor & Council of Berlin, Maryland

April 12, 2021

PROCLAMATION 2021-30

A PROCLAMATION OF THE MAYOR AND COUNCIL OF THE TOWN OF BERLIN RECOGNIZING FAIR HOUSING MONTH - APRIL, 2021

WHEREAS the Congress of the United States passed the Civil Rights Act of 1968, in which it was declared that the law of the land would guarantee the rights of equal housing opportunity, and

WHEREAS the month of April is recognized by the federal government as Fair Housing Month and realtors, developers, financial institutions, landlords, tenants and the public at-large are reminded that it is illegal to discriminate in housing on the basis of age, race, religion, sex or national origin, and

WHEREAS fair housing groups and the Maryland Department of Housing and Community Development have, over the years, received complaints of alleged illegal housing discrimination, and

WHEREAS the State of Maryland, through the Maryland Department of Housing and Community Development, supports fairness in housing through a variety of programs and working partnerships with the federal government, local governments and private sector businesses to ensure better living conditions for all Marylanders, and

WHEREAS equal housing opportunity is a condition of life in our community that can and should be achieved;

NOW THEREFORE, be it proclaimed that the MAYOR AND COUNCIL OF THE TOWN OF BERLIN hereby declare the month of April 2021 as FAIR HOUSING MONTH in the Town of Berlin and does commend this observance to all of our citizens.

WITNESS MY HAND AND SEAL, THIS ____ DAY OF APRIL, 2021.

Zackery Tyndall - Mayor

Jeff Fleetwood - Town Administrator



MOTION OF THE MAYOR AND COUNCIL 2021-09

A MOTION OF THE MAYOR AND COUNCIL OF THE TOWN OF BERLIN TO APPROVE THE PJM RISK MANAGEMENT POLICY, PROCEDURES, AND CONTROL PROVISIONS.

APPROVED THIS ____ DAY OF _____, 2021 BY THE MAYOR AND COUNCIL OF THE TOWN OF BERLIN, MARYLAND BY AFFIRMATIVE VOTE OF ____ TO ____ OPPOSED, WITH ____ ABSTAINING, AND ____ ABSENT.

Dean Burrell, Sr. Vice President

Approved this ____ day of _____, 2021 by the Mayor of the Town of Berlin.

Zackery Tyndall, Mayor

ATTEST: _____
Jeffrey Fleetwood, Town Administrator

**Tariff, Attachment Q
Appendix 1**

**PJM MINIMUM PARTICIPATION CRITERIA
ANNUAL OFFICER CERTIFICATION FORM**

Participant Name: Town of Berlin ("Participant")

I, Jeffrey Fleetwood, a duly authorized officer of Participant, understanding that PJM Interconnection, L.L.C. and PJMSettlement, Inc. ("PJMSettlement") are relying on this certification as evidence that Participant meets the minimum requirements set forth in the PJM Open Access Transmission Tariff ("PJM Tariff"), Attachment Q hereby certify that I have full authority to represent on behalf of Participant and further represent as follows, as evidenced by my initialing each representation in the space provided below:

1. All employees or agents transacting in markets or services provided pursuant to the PJM Tariff or PJM Amended and Restated Operating Agreement ("PJM Operating Agreement") on behalf of the Participant have received appropriate training and are authorized to transact on behalf of Participant. As used in this representation, the term "appropriate" as used with respect to training means training that is (i) comparable to generally accepted practices in the energy trading industry, and (ii) commensurate and proportional in sophistication, scope and frequency to the volume of transactions and the nature and extent of the risk taken by the participant. _____
2. Participant has written risk management policies, procedures, and controls, approved by Participant's independent risk management function and applicable to transactions in any PJM Markets in which it participates and for which employees or agents transacting in markets or services provided pursuant to the PJM Tariff or PJM Operating Agreement have been trained, that provide an appropriate, comprehensive risk management framework that, at a minimum, clearly identifies and documents the range of risks to which Participant is exposed, including, but not limited to credit risks, liquidity risks and market risks. As used in this representation, a Participant's "independent risk management function" can include appropriate corporate persons or bodies that are independent of the Participant's trading functions, such as a risk management committee, a risk officer, a Participant's board or board committee, or a board or committee of the Participant's parent company.
 - × a. Participant is providing to PJM or PJMSettlement, in accordance with Tariff, Attachment Q, section III, with this Annual Officer Certification Form, a copy of its current governing risk management policies, procedures and controls applicable to its activities in any PJM Markets pursuant to Attachment Q or because there have been substantive changes made to such policies, procedures and controls applicable to its market activities since they were last provided to PJM. _____
 - b. If the risk management policies, procedures and controls applicable to Participant's market activities submitted to PJM or PJMSettlement were submitted prior to the current certification, Participant certifies that no substantive changes have been made to such policies, procedures and controls applicable to its market activities since such submission. _____

3. An FTR Participant must make either the following 3.a. or 3.b. additional representations, evidenced by the undersigned officer initialing either the one 3.a. representation or the four 3.b. representations in the spaces provided below:

a. Participant transacts in PJM's FTR markets with the sole intent to hedge congestion risk in connection with either obligations Participant has to serve load or rights Participant has to generate electricity in the PJM Region ("physical transactions") and monitors all of the Participant's FTR market activity to endeavor to ensure that its FTR positions, considering both the size and pathways of the positions, are either generally proportionate to or generally do not exceed the Participant's physical transactions, and remain generally consistent with the Participant's intention to hedge its physical transactions. _____

b. On no less than a weekly basis, Participant values its FTR positions and engages in a probabilistic assessment of the hypothetical risk of such positions using analytically based methodologies, predicated on the use of industry accepted valuation methodologies. _____

Such valuation and risk assessment functions are performed either by persons within Participant's organization independent from those trading in PJM's FTR markets or by an outside firm qualified and with expertise in this area of risk management.

Having valued its FTR positions and quantified their hypothetical risks, Participant applies its written policies, procedures and controls to limit its risks using industry recognized practices, such as value-at-risk limitations, concentration limits, or other controls designed to prevent Participant from purposefully or unintentionally taking on risk that is not commensurate or proportional to Participant's financial capability to manage such risk. _____

Exceptions to Participant's written risk policies, procedures and controls applicable to Participant's FTR positions are documented and explain a reasoned basis for the granting of any exception. _____

- JF* 4. Participant has appropriate personnel resources, operating procedures and technical abilities to promptly and effectively respond to all PJM and PJMSettlement communications and directions. _____

- JF* 5. Participant has demonstrated compliance with the Minimum Capitalization criteria set forth in Tariff, Attachment Q that are applicable to any PJM Markets in which Participant transacts, and is not aware of any change having occurred or being imminent that would invalidate such compliance. _____

6. All Participants must certify and initial in at least one of the four sections below:

- a. I certify that Participant qualifies as an "appropriate person" as that term is defined under section 4(c)(3), or successor provision, of the Commodity Exchange Act or an "eligible contract participant" as that term is defined under section 1a(18), or successor provision, of the Commodity Exchange Act. I certify that Participant will cease transacting in any PJM Markets and notify PJM and PJMSettlement immediately if Participant no longer qualifies as an "appropriate person" or "eligible contract participant." _____

If providing audited financial statements, which shall be in US GAAP format or any other format acceptable to PJM, to support Participant's certification of qualification as an "appropriate person."

I certify, to the best of my knowledge and belief, that the audited financial statements provided to PJM and/or PJMSettlement present fairly, pursuant to such disclosures in such audited financial statements, the financial position of Participant as of the date of those audited financial statements. Further, I certify that Participant continues to maintain the minimum \$1 million total net worth and/or \$5 million total asset levels reflected in these audited financial statements as of the date of this certification. I acknowledge that both PJM and PJMSettlement are relying upon my certification to maintain compliance with federal regulatory requirements. _____

If not providing audited financial statements to support Participant's certification of qualification as an "appropriate person," Participant certifies that they qualify as an "appropriate person" under one of the entities defined in section 4(c)(3)(A)-(J) of the Commodities Exchange Act. _____

If providing audited financial statements, which shall be in US GAAP format or any other format acceptable to PJM, to support Participant's certification of qualification as an "eligible contract participant:"

I certify, to the best of my knowledge and belief, that the audited financial statements provided to PJM and/or PJMSettlement present fairly, pursuant to such disclosures in such audited financial statements, the financial position of Participant as of the date of those audited financial statements. Further, I certify that Participant continues to maintain the minimum \$1 million total net worth and/or \$10 million total asset levels reflected in these audited financial statements as of the date of this certification. I acknowledge that both PJM and PJMSettlement are relying upon my certification to maintain compliance with federal regulatory requirements. _____

If not providing audited financial statements to support Participant's certification of qualification as an "eligible contract participant," Participant certifies that they qualify as an "eligible contract participant" under one of the entities defined in section 1a(18)(A) of the Commodities Exchange Act. _____

- b. I certify that Participant has provided an unlimited Corporate Guaranty in a form acceptable to PJM as described in Tariff, Attachment Q, section III.D from an issuer that has at least \$1 million of total net worth or \$5 million of total assets per Participant for which the issuer has issued an unlimited Corporate Guaranty. I also certify, to the best of my knowledge and belief, that the audited financial statements provided to PJM and/or PJMSettlement present fairly, pursuant to such disclosures in such audited financial statements, the financial position of the issuer as of the date of those audited financial statements. Further, I certify that Participant will cease transacting PJM's Markets and notify PJM and PJMSettlement immediately if issuer of the unlimited Corporate Guaranty for Participant no longer has at least \$1 million of total net worth or \$5 million of total assets per Participant for which the issuer has issued an unlimited Corporate Guaranty. _____

I certify that the issuer of the unlimited Corporate Guaranty to Participant continues to have at least \$1 million of total net worth or \$5 million of total assets per Participant for which the issuer has issued an unlimited Corporate Guaranty. I acknowledge that PJM and PJMSettlement are relying upon my certifications to maintain compliance with federal regulatory requirements. _____

- x c. I certify that Participant fulfills the eligibility requirements of the Commodity Futures Trading Commission exemption order (78 F.R. 19880 – April 2, 2013) by being in the

JP

business of at least one of the following in the PJM Region as indicated below (initial those applicable):

1. Generating electric energy, including Participants that resell physical energy acquired from an entity generating electric energy: _____
2. Transmitting electric energy: _____
- JP 3. Distributing electric energy delivered under Point-to-Point or Network Integration Transmission Service, including scheduled import, export and wheel through transactions: _____
4. Other electric energy services that are necessary to support the reliable operation of the transmission system: _____

Description only if c(4) is initialed:

JP Further, I certify that Participant will cease transacting in any PJM Markets and notify PJM and PJMSettlement immediately if Participant no longer performs at least one of the functions noted above in the PJM Region. I acknowledge that PJM and PJMSettlement are relying on my certification to maintain compliance with federal energy regulatory requirements. _____

- d. I certify that Participant has provided a Letter of Credit of \$5 million or more to PJM or PJMSettlement in a form acceptable to PJM and/or PJMSettlement as described in Tariff, Attachment Q, section V.B that the Participant acknowledges cannot be utilized to meet its credit requirements to PJM and PJMSettlement. I acknowledge that PJM and PJMSettlement are relying on the provision of this letter of credit and my certification to maintain compliance with federal regulatory requirements. _____

- JP 7. I acknowledge that I have read and understood the provisions of Tariff, Attachment Q applicable to Participant's business in any PJM Markets, including those provisions describing PJM's Minimum Participation Requirements and the enforcement actions available to PJM and PJMSettlement of a Participant not satisfying those requirements. I acknowledge that the information provided herein is true and accurate to the best of my belief and knowledge after due investigation. In addition, by signing this certification, I acknowledge the potential consequences of making incomplete or false statements in this Certification. _____

Date: 4/6/2021 _____

Jeffrey Fleetwood
Participant (Signature)

Print Name:
Title:

Jeffrey Fleetwood
Town Administrator

Check Run Report for:

03/19/21

03/23/21

03/29/21

04/01/21



Town of Berlin, MD

Check Register

Packet: APPKT01950 - 20210319SW

3/19/21

MRB 3/19/21

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
0003167	FLUHART DAVID	03/19/2021	Regular	0.00	223.00	19685

Bank Code BOC AP Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	1	1	0.00	223.00
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	1	1	0.00	223.00



Town of Berlin, MD

Payment Register

APPKT01950 - 20210319SW

01 - Vendor Set 01

Bank: BOC AP - BOC AP Checks

Vendor Number Vendor Name
0003167 FLUHART DAVID
Payment Type Payment Number
Check

Total Vendor Amount
223.00

Payable Number Description
02/26/2021 PER DIEM MEALS - LINEMAN TRAINING LTAP #3 PALMYRA, VA

Payable Date Due Date
03/03/2021 03/03/2021

Payment Date Payment Amount
03/19/2021 223.00
Discount Amount Payable Amount
0.00 223.00

Bank Code	Type	Payable Count	Payment Count	Discount	Payment
BOC AP	Check	1	1	0.00	223.00
Packet Totals:		1	1	0.00	223.00



Town of Berlin, MD

3/23/21

Check Register

Packet: APPKT01958 - 20210323SW

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: BOC AP-BOC AP Checks						
0000334	BERLIN FIRE CO	03/23/2021	Regular	0.00	41,321.25	19785
0000335	BERLIN FIRE COMPANY EMERGENCY	03/23/2021	Regular	0.00	117,357.50	19786

Bank Code BOC AP Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	2	2	0.00	158,678.75
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	2	2	0.00	158,678.75



Town of Berlin, MD

3/23/21

Payment Register

APPKT01958 - 20210323SW

01 - Vendor Set 01

Bank: BOC AP - BOC AP Checks

Vendor Number Vendor Name
0000334 BERLIN FIRE CO
Payment Type Payment Number
Check

Payable Number Description
MARCH 1ST PAYMENT FY 21 FIRE AND RESCUE SERVICES ALLOCATION

Payable Date Due Date
03/23/2021 03/23/2021

Payment Date	Payment Amount
03/23/2021	41,321.25
Discount Amount	Payable Amount
0.00	41,321.25

Total Vendor Amount
41,321.25

Vendor Number Vendor Name
0000335 BERLIN FIRE COMPANY EMERGENCY MEDICAL SERVICE
Payment Type Payment Number
Check

Payable Number Description
MARCH 1ST PAYMENT FY 21 EMERGENCY MEDICAL SERVICES ALLOCATION

Payable Date Due Date
03/23/2021 03/23/2021

Payment Date	Payment Amount
03/23/2021	117,357.50
Discount Amount	Payable Amount
0.00	117,357.50

Total Vendor Amount
117,357.50

Payment Summary

Bank Code	Type	Payable Count	Payment Count	Discount	Payment
BOC AP	Check	2	2	0.00	158,678.75
Packet Totals:		2	2	0.00	158,678.75



Town of Berlin, MD

Refund Check Register

Refund Check Detail

3/23/21

UBPKT06998 - 20210322BS

Account	Name	Date	Check #	Amount	Code	Receipt	Amount	Type
33-1480041-06	MARTINEK, ALEXIS	3/23/2021	19781	43.67			43.67	Generated From Billing
Total Refunded Amount:				43.67				

Total Refunds: 1

Revenue Code Summary

Revenue Code	Amount
996 - UNAPPLIED CREDITS / REFUNDS	43.67
Revenue Total:	43.67

General Ledger Distribution

Posting Date: 03/19/2021

Account Number	Account Name	Posting Amount	IFT
Fund: 10 - ELECTRIC			
10-1110-1098	CLAIM ON CASH-FUND 10	-43.67	Yes
10-2010-2074	UNAPPLIED CREDITS	43.67	
10 Total:		0.00	
Fund: 98 - POOLED CASH			
98-1098-1000	CENTRAL DEPOSITORY CASH	-43.67	
98-2498-2200	DUE TO OTHER FUNDS	43.67	Yes
98 Total:		0.00	
Distribution Total:		0.00	



Town of Berlin, MD

3/23/21

Check Register

Packet: APPKT01954 - 20210323SW

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: BOC AP-BOC AP Checks						
0000187	ANTHONY SULLIVAN	03/23/2021	Regular	0.00	150.00	19714
0002916	BASSETT DAVID	03/23/2021	Regular	0.00	150.00	19715
0000380	BIRELEY CHRISTOPHER	03/23/2021	Regular	0.00	150.00	19716
0000393	BOHLEN MARY	03/23/2021	Regular	0.00	150.00	19717
0000399	BRAGG MERLE	03/23/2021	Regular	0.00	150.00	19718
0002636	BRATTEN GARY	03/23/2021	Regular	0.00	150.00	19719
0000435	BURRELL DEAN SR	03/23/2021	Regular	0.00	150.00	19720
0000451	CAMPBELL MICHAEL	03/23/2021	Regular	0.00	150.00	19721
0003230	CHARLES JAMES	03/23/2021	Regular	0.00	50.00	19722
0003079	CHESSER CODY	03/23/2021	Regular	0.00	150.00	19723
0000541	CLARK ROBERT	03/23/2021	Regular	0.00	150.00	19724
0000553	COARD CHRIS	03/23/2021	Regular	0.00	150.00	19725
0000564	COFFEY MELISSA	03/23/2021	Regular	0.00	150.00	19726
0000570	COLLINS JESSICA	03/23/2021	Regular	0.00	150.00	19727
0000599	CORBIN SAMUEL	03/23/2021	Regular	0.00	150.00	19728
0000668	DAVID C GASKILL, ATTORNEY AT LAW	03/23/2021	Regular	0.00	150.00	19729
0003098	DAVID DAVIS JR	03/23/2021	Regular	0.00	150.00	19730
0000728	DENNIS RICKY C	03/23/2021	Regular	0.00	150.00	19731
0000775	DOWNING ARNOLD	03/23/2021	Regular	0.00	150.00	19732
0000777	DUFFY CAROLYN	03/23/2021	Regular	0.00	150.00	19733
0000778	DUKES KEITH ALAN	03/23/2021	Regular	0.00	150.00	19734
0002956	EARLY ALLISON	03/23/2021	Regular	0.00	100.00	19735
0000843	ENGELHART DAVID	03/23/2021	Regular	0.00	150.00	19736
0001581	EVANS NOAH DAVID	03/23/2021	Regular	0.00	150.00	19737
0000905	FISHER ROBERT	03/23/2021	Regular	0.00	150.00	19738
0000910	FLEETWOOD, JEFF	03/23/2021	Regular	0.00	150.00	19739
0003167	FLUHART DAVID	03/23/2021	Regular	0.00	150.00	19740
0002920	FORTUNE BRIAN	03/23/2021	Regular	0.00	150.00	19741
0001029	HIGGASON JIM	03/23/2021	Regular	0.00	150.00	19742
0002971	HUNTER CALEB	03/23/2021	Regular	0.00	150.00	19743
0001054	HURLEY DONALD M. III	03/23/2021	Regular	0.00	150.00	19744
0002532	JENSEN KELSEY	03/23/2021	Regular	0.00	150.00	19745
0001228	KERR JOSEPH	03/23/2021	Regular	0.00	150.00	19746
0003202	KNERR JAY	03/23/2021	Regular	0.00	150.00	19747
0001268	LATCHUM JAMES	03/23/2021	Regular	0.00	150.00	19748
0001278	LAWRENCE TIM	03/23/2021	Regular	0.00	150.00	19749
0001280	LAWSON JEFFREY D	03/23/2021	Regular	0.00	150.00	19750
0003086	LEWIS HUNTER	03/23/2021	Regular	0.00	150.00	19751
0001314	LITTLETON CLAUDE	03/23/2021	Regular	0.00	150.00	19752
0002800	LLOYD KEVIN	03/23/2021	Regular	0.00	150.00	19753
0001318	LOCKWOOD JAMES	03/23/2021	Regular	0.00	150.00	19754
0003219	MARSHALL AVERY	03/23/2021	Regular	0.00	150.00	19755
0001534	MUMFORD WILLIE	03/23/2021	Regular	0.00	150.00	19756
0003203	NICHOLS SHANEKA	03/23/2021	Regular	0.00	150.00	19757
0001593	O'CONNOR MICHAEL	03/23/2021	Regular	0.00	150.00	19758
0003229	ODEGARRD JASON	03/23/2021	Regular	0.00	150.00	19759
0003201	ORRIS JACK	03/23/2021	Regular	0.00	150.00	19760
0001649	PARKINSON ALAN	03/23/2021	Regular	0.00	150.00	19761
0001688	PFALLER MEGHAN	03/23/2021	Regular	0.00	150.00	19762
0001705	PITTS MARCUS	03/23/2021	Regular	0.00	150.00	19763
0003204	RHODE ANTHONY	03/23/2021	Regular	0.00	150.00	19764
0002942	ROMBLAD CONNOR A	03/23/2021	Regular	0.00	150.00	19765
0001555	SALEH NATALIE	03/23/2021	Regular	0.00	150.00	19766
0001885	SATCHELL SR EARLEST M	03/23/2021	Regular	0.00	150.00	19767

Check Register

Packet: APPKT01954-20210323SW

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
0003140	SHORD ELIZABETH	03/23/2021	Regular	0.00	150.00	19768
0001850	SHOWELL RYAN	03/23/2021	Regular	0.00	150.00	19769
0001967	SMITH MARVIN	03/23/2021	Regular	0.00	150.00	19770
0002632	THOMAS TUBBS	03/23/2021	Regular	0.00	150.00	19771
0002166	TOWNSEND MICHELLE	03/23/2021	Regular	0.00	150.00	19772
0002193	UNGER JOANN	03/23/2021	Regular	0.00	150.00	19773
0002915	VOISINE DAVID	03/23/2021	Regular	0.00	150.00	19774
0002294	WEBB EDWARD	03/23/2021	Regular	0.00	150.00	19775
0002299	WELLS IVY	03/23/2021	Regular	0.00	150.00	19776
0002307	WHEATON DAVE	03/23/2021	Regular	0.00	150.00	19777
0002309	WHITE SHIRLEY	03/23/2021	Regular	0.00	150.00	19778
0002316	WIENHOLD AUGUST J.	03/23/2021	Regular	0.00	150.00	19779
0002338	WISE RONDELL	03/23/2021	Regular	0.00	150.00	19780

Bank Code BOC AP Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	67	67	0.00	9,900.00
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	67	67	0.00	9,900.00



Town of Berlin, MD

f 3/23/21

Payment Register

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01 - Vendor Set 01

Bank: BOC AP - BOC AP Checks

Vendor Number	Vendor Name	Total Vendor Amount
0000187	ANTHONY SULLIVAN	150.00
Payment Type	Payment Number	
Check		
Payable Number	Description	
3RD QRT FY 21	CELL PHONE ALLOWANCE	
Payable Date	Due Date	
03/10/2021	03/10/2021	
Discount Amount	Payable Amount	
0.00	150.00	
		Payment Date 03/23/2021 Payment Amount 150.00

Vendor Number	Vendor Name	Total Vendor Amount
0002916	BASSETT DAVID	150.00
Payment Type	Payment Number	
Check		
Payable Number	Description	
3RD QRT FY 21	CELL PHONE ALLOWANCE	
Payable Date	Due Date	
03/10/2021	03/10/2021	
Discount Amount	Payable Amount	
0.00	150.00	
		Payment Date 03/23/2021 Payment Amount 150.00

Vendor Number	Vendor Name	Total Vendor Amount
0000380	BIRELEY CHRISTOPHER	150.00
Payment Type	Payment Number	
Check		
Payable Number	Description	
3RD QRT FY 21	CELL PHONE ALLOWANCE	
Payable Date	Due Date	
03/10/2021	03/10/2021	
Discount Amount	Payable Amount	
0.00	150.00	
		Payment Date 03/23/2021 Payment Amount 150.00

Vendor Number	Vendor Name	Total Vendor Amount
0000393	BOHLEN MARY	150.00
Payment Type	Payment Number	
Check		
Payable Number	Description	
3RD QRT FY 21	CELL PHONE ALLOWANCE	
Payable Date	Due Date	
03/10/2021	03/10/2021	
Discount Amount	Payable Amount	
0.00	150.00	
		Payment Date 03/23/2021 Payment Amount 150.00

Vendor Number	Vendor Name	Total Vendor Amount
0000399	BRAGG MERLE	150.00
Payment Type	Payment Number	
Check		
Payable Number	Description	
3RD QRT FY 21	CELL PHONE ALLOWANCE	
Payable Date	Due Date	
03/10/2021	03/10/2021	
Discount Amount	Payable Amount	
0.00	150.00	
		Payment Date 03/23/2021 Payment Amount 150.00

Vendor Number	Vendor Name	Total Vendor Amount
0002636	BRATTEN GARY	150.00
Payment Type	Payment Number	
Check		
Payable Number	Description	
3RD QRT FY 21	CELL PHONE ALLOWANCE	
Payable Date	Due Date	
03/10/2021	03/10/2021	
Discount Amount	Payable Amount	
0.00	150.00	
		Payment Date 03/23/2021 Payment Amount 150.00

Vendor Number	Vendor Name	Total Vendor Amount
0000435	BURRELL DEAN SR	150.00
Payment Type	Payment Number	
Check		
Payable Number	Description	
3RD QRT FY 21	CELL PHONE ALLOWANCE	
Payable Date	Due Date	
03/10/2021	03/10/2021	
Discount Amount	Payable Amount	
0.00	150.00	
		Payment Date 03/23/2021 Payment Amount 150.00

Payment Register

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Vendor Number	Vendor Name					Total Vendor Amount
0000451	CAMPBELL MICHAEL					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0003230	CHARLES JAMES					50.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	50.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	50.00	
Vendor Number	Vendor Name					Total Vendor Amount
0003079	CHESSER CODY					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000541	CLARK ROBERT					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000553	COARD CHRIS					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000564	COFFEY MELISSA					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000570	COLLINS JESSICA					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000599	CORBIN SAMUEL					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	

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Vendor Number	Vendor Name					Total Vendor Amount
0000668	DAVID C GASKILL, ATTORNEY AT LAW					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0003098	DAVID DAVIS JR					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000728	DENNIS RICKY C					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000775	DOWNING ARNOLD					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000777	DUFFY CAROLYN					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000778	DUKES KEITH ALAN					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0002956	EARLY ALLISON					100.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	100.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	100.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000843	ENGELHART DAVID					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	

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Vendor Number	Vendor Name					Total Vendor Amount
<u>0001581</u>	EVANS NOAH DAVID					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>3RD QRT FY 21</u>	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
<u>0000905</u>	FISHER ROBERT					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>3RD QRT FY 21</u>	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
<u>0000910</u>	FLEETWOOD, JEFF					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>3RD QRT FY 21</u>	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
<u>0003167</u>	FLUHART DAVID					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>3RD QRT FY 21</u>	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
<u>0002920</u>	FORTUNE BRIAN					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>3RD QRT FY 21</u>	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
<u>0001029</u>	HIGGASON JIM					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>3RD QRT FY 21</u>	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
<u>0002971</u>	HUNTER CALEB					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>3RD QRT FY 21</u>	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
<u>0001054</u>	HURLEY DONALD M. III					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>3RD QRT FY 21</u>	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	

Payment Register

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Vendor Number	Vendor Name					Total Vendor Amount
0002532	JENSEN KELSEY					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001228	KERR JOSEPH					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0003202	KNERR JAY					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001268	LATCHUM JAMES					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001278	LAWRENCE TIM					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001280	LAWSON JEFFREY D					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0003086	LEWIS HUNTER					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001314	LITTLETON CLAUDE					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	

Payment Register
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Vendor Number	Vendor Name					Total Vendor Amount
0002800	LLOYD KEVIN					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001318	LOCKWOOD JAMES					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0003219	MARSHALL AVERY					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/16/2021	03/16/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001534	MUMFORD WILLIE					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0003203	NICHOLS SHANEKA					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001593	O'CONNOR MICHAEL					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0003229	ODEGARRD JASON					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/16/2021	03/16/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0003201	ORRIS JACK					150.00
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/23/2021	150.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	

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Vendor Number	Vendor Name					Total Vendor Amount
0001649	PARKINSON ALAN					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001688	PFALLER MEGHAN					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001705	PITTS MARCUS					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0003204	RHODE ANTHONY					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0002942	ROMBLAD CONNOR A					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001555	SALEH NATALIE					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001885	SATCHELL SR EARLEST M					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0003140	SHORD ELIZABETH					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	

Payment Register
APPKT01954 - 20210323SW

Vendor Number	Vendor Name					Total Vendor Amount
0001850	SHOWELL RYAN					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001967	SMITH MARVIN					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0002632	THOMAS TUBBS					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0002166	TOWNSEND MICHELLE					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0002193	UNGER JOANN					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0002915	VOISINE DAVID					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0002294	WEBB EDWARD					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0002299	WELLS IVY					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	

Payment Register

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Vendor Number	Vendor Name					Total Vendor Amount
0002307	WHEATON DAVE					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
						Total Vendor Amount
						150.00
Vendor Number	Vendor Name					Total Vendor Amount
0002309	WHITE SHIRLEY					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
						Total Vendor Amount
						150.00
Vendor Number	Vendor Name					Total Vendor Amount
0002316	WIENHOLD AUGUST J.					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	
						Total Vendor Amount
						150.00
Vendor Number	Vendor Name					Total Vendor Amount
0002338	WISE RONDELL					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
3RD QRT FY 21	CELL PHONE ALLOWANCE	03/10/2021	03/10/2021	0.00	150.00	

Payment Summary

Bank Code	Type	Payable Count	Payment Count	Discount	Payment
BOC AP	Check	67	67	0.00	9,900.00
Packet Totals:		67	67	0.00	9,900.00



Town of Berlin, MD

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Check Register

Packet: APPKT01952 - 20210323SW

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: BOC AP-BOC AP Checks						
0000080	ADVANCE AUTO PARTS	03/23/2021	Regular	0.00	45.01	19686
0000088	AFFORDABLE BUSINESS SYSTEMS	03/23/2021	Regular	0.00	142.11	19687
0000323	BERLIN AUTOMOTIVE	03/23/2021	Regular	0.00	52.38	19688
0000405	BRASURE'S PEST CONTROL INC	03/23/2021	Regular	0.00	220.00	19689
0000453	CAPITAL ELECTRIC SUPPLY COMPAN	03/23/2021	Regular	0.00	1,989.13	19690
0000496	CHEMSEARCH	03/23/2021	Regular	0.00	1,202.00	19691
0000529	CINTAS FIRST AID & SAFETY	03/23/2021	Regular	0.00	341.38	19692
0002647	CINTAS RUGS	03/23/2021	Regular	0.00	404.42	19693
0000572	COMCAST	03/23/2021	Regular	0.00	23.79	19694
0000581	COMPTROLLER OF MARYLAND	03/23/2021	Regular	0.00	625.00	19695
0000584	COMPTROLLER OF MARYLAND	03/23/2021	Regular	0.00	2,364.30	19696
0000792	EAST TO WEST EMBROIDERY & DESI	03/23/2021	Regular	0.00	83.95	19697
0000899	FIRE PROTECTIVE SERVICE	03/23/2021	Regular	0.00	35.00	19698
0000907	FLAG PUBLICATIONS INC	03/23/2021	Regular	0.00	55.00	19699
0000968	GOODY HILL GROUND WORK INC	03/23/2021	Regular	0.00	18,071.16	19700
0001035	HOLBROOK ENVIRONMENTAL INC	03/23/2021	Regular	0.00	600.00	19701
0001080	IRIE RADIO INC	03/23/2021	Regular	0.00	450.00	19702
0001286	LEGAL SHIELD	03/23/2021	Regular	0.00	57.80	19703
0001397	MARYLAND INDUSTRIAL TRUCKS, IN	03/23/2021	Regular	0.00	784.49	19704
0001448	MD PLANNING COMMISSION ASSOC	03/23/2021	Regular	0.00	150.00	19705
0001565	NATIONWIDE RETIREMENT SOLUTIC	03/23/2021	Regular	0.00	4,209.96	19706
0001997	STAPLES BUSINESS CREDIT	03/23/2021	Regular	0.00	403.31	19707
0002022	STUART C IRBY CO	03/23/2021	Regular	0.00	2,271.00	19708
0002993	TUCKAHOE UNDERGROUND LLC	03/23/2021	Regular	0.00	2,294.40	19709
0002928	UNIFIRST CORPORATION	03/23/2021	Regular	0.00	216.86	19710
0002205	UNITED WAY OF THE EASTERN SHOI	03/23/2021	Regular	0.00	38.00	19711
0002304	WEST OCEAN CITY ILLNESS & INJUR	03/23/2021	Regular	0.00	80.00	19712
0002363	WORCESTER COUNTY LANDFILL	03/23/2021	Regular	0.00	22,895.25	19713

Bank Code BOC AP Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	32	28	0.00	60,105.70
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	32	28	0.00	60,105.70



Town of Berlin, MD

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Payment Register

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01 - Vendor Set 01

Bank: BOC AP - BOC AP Checks

Vendor Number 0000080	Vendor Name ADVANCE AUTO PARTS	Payment Type Check	Payment Number	Payable Number 6035107619734	Description BLASTER PENETRATING OIL	Payable Date 03/18/2021	Due Date 03/18/2021	Payment Date 03/23/2021	Payment Amount 45.01	Discount Amount 0.00	Payable Amount 45.01	Total Vendor Amount 45.01
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Vendor Number 0000088	Vendor Name AFFORDABLE BUSINESS SYSTEMS	Payment Type Check	Payment Number	Payable Number IN161318	Description ABS PLOTTER WASTE FLUID SECTION	Payable Date 03/18/2021	Due Date 03/18/2021	Payment Date 03/23/2021	Payment Amount 142.11	Discount Amount 0.00	Payable Amount 142.11	Total Vendor Amount 142.11
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Vendor Number 0000323	Vendor Name BERLIN AUTOMOTIVE	Payment Type Check	Payment Number	Payable Number 346091	Description BRAKE CLEAN & RED GREASE	Payable Date 03/18/2021	Due Date 03/18/2021	Payment Date 03/23/2021	Payment Amount 52.38	Discount Amount 0.00	Payable Amount 52.38	Total Vendor Amount 52.38
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Vendor Number 0000405	Vendor Name BRASURE'S PEST CONTROL INC	Payment Type Check	Payment Number	Payable Number 661221,1219,1220,1223	Description BRAUSERS QUARTERLY PEST CONTROL SPRAYING	Payable Date 03/18/2021	Due Date 03/18/2021	Payment Date 03/23/2021	Payment Amount 220.00	Discount Amount 0.00	Payable Amount 220.00	Total Vendor Amount 220.00
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Vendor Number 0000453	Vendor Name CAPITAL ELECTRIC SUPPLY COMPANY	Payment Type Check	Payment Number	Payable Number S043187528.001	Description OVERHEAD STREET LIGHTS (50) WATT LED FIXTURES	Payable Date 03/18/2021	Due Date 03/18/2021	Payment Date 03/23/2021	Payment Amount 1,989.13	Discount Amount 0.00	Payable Amount 1,989.13	Total Vendor Amount 1,989.13
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Vendor Number 0000496	Vendor Name CHEMSEARCH	Payment Type Check	Payment Number	Payable Number 7261996	Description GEAR OIL	Payable Date 03/18/2021	Due Date 03/18/2021	Payment Date 03/23/2021	Payment Amount 1,202.00	Discount Amount 0.00	Payable Amount 1,202.00	Total Vendor Amount 1,202.00
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Vendor Number 0000529	Vendor Name CINTAS FIRST AID & SAFETY	Payment Type Check	Payment Number	Payable Number 8405034472	Description FIRST AID CABINET	Payable Date 03/18/2021	Due Date 03/18/2021	Payment Date 03/23/2021	Payment Amount 341.38	Discount Amount 0.00	Payable Amount 341.38	Total Vendor Amount 341.38
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Payment Register

APPKT01952 - 20210323SW

Vendor Number	Vendor Name					Total Vendor Amount
0002647	CINTAS RUGS					404.42
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	404.42			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
4077929619	YEARLY RUG SERVICE	03/18/2021	03/18/2021	0.00	62.22	
FEB FY 21	COVERALL ,CLEANING RAGS, INDUSTRIAL RUGS	03/16/2021	03/16/2021	0.00	342.20	
Vendor Number	Vendor Name					Total Vendor Amount
0000572	COMCAST					23.79
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	23.79			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
41 016 0053157 MAR FY21	TELEVISION POLICE DEPT	03/18/2021	03/18/2021	0.00	23.79	
Vendor Number	Vendor Name					Total Vendor Amount
0000581	COMPTROLLER OF MARYLAND					625.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	625.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
FEBRUARY FY 21	ENVIRONMENTAL TRUST FUND REPORT	03/16/2021	03/16/2021	0.00	625.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000584	COMPTROLLER OF MARYLAND					2,364.30
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	2,364.30			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
FEBRUARY FY 21	ELECTRIC UNIVERSAL SERVICE PROGRAM FUND	03/16/2021	03/16/2021	0.00	2,364.30	
Vendor Number	Vendor Name					Total Vendor Amount
0000792	EAST TO WEST EMBROIDERY & DESIGN					83.95
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	83.95			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
58285	FR SHIRTS ALAN PARKINSON & TOB EMBLEM	03/18/2021	03/18/2021	0.00	83.95	
Vendor Number	Vendor Name					Total Vendor Amount
0000899	FIRE PROTECTIVE SERVICE					35.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	35.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
97858	ANNUAL FIRE EXTINGUISHER INSPECTION	03/18/2021	03/18/2021	0.00	35.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000907	FLAG PUBLICATIONS INC					55.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	55.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
334628	FLAG PUBLICATIONS TAX RATE AD	03/18/2021	03/18/2021	0.00	55.00	
Vendor Number	Vendor Name					Total Vendor Amount
0000968	GOODY HILL GROUND WORK INC					18,071.16
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	18,071.16			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
10054	INSTALL 6" WATER MAIN M ST & STEVENSON	03/18/2021	03/18/2021	0.00	18,071.16	

Payment Register

APPKT01952 - 20210323SW

Vendor Number	Vendor Name					Total Vendor Amount
0001035	HOLBROOK ENVIRONMENTAL INC					600.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	600.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
215650	POWER PLANT ANNUAL FUEL LINE PRECISION TEST	03/16/2021	03/16/2021	0.00	600.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001080	IRIE RADIO INC					450.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	450.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
643-00003-0012 FEB FY 21	ADVERTISING	03/18/2021	03/18/2021	0.00	450.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001286	LEGAL SHIELD					57.80
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	57.80			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
0139007 MAR FY 21	LEGAL SHIELD	03/19/2021	03/19/2021	0.00	57.80	
Vendor Number	Vendor Name					Total Vendor Amount
0001397	MARYLAND INDUSTRIAL TRUCKS, INC.					784.49
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	784.49			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
P01010	REPAIRS TO STREET CLEANER	03/16/2021	03/16/2021	0.00	784.49	
Vendor Number	Vendor Name					Total Vendor Amount
0001448	MD PLANNING COMMISSION ASSOCIATION					150.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	150.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
MPCA 2021-1050	MEMBERSHIP DUES	03/19/2021	03/19/2021	0.00	150.00	
Vendor Number	Vendor Name					Total Vendor Amount
0001565	NATIONWIDE RETIREMENT SOLUTIONS					4,209.96
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	4,209.96			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
PPE 03/14/2021	NATIONWIDE 457 EMPLOYEE CONTRIBUTION	03/16/2021	03/16/2021	0.00	4,209.96	
Vendor Number	Vendor Name					Total Vendor Amount
0001997	STAPLES BUSINESS CREDIT					403.31
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	403.31			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
1633389545	OFFICE SUPPLIES	03/23/2021	03/23/2021	0.00	403.31	
Vendor Number	Vendor Name					Total Vendor Amount
0002022	STUART C IRBY CO					2,271.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		03/23/2021	2,271.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
S012255898.001	CROSS PINS HPS C2060266	03/18/2021	03/18/2021	0.00	730.00	
S012320437.001	REEL OF 1/0 ACSR OVERHEAD ALUM WIRE	03/19/2021	03/19/2021	0.00	1,541.00	

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Vendor Number	Vendor Name					Total Vendor Amount	
0002363	WORCESTER COUNTY LANDFILL					22,895.25	
Payment Type	Payment Number					Payment Date	Payment Amount
Check						03/23/2021	22,895.25
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount		
124 MAR FY 21	REFUSE, RECYCLE AND CAN PULLS	03/16/2021	03/16/2021	0.00	19,719.75		
309 FEB FY 21	SLUDGE	03/18/2021	03/18/2021	0.00	3,175.50		

Payment Summary

Bank Code	Type	Payable Count	Payment Count	Discount	Payment
BOC AP	Check	32	28	0.00	60,105.70
Packet Totals:		32	28	0.00	60,105.70



Town of Berlin, MD

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Check Register

Packet: APPKT01956 - 20210323SW

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: BOC AP-BOC AP Checks						
0000970	GOVERNMENT FINANCE OFFICERS A	03/23/2021	Regular	0.00	85.00	19782
0003109	JAMES BRADFORD FARM TRUST	03/23/2021	Regular	0.00	2,022.50	19783
0003110	JESSE JONES FARM TRUST	03/23/2021	Regular	0.00	2,022.50	19784

Bank Code BOC AP Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	3	3	0.00	4,130.00
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	3	3	0.00	4,130.00

Fund Summary

Fund	Name	Period	Amount
98	POOLED CASH	3/2021	4,130.00
			<u>4,130.00</u>



Town of Berlin, MD

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Payment Register

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01 - Vendor Set 01

Bank: BOC AP - BOC AP Checks

Vendor Number 0000970 Vendor Name GOVERNMENT FINANCE OFFICERS ASSOCIATION
Payment Type Payment Number
Check 19782
Payable Number 3000893 Description GFOA ONLINE CLASSES

Payable Date	Due Date	Payment Date	Payment Amount	Discount Amount	Payable Amount	Total Vendor Amount
03/23/2021	03/23/2021	03/23/2021	85.00	0.00	85.00	85.00

Vendor Number 0003109 Vendor Name JAMES BRADFORD FARM TRUST
Payment Type Payment Number
Check 19783
Payable Number MARCH FY 21 Description BOUNDS SPRAY SITE BOND

Payable Date	Due Date	Payment Date	Payment Amount	Discount Amount	Payable Amount	Total Vendor Amount
03/23/2021	03/23/2021	03/23/2021	2,022.50	0.00	2,022.50	2,022.50

Vendor Number 0003110 Vendor Name JESSE JONES FARM TRUST
Payment Type Payment Number
Check 19784
Payable Number MARCH FY 21 Description BOUNDS SPRAY SITE BOND

Payable Date	Due Date	Payment Date	Payment Amount	Discount Amount	Payable Amount	Total Vendor Amount
03/23/2021	03/23/2021	03/23/2021	2,022.50	0.00	2,022.50	2,022.50

Payment Summary

Bank Code	Type	Payable Count	Payment Count	Discount	Payment
BOC AP	Check	3	3	0.00	4,130.00
Packet Totals:		3	3	0.00	4,130.00



Town of Berlin, MD

Check Register

Packet: APPKT01962 - 20210329SW

3/29/21
MMB 3/29/21

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: BOC AP-BOC AP Checks						
0002636	BRATTEN GARY	03/29/2021	Regular	0.00	157.60	19787
0000455	CARD'S TECHNOLOGY	03/29/2021	Regular	0.00	3,867.47	19788
0000511	CHOPTANK ELECTRIC COOPERATIVE	03/29/2021	Regular	0.00	5,523.17	19789
0002647	CINTAS RUGS	03/29/2021	Regular	0.00	31.68	19790
0000572	COMCAST	03/29/2021	Regular	0.00	154.60	19791
0000571	COMCAST BUSINESS	03/29/2021	Regular	0.00	1,003.25	19792
0000678	DAVIS, BOWEN & FRIEDEL	03/29/2021	Regular	0.00	3,382.50	19793
0001068	INTERCOASTAL TRADING INC.	03/29/2021	Regular	0.00	2,375.10	19794
0000223	JUDY ASHTON	03/29/2021	Regular	0.00	800.00	19795
0001261	L/B WATER SERVICE, INC	03/29/2021	Regular	0.00	9,573.45	19796
0001985	SFS TOOLS & SAFETY	03/29/2021	Regular	0.00	262.47	19797
0002928	UNIFIRST CORPORATION	03/29/2021	Regular	0.00	108.43	19798
0003207	UNITED ENERGY TRADING LLC	03/29/2021	Regular	0.00	882.81	19799
0002246	VERIZON-000014448231	03/29/2021	Regular	0.00	777.47	19800
0002247	VERIZON-000718605643	03/29/2021	Regular	0.00	57.32	19801
0002857	VERIZON-850462866001-13	03/29/2021	Regular	0.00	45.04	19802
0003055	WASHINGTON NATIONAL INSURANCE	03/29/2021	Regular	0.00	317.94	19803

Bank Code BOC AP Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	28	17	0.00	29,320.30
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	28	17	0.00	29,320.30

Fund Summary

Fund	Name	Period	Amount
98	POOLED CASH	3/2021	29,320.30
			<u>29,320.30</u>



Town of Berlin, MD

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Payment Register

APPKT01962 - 20210329SW

01 - Vendor Set 01

Bank: BOC AP - BOC AP Checks

Vendor Number	Vendor Name	Total Vendor Amount			
0002636	BRATTEN GARY	157.60			
Payment Type	Payment Number	Payment Date	Payment Amount		
Check		03/29/2021	157.60		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
03292021	REIMBURSEMENT - COVID TEST	03/29/2021	03/29/2021	0.00	157.60

Vendor Number	Vendor Name	Total Vendor Amount			
0000455	CARD'S TECHNOLOGY	3,867.47			
Payment Type	Payment Number	Payment Date	Payment Amount		
Check		03/29/2021	3,867.47		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
46575	FY20 CARDS MANAGED NETWORK	03/24/2021	03/24/2021	0.00	3,867.47

Vendor Number	Vendor Name	Total Vendor Amount			
0000511	CHOPTANK ELECTRIC COOPERATIVE, INC.	5,523.17			
Payment Type	Payment Number	Payment Date	Payment Amount		
Check		03/29/2021	5,523.17		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
414700 MAR FY 21	ELECTRIC UTILITY FOR SPRAY SITES	03/25/2021	03/25/2021	0.00	3,361.52
9913024900 MAR FY 21	ELECTRIC UTILITY FOR SPRAY SITES	03/25/2021	03/25/2021	0.00	2,161.65

Vendor Number	Vendor Name	Total Vendor Amount			
0002647	CINTAS RUGS	31.68			
Payment Type	Payment Number	Payment Date	Payment Amount		
Check		03/29/2021	31.68		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
4079350264	YEARLY RUG SERVICE	03/26/2021	03/26/2021	0.00	31.68

Vendor Number	Vendor Name	Total Vendor Amount			
0000572	COMCAST	154.60			
Payment Type	Payment Number	Payment Date	Payment Amount		
Check		03/29/2021	154.60		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
41 016 0041947 MAR FY 21	COMCAST INTERNET AND DIGITAL SVC	03/26/2021	03/26/2021	0.00	154.60

Vendor Number	Vendor Name	Total Vendor Amount			
0000571	COMCAST BUSINESS	1,003.25			
Payment Type	Payment Number	Payment Date	Payment Amount		
Check		03/29/2021	1,003.25		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
119036585	COMCAST BUSINESS	03/25/2021	03/25/2021	0.00	1,003.25

Vendor Number	Vendor Name	Total Vendor Amount			
0000678	DAVIS, BOWEN & FRIEDEL	3,382.50			
Payment Type	Payment Number	Payment Date	Payment Amount		
Check		03/29/2021	3,382.50		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
154245	PROJ 0050A002.001 GEN ON CALL ENG SVCS	03/26/2021	03/26/2021	0.00	150.00
154247	PROJ 0050A002.009 ON CALL SVCS - PURNELL CROSSING	03/26/2021	03/26/2021	0.00	997.50
154248	PROJ 0050A002.019 OCEAN'S EAST, SEAHAWK ON CALL	03/26/2021	03/26/2021	0.00	225.00
154253	PROJ 0050A002.033 BERLIN SONRISE CHURCH PROPERTY	03/26/2021	03/26/2021	0.00	150.00
154254	PROJ 0050A002.059 WILLOWS AT BERLIN	03/26/2021	03/26/2021	0.00	195.00
154255	PROJ 0050A002.060 RDWY PAVEMENT OVERLAY PROJS	03/26/2021	03/26/2021	0.00	180.00

Payment Register

APPKT01962 - 20210329SW

<u>154256</u>	PROJ 0050A002.063 BERLIN WWTP UPGRD & SEWER	03/26/2021	03/26/2021	0.00	720.00
<u>154258</u>	PROJ 0050A002.066 ATHENA PLAZA	03/26/2021	03/26/2021	0.00	75.00
<u>154259</u>	PROJ FRANKLIN KNOLL ON CALL ENG SVCS	03/26/2021	03/26/2021	0.00	690.00
					Total Vendor Amount
					2,375.10
Vendor Number	Vendor Name				
<u>0001068</u>	INTERCOASTAL TRADING INC.				
Payment Type	Payment Number				
Check					
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>210534, 210707</u>	BLEACH	03/26/2021	03/26/2021	0.00	2,375.10
					Total Vendor Amount
					800.00
Vendor Number	Vendor Name				
<u>0000223</u>	JUDY ASHTON				
Payment Type	Payment Number				
Check					
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>632556</u>	GARDEN MAINTENANCE	03/24/2021	03/24/2021	0.00	800.00
					Total Vendor Amount
					9,573.45
Vendor Number	Vendor Name				
<u>0001261</u>	L/B WATER SERVICE, INC				
Payment Type	Payment Number				
Check					
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>3472100</u>	WATER METERS	03/24/2021	03/24/2021	0.00	299.97
<u>3475509</u>	WATER METERS	03/26/2021	03/26/2021	0.00	5,440.00
<u>3475510</u>	113 FLOWER METER	03/26/2021	03/26/2021	0.00	3,833.48
					Total Vendor Amount
					262.47
Vendor Number	Vendor Name				
<u>0001985</u>	SFS TOOLS & SAFETY				
Payment Type	Payment Number				
Check					
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>382772</u>	WIRE PULLING GRIPS & SWIVEL	03/25/2021	03/25/2021	0.00	262.47
					Total Vendor Amount
					108.43
Vendor Number	Vendor Name				
<u>0002928</u>	UNIFIRST CORPORATION				
Payment Type	Payment Number				
Check					
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>092 1829532</u>	UNIFORM CLEANING SERVICE - PUBLIC WORKS	03/25/2021	03/25/2021	0.00	108.43
					Total Vendor Amount
					882.81
Vendor Number	Vendor Name				
<u>0003207</u>	UNITED ENERGY TRADING LLC				
Payment Type	Payment Number				
Check					
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>199232</u>	POWER PLANT NATURAL GAS COMMODITY & CAPACITY	03/25/2021	03/25/2021	0.00	882.81
					Total Vendor Amount
					777.47
Vendor Number	Vendor Name				
<u>0002246</u>	VERIZON-000014448231				
Payment Type	Payment Number				
Check					
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>14448231 MAR FY 21</u>	VERIZON TELEPHONE	03/25/2021	03/25/2021	0.00	777.47
					Total Vendor Amount
					57.32
Vendor Number	Vendor Name				
<u>0002247</u>	VERIZON-000718605643				
Payment Type	Payment Number				
Check					
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>000718605643 MAR FY 21</u>	VERIZON TELEPHONE 5 MILE BRANCH RD	03/25/2021	03/25/2021	0.00	57.32

Payment Register

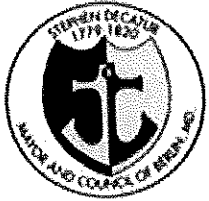
APPKT01962 - 20210329SW

Vendor Number	Vendor Name					Total Vendor Amount
<u>0002857</u>	VERIZON-850462866001-13					45.04
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/29/2021	45.04	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>410-641-0158 MAR FY 21</u>	VERIZON TELEPHONE	03/25/2021	03/25/2021	0.00	45.04	

Vendor Number	Vendor Name					Total Vendor Amount
<u>0003055</u>	WASHINGTON NATIONAL INSURANCE COMPANY					317.94
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				03/29/2021	317.94	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>P2104541</u>	WASHINGTON NATIONAL EMPLOYEE CONTRIBUTION	03/24/2021	03/24/2021	0.00	317.94	

Payment Summary

Bank Code	Type	Payable Count	Payment Count	Discount	Payment
BOC AP	Check	28	17	0.00	29,320.30
Packet Totals:		28	17	0.00	29,320.30



Town of Berlin, MD

Payment Register

APPKT01964 - 20210329SW

01 - Vendor Set 01

Bank: BOC AP - BOC AP Checks

Vendor Number Vendor Name
0002366 WORCESTER COUNTY

Total Vendor Amount
59.36

Payment Type Payment Number
Check

Payable Number Description
03292021 COUNTY FLAGS

Payment Date Payment Amount
03/29/2021 59.36

Payable Date	Due Date	Discount Amount	Payable Amount
03/29/2021	03/29/2021	0.00	59.36

Payment Register

APPKT01964 - 20210329SW

Payment Summary

Bank Code	Type	Payable Count	Payment Count	Discount	Payment
BOC AP	Check	1	1	0.00	59.36
Packet Totals:		1	1	0.00	59.36



Town of Berlin, MD

Check Register

Packet: APPKT01971 - 20210401SW

4/1/21 m74 4/1/21

By Check Number

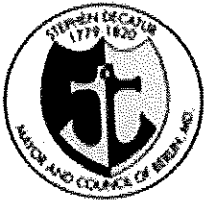
Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: BOC AP-BOC AP Checks						
0000015	ABC PRINTERS INC	04/01/2021	Regular	0.00	200.00	19805
0000070	ADKINS COMPANY	04/01/2021	Regular	0.00	6.80	19806
0002406	AE MOORE JANITORIAL INC	04/01/2021	Regular	0.00	119.15	19807
0000088	AFFORDABLE BUSINESS SYSTEMS	04/01/2021	Regular	0.00	161.05	19808
0000090	AFLAC	04/01/2021	Regular	0.00	1,323.72	19809
0000102	ALBAN ENGINE POWER SYSTEMS	04/01/2021	Regular	0.00	1,538.72	19810 --
0002755	CHESAPEAKE TELEPHONE SYSTEMS	04/01/2021	Regular	0.00	300.00	19811
0000555	COASTAL COMFORT	04/01/2021	Regular	0.00	574.82	19812 --
0000572	COMCAST	04/01/2021	Regular	0.00	134.65	19813
0000572	COMCAST	04/01/2021	Regular	0.00	128.39	19814
0000572	COMCAST	04/01/2021	Regular	0.00	154.60	19815
0000572	COMCAST	04/01/2021	Regular	0.00	336.02	19816
0000795	EASTERN SHORE FOREST PRODUCTS	04/01/2021	Regular	0.00	2,125.00	19817
0000897	FERGUSON ENTERPRISES	04/01/2021	Regular	0.00	100.74	19818
0000977	GREAT AMERICA FINANCIAL	04/01/2021	Regular	0.00	308.64	19819
0001032	HILL'S ELECTRIC MOTOR SERVICE IN	04/01/2021	Regular	0.00	1,260.00	19820
0001039	HOLT PAPER CO.	04/01/2021	Regular	0.00	300.74	19821
0001495	MIDDLE DEPARTMENT INSPECTION	04/01/2021	Regular	0.00	1,988.00	19822
0001676	PENINSULA AUTO & TRUCK PARTS, I	04/01/2021	Regular	0.00	227.60	19823 --
0001682	PEP-UP, INC.	04/01/2021	Regular	0.00	615.67	19824
0003019	PLAYGROUND GUARDIAN LLC	04/01/2021	Regular	0.00	1,075.00	19825
0003171	RICKY JARMON	04/01/2021	Regular	0.00	933.38	19826
0001814	RJ LOCK & SECURITY	04/01/2021	Regular	0.00	12.00	19827 --
0002928	UNIFIRST CORPORATION	04/01/2021	Regular	0.00	139.42	19828
0002220	USA BLUEBOOK	04/01/2021	Regular	0.00	618.69	19829
0002248	VERIZON BUSINESS	04/01/2021	Regular	0.00	103.87	19830
0002252	VERIZON WIRELESS-720117503-000	04/01/2021	Regular	0.00	480.12	19831
0002389	XYLEM DEWATERING SOLUTIONS IN	04/01/2021	Regular	0.00	699.84	19832

Bank Code BOC AP Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	31	28	0.00	15,966.63
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	31	28	0.00	15,966.63

Fund Summary

Fund	Name	Period	Amount
98	POOLED CASH	4/2021	15,966.63
			<u>15,966.63</u>



Town of Berlin, MD

Payment Register

APPKT01971 - 20210401SW

01 - Vendor Set 01

Bank: BOC AP - BOC AP Checks

Vendor Number <u>0000015</u>	Vendor Name ABC PRINTERS INC	Payment Type Check	Payment Number <u>59418</u>	Description FARMERS MARKET FLYERS FOR SCHOOL DISTRIBUTION	Payable Date 03/29/2021	Due Date 03/29/2021	Discount Amount 0.00	Payable Amount 200.00	Total Vendor Amount 200.00
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Vendor Number <u>0000070</u>	Vendor Name ADKINS COMPANY	Payment Type Check	Payment Number <u>03658941,03658297</u>	Description PARTS TOOLS AND OTHER SUPPLIES	Payable Date 03/31/2021	Due Date 03/31/2021	Discount Amount 0.00	Payable Amount 6.80	Total Vendor Amount 6.80
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Vendor Number <u>0002406</u>	Vendor Name AE MOORE JANITORIAL INC	Payment Type Check	Payment Number <u>393918</u> <u>394473</u>	Description PAPER PRODUCTS RESTROOMS PAPER PRODUCTS FOR RESTROOMS	Payable Date 03/29/2021 03/30/2021	Due Date 03/29/2021 03/30/2021	Discount Amount 0.00 0.00	Payable Amount 53.37 65.78	Total Vendor Amount 119.15
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Vendor Number <u>0000088</u>	Vendor Name AFFORDABLE BUSINESS SYSTEMS	Payment Type Check	Payment Number <u>IN161873</u> <u>IN162251</u>	Description ABS MICR PRINTER PHOTOCONDUCTOR UNIT COPIER LEASE	Payable Date 03/31/2021 03/31/2021	Due Date 03/31/2021 03/31/2021	Discount Amount 0.00 0.00	Payable Amount 90.95 70.10	Total Vendor Amount 161.05
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Vendor Number <u>0000090</u>	Vendor Name AFLAC	Payment Type Check	Payment Number <u>946020</u>	Description AFLAC SUPPLEMENTAL INSURANCE	Payable Date 03/31/2021	Due Date 03/31/2021	Discount Amount 0.00	Payable Amount 1,323.72	Total Vendor Amount 1,323.72
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Vendor Number <u>0000102</u>	Vendor Name ALBAN ENGINE POWER SYSTEMS	Payment Type Check	Payment Number <u>SERV-1343678</u>	Description BRANCH ST GENERATOR ALARM	Payable Date 03/31/2021	Due Date 03/31/2021	Discount Amount 0.00	Payable Amount 1,538.72	Total Vendor Amount 1,538.72
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Vendor Number <u>0002755</u>	Vendor Name CHESAPEAKE TELEPHONE SYSTEMS INC	Payment Type Check	Payment Number <u>INV193657</u>	Description TELEPHONE SERVICE	Payable Date 03/31/2021	Due Date 03/31/2021	Discount Amount 0.00	Payable Amount 300.00	Total Vendor Amount 300.00
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Payment Register

Vendor Number	Vendor Name					Total Vendor Amount
0000555	COASTAL COMFORT					574.82
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				04/01/2021	574.82	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
29257	MITSUBISHI MINI SPLIT	03/30/2021	03/30/2021	0.00	574.82	
						Total Vendor Amount
						753.66
Vendor Number	Vendor Name					
0000572	COMCAST					
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				04/01/2021	154.60	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
41 016 0042184 APR FY 21	COMCAST INTERNET AND DIGITAL SVC	03/30/2021	03/30/2021	0.00	154.60	
				04/01/2021	128.39	
Check				04/01/2021	128.39	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
41 016 0043323 APR FY 21	COMCAST INTERNET AND DIGITAL SVC	03/30/2021	03/30/2021	0.00	128.39	
				04/01/2021	134.65	
Check				04/01/2021	134.65	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
41 016 0043547 APR FY 21	COMCAST INTERNET AND DIGITAL SVC	03/30/2021	03/30/2021	0.00	134.65	
				04/01/2021	336.02	
Check				04/01/2021	336.02	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
41 016 0052845 APR FY 21	COMCAST INTERNET AND DIGITAL SVC	03/29/2021	03/29/2021	0.00	336.02	
						Total Vendor Amount
						2,125.00
Vendor Number	Vendor Name					
0000795	EASTERN SHORE FOREST PRODUCTS INC					
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				04/01/2021	2,125.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
241027	ENGINEERED WOOD FIBER FOR PLAYGROUNDS	03/31/2021	03/31/2021	0.00	2,125.00	
						Total Vendor Amount
						100.74
Vendor Number	Vendor Name					
0000897	FERGUSON ENTERPRISES					
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				04/01/2021	100.74	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
0538891	SPIRAL CLAMPS 4" SUCTION HOSES	03/30/2021	03/30/2021	0.00	100.74	
						Total Vendor Amount
						308.64
Vendor Number	Vendor Name					
0000977	GREAT AMERICA FINANCIAL					
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				04/01/2021	308.64	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
28998684	LEASED COPIER	03/31/2021	03/31/2021	0.00	308.64	
						Total Vendor Amount
						1,260.00
Vendor Number	Vendor Name					
0001032	HILL'S ELECTRIC MOTOR SERVICE INC.					
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				04/01/2021	1,260.00	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
0120811	CANNERY LS CONTROL PANEL	03/31/2021	03/31/2021	0.00	1,260.00	
						Total Vendor Amount
						300.74
Vendor Number	Vendor Name					
0001039	HOLT PAPER CO.					
Payment Type	Payment Number			Payment Date	Payment Amount	
Check				04/01/2021	300.74	
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
341511	PAPER TOWELS	03/31/2021	03/31/2021	0.00	300.74	

Payment Register

Vendor Number	Vendor Name					Total Vendor Amount
<u>0001495</u>	MIDDLE DEPARTMENT INSPECTION AGENCY					1,988.00
Payment Type	Payment Number					Payment Date Payment Amount
Check						04/01/2021 1,988.00
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>140467,468,469,470,471,47</u>	INSPECTION SERVICES	03/29/2021	03/29/2021	0.00	1,988.00	
						Total Vendor Amount
						227.60
Vendor Number	Vendor Name					Total Vendor Amount
<u>0001676</u>	PENINSULA AUTO & TRUCK PARTS, INC					227.60
Payment Type	Payment Number					Payment Date Payment Amount
Check						04/01/2021 227.60
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>187136, 187627</u>	TOOLS, PARTS AND OTHER SUPPLIES	03/30/2021	03/30/2021	0.00	227.60	
						Total Vendor Amount
						615.67
Vendor Number	Vendor Name					Total Vendor Amount
<u>0001682</u>	PEP-UP, INC.					615.67
Payment Type	Payment Number					Payment Date Payment Amount
Check						04/01/2021 615.67
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>2305656</u>	OFF ROAD FUEL	03/31/2021	03/31/2021	0.00	615.67	
						Total Vendor Amount
						1,075.00
Vendor Number	Vendor Name					Total Vendor Amount
<u>0003019</u>	PLAYGROUND GUARDIAN LLC					1,075.00
Payment Type	Payment Number					Payment Date Payment Amount
Check						04/01/2021 1,075.00
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>12396</u>	ANNUAL PLAYGROUND INSPECTIONS	03/31/2021	03/31/2021	0.00	1,075.00	
						Total Vendor Amount
						933.38
Vendor Number	Vendor Name					Total Vendor Amount
<u>0003171</u>	RICKY JARMON					933.38
Payment Type	Payment Number					Payment Date Payment Amount
Check						04/01/2021 933.38
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>MARCH CLEANING FY 21</u>	CLEANING SERVICE	03/30/2021	03/30/2021	0.00	933.38	
						Total Vendor Amount
						12.00
Vendor Number	Vendor Name					Total Vendor Amount
<u>0001814</u>	RJ LOCK & SECURITY					12.00
Payment Type	Payment Number					Payment Date Payment Amount
Check						04/01/2021 12.00
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>76774</u>	KEYS FOR HENRY PARK & DOWNTOWN BATHROOMS	03/30/2021	03/30/2021	0.00	12.00	
						Total Vendor Amount
						139.42
Vendor Number	Vendor Name					Total Vendor Amount
<u>0002928</u>	UNIFIRST CORPORATION					139.42
Payment Type	Payment Number					Payment Date Payment Amount
Check						04/01/2021 139.42
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>092 1830460</u>	UNIFORM CLEANING SERVICE - PUBLIC WORKS	03/30/2021	03/30/2021	0.00	30.99	
<u>092 1830623</u>	UNIFORM CLEANING SERVICE - PUBLIC WORKS	03/30/2021	03/30/2021	0.00	108.43	
						Total Vendor Amount
						618.69
Vendor Number	Vendor Name					Total Vendor Amount
<u>0002220</u>	USA BLUEBOOK					618.69
Payment Type	Payment Number					Payment Date Payment Amount
Check						04/01/2021 618.69
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
<u>536530</u>	DRUM PUMP CL2	03/31/2021	03/31/2021	0.00	618.69	

Payment Register

Vendor Number	Vendor Name					Total Vendor Amount
0002248	VERIZON BUSINESS					103.87
Payment Type	Payment Number				Payment Date	Payment Amount
Check					04/01/2021	103.87
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
09725120	VERIZON BUSINESS TELEPHONE	03/30/2021	03/30/2021	0.00	103.87	
						Total Vendor Amount
						480.12
Vendor Number	Vendor Name				Payment Date	Payment Amount
0002252	VERIZON WIRELESS-720117503-00001				04/01/2021	480.12
Payment Type	Payment Number				Discount Amount	Payable Amount
Check		Payable Date	Due Date		0.00	480.12
Payable Number	Description					
9875403541	MDT CARD FEE	03/31/2021	03/31/2021			
						Total Vendor Amount
						699.84
Vendor Number	Vendor Name				Payment Date	Payment Amount
0002389	XYLEM DEWATERING SOLUTIONS INC				04/01/2021	699.84
Payment Type	Payment Number				Discount Amount	Payable Amount
Check		Payable Date	Due Date		0.00	699.84
Payable Number	Description					
401077166	SUCTION HOSE FOR GODWIN PUMP	03/30/2021	03/30/2021			

Bank Code	Type	Payable Count	Payment Count	Discount	Payment
BOC AP	Check	31	28	0.00	15,966.63
Packet Totals:		31	28	0.00	15,966.63



Town of Berlin, MD

Check Register

Packet: APPKT01973 - 20210401SW

By Check Number

Vendor Number Vendor Name Payment Date Payment Type Discount Amount Payment Amount Number
Bank Code: BOC AP-BOC AP Checks
0001040 HOME DEPOT CREDIT CARD SERVICE 04/01/2021 Regular 0.00 409.86 19833

Bank Code BOC AP Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	2	1	0.00	409.86
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	2	1	0.00	409.86

Fund Summary

Fund	Name	Period	Amount
98	POOLED CASH	4/2021	409.86
			<u>409.86</u>



Town of Berlin, MD

Payment Register

APPKT01973 - 20210401SW

01 - Vendor Set 01

Bank: BOC AP - BOC AP Checks

Vendor Number Vendor Name
0001040 HOME DEPOT CREDIT CARD SERVICES

Total Vendor Amount
409.86

Payment Type Payment Number
Check

Payment Date Payment Amount
04/01/2021 409.86

Payable Number	Description
14169,23677,24773,20318,3	PARTS TOOLS AND OTHER SUPPLIES
9020721,0020430,3014339,	MONTHLY SUPPLIES

Payable Date	Due Date	Discount Amount	Payable Amount
04/01/2021	04/01/2021	0.00	198.58
03/31/2021	03/31/2021	0.00	211.28

Payment Summary

Bank Code	Type	Payable Count	Payment Count	Discount	Payment
BOC AP	Check	2	1	0.00	409.86
Packet Totals:		2	1	0.00	409.86