TOWN CLERK'S MONTHLY REPORT

TOWN OF VIENNA, NEW YORK — AUGUST, 2026

TO THE SUPERVISOR: — PAGE 1

Pursuant to Section 27, Subd 1 of the Town Law, I hereby make the following statement of all fees and moneys received by me in connection with my office during the month stated above, excepting only such fees and moneys the application and payment of which are otherwise provided for by Law:

A1255					
	4	MARRIAGE LICENSES	NO. 26006 TO 26009	70.00	
	1	MARRIAGE OFFICIANTS	NO. 000002 TO 000002	25.00	
	21	COPIES		5.25	
	2	CERTIFIED COPIES		20.00	
	1	GENEALOGY		22.00	
		TOTAL TOWN CLERK FEES			**142.25**
A1603					
	11	CERTIFIED BIRTH & DEATH		110.00	
		TOTAL A1603			**110.00**
A2544					
	21	DOG LICENSES		179.50	
		TOTAL A2544			**179.50**
A2770					
	1	INSTALLER LICENSE-SEWER		20.00	
	4	CULVERT PIPE		3,177.67	
		TOTAL A2770			**3,197.67**
B2555					
	7	BUILDING PERMITS		675.00	
	1	SEPTIC PERMIT		50.00	
	3	RENEWAL PERMITS		75.00	
		TOTAL B2555			**800.00**
B2590					
	392	CAMPGROUND LOT LICENSE		1,960.00	
		TOTAL B2590			**1,960.00**

TOWN CLERK'S MONTHLY REPORT

AUGUST, 2026

Interest 05¢

DISBURSEMENTS

PAID TO SUPERVISOR FOR GENERAL FUND	3,629.42
PAID TO SUPERVISOR FOR PART TOWN FUND	2,760.00
PAID TO NYS ANIMAL POPULATION CONTROL PROGRAM	25.00
PAID TO NYS HEALTH DEPT FOR MARRIAGE LICENSES	90.00
TOTAL DISBURSEMENTS	**6,504.42**

Supervisor 3629.42
2760.00
05
6389.42

SEPTEMBER 1, 2026

Jason Spellicy, SUPERVISOR

STATE OF NEW YORK, COUNTY OF ONEIDA, TOWN OF VIENNA

I, Carol L Huber , being duly sworn, says that I am the Clerk of the TOWN OF VIENNA that the foregoing is a full and true statement of all Fees and moneys received by me during the month above stated, excepting only such Fees the application and payment of which are otherwise provided for by law.

Carol L Huber

Town Clerk

NEW YORK STATE DEPARTMENT OF HEALTH
Empire State Plaza - Corning Tower
Bureau of Accounts Management - Revenue Unit
Room 2748 Albany, New York 12237-0016

Monthly Report of Marriage Licenses Issued

SEE INSTRUCTIONS AT BOTTOM OF PAGE

Report for the month of AUGUST 2026

City or Town of VIENNA

County of ONEIDA

Do not write in this area DEP. NO. _____ $ _____ CHECK # _____

Licenses numbered from 006 to 009 inclusive.

*If only ONE license was issued, place license number in both spaces.

*If NO licenses were issued, write "NONE" in both spaces.

# of Military Exemptions: _____

# of Skipped Licenses: _____

# of Voided Licenses: _____

Pursuant to the provisions of Section 15 of the Domestic Relations Law, I herewith transmit to the State Commissioner of Health a fee of twenty-two dollars and fifty cents for each marriage license issued by me during the month covered by this report.

Make remittance by CHECK or MONEY ORDER payable to the State Department of Health

DO NOT SEND CASH

Amount of remittance with this report

$ 90.00

Name of City or Town Clerk (Please type or print)

Carol L Huber

Signature of City or Town Clerk

Carol L Huber

Date

09/01/2026

Mailing Address

PO Box 250

NORTH BAY, NY Zip 13123

E-mail Address

townclerk@townofviennany.org

Phone

(315) 245-2191

INSTRUCTIONS

This Monthly Report of Marriage Licenses issued must be submitted to the New York State Department of Health at the above address for each month whether or not any licenses were issued. If no licenses were issued, indicate NONE in the spaces provided for license numbers.

The issuance of a marriage license makes you responsible for the remittance fee of $22.50 whether or not the marriage ceremony is ever performed. An exception to the mandatory remittance is when either of the parties applying for such license is a member of the armed forces of the U.S. on active duty.

Marriage licenses must be numbered and reported consecutively throughout the year starting with number 1 at the beginning of EACH calendar year.

Pursuant to the authority of Section 19 of the New York State Domestic Relations Law, the Commissioner of Health has directed that this report, together with any fee, be transmitted to the State Department of Health by the 15th of the month following the month which the report covers.

New York State Domestic Relations Law Section 22 provides that any Town or City Clerk who violates or fails to comply with any of the above mentioned reporting requirements, shall be deemed guilty of a misdemeanor and shall pay a fine not exceeding the sum of one hundred dollars on a conviction thereof.

Month Reported: AUGUST, 2026
County: ONEIDA Code: 30
TOWN OF VIENNA Code: 23
Prepared by: Carol L Huber, TOWN CLERK
Date Prepared: SEPTEMBER 1, 2026

Dog License Monthly Report

Original ID Dog Licenses sold		**6**
Original Purebred License sold		**0**
Dog License Renewals sold		**15**
Purebred License Renewals sold		**0**
	Total sold	**21**

LICENSE TYPES AND FEES COLLECTED		Quantity		Local Fees		Surcharge Fees
Spayed and Neutered Dogs		19	$7.50 ea	142.50	$1.00 ea	19.00
Unspayed and Unneutered Dogs		2	$18.50 ea	37.00	$3.00 ea	6.00
Exempt - Seeing Eye, War, Police		0		No Fee		0.00
Purebred License (1-10 dogs)	Spayed & Neutered	0	$35.00 ea	0.00		0.00
Purebred License (1-10 dogs)	Unspayed & Unneutered					0.00
Purebred License (11-25 dogs)	Spayed & Neutered	0	$75.00 ea	0.00		0.00
Purebred License (11-25 dogs)	Unspayed & Unneutered					0.00
Purebred License (26+ dogs)	Spayed & Neutered	0		0.00		0.00
Purebred License (26+ dogs)	Unspayed & Unneutered					0.00
Total licenses sold		21		179.50		25.00

Total Donation 0.00

REPLACEMENT AND PUREBRED TAG ORDERS

Replacement Tags	0	0.00
Purebred Tags	0	0.00
Total tags sold	0	0.00

DISBURSEMENTS

Paid to Supervisor	$179.50
Paid to NYS Animal Population Control Program	$25.00

NYS Department of Agriculture and Markets
Spay and Neuter
PO Box 975
Albany, NY 12201-0975

Month of Submission: AUGUST, 2026

County: ONEIDA Town of Vienna

TCV Code: 3023 Oneida Vienna

Prepared by: Carol L Huber, Town Clerk

Date Prepared: SEPTEMBER 1, 2026

State of New York
Department of Agriculture and Markets
Spay and Neuter
PO Box 975, Albany, NY 12201-0975

ANIMAL POPULATION CONTROL PROGRAM SUBMISSION

Submit by the 5th of the month covering activities of the preceding month.

LICENSE TYPES AND FEES COLLECTED	**Unspayed/Unneutered - Four months of age or older**	
Spayed and Neutered Dogs	$1.00 ea =	$19.00
Unspayed and Unneutered Dogs	$3.00 ea =	$6.00
TOTAL AMOUNT REMITTED		$25.00
Check Number: 1460		