

**Return of Organization Exempt From Income Tax**

**2009**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

**A** For the 2009 calendar year, or tax year beginning 2009, and ending 20

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C** Name of organization West Monroe Volunteer Fire Dept. Inc.  
 Doing Business As \_\_\_\_\_  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
P O Box 29  
 City or town, state or country, and ZIP + 4  
West Monroe NY 13167

**D** Employer identification number  
16 1098043

**E** Telephone number  
(315) 676-4600

**F** Name and address of principal officer Richard Wicks  
54 County Route 11 West Monroe NY 13167

**G** Gross receipts \$248,832

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** Are all affiliates included?  Yes  No  
 If "No," attach a list (see instructions)  
**H(c)** Group exemption number ▶

**I** Tax-exempt status  501(c)(7) (insert no)  4947(a)(1) or  527

**J** Website: ▶ WestMonroeFire.org

**K** Form of organization  Corporation  Trust  Association  Other ▶

**L** Year of formation 1978

**M** State of legal domicile New York

**Part I Summary**

1 Briefly describe the organization's mission or most significant activities: <u>Provide Town of West Monroe Fire Protection, water rescue, EMS Protection</u>			
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	62
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	62
	5 Total number of employees (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	62
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	
Revenue	8 Contributions and grants (Part VIII, line 1h) <u>OCT 19 2010</u>	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	93,335	9,435
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	180,660	194,000
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,285	1,343
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,469	10,842
		295,444	215,620
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	130,883	258,722
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	130,883	258,722	
19 Revenue less expenses. Subtract line 18 from line 12	164,561	-43,102	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	2,069,916	2,096,766
	22 Net assets or fund balances. Subtract line 21 from line 20	304,524	249,737
		1,765,392	1,847,029

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**  
 Signature of officer: Richard A Wicks Date: 10/14/10  
 Type or print name and title: RICHARD A WICKS

**Paid Preparer's Use Only**  
 Preparer's signature: [Signature] Date: 10/19/2010  
 Check if self-employed  Preparer's identifying number (see instructions): P01068442  
 Firm's name (or yours if self-employed), address, and ZIP + 4: KENNETH J. PARROTTE 1820 CO. RT. 37  
 EIN: \_\_\_\_\_ Phone no: \_\_\_\_\_

May the IRS discuss this return with the Post Office Box above? (see instructions)  Yes  No

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**Part III Statement of Program Service Accomplishments**

1 Briefly describe the organization's mission:

Preservation of life and property from fire and injury from accident and illness. Provide fire prevention, fire inspection, fire safety education services to the community.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No  
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No  
If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code ) (Expenses \$ 258,722 including grants of \$ 0 ) (Revenue \$ 215,620 )

Provide the Town of West Monroe with fire protection, water rescue, EMS protection

4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services. (Describe in Schedule O.)  
(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses ▶ 258,722

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		X
	<ul style="list-style-type: none"> <li>• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.</li> <li>• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.</li> <li>• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII</li> <li>• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.</li> <li>• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.</li> <li>• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.</li> </ul>		X
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Yes	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
<b>25b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		X
<b>28a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>28b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>28c</b> An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.		X

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>4b</b>	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		
<b>5c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	X	
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the organization make any taxable distributions under section 4966?		
<b>9b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12.		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11a</b>	Gross income from members or shareholders		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body . . . . .		
1b	Enter the number of voting members that are independent . . . . .		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . .		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . . .		X
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .		X
6	Does the organization have members or stockholders? . . . . .		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body? . . . . .	X	
b	Each committee with authority to act on behalf of the governing body? . . . . .	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates? . . . . .		X
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? . . . . .		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . .		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .		X
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .		X
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .		X
13	Does the organization have a written whistleblower policy? . . . . .		X
14	Does the organization have a written document retention and destruction policy? . . . . .		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official . . . . .		NA
b	Other officers or key employees of the organization . . . . .		NA
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .		

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **▶ New York**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
  - Own website
  - Another's website
  - Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. **▶** . . . . .





**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, gifts, grants and other similar amounts</b>	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions).	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	9,435				
	g	Noncash contributions included in lines 1a-1f \$						
	h	<b>Total.</b> Add lines 1a-1f		9,435				
<b>Program Service Revenue</b>	2a	Town of West Monroe	Business Code	194,000				
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	<b>Total.</b> Add lines 2a-2f		194,000				
<b>Other Revenue</b>	3	Investment income (including dividends, interest, and other similar amounts)		1,343				
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6a	Gross Rents	(i) Real	(ii) Personal				
			b	Less: rental expenses				
			c	Rental income or (loss)				
			d	Net rental income or (loss)				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			b	Less: cost or other basis and sales expenses				
			c	Gain or (loss)				
			d	Net gain or (loss)				
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a	44,054				
			b	Less: direct expenses	33,212			
			c	Net income or (loss) from fundraising events	10,842			
	9a	Gross income from gaming activities. See Part IV, line 19	a					
b			Less: direct expenses					
c			Net income or (loss) from gaming activities					
10a	Gross sales of inventory, less returns and allowances	a						
		b	Less: cost of goods sold					
		c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue			Business Code					
11a								
b								
c								
d	All other revenue							
e	<b>Total.</b> Add lines 11a-11d							
12	<b>Total revenue.</b> See instructions.			215,620				

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	1,590			
14 Information technology				
15 Royalties				
16 Occupancy	46,008			
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	27,026			
24 Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a Fire expense / supplies	184,098			
b				
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f				
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	258,722			

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1	Cash—non-interest-bearing . . . . .	87,965	1 44,815
	2	Savings and temporary cash investments . . . . .		2
	3	Pledges and grants receivable, net . . . . .		3
	4	Accounts receivable, net . . . . .		4
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		5
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .		6
	7	Notes and loans receivable, net . . . . .		7
	8	Inventories for sale or use . . . . .		8
	9	Prepaid expenses and deferred charges . . . . .		9
	10a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D . . . . .		
	10b	Less: accumulated depreciation . . . . .	566,000	10c 566,000
	11	Investments—publicly traded securities . . . . .		11
	12	Investments—other securities. See Part IV, line 11 . . . . .		12
	13	Investments—program-related. See Part IV, line 11 . . . . .		13
	14	Intangible assets . . . . .		14
	15	Other assets. See Part IV, line 11 <i>Fire Fighting Equipment</i> . . . . .	1,415,951	15 1,485,951
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	2,069,916	16 2,096,766	
<b>Liabilities</b>	17	Accounts payable and accrued expenses . . . . .		17
	18	Grants payable . . . . .		18
	19	Deferred revenue . . . . .		19
	20	Tax-exempt bond liabilities . . . . .		20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		21
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		22
	23	Secured mortgages and notes payable to unrelated third parties . . . . .	304,524	23 249,737
	24	Unsecured notes and loans payable to unrelated third parties . . . . .		24
	25	Other liabilities. Complete Part X of Schedule D . . . . .		25
	26	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .	304,524	26 249,737
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27	Unrestricted net assets . . . . .		27
	28	Temporarily restricted net assets . . . . .		28
	29	Permanently restricted net assets . . . . .		29
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30	Capital stock or trust principal, or current funds . . . . .		30
	31	Paid-in or capital surplus, or land, building, or equipment fund . . . . .		31
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .		32
	33	Total net assets or fund balances . . . . .		33
34	<b>Total liabilities and net assets/fund balances . . . . .</b>	1,765,392	34 1,847,209	

**Part XI Financial Statements and Reporting**

1 Accounting method used to prepare the Form 990  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:

Separate basis  Consolidated basis  Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
1		
2a		X
2b		X
2c		
3a		X
3b		



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**  
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	172,011	238,885	201,057	280,690	203,435	1,096,078
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	172,011	238,885	201,057	280,690	203,435	1,096,078
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6 Public support.</b> Subtract line 5 from line 4.						1,096,078

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,041	2,860	3,171	2,285	1,343	10,700
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	11,802	7,586	9,099	12,469	10,842	51,798
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc (see instructions)					12	1,158,576
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	.94	%
<b>15</b> Public support percentage from 2008 Schedule A, Part II, line 14	15	.94	%
<b>16a 33 1/3 % support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>			
<b>b 33 1/3 % support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
<b>17a 10%-facts-and-circumstances test—2009.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>			
<b>b 10%-facts-and-circumstances test—2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
(Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12)						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17	<b>18</b>	%

- 19a 33 1/3 % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ►
- b 33 1/3 % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ►
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12. Provide any other additional information. See instructions.

Fund raising activities held at the fire hall such as pancake breakfasts, banquets, hall rental



## Members

### Members of the West Monroe Volunteer Fire Department

#### Chief

Russell W Boughton

#### Assistant Chief

Kevin Davis  
Al Giamartino Jr

#### Captain

Jeff E DeMong  
Thomas Hemphill

#### Lieutenant

Nick Belair  
Mark Bender  
Dave Hanson  
Kevin James  
Jeff Sikora

#### Fire Fighter

Marjorie Auber  
Mike Altier  
Paul M Baxter  
Neil H Brownell  
Kelley J Davis  
John DeMong  
Hank Dynka  
Don Farewell  
Kyle W Fleischman  
Matt J Frawley  
Andrew w Freeman  
Steven c Gass Jr  
Ryan Gass  
John T Gates  
Chris Graber  
Mark L Graber  
Al Hains  
Danielle Hemphill  
Dennis Hyde  
Dakota Hyde  
James Jock  
Jay Jones  
Ron Kingsley  
Dominic Lembo  
Edward Lesnau  
Jeffrey H Mawson  
Adam Morey  
Doug Murray  
Kyle Thompson  
Diane Thompson  
Chad W Thompson  
Dermke Tucker  
Mike Walker  
Hollis Weed  
Richard Wicks  
Kyle Williams  
Roseanne Wood

#### Fire Police Captain

Kristina M Donegan

#### Fire Police

Bill Chapman  
Vaughn Fisher  
Jim Gabruk  
Joan Hilton  
Paul Hoyt  
Bruce Judge

#### Junior Restricted

Thomas Haynes  
Adam Hyde  
Bran Kobus  
Dylan Pett

#### Auxiliary

Gail Ackley  
Barb Anelli  
Colleen Armani  
Jerne Brownell  
Kendra Chapman  
Pat Chapman

Marty Charpentier  
Ruth Corgnell  
Debbie Curniere  
Sue DeMong  
Kristina M Donegan  
Karalynn Donegan  
Donna Fisher  
Judy Freeman  
Brenda Gabruk  
Susan Graber  
Lindsey Graber  
Nancy Hains  
Ella Hilton  
Bev Humphrey  
Mane Humphrey  
Kassie Judge  
Megan Keeler  
Barb Kingsley  
Shannon Kesselstein  
Sharon Krahl  
Mary Lesnau  
Ruth Ann Maher  
Laura Murray  
Carol Walker  
Joann Wines

**Supporting**  
Patty Jock

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## About Us

The West Monroe Fire Department, located at 54 County Route 11 in the town of West Monroe, is in south eastern Oswego County. We serve the West Monroe Fire Protection District, a primarily suburban and country territory which includes several miles of Oneida Lake and State Route 49 (The town of West Monroe contracts with the Brewerton Fire Department to protect the Big Bay land area portion of town.) Founded in 1978, as West Monroe Volunteer Fire Department, Inc. We have a common Board of Directors composed of members of the Department.

Hazards in our first due area include the Mirabito Propane filling plant, several mobile home parks, and large portions of Oneida Lake. In addition, we offer primary fire protection for a population of 4,500. We have over 50 volunteers operating 3 pieces of fire suppression apparatus, one Heavy Rescue truck, one Light Rescue, one Tanker, one Air Boat and a Boston Whaler Rescue Boat. On average, we run about 350 calls a year, the bulk of which are EMS calls or vehicle accidents.

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### Fire Department Charter Members

Luigi Anelli  
 Richard Baxter  
 William Bellows  
 Bruce Bisbo  
 Neil Brownell  
 Ronald Casolare  
 William Chapman  
 Leon Clement  
 Michael Corbett  
 Ernest Cortis  
 James Cunningham  
 John Degraw  
 John DeMong  
 Donald Farewell  
 Robert Foster  
 Daniel Effe  
 Bruce Faust  
 James Fay  
 Elwin Fisher  
 Vaughn Fisher  
 Terry Fergerson  
 Alfred Gensch  
 Kenneth Glazier  
 Ned Green  
 Gladys Halliday  
 Paul Hoyt  
 Richard Johnson  
 James Kelley  
 Ronald Kingsley  
 Ernest Ludlow  
 Claude Miller  
 Neil Morey  
 Richard Redhead  
 John M. Revell  
 John T. Revell  
 David Rowe III  
 Richard Sankey  
 Lester Schaad Sr.  
 Carl Schonborg  
 Arnold Shaw  
 Randall Shaw  
 Michael Sheehan  
 John Thayer  
 Elet Vollmer  
 William Walker  
 Thomas Wise

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### Auxillary Charter Members

Barbara Anelli  
 Gretchen Baxter  
 Carol Bellows  
 Brenda Bisbo  
 Jerrie Ann Brownell  
 Pat Chapman  
 Peggy Clement  
 Dotie Corbett  
 Joan Cortis  
 Manon Cosby  
 Nancy Degraw

*Sue DeMong  
Nancy Eiffe  
Joyce Fisher  
Donna Fisher  
Norma Foster  
Mary Ann Gensch  
Kathy Hoyt  
Loretta Judge  
Barbara Kingsley  
Ruth Ann Maher  
Eldora Miller  
Jean Morey  
Marie Nageldinger  
Donna Peregoy  
Annie Redhead  
Yvonne Redhead  
Jean Revell  
Judy Rogers  
Donna Sankey  
Beverly Schaad  
Peggy Seymour  
Denise Shaw  
Bonnie Sheehan  
Ann Walker  
Jan Wise*

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**WEST MONROE VOLUNTEER FIRE DEPARTMENT, INC**

July 13, 2010

#	Name	Service Date	Home Tel #	Alt Tel #	Note	Rank	e-mail
35	Baxter, Paul	07/01/89	668-8945			Board of Director	pbaxter35@westmonroefire.org
127	Bender, Mark	12/01/98	623-9322			Lieutenant	
95	Boughton, Russ	03/01/88	676-2806			Chief	
15	Brownell, Neil	11/19/77	668-8480			Charter	
115	Davis, Kelley	11/07/95	668-7933			Asst Treasurer	
110	Davis, Kevin	09/06/94	668-7933			1st Assistant Chief	
121	DeMong, Jeff	02/03/98	668-6138			Captain	
19	DeMong, John	11/01/77	668-6138			Board of Director	
168	Donegan, Kristina	04/06/04	623-7668			Captain of Fire Police	
163	Dynka, Hank	12/02/03	668-8113			Fire Line Member	hdynka163@westmonroefire.org
21	Farewell, Don	11/15/77	668-8681			Charter	
25	Fisher, Vaughn	11/28/77	668-7793			Charter	
169	Fleischman, Kyle	04/06/04	676-5473	480-9408	Cell Ph	Fire Line Member	
181	Frawley, Matt	06/07/05	668-3900	532-4267	Cell Ph	Fire Line Member	
212	Freeman, Andrew	11/11/08	254-5793			Fire Line Member	
18	Gabruk, Jim	09/03/85	676-2365			Fire Line Member	
205	Gass, Ryan	01/08/08	676-2358			Fire Line Member	
190	Gass Jr, Steven	05/04/06	623-7541			Fire Line Member	
213	Gates, John	07/07/09	676-3018			Probationary Member	
128	Giamartino, Al	12/01/98	668-3667			2nd Assistant Chief	agiamartino128@westmonroefire.org
160	Graber, Chris	10/07/03	751-9028			Fire Line Member	
161	Graber, Mark	11/04/03	668-2855	378-6537		Fire Line Member	
85	Hains, Al	12/06/88	668-6403			Fire Line Member	markgraber474@hotmail.com
49	Hanson, Dave	12/04/79	668-8072	263-9284	Cell Ph	Lieutenant/Vice President	dave3301@twcny.rr.com
61	Hilton, Joan	12/05/89	668-3041			Fire Line Member	
208	Hyde, Adam	08/05/08	668-6539			Restricted Age Member	
207	Hyde, Dakota	08/05/08	420-5269			Fire Line Member	
40	Hyde, Dennis	09/01/87	676-3398			Fire Line Member	dhyde40@westmonroefire.org
172	James, Kevin	10/05/04	668-9248			Lieutenant	kjames172@westmonroefire.org
202	Jock, James	08/07/07	668-8756			Fire Line Member	
214	Jones, Hayley	10/06/09	676-2973			Restricted Age Member	
111	Jones, Jay	03/02/93	657-6618			Fire Line Member	
55	Judge, Bruce	11/04/78	668-6755			Fire Line Member	
33	Kingsley, Ron	12/01/77	668-8190	409-6898	Cell Ph	Charter/Director	
211	Kobus, Brian	11/11/08	623-9017			Restricted Age Member	
186	Lembo, Dominick	02/07/06	668-3757			Fire Line Member	
199	Lesnau, Edward	04/03/07	668-7106			Fire Line Member	
209	Mawson, Jeffrey	09/02/08	676-5299			Fire Line Member	
171	Murray, Doug	08/03/04	668-6617	415-7793	Cell Ph	Fire Line Member	

**WEST MONROE VOLUNTEER FIRE DEPARTMENT, INC**

July 13, 2010

#	Name	Service Date	Home Tel #	Alt Tel #	Note	Rank	e-mail
206	Petit, Dylan	04/01/08				Fire Line Member	
154	Sikora, Jeff	03/04/03	256-9614	727-3835 C 249-1642 P		Lieutenant	jsikora154@westmonroefire.org
195	Thompson, Chad	03/06/07	668-3109			Fire Line Member	
155	Thompson, Diane	03/04/03	668-3109			Secretary	
174	Thompson, Kyle	06/07/05	668-3109			Fire Line Member	
188	Tucker, Derrike	04/04/06	676-3158			Fire Line Member	
78	Walker, Mike	04/01/86	668-9025			President	
80	Wicks, Dick	03/01/88	676-2497			Treasurer	twicks80@westmonroefire.org
215	Wood, Roseanne	02/02/10	668-6808			Probationary Member	
<b>Supporting Members</b>							
	Patty Jack	02/02/10	668-8756				
	Fidler, Chris	03/07/01	668-9131				
	Fidler, Mike	03/07/01	668-9131				
	Fidler, Nancy	03/07/01	668-9131				
	Jim Peet		480-8327		(CPR instructor)		
<b>Members on Leave / Inactive Members</b>							
145	Belair, Nick	01/08/02	676-5904			LOA - Military	
101	Shaw, Matt	10/02/90	676-5842			Fire Line Member	
182	Hemphill, Logan	09/06/05	676-5070			LOA - Military	
124	Eiffe, Ryan	08/15/98	668-8590				
20	Eiffe, Dan	11/14/97	668-8590			Charter	
100	Eiffe, Dale	12/05/89	668-9930				deiffe100@westmonroefire.org
149	Rosenbarker, Rob	05/07/02	668-1418				
125	Mason, Chris	10/06/98	668-6482	256-5755	Cell	LOA	

Baxter	Paul	30 Birch Lane		West Monroe	NY	13167
Bender	Mark	258 Grannis Road		Constantia	NY	13044
Boughton	Russell	203 Slosson Road		West Monroe	NY	13167
Brownell	Neil	95 Gulf Bridge Road		West Monroe	NY	13167
Davis	Kelley	162 County Route 84		West Monroe	NY	13167
Davis	Kevin	162 County Route 84		West Monroe	NY	13167
DeMong	Jeffrey	28 Gulf Bridge Road		West Monroe	NY	13167
DeMong	John	28 Gulf Bridge Road		West Monroe	NY	13167
Donegan	Kristina	93 Granis Road		Constantia	NY	13044
Dynka	Henry	229 Helinger Road		West Monroe	NY	13167
Farewell	Donald	2204 State Route 49		West Monroe	NY	13167
Fisher	Vaughn	749 County Route 11		West Monroe	NY	13167
Fleishman	Kyle	PO Box 8		West Monroe	NY	13167
Frawley	Matthew	1469 County Route 26		West Monroe	NY	13167
Freeman	Andrew	451 County Route 11	Lot 57	West Monroe	NY	13167
Gabruk	James	451 County Route 11	Lot 48	West Monroe	NY	13167
Gass	Ryan	2665 SR 49		West Monroe	NY	13167
Gass	Steven	1493 County Route 23		Constantia	NY	13044
Gates	John	19 Rogers Road		West Monroe	NY	13167
Giamartino	Albert	153 County Route 84		West Monroe	NY	13167
Graber	Christopher	384 Morey Road		Central Square Central	NY	13036
Graber	Mark	384 Morey Road		Square	NY	13036
Hains	Alfred	1611 County Route 37		West Monroe	NY	13167
Hanson	David	179 Helinger Road		West Monroe	NY	13167
Hilton	Joan	2155 State Route 49		West Monroe	NY	13167
Hyde	Adam	38 Helinger Road		West Monroe	NY	13167
Hyde	Dakota	38 Helinger Road		West Monroe	NY	13167
Hyde	Dennis	295 County Route 84		West Monroe	NY	13167
James	Kevin	49 Erins Way		West Monroe	NY	13167
Jock	James	11 Morey Road		West Monroe	NY	13167
Jones	Hayley	338 Co Rt 11	Lot 147	West Monroe	NY	13167
Jones	Jay	542 Lower Road		West Monroe	NY	13167
Judge	Bruce	469 Morey Road		Mallory	NY	13103
Kingsley	Ronald	211 Toad Harbor Road		West Monroe	NY	13167
Kobus	Brian	70 Co Rt 23		Constantia	NY	13044
Lembo	Dominick	68 Pinecrest Drive		West Monroe	NY	13167
Lesnau	Edward	138 County Route 26		West Monroe	NY	13167
Mawson	Jeffrey	338 Co Rt 11	Lot 131	West Monroe	NY	13167
Murray	Doug	568 Lower Road		West Monroe	NY	13167
Petit	Dylan	155 Morey Road		West Monroe	NY	13167
Sikora	Jeffrey	2137 State Route 49		West Monroe	NY	13167
Thompson	Chad	545 Toad Harbor Road		West Monroe	NY	13167
Thompson	Diane	545 Toad Harbor Road		West Monroe	NY	13167
Thompson	Kyle	545 Toad Harbor Road		West Monroe	NY	13167
Tucker	Derrick	PO Box 58		West Monroe	NY	13167
Walker	Michael	Toad Harbor Road		West Monroe	NY	13167
Wicks	Richard	PO Box 8		West Monroe	NY	13167
Wood	Roseanne	28 Maplewood Drive		West Monroe	NY	13167