

Name of local government: Troy Volunteer Dispatch  
 Budget for Fiscal Year: 2020  
 Fund Name: Troy Area Dispatch  
 Fund #: 7399

**CASH AVAILABLE, REVENUES, & OTHER FINANCING SOURCES**

	AMOUNT
<u>1</u> Cash Balance In County fund as of June 30th	106989
<u>2</u> Cash Balance all accounts held outside the County as of June 30th	
<u>3</u> Monies not yet deposited for all accounts	
<u>4</u> Outstanding warrants (checks) as of June 30th	
<u>5</u> Capital Improvement Fund	
	106989
<u>6</u> Cash Available as of July 1st (6 = (1 + 2 + 3 + 5) - 4)	

Revenues	AMOUNT
<u>7</u> Tax Revenue	196475
<u>8</u> <b>NON-TAX REVENUES &amp; OTHER FINANCING SOURCES</b>	
<u>Special Assessments</u>	
<u>License &amp; Permits</u>	
<u>Intergovernmental</u>	
Federal grants (specify below)	
<u>911 funds</u>	22000
<u>other entitlements</u>	13000
State grants (specify below)	
State shared revenues (specify below)	
State entitlement	
<u>Charges for Services</u>	
<u>Miscellaneous</u>	
Contribution & donations	
Sale of junk or salvage (non capital items)	
Other (specify)	
<u>Investment earnings</u>	
<u>Other Financing Sources</u>	
Transfers In from other funds ( <i>do not use to budget cash transfers between bank accounts</i> )	
Proceeds from long term debt	
Proceeds from sale of capital assets	
<b>TOTAL TAX/ NON-TAX REVENUES &amp; OTHER FINANCING SOURCES:</b>	<b>231475</b>
<u>9</u>	

<u>10</u> <b>Total Resources</b> (Total Resources <i>MUST</i> equal Total Requirements from page 2, 11) (10 = 6 + 9)	<b>338464</b>
---	---------------

**APPROPRIATIONS AND CASH RESERVE**

11	Expenditures	AMOUNT	Expenditures	AMOUNT
	<b>Personal Services (100)</b>		<b>Fixed Charges (500)</b>	
	Salaries/Wages	164000	Insurance on trucks, buildings, etc.	39000
	Workers compensation	21000	Bank/Investment charges	
	Employer contributions		Cooperative contracts/agreements	26000
	Other (specify)	13000	Clothing allowance	
	<b>Supplies (200)</b>		Election costs	
	Office supplies	4000	Other (specify)	
	Equipment (non-capital)	1000	<b>Debt Service (600)</b>	
	Operating supplies		Principal payments	
	Chemicals		Interest payments	
	Gas & oil-vehicles	12000	Other (specify)	
	Vehicles (repair & maintenance)		<b>Grants, Contributions and Indemnities (700)</b>	
	Equipment (non-capital)		Donations	
	Other (specify)		Other (specify)	
	Building supplies (repair & maintenance)		<b>Other (800)</b>	
	Other (specify)		Transfers to other funds	
	<b>Purchased Services (300)</b>		<i>(do not use to budget cash transfers between bank accounts)</i>	22000
	Utilities		Depreciation	
	Telephone & communication		Losses (bad debt) Enterprise funds only	
	Electricity and/or natural gas		<b>Capital Outlay (900)</b>	
	Repair & Maintenance	5000	<i>(expenditures budgeted to capital outlay MUST meet the local government's capitalization policy.)</i>	
	Building		Land	
	Vehicles		Building	
	Office equipment		Improvement other than building	
	Publicity, subscriptions, dues		Machinery & equipment (list below)	
	Newspaper publications		PSAP	60564
	Subscriptions			
	Membership fees			
	Training	3500	<b>Capital Improvement Plan</b>	
	Tuition/registration costs			
	Travel reimbursements			
	Other (specify)			
	Professional services	2500		
	Legal			
	Accounting & auditing			
	Other (specify)			
	Equipment rental			

**TOTAL APPROPRIATIONS (EXPENDITURES):**  
*(The total actual expenditures for the period stated shall not in any event exceed the total budgeted appropriations, unless a budget amendment in accordance with 7-6-4006, MCA has been passed.)*  
 338464

**Cash Reserve**  
 Criteria - If fund is budgeted to receive tax revenue in the fiscal year, the budgeted cash reserve amount cannot exceed 1/3 of appropriations. The cash reserve amount cannot be a negative amount.  
 12 (= a reserve to meet expenditures made from the fund during the months of July to November of the next fiscal year)

**Total Requirements** (Total Requirements *MUST* equal Total Resources from page 1, 10)  
 13 ( 13 = 11 + 12 ) 338464

14 If Total Requirements = Total Expenditures, this column should auto calculate to a zero balance. 0

**This space is reserved for any additional comments or explanations.**

**Please list any additional non-tax revenues or accounts not reflected in the operating budget or CIP and/or not held in the county account with an explanation of purpose.**

Name of financial institution: _____	Amount: _____
Page 2 - personal services specified is Health Insurance	

Name of financial institution: _____	Amount: _____
Explanation of account:	

Name of financial institution: _____	Amount: _____
Explanation of account:	

Name of local government: Troy Volunteer Dispatch  
 Budget for Fiscal Year: 2020  
 Fund Name: Troy Area Dispatch  
 Fund #: 7300

**GENERAL INFORMATION REQUIRED**

BOARD:	NAME	DATE TERM EXPIRES
Chairman	Dennis DuPuis	
Vice-Chairman		
Board member	Roder Gillioan	
Board member	James Ward	
Board member		
Board member		
Board member		
Secretary	Sandi Sullivan	
Treasurer		

Prepared by (Print Name): Dennis DuPuis/ Sandi Sullivan  
 Prepared by (Signature): \_\_\_\_\_  
 Title: Chairman/ Secretary  
 Date: 8/20/2019  
 District Mailing Address: PO Box 823  
 City/ State/ Zip code: Troy, MT 59935  
 District Phone #: 406.295.4111  
 Email address of District: troy911dispatch@hotmail.com

**INFORMATION BELOW IS FOR INTERNAL USE  
 TO BE COMPLETED BY THE Finance Department**

Darren Coldwell  
 Lincoln County Administrator

**Ad Mill Levy Information**

FY Voted Mills 1st Levied	Number of Mills	Last FY Voted Mills will be levied (Sunset)

**Emergency Mill levy or other permissive mills per 15-10-420(9)**

Type of Permissive Mill (i.e. emergency, judgment, etc.)	Number of Mills

**Current Year Mill levy approved by County Commissioners:**

Taxable Valuation	Value Per Mill	Number of Mills Authorized without a vote	Number of voted & permissive mills levied	Total number of mills levied	Total Authorized Tax Revenue

(should agree to page 1, Z)

Special Notes: Capital Improvement Plans should be approved by your board.

Questions??

Contact County Administrator Darren Coldwell  
 283-2345  
[dcoldwell@lbbv.org](mailto:dcoldwell@lbbv.org)

eSigned via [ElectronicDocs.com](http://www.ElectronicDocs.com)  
*Dennis DuPuis / Sandi Sullivan*  
 Key: 977ad71003d10020e93770461e0890d