	of local government:	
	t for Fiscal Year:	
runa r Fund <i>‡</i>	lame: t:	
4114		
	CASH AVAILABLE, REVENUES, & OTHER FIN	ANCING SOURCES
		AMOUNT
1	Cash Balance in County fund as of June 30th	
2	Cash Balance all accounts held outside the County as of June 30th	
<u>3</u>	Monies not yet deposited for all accounts	
4	Outstanding warrants (checks) as of June 30th	
<u>5</u>	Cash Available as of July 1st (5 = (1 + 2+3) - 4)	-
	Revenues	AMOUNT
<u>6</u>	Tax Revenue	
-	NON TAY BEVENUES & OTHER PENANCENO COURCES	
7	NON-TAX REVENUES & OTHER FINANCING SOURCES Special Assessments	
	License & Permits	
	Intergovernmental	
	Federal grants (specify below)	
	State grants (specify below)	
	State shared revenues (specify below) State entitlement	
	Charges for Services	
	Miscellaneous	
	Contribution & donations Sale of junk or salvage (non capital items)	
	Other (specify)	
	Investment earnings	
	Other Financing Sources Transfers in from other funds	
	(<u>do not use</u> to budget cash transfers between bank	
	accounts)	
	Proceeds from long term debt Proceeds from sale of capital assets	
8	TOTAL TAX/NON-TAX REVENUES & OTHER FINANCING SOURCES:	
ت		
	Total Resources (Total Resources <u>MUST</u> equal Total	
9	Requirements from page 2, $\underline{11}$) $(9=5\pm8$ _)	_
L	r /	

Name of local government:_	
Budget for Fiscal Year:	
Fund Name:	
Fund #:	

	AP	PROPRIATIONS AN	ID CASH RESERVE	
10	Expenditures	AMOUNT	Expenditures	AMOUNT
	Personal Services (100)		Fixed Charges (500)	
	Salaries/Wages		Insurance on trucks, buildings, etc.	
	Workers compensation		Bank/Investment charges	
	Employer contributions		Cooperative contracts/agreements	
	Other (specify)		Clothing allowance	
	Supplies (200)		Election costs	
	Office supplies		Other (specify)	
	Equipment (non-capital)		Debt Service (600)	
	Operating supplies		Principal payments	
	Chemicals		Interest payments	
	Gas & oil-vehicles		Other (specify)	
	•		Grants, Contributions and	
	Vehicles (repair & maintenance)		Indemnities (700)	
	Equipment (non-capital)		Donations	
	Other (specify)		Other (specify)	
	Building supplies (repair & maintenance)		Other (800)	
			Transfers to other funds	
			(do not use to budget cash transfers	
	Other (specify)		between bank accounts)	
	Purchased Services (300)		Depreciation	
	Utilities		Losses (bad debt) Enterprise funds only	
	Telephone & communication		Capital Outlay (900)	
	•		(expenditures budgeted to capital outlay	
			MUST meet the local government's	
	Electricity and/or natural gas		capitalization policy.)	
	Repair & Maintenance		Land	
	Building		Building	
	Vehicles		Improvement other than building	
	Office equipment		Machinery & equipment (list below)	
	Publicity, subscriptions, dues			
	Newspaper publications			
	Subscriptions			
	Membership fees			
	Training		Miscellaneous (specify)	
	Tuition/registration costs			
	Travel reimbursements			
	Other (specify)			
	Professional services			
	Legal			
	Accounting & auditing			
	Other (specify)			
	Equipment rental			
			TAL ADDDODDIATIONS (EVERNOTURES)	
		TOTAL APPROPRIATIONS (EXPENDITURES): (The total actual expenditures for the period stated shall not in any		
			total budgeted appropriations, unless a budget	
			ordance with 7-6-4006, MCA has been passed.)	
		sc.ia.nene in deci		
	Cash Reserve			
	Criteria - If fund is budgeted to receive tax revenu			
	1/3 of appropriations. The cash reserve amount co			
<u>11</u>	(= a reserve to meet expenditures made from the	e rund during the mon	ntns of July to November of the next fiscal year)	
	Total Requirements (Total Requirements <u>MUS</u>	<u>7</u> equal Total Resourc	es from page 1, <u>9</u>)	
<u>12</u>	(12 = 10 + 11)	•		

ame of local gove	ernment: ear:					
nd Name:						
nd #:						
NERAL INFORM	ATION REQUIRED					
DARD:			ΝΔΜΕ			DATE TER
ARD.	Chairman		/V/I//L			DATETER
	Vice-Chairman					
	Board member					
	Board member					
	Board member					
	Board member					
	Board member					
	Secretary					
	Treasurer					
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epared by (Fillic	Name): nture):					
tle:						
ate:						
istrict Mailing Add	dress:		· · · · · · · · · · · · · · · · · · ·			
ity/State/Zip cod	e:					
strict Phone #:_						
mail address of D	istrict:					
		BELOW IS FOR IN				
<u> 7</u>	<u> O BE COMPLETED</u>	BY THE CLERK AI	<u>VD RECORDE</u>	<u>R</u>		
oted Mill Levy Inf	Formation Ils 1st Levied	N. alas Chille	Last FY Vote		l be levied	
		Number of Mills		(Sunset)		
mergency Mill lev	y or other permiss	ive mills ner 15-1	 -420(9)			
	missive Mill	mms per 13-1	120(3)			
(i.e. emergency,	judgment, etc.)	Number of Mills	ļ			
			1			
urrent Vear Mill le	evy approved by Co	unty Commission	ers:			
arrent rear Mill le	approved by Co	Carry Commission				
Touchto Mahadian	Malua Dan Mill	Number of Mills	Number of voted &	Total number	Total Author	inad Tay Dayanya
Taxable Valuation	Value Per Mill	Authorized without a vote	permissive mills levied	of mills levied	i Ulai AuliiOfi	ized Tax Revenue
		<u> </u>				
					(should agree	e to page 1, # <u>6</u>)
* * *						
cial Notes:	Capital Improvemen	nt Plans should be ap	proved by you	ır board an	d needs to be	a

Contact County Administrative Assistant, Jennifer Brown Phone: (406) 283-2319 Email: jenbrown@libby.org

separate budget from your operating budget.

Questions??