CERTIFIED FINANCIAL STATEMENT (CFS)	Name of City:	Page # of
	CERTIFIED FINANCIAL STATEMENT (CFS)	

FY EXECUTIVE SUMMARY	
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A Comparison of Total Revenues and Expenses

Budget Summary Budgeted Actual Line Reference **TOTAL BUDGETED REVENUES** \$ \$ 26 \$ TOTAL BUDGETED EXPENSES 55 **BALANCE** (Total Revenues minus Total Expenses) \$ \$ \$ \$ **Remaining Cash Balance** \$ \$ TOTAL CASH AVAILABLE

First day of the fis	al year
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Name of City:	Page # of
Name of City.	rage π 01

FY _____ REVENUE SUMMARY

REVENUES	Budgeted	Actual	Budget Summary Line Reference
Administration and Finance	\$	\$	1
Council	\$	\$	2
Law Enforcement	\$	\$	3
Fire	\$	\$	4
Streets and Roads	\$	\$	5
Airport	\$	\$	6
Harbor and Dock	\$	\$	7
Electric Utility	\$	\$	8
Water and Sewer	\$	\$	9
Washeteria	\$	\$	10
Garbage and Landfill	\$	\$	11
Gravel Sales	\$	\$	12
Fuel Sales	\$	\$	13
Pull Tabs	\$	\$	14
Bingo	\$	\$	15
Clinic	\$	\$	16
Library	\$	\$	17
Grant 1	\$	\$	18
Grant 2	\$	\$	19
Capital Project	\$	\$	20
Other Departments, Enterprises or Grants:			
	\$	\$	21
	\$	\$	22
	\$	\$	23
	\$	\$	24
	\$	\$	25
TOTAL FY REVENUES	\$	\$	26

First day of the fiscal	year
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Name of City:	Page #	‡	of	

FY _____ EXPENSE SUMMARY

EXPENSES	Budgeted	Actual	Budget Summary Line Reference
Administration and Finance	\$	\$	30
Council	\$	\$	31
Law Enforcement	\$	\$	32
Fire	\$	\$	33
Streets and Roads	\$	\$	34
Airport	\$	\$	35
Harbor and Dock	\$	\$	36
Electric Utility	\$	\$	37
Water and Sewer	\$	\$	38
Washeteria	\$	\$	39
Garbage and Landfill	\$	\$	40
Gravel Sales	\$	\$	41
Fuel Sales	\$	\$	42
Pull Tabs	\$	\$	43
Bingo	\$	\$	44
Clinic	\$	\$	45
Library	\$	\$	46
Grant 1	\$	\$	47
Grant 2	\$	\$	48
Capital Project	\$	\$	49
Other Departments, Enterprises or Grants:			
	\$	\$	50
	\$	\$	51
	\$	\$	52
	\$	\$	53
	\$	\$	54
TOTAL FY EXPENSES	\$	\$	55

rst day of the fiscal year	Last day of the fiscal year

Name of City:	Page #
	· ~8~ ::

Department/Service: ADMINISTRATION & FINANCE

OPERATING REVENUES			Budget Summary
	Budgeted	Actual	Line Reference
Sales Tax Income	Ś	\$	-
Property Taxes	\$	\$	†
Payment in Lieu of Taxes PILT	\$	\$	7
Annual CAP Payment	\$	\$	7
Land Lease Income	\$	\$	7
Interest Earnings	\$	\$	7
Rental Income	\$	\$	7
Tobaccco Excise Tax Income	\$	\$	7
Other Sources of Income:	\$	\$	7
	\$	\$	7
	\$	\$	7
TOTAL OPERATING REVENUES	\$	\$	Enter on line 1

OPERATING EXPENSES			Budget Summary
	Budgeted	Actual	Line Reference
Salaries	\$	\$	
Payroll Taxes	\$	\$	
Airfare	\$	\$	
Bank Charges	\$	\$	
Building Repairs and Maintenance	\$	\$	
Car Rental/Cab/Ride Fees	\$	\$	
Donations	\$	\$	
Electricity	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Janitorial Supplies	\$	\$	
Liability Insurance	\$	\$	
Lodging	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	
Per Diem	\$	\$	
Permits / Licenses	\$	\$	
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
Telephone & Internet	\$	\$	
Training, Workshop & Conference Fees	\$	\$	
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	7
Water & Sewer Expense	\$	\$	
Workers' Compensation Ins.	\$	\$	7
TOTAL OPERATING EXPENSES	\$	\$	Enter on line 30

ADMINISTRATION & FINANCE BALANCE (revenues minus expenses) \$	\$

First day of the fiscal year_____

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Last day	or the	fiscal vear	

Name of City:	Page #	ŧ,	of
Name of City.	· upc »		··

Department/Service:		COUNCIL		
OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference	
State of Alaska Elections	\$	\$	1	
	\$	\$	Ī	
	\$	\$	[
	\$	\$	Ī	
	\$	\$	Ī	
	\$	\$	Ī	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 2	

OPERATING EXPENSES	Budgeted	Actual	Budget Summar Line Reference
Salaries	\$	\$	
Stipends	\$	\$	
Payroll Taxes	\$	\$	
Airfare	\$	\$	
Bank Charges	\$	\$	
Building Repairs and Maintenance	\$	\$	
Car Rental/Cab/Ride Fees	\$	\$	
Donations	\$	\$	
Election Expenses	\$	\$	
Electricity	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Janitorial Supplies	\$	\$	
Liability Insurance	\$	\$	
Lodging	\$	\$	
Meeting Expenses	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	
Per Diem	\$	\$	
Permits / Licenses	\$	\$	
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
Telephone & Internet	\$	\$	
Training, Workshop & Conference Fees	\$	\$	
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	
Water & Sewer Expense	\$	\$	
Workers' Compensation Ins.	\$	\$	
	\$	\$	
	\$	\$	
OPERATING EXPENSES	\$	\$	Enter on line 31

COUNCIL BALANCE (revenue minus expenses) | \$

First day of the fiscal year_

Last day of the fiscal year_

\$

Name of City:	Page # of
Name of City.	rage π 01

Department/Service: LAW ENFORCEMENT

OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference
DOJ Grant	\$	\$	7
VPSO Funding	\$	\$	
Other Funding Sources:	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 3

OPERATING EXPENSES			Budget Summary
	Budgetd	Actual	Line Reference
Salaries	\$	\$	-
Payroll Taxes	\$	\$	
Airfare	\$	\$	
Bank Charges	\$	\$	
Building Repairs and Maintenance	\$	\$	
Car Rental/Cab/Ride Fees	\$	\$	
Donations	\$	\$	
Electricity	\$	\$	
Food for Inmates	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Janitorial Supplies	\$	\$	
Liability Insurance	\$	\$	
Lodging	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	
Per Diem	\$	\$	
Permits / Licenses	\$	\$	
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
Telephone & Internet	\$	\$	
Training, Workshop & Conference Fees	\$	\$	
Uniforms & Safety Equipment	\$	\$	
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	
Water & Sewer Expense	\$	\$	
Workers' Compensation Ins.	\$	\$	
	\$	\$	
TOTAL OPERATING EXPENSES	\$	\$	Enter on line 32

POLICE DEPARTMENT BALANCE	(revenue minus expenses)	\$ \$

First day of the fiscal year	
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Last	dav	of the	tiscai	vear		

Name of Citv:	Page #	of

Denartment/Service:	CIDE

OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference
Grant Income	\$	\$	1
Other Funding Sources:	\$	\$	1
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 4

OPERATING EXPENSES			Budget Summary
	Budgeted	Actual	Line Reference
Salaries	\$	\$	-
Payroll Taxes	\$	\$	
Airfare	\$	\$	
Bank Charges	\$	\$	
Building Repairs and Maintenance	\$	\$	
Car Rental/Cab/Ride Fees	\$	\$	
Donations	\$	\$	
Electricity	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	7
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Liability Insurance	\$	\$	
Lodging	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	7
Per Diem	\$	\$	
Permits / Licenses	\$	\$	7
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Janitorial Supplies	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
Telephone & Internet	\$	\$	7
Training, Workshop & Conference Fees	\$	\$	7
Uniforms & Safety Equipment	\$	\$	7
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	7
Water & Sewer Expense	\$	\$	7
Workers' Compensation Ins.	\$	\$	7
•	\$	\$	7
	\$	\$	7
TOTAL OPERATING EXPENSES	\$	\$	Enter on line 33

FIRE DEPARTMENT BALANCE (revenue minus expenses)	\$ \$

irst day of the fiscal year	Last day of the fiscal year

Name of City:	Page #	of	
Name of City:	Page #	_ 01	

Department/Service: STREETS & ROADS

OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference	
Heavy Equipment Rental Income	\$	\$	7	
Shop Rental Income	\$	\$		
Other Sources of Income:	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
TOTAL OPERATING REVENUES	\$	\$	Enter on line 5	

OPERATING EXPENSES			Budget Summary
	Budgeted	Actual	Line Reference
Salaries	le le	l¢.	4
Payroll Taxes	\$	\$ \$	
•	\$		_
Airfare	\$	\$	
Bank Charges	\$	\$	
Building Repairs and Maintenance	\$	\$	_
Car Rental/Cab/Ride Fees	\$	\$	_
Donations	\$	\$	
Electricity	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Liability Insurance	\$	\$	
Lodging	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	
Per Diem	\$	\$	
Permits / Licenses	\$	\$	
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Janitorial Supplies	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
Telephone & Internet	\$	\$	
Training, Workshop & Conference Fees	\$	\$	
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	7
Water & Sewer Expense	\$	\$	7
Workers' Compensation Ins.	\$	\$	7
·	\$	\$	7
	\$	\$	7
TOTAL OPERATING EXPENSES	\$	\$	Enter on line 34

STREETS & ROADS BALANCE (revenue minus expenses) \$

First day of the fiscal year___

Last day of the fiscal year____

Name of Citv:	Page #
taile of city.	1 ugc #

Department/Service:		AIRPURT			
OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference		
Airport Maintenance Contract	\$	\$	1		
Other Sources of Income:	\$	\$	1		
	\$	\$	1		
	\$	\$			
	\$	\$	1		
	\$	\$	1		
	\$	\$]		
TOTAL OPERATING REVENUES	Ś	Ś	Enter on line 6		

OPERATING EXPENSES Budgeted Actual Line Reference Salaries **Payroll Taxes** \$ \$ **Airfare** \$ \$ \$ **Bank Charges Building Repairs and Maintenance** \$ \$ Car Rental/Cab/Ride Fees **Donations** Electricity Gasoline-Avgas-Oil \$ Hardware, Lumber and Tools \$ **Heating Fuel / Diesel Interest & Late Charges Liability Insurance** \$ Lodging \$ **Membership Fees & Subscriptions** \$ Office Supplies-Equip-Software \$ Per Diem \$ \$ Permits / Licenses \$ \$ Postage & Freight \$ **Professional Services & Contract Labor** \$ **Janitorial Supplies Rental Expenses** \$ **Retirement/Pension** \$ **Telephone & Internet Training, Workshop & Conference Fees Vehicle or Heavy Equipment Purchase Vehicle Parts & Repair** \$ \$ \$ Water & Sewer Expense \$ Workers' Compensation Ins. \$ \$ \$ **TOTAL OPERATING EXPENSES** \$ Enter on line 35

Budget Summary

4 IDDODT

AIRPORT BALANCE (revenue minus expenses) \$	\$

First day of the fisca	l year
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Name of City:	Page #	: (of
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OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference
Harbor / Dock Charges	\$	\$	
Fuel Sales	\$	\$	
Other Sources of Income:	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 7

OPERATING EXPENSES			
OF ENATING EAFEIGES	Budgeted	Actual	Budget Summa
	1.		
Salaries 	\$	\$	
Payroll Taxes	\$	\$	
Airfare	\$	\$	
Bank Charges	\$	\$	
Building Repairs and Maintenance	\$	\$	
Car Rental/Cab/Ride Fees	\$	\$	
Donations	\$	\$	
Electricity	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Janitorial Supplies	\$	\$	
Liability Insurance	\$	\$	
Lodging	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	
Per Diem	\$	\$	
Permits / Licenses	\$	\$	
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
Telephone & Internet	\$	\$	
Training, Workshop & Conference Fees	\$	\$	
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	
Water & Sewer Expense	\$	\$	
Workers' Compensation Ins.	\$	\$	
•	\$	\$	
	\$	\$	
TOTAL OPERATING EXPENSES	\$	\$	Enter on line

HARBOR & DOCK BALANCE (revenue minus expenses) \$

First day of the fiscal year	
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Name of City:	Page #	of
Tuine or only .		

Department/Service: **ELECTRIC UTILITY**

OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference
Residential Customer Payments	\$	\$	7
Commercial Customer Payments	\$	\$	7
School Payment	\$	\$	7
Electric Utility: PCE Subsidy	\$	\$	7
AVEC Reimbursement	\$	\$	7
Other Income Sources:	\$	\$	7
	\$	\$	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 8

	Budgeted	Actual	Budget Summary Line Reference
Salaries	\$	\$	
Payroll Taxes	\$	\$	
Airfare	\$	\$	
Bank Charges	\$	\$	
Building Repairs and Maintenance	\$	\$	
Car Rental/Cab/Ride Fees	\$	\$	
Donations	\$	\$	
Electricity	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Janitorial Supplies	\$	\$	
Liability Insurance	\$	\$	
Lodging	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	
Per Diem	\$	\$	
Permits / Licenses	\$	\$	
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
Telephone & Internet	\$	\$	
Training, Workshop & Conference Fees	\$	\$	
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	
Water & Sewer Expense	\$	\$	
Workers' Compensation Ins.	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING EXPENSES	\$	\$	Enter on line 37

ELECTRIC UTILITY BALANCE (revenue minus expenses)	\$ \$

First day of the fiscal year	
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Last day	or the	fiscal vear	

Name of City:	Page #	of

Department/Service:	WATER & SEWER

Residential Customers 5	\$ ċ	†
	Ş	
Commercial Customers	\$ \$	1
School District Income	\$ \$	1
Other Income Sources:	\$ \$	
ļ.	\$ \$	
ļ.	\$ \$	
TOTAL OPERATING REVENUES	\$ \$	Enter on line 9

OPERATING EXPENSES	Budgeted Actual	Budget Summary Line Reference
Salaries	\$ \$	
Payroll Taxes	\$ \$	
Airfare	\$ \$	
Bank Charges	\$ \$	
Building Repairs and Maintenance	\$ \$	
Car Rental/Cab/Ride Fees	\$ \$	
Donations	\$ \$	
Electricity	\$ \$	
Gasoline-Avgas-Oil	\$ \$	
Hardware, Lumber and Tools	\$ \$	
Heating Fuel / Diesel	\$ \$	
Interest & Late Charges	\$ \$	
Janitorial Supplies	\$ \$	
Liability Insurance	\$ \$	
Lodging	\$ \$	
Membership Fees & Subscriptions	\$ \$	
Office Supplies-Equip-Software	\$ \$	
Per Diem	\$ \$	
Permits / Licenses	\$ \$	
Postage & Freight	\$ \$	
Professional Services & Contract Labor	\$ \$	
Rental Expenses	\$ \$	
Repair & Replacement (R&R) Account	\$ \$	
Retirement/Pension	\$ \$	
Telephone & Internet	\$ \$	
Training, Workshop & Conference Fees	\$ \$	
Vehicle or Heavy Equipment Purchase	\$ \$	
Vehicle Parts & Repair	\$ \$	
Water & Sewer Expense	\$ \$	
Water Treatment Chemicals & Supplies	\$ \$	
Water Sampling and Testing Fees	\$ \$	
Workers' Compensation Ins.	\$ \$	
	\$ \$	
TOTAL OPERATING EXPENSES	\$ \$	Enter on line 38

WATER & SEWER BALANCE (revenue minus expenses)	\$ \$

First day of the fiscal year	
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Name of City:			

Page # _____ of ___

CERTIFIED FINANCIAL STATEMENT (CFS)

Department/Service:		WASHETERIA		
OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference	
Washer Income	\$	\$	1	
Dryer Income	\$	\$	1	
Shower/Sauna Income	\$	\$	1	
Soap/Detergent Income	\$	\$	1	
Other Income Sources:	\$	\$	1	
	\$	\$	1	
	\$	\$	1	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 10	

OPERATING EXPENSES			
	Budgeted	Actual	Budget Summa Line Referenc
Salaries	\$	\$	-
Payroll Taxes	\$	\$	
Airfare	\$	\$	
Bank Charges	\$	\$	
Building Repairs and Maintenance	\$	\$	
Car Rental/Cab/Ride Fees	\$	\$	
Donations	\$	\$	
Electricity	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	7
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Janitorial Supplies	\$	\$	
Liability Insurance	\$	\$	7
Lodging	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	
Per Diem	\$	\$	
Permits / Licenses	\$	\$	
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
Telephone & Internet	\$	\$	
Training, Workshop & Conference Fees	\$	\$	
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	
Washer & Dryer Parts and Repairs	\$	\$	
Water & Sewer Expense	\$	\$	
Workers' Compensation Ins.	\$	\$	
	\$	\$	
TOTAL OPERATING EXPENSES	\$	\$	Enter on line 3

WASHETERIA BALANCE (revenue minus expenses) \$

First day of the fiscal year_____

Last day of the fiscal year___

Name of City:	Page #	of
runic of city.	1 ugc #	0

Department/Service: **GARBAGE & LANDFILL**

-1	_		
OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference
Garbage Collection Services	\$	\$	†
Landfill / Dump Fees	\$	\$	
Other Income Sources:	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 11

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OPERATING EXPENSES	Dudgatad	Actual	Budget
	Budgeted	Actual	Line R
Salaries	\$	\$	
Payroll Taxes	\$	\$	
Airfare	\$	\$	
Bank Charges	\$	\$	
Building Repairs and Maintenance	\$	\$	
Car Rental/Cab/Ride Fees	\$	\$	
Donations	\$	\$	
Electricity	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Janitorial Supplies	\$	\$	
Liability Insurance	\$	\$	
Lodging	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	
Per Diem	\$	\$	
Permits / Licenses	\$	\$	
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
Telephone & Internet	\$	\$	
Training, Workshop & Conference Fees	\$	\$	
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	
Water & Sewer Expense	\$	\$	
Workers' Compensation Ins.	\$	\$	
·	\$	\$	
	\$	\$	
TOTAL OPERATING EXPENSES	\$	\$	Enter

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GARBAGE & LANDFILL BALANCE (revenue minus expenses)	\$ \$

First day of the fiscal year	
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Name of City:	Page #

Denartment/Service:	GRAVEL SALES

OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference
Gravel Sales	\$	\$	7
Other Income Sources:	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 12

Salaries Stipends Payroll Taxes Airfare Sank Charges Building Repairs and Maintenance Car Rental/Cab/Ride Fees Donations Electricity Gasoline-Avgas-Oil Hardware, Lumber and Tools Heating Fuel / Diesel Interest & Late Charges \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Budgeted \$	Actual	Budget Summary Line Reference
Stipends Payroll Taxes Airfare Bank Charges Building Repairs and Maintenance Car Rental/Cab/Ride Fees Donations Electricity Gasoline-Avgas-Oil Hardware, Lumber and Tools Heating Fuel / Diesel	\$		
Stipends Payroll Taxes Airfare Bank Charges Building Repairs and Maintenance Car Rental/Cab/Ride Fees Donations Electricity Gasoline-Avgas-Oil Hardware, Lumber and Tools Heating Fuel / Diesel	\$		
Payroll Taxes Airfare Bank Charges Building Repairs and Maintenance Car Rental/Cab/Ride Fees Donations Electricity Gasoline-Avgas-Oil Hardware, Lumber and Tools Heating Fuel / Diesel \$ \$	\$		
Airfare Bank Charges Building Repairs and Maintenance Car Rental/Cab/Ride Fees Donations Electricity Gasoline-Avgas-Oil Hardware, Lumber and Tools Heating Fuel / Diesel \$ \$			
Bank Charges \$ Building Repairs and Maintenance \$ Car Rental/Cab/Ride Fees \$ Donations \$ Electricity \$ Gasoline-Avgas-Oil \$ Hardware, Lumber and Tools \$ Heating Fuel / Diesel \$	ċ		
Building Repairs and Maintenance Car Rental/Cab/Ride Fees Donations Electricity Gasoline-Avgas-Oil Hardware, Lumber and Tools Heating Fuel / Diesel \$ \$			
Car Rental/Cab/Ride Fees \$ Donations \$ Electricity \$ Gasoline-Avgas-Oil \$ Hardware, Lumber and Tools \$ Heating Fuel / Diesel \$	\$		
Donations \$ Electricity \$ Gasoline-Avgas-Oil \$ Hardware, Lumber and Tools \$ Heating Fuel / Diesel \$	\$		
Electricity \$ Gasoline-Avgas-Oil \$ Hardware, Lumber and Tools \$ Heating Fuel / Diesel \$	\$		
Gasoline-Avgas-Oil \$ Hardware, Lumber and Tools \$ Heating Fuel / Diesel \$	\$		
Hardware, Lumber and Tools \$ Heating Fuel / Diesel \$	\$		
Heating Fuel / Diesel \$	\$		
	\$		
Interest & Late Charges	\$		
	\$		
Janitorial Supplies \$	\$		
Liability Insurance \$	\$		
Lodging \$	\$		
Membership Fees & Subscriptions \$	\$		
Office Supplies-Equip-Software \$	\$		
Per Diem \$	\$		
Permits / Licenses \$	\$		
Postage & Freight \$	\$		
Professional Services & Contract Labor \$	\$		
Rental Expenses \$	\$		
Retirement/Pension \$	\$		
Telephone & Internet \$	\$		
Training, Workshop & Conference Fees \$	\$		
Uniforms & Safety Equipment \$	\$		
Vehicle or Heavy Equipment Purchase \$	\$		
Vehicle Parts & Repair \$	\$		
Water & Sewer Expense \$	\$		
Workers' Compensation Ins. \$	T T		
\$	\$		
TOTAL OPERATING EXPENSES \$			

GRAVEL SALES BALANCE (revenue minus expense	5) \$	\$

First day of the fis	al year
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Name of City:	Page #	٠ (of
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Department/Service:		FUEL SALES	
OPERATING REVENUES	Budgeted	Actual	Budget Summar Line Reference
Heating Fuel/Diesel Sales	\$	\$	1
Gas Sales	\$	\$	1
Avgas Sales	\$	\$	1
Propane Sales	\$	\$	
Motor Oil Sales	\$	\$	1
Other Income Sources:	\$	\$	1
	\$	\$	1
TOTAL OPERATING REVENUES	Ś	Ś	Enter on line 13

OPERATING EXPENSES		
	Budgeted	Actual
Salaries	\$	\$
Stipends	\$	\$
Payroll Taxes	\$	\$
Airfare	\$	\$
Avgas	\$	\$
Bank Charges	\$	\$
Building Repairs and Maintenance	\$	\$
Car Rental/Cab/Ride Fees	\$	\$
Donations	\$	\$
Electricity	\$	\$
Gasoline	\$	\$
Hardware, Lumber and Tools	\$	\$
Heating Fuel / Diesel	\$	\$
Interest & Late Charges	\$	\$
Janitorial Supplies	\$	\$
Liability Insurance	\$	\$
Lodging	\$	\$
Membership Fees & Subscriptions	\$	\$
Motor Oil	\$	\$
Office Supplies-Equip-Software	\$	\$
Per Diem	\$	\$
Permits / Licenses	\$	\$
Postage & Freight	\$	\$
Professional Services & Contract Labor	\$	\$
Propane	\$	\$
Rental Expenses	\$	\$
Retirement/Pension	\$	\$
Telephone & Internet	\$	\$
Training, Workshop & Conference Fees	\$	\$
Vehicle or Heavy Equipment Purchase	\$	\$
Vehicle Parts & Repair	\$	\$
Water & Sewer Expense	\$	\$
Workers' Compensation Ins.	\$	\$
TOTAL OPERATING EXPENSES	\$	\$

Budget Summary Line Reference

Enter on line 42

FUEL SALES BALANCE (revenues minus expens	s) \$	\$
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First day of the fiscal year_____

Last day of the fiscal year_____

Name of City:	Page #	o	ıf
Name of City.	rage #_		"

Department/Service:	PULL TAB SALES

OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference
Pull Tab Sales	\$	\$	
Other Revenue Sources:	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 14

Budget Summary Line Reference

OPERATING EXPENSES		
	Budgeted	Actual
		1.
Salaries	\$	\$
Stipends	\$	\$
Payroll Taxes	\$	\$
Airfare	\$	\$
Bank Charges	\$	\$
Building Repairs and Maintenance	\$	\$
Car Rental/Cab/Ride Fees	\$	\$
Donations	\$	\$
Electricity	\$	\$
Gasoline-Avgas-Oil	\$	\$
Hardware, Lumber and Tools	\$	\$
Heating Fuel / Diesel	\$	\$
Interest & Late Charges	\$	\$
Janitorial Supplies	\$	\$
Liability Insurance	\$	\$
Lodging	\$	\$
Membership Fees & Subscriptions	\$	\$
Office Supplies-Equip-Software	\$	\$
Per Diem	\$	\$
Permits / Licenses	\$	\$
Postage & Freight	\$	\$
Professional Services & Contract Labor	\$	\$
Pull Tab Prize Payouts	\$	\$
Pull Tab Supplies	\$	\$
Rental Expenses	\$	\$
Retirement/Pension	\$	\$
State and Federal Gaming Taxes	\$	\$
Telephone & Internet	\$	\$
Training, Workshop & Conference Fees	\$	\$
Vehicle or Heavy Equipment Purchase	\$	\$
Vehicle Parts & Repair	\$	\$
Water & Sewer Expense	\$	\$
Workers' Compensation Ins.	\$	\$
	\$	\$
TOTAL OPERATING EXPENSES	\$	\$

Enter on line 43

PULL TAB SALES (revenues minus expenses)	\$ \$

rst day of the fiscal	year
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14	- f 4l	C	
Last day	or the	fiscal vear	

Name of City:		

Last day of the fiscal year_____

CERTIFIED FINANCIAL STATEMENT (CFS)

Department/Service: BINGO

OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference
			Line Nererence
Bingo Sheet Sales	\$	\$	
Other Revenue Sources:	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 15

OPERATING EXPENSES			Budget Summar
	Budgeted	Actual	Line Reference
Salaries	\$	\$	
Payroll Taxes	\$	\$	
Airfare	\$	\$	
Bank Charges	\$	\$	
Bingo Prize Payouts	\$	\$	
Bingo Supplies	\$	\$	
Building Repairs and Maintenance	\$	\$	
Car Rental/Cab/Ride Fees	\$	\$	
Donations	\$	\$	
Electricity	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Janitorial Supplies	\$	\$	
Liability Insurance	\$	\$	
Lodging	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	
Per Diem	\$	\$	
Permits / Licenses	\$	\$	
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
State and Federal Gaming Taxes	\$	\$	
Telephone & Internet	\$	\$	
Training, Workshop & Conference Fees	\$	\$	
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	
Water & Sewer Expense	\$	\$	
Workers' Compensation Ins.	\$	\$	
	\$	\$	
TOTAL OPERATING EXPENSES	\$	\$	Enter on line 4

BINGO BALANCE (revenues minus expenses) \$

First day of the fiscal year_____

Name of City:	Page #	of
tunic of city!	. 466	 ٠.

Department/Service:	CLINIC

OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference
Clinic Lease Income	\$	\$	
Other Revenue Sources:	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 16

Budget Summary Line Reference

OPERATING EXPENSES	Budgeted	Actual
Salaries	\$	\$
Payroll Taxes	\$	\$
Airfare	\$	\$
Bank Charges	\$	\$
Building Repairs and Maintenance	\$	\$
Car Rental/Cab/Ride Fees	\$	\$
Donations	\$	\$
Electricity	\$	\$
Gasoline-Avgas-Oil	\$	\$
Hardware, Lumber and Tools		\$
Heating Fuel / Diesel		\$
Interest & Late Charges		\$
Janitorial Supplies		\$
Liability Insurance		\$
Lodging	\$	\$
Membership Fees & Subscriptions		\$
Office Supplies-Equip-Software	\$	\$
Per Diem		\$
Permits / Licenses		\$
Postage & Freight		\$
Professional Services & Contract Labor		\$
Rental Expenses	<u> </u>	<u>, </u>
Retirement/Pension		<u>, </u>
Telephone & Internet		* \$
Training, Workshop & Conference Fees	<u> </u>	* \$
Vehicle or Heavy Equipment Purchase		* \$
Vehicle Parts & Repair		* \$
Water & Sewer Expense	<u> </u>	* \$
Workers' Compensation Ins.		y \$
·		* \$
	L Company of the Comp	<u>*</u> \$
TOTAL OPERATING EXPENSES		<u>*</u> \$

Enter on line 45

CLINIC BALANCE (revenue minus expenses) \$	\$
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First day of the fiscal year	
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Last	dav	of the	tiscai	vear		

Name of City:	Page #	of _	

Department/Service:	LIBRARY

OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference
Grant Income	\$	\$	7
Other Revenue Sources:	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 17

Salaries **Payroll Taxes** \$ \$ **Airfare** \$ \$ **Bank Charges** \$ **Books and Media Purchases** \$ **Building Repairs and Maintenance** \$ Car Rental/Cab/Ride Fees \$ **Donations** \$ \$ Electricity \$ Gasoline-Avgas-Oil \$ Hardware, Lumber and Tools \$ \$ **Heating Fuel / Diesel Interest & Late Charges** \$ \$ **Janitorial Supplies Liability Insurance** \$ \$ Lodging \$ **Membership Fees & Subscriptions** \$ \$ Office Supplies-Equip-Software \$ **Per Diem** \$ Permits / Licenses Postage & Freight \$ **Professional Services & Contract Labor** \$ **Rental Expenses** Retirement/Pension **Telephone & Internet** \$ **Training, Workshop & Conference Fees** \$ **Vehicle or Heavy Equipment Purchase**

Budget Summary Line Reference

Actual

Budgeted

LIBRARY BALANCE (revenue minus expenses) \$	\$

\$

\$

\$

irst day of the fiscal	year
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Vehicle Parts & Repair

Water & Sewer Expense

Workers' Compensation Ins.

TOTAL OPERATING EXPENSES

OPERATING EXPENSES

Enter on line 46

\$

\$ \$

Name of City:	Page #	of

Department/Service:	GRANT 1

			_
OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference
Grant funded by:	\$	\$	1
	\$	\$	1
	\$	\$	1
	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING REVENUES	\$	\$	Enter on line 18

OPERATING EXPENSES Budgeted Actual Salaries \$ \$ **Payroll Taxes Airfare** \$ \$ \$ \$ **Bank Charges** \$ **Building Repairs and Maintenance** Car Rental/Cab/Ride Fees \$ **Donations** \$ **Electricity** \$ Gasoline-Avgas-Oil \$ Hardware, Lumber and Tools \$ \$ **Heating Fuel / Diesel Interest & Late Charges** \$ **Janitorial Supplies** \$ **Liability Insurance** \$ Lodging \$ \$ **Membership Fees & Subscriptions** \$ Office Supplies-Equip-Software \$ Per Diem \$ Permits / Licenses \$ Postage & Freight \$ **Professional Services & Contract Labor** \$ \$ **Rental Expenses** \$ Retirement/Pension **Telephone & Internet** \$ **Training, Workshop & Conference Fees Vehicle or Heavy Equipment Purchase Vehicle Parts & Repair** \$ **Water & Sewer Expense** \$ \$ Workers' Compensation Ins. \$ \$ \$ \$ **TOTAL OPERATING EXPENSES** Enter on line 47

GRANT BALANCE	(revenue minus expenses)	\$ \$

First day of the fiscal year	
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Name of City:	Page #
	· ~8~ ::

Denartment/Service:	GRANT 2

		<u> </u>		
OPERATING REVENUES	Budgeted	Actual	Budget Summary Line Reference	
Grant funded by:	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
TOTAL OPERATING REVENUES	\$	\$	Enter on line 19	

OPERATING EXPENSES			Budget Summary
	Budgeted	Actual	Line Reference
Salaries	\$	\$	-
Stipends	\$	\$	-
Payroll Taxes	\$	\$	
Airfare	\$	\$	
Bank Charges	\$	\$	
Building Repairs and Maintenance	\$	\$	
Car Rental/Cab/Ride Fees	\$	\$	
Donations	\$	\$	
Electricity	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Janitorial Supplies	\$	\$	
Liability Insurance	\$	\$	
Lodging	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	
Per Diem	\$	\$	
Permits / Licenses	\$	\$	
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
Telephone & Internet	\$	\$	
Training, Workshop & Conference Fees	\$	\$	
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	
Water & Sewer Expense	\$	\$	
Workers' Compensation Ins.	\$	\$	
	\$	\$	
	\$	\$	
TOTAL OPERATING EXPENSES	\$	\$	Enter on line 48

GRANT BALANCE (revenue minus expenses)	\$	\$
	•	•

First day of the fiscal year	
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Name of City:	Page #	of	
Name of City:	Page #	_ 01	

Department/Service:	CAPITAL PROJECT
Department/Service.	CAFITAL PROJECT

OPERATING REVENUES	Budgeted	Actual	Budget Summa Line Reference
Funding Source 1:	\$	\$	7
Funding Source 2:	\$	\$	7
Funding Source 3:	\$	\$	7
	\$	\$	7
	\$	\$	7
	\$	\$	7
TOTAL OPERATING REVENUES	\$	\$	Enter on line 2

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OPERATING EXPENSES			Budget Summary
	Budgeted	Actual	Line Reference
Salaries	\$	\$	7
Payroll Taxes	\$	\$	
Airfare	\$	\$	
Bank Charges	\$	\$	
Building Repairs and Maintenance	\$	\$	
Car Rental/Cab/Ride Fees	\$	\$	
Donations	\$	\$	
Electricity	\$	\$	
Gasoline-Avgas-Oil	\$	\$	
Hardware, Lumber and Tools	\$	\$	
Heating Fuel / Diesel	\$	\$	
Interest & Late Charges	\$	\$	
Janitorial Supplies	\$	\$	
Liability Insurance	\$	\$	
Lodging	\$	\$	
Membership Fees & Subscriptions	\$	\$	
Office Supplies-Equip-Software	\$	\$	
Per Diem	\$	\$	
Permits / Licenses	\$	\$	
Postage & Freight	\$	\$	
Professional Services & Contract Labor	\$	\$	
Rental Expenses	\$	\$	
Retirement/Pension	\$	\$	
Telephone & Internet	\$	\$	
Training, Workshop & Conference Fees	\$	\$	
Vehicle or Heavy Equipment Purchase	\$	\$	
Vehicle Parts & Repair	\$	\$	
Water & Sewer Expense	\$	\$	
Workers' Compensation Ins.	\$	\$	7
•	\$	\$	\exists
	\$	\$	\exists
TOTAL OPERATING EXPENSES	\$	\$	Enter on line 49

CAPITAL PROJECT BALANCE (revenue minus expenses) \$

First day of the fiscal year	
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Last day	or the	fiscal vear	

Name of City:	Page # of
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Department/Service:	BLANK
Department, Service.	DEAM

Budgeted	Actual	Budget Summary Line Reference	
\$	\$		
\$	\$	1	
\$	\$		
\$	\$		
\$	\$		
\$	\$		
\$	\$	Enter on line ??	
	Budgeted \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	S	

OPERATING EXPENSES			
	Budgeted	Actual	Budget Summary Line Reference
		I •	
Salaries \$		\$	
Payroll Taxes \$		\$	
Airfare \$		\$	
Bank Charges \$		\$	
Building Repairs and Maintenance \$.	\$	
Car Rental/Cab/Ride Fees \$.	\$	
Donations \$	i	\$	
Electricity \$	•	\$	
Gasoline-Avgas-Oil \$	•	\$	
Hardware, Lumber and Tools \$	•	\$	
Heating Fuel / Diesel \$	}	\$	
Interest & Late Charges \$	3	\$	
Janitorial Supplies \$	3	\$	
Liability Insurance \$	3	\$]
Lodging \$	3	\$	
Membership Fees & Subscriptions \$	3	\$	
Office Supplies-Equip-Software \$	3	\$	1
Per Diem \$	3	\$	1
Permits / Licenses \$	3	\$	1
Postage & Freight \$	}	\$	
Professional Services & Contract Labor \$	}	\$	
Rental Expenses \$	}	\$	
Retirement/Pension \$	}	\$	
Telephone & Internet \$	}	\$	
Training, Workshop & Conference Fees \$	i	\$	1
Vehicle or Heavy Equipment Purchase \$	}	\$	
Vehicle Parts & Repair \$	}	\$	1
Water & Sewer Expense \$	}	\$	1
Workers' Compensation Ins.	}	\$	
\$		\$	1
\$		\$	1
TOTAL OPERATING EXPENSES \$		\$	Enter on line ??

Balance (revenue minus expenses) \$

First	day of	tne	rıscaı	vear	

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