

# City Budget Form



City of: \_\_\_\_\_

Day of the Week: \_\_\_\_\_

**Prior Day's Balance**

| Ln #                         | Revenue Items                                     |                      |                      |
|------------------------------|---|----------------------|----------------------|
| <b>Sales Tax</b>             |   |                      |                      |
| 1                            | Amount Subject to Sales Tax                       | <input type="text"/> |                      |
| 2                            | Sales Tax Rate                                    | <input type="text"/> |                      |
| 3                            | Total Sales Tax Revenue (ln 1 X ln 2)             | <input type="text"/> | <input type="text"/> |
| <b>Property Tax</b>          |   |                      |                      |
| 4                            | Amount Subject to Property Tax                    | <input type="text"/> |                      |
| 5                            | Mill Levy   | <input type="text"/> |                      |
| 6                            | Total Prop. Tax Revenue (ln 5 X ln 6 X 0.001)     | <input type="text"/> | <input type="text"/> |
| <b>Bond Revenue</b>          |   |                      |                      |
| 7                            | Bond #1   | <input type="text"/> |                      |
| 8                            | Bond #2   | <input type="text"/> |                      |
| 9                            | Total Bond Revenue (ln 7+ ln 8)                   | <input type="text"/> | <input type="text"/> |
| <b>Miscellaneous Revenue</b> |   |                      |                      |
| 10                           | Misc #1 _____                                     | <input type="text"/> |                      |
| 11                           | Misc #2 _____                                     | <input type="text"/> |                      |
| 12                           | Misc #3 _____                                     | <input type="text"/> |                      |
| 13                           | Total Misc. Revenue (ln 10 + ln 11 + ln 12)       | <input type="text"/> | <input type="text"/> |
| 14                           | <b>Total Revenue</b> (ln 3 + ln 6 + ln 9 + ln 13) |                      | <input type="text"/> |

**Items shaded in gray are not implemented until a counselor enters the information into the County or Banking Center computer.**

| In # | Expenditure Items   |                      |                      |
|------|---|----------------------|----------------------|
|      | <b>Welfare</b>  |                      |                      |
| 15   | Amt. Subject to Welfare Contribution  | <input type="text"/> |                      |
| 16   | City Contribution Rate (see B.S.S.A 84-1001)                                      | <input type="text"/> |                      |
| 17   | Total Welfare Expenditures (In 15 X In 16)  |                      | <input type="text"/> |
|      | <b>Salaries</b>   |                      |                      |
| 18   | Employee #1 _____   | <input type="text"/> |                      |
| 19   | Employee #2 _____   | <input type="text"/> |                      |
| 20   | Employee #3 _____   | <input type="text"/> |                      |
| 21   | Employee #4 _____   | <input type="text"/> |                      |
| 22   | Employee #5 _____   | <input type="text"/> |                      |
| 23   | Employee #6 _____   | <input type="text"/> |                      |
| 24   | Employee #7 _____   | <input type="text"/> |                      |
| 25   | Employee #8 _____   | <input type="text"/> |                      |
| 26   | Employee #9 _____   | <input type="text"/> |                      |
| 27   | Employee #10 _____  | <input type="text"/> |                      |
| 28   | Total Salaries (sum In 18 through In 27)  |                      | <input type="text"/> |
|      | <b>Bond Payments</b>  |                      |                      |
| 29   | Total Amount of Bonds When Issued   | <input type="text"/> |                      |
| 30   | Number of Payments  | 6                    |                      |
| 31   | Total Bond Pymt. Expenditures (In 29 ÷ In 30)                                     |                      | <input type="text"/> |
|      | <b>Checks</b>   |                      |                      |
| 32   | Check #1 _____  | <input type="text"/> |                      |
| 33   | Check #2 _____  | <input type="text"/> |                      |
| 34   | Check #3 _____  | <input type="text"/> |                      |
| 35   | Check #4 _____  | <input type="text"/> |                      |
| 36   | Check #5 _____  | <input type="text"/> |                      |
| 37   | Check #6 _____  | <input type="text"/> |                      |
| 38   | Check #7 _____  | <input type="text"/> |                      |
| 39   | Check #8 _____  | <input type="text"/> |                      |
| 40   | Check #9 _____  | <input type="text"/> |                      |
| 41   | Check #10 _____   | <input type="text"/> |                      |
| 42   | Total Check Exp. (sum In 32 through In 41)  |                      | <input type="text"/> |
| 43   | <b>Total Expenditures</b> (In. 17 + In 28 + In 31 + In 42)                        |                      | <input type="text"/> |
|      | <b>Total Carried Forward to Next Day</b> (Prev. Balance + Revenue - Expenditures) |                      | <input type="text"/> |

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