

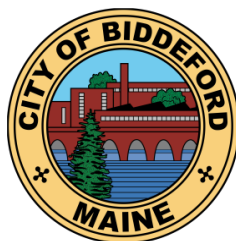
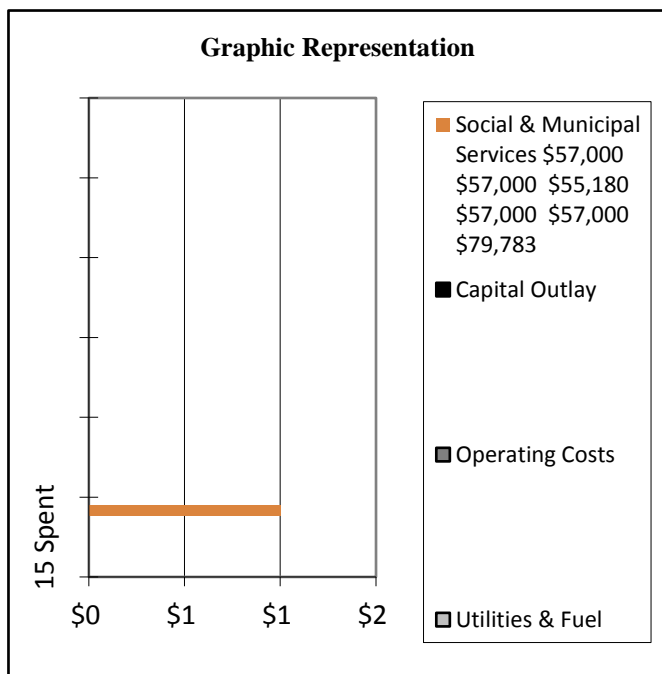
# City of Biddeford, Maine

FY2018

## Budget: Social Services

Account Number: 21127

	FY15	FY16	FY16	FY17	FY17	FY2018		
	Spent	Budget	Spent	Budget	Yr to Date Spent thru 3/1/2017	Dept Head	Manager's Rec	City Council Rec
Personnel Services:	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Purchased Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Utilities & Fuel	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Operating Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Capital Outlay	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Social & Municipal Services	\$57,000	\$57,000	\$55,180	\$57,000	\$57,000	\$79,783	\$57,000	
<b>TOTALS:</b>	<b>\$57,000</b>	<b>\$57,000</b>	<b>\$55,180</b>	<b>\$57,000</b>	<b>\$57,000</b>	<b>\$79,783</b>	<b>\$57,000</b>	<b>\$0</b>



Total Fringe Benefit Impact

<b>FRINGE BENEFIT IMPACT (Estimated):</b>	
FICA	\$0
Workers Comp	\$0
Health Insurance	\$0
Retirement	\$0
Unemployment	\$0
Other Insurance	\$0
# of Full Time Employees	-
<b>Total Fringe Benefit Impact</b>	<b>\$0</b>

	FY17 Budget	FY18 Manager's Rec	Dollar Change	Percentage Change
Personal Services:	\$0	\$0	\$0	N/A
Purchased Services	\$0	\$0	\$0	N/A
Utilities & Fuel	\$0	\$0	\$0	N/A
Operating Costs	\$0	\$0	\$0	N/A
Capital Outlay	\$0	\$0	\$0	N/A
Social & Municipal Services	\$57,000	\$57,000	\$0	\$0
<b>TOTALS:</b>	<b>\$57,000</b>	<b>\$57,000</b>	<b>\$0</b>	<b>0.0%</b>

## FY2018 Social &amp; Municipal Services

Account Number	Description	FY145 Spent	FY16 Budget	FY16 Spent	FY17 Budget	FY17 Yr to Date Spent	FY2018	
							Dept Head	Mgr's Rec
60800	All Social Services Budget Exp	\$0	\$0	\$0	\$0	\$0	\$0	\$57,000
60801	So ME Agency on Aging	\$1,500	\$1,500	\$1,500	\$0	\$0	\$0	\$0
60802	Counseling Services, Inc.	\$0	\$0	\$0	\$0	\$0	\$0	\$0
60803	Caring Unlimited	\$3,500	\$6,020	\$6,020	\$6,000	\$6,000	\$6,383	\$0
60805	Kids Free to Grow	\$0	\$500	\$500	\$0	\$0	\$1,000	\$0
60806	Stone Soup Food Pantry	\$0	\$0	\$0	\$5,000	\$5,000	\$5,000	\$0
60808	Maine Behavioral Healthcare	\$1,500	\$1,500	\$1,500	\$0	\$0	\$0	\$0
60811	Bon Appetit Soup Kitchen	\$15,070	\$17,500	\$17,500	\$15,000	\$15,000	\$20,000	\$0
60815	Friends of Community Action	\$0	\$0	\$0	\$10,000	\$10,000	\$20,000	\$0
60816	Emergency Apartment Rent	\$0	\$5,780	\$3,960	\$0	\$0	\$0	\$0
60817	Home Health Visiting Nurses	\$5,000	\$5,000	\$5,000	\$2,000	\$2,000	\$2,000	\$0
60819	The Maine Way, Inc.	\$10,560	\$0	\$0	\$0	\$0	\$0	\$0
60820	Biddeford Free Clinic	\$2,000	\$0	\$0	\$0	\$0	\$0	\$0
60821	Community Partners, Inc.	\$0	\$0	\$0	\$0	\$0	\$0	\$0
60823	In A Pinch Program	\$4,000	\$5,000	\$5,000	\$8,000	\$8,000	\$8,000	\$0
60824	Day One	\$1,000	\$1,200	\$1,200	\$1,200	\$1,200	\$1,400	\$0
60826	Coummunity Bicycle Center	\$4,000	\$4,000	\$4,000	\$2,000	\$2,000	\$4,000	\$0
60827	Seeds of Hope Neighborhood C	\$8,870	\$9,000	\$9,000	\$7,800	\$7,800	\$12,000	\$0
60866	#N/A							
<b>Totals</b>		<b>\$57,000</b>	<b>\$57,000</b>	<b>\$55,180</b>	<b>\$57,000</b>	<b>\$57,000</b>	<b>\$79,783</b>	<b>\$57,000</b>



## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: All Social Services Budget Exp

Department Number:           21127

Account Number:           60800

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$0.00	\$0.00	\$0.00	\$0.00	

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
		\$57,000.00		\$57,000.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.



## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: So ME Agency on Aging

Department Number: 21127

Account Number: 60801

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$1,500.00	\$1,500.00	\$1,500.00	\$0.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$0.00			\$0.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

Southern Maine Agency on Aging receives CDBG Funds from the City



## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: Counseling Services, Inc.

Department Number:           21127

Account Number:           60802

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$0.00			\$0.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

Nothing requested



## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: Caring Unlimited

Department Number:           21127

Account Number:           60803

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$3,500.00	\$6,020.00	\$6,020.00	\$6,000.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$6,383.00			\$383.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.



## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: Kids Free to Grow

Department Number:           21127

Account Number:           60805

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$0.00	\$500.00	\$500.00	\$0.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$1,000.00			\$1,000.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.



## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: Stone Soup Food Pantry

Department Number:           21127

Account Number:           60806

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$0.00	\$0.00	\$0.00	\$5,000.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$5,000.00			\$0.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.





## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: Bon Appetit Soup Kitchen

Department Number:           21127

Account Number:               60811

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$15,070.00	\$17,500.00	\$17,500.00	\$15,000.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$20,000.00			\$5,000.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.



## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: Friends of Community Action

Department Number: 21127

Account Number: 60815

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$0.00	\$0.00	\$0.00	\$10,000.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$20,000.00			\$10,000.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.



## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: Emergency Apartment Rent

Department Number: 21127

Account Number: 60816

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$0.00	\$5,780.00	\$3,960.00	\$0.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$0.00			\$0.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

City no longer maintains an emergency apartment



## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: Home Health Visiting Nurses

Department Number: 21127

Account Number: 60817

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$5,000.00	\$5,000.00	\$5,000.00	\$2,000.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$2,000.00			\$0.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

Formerly known as Home Health Visiting Nurses



## Fiscal Year 2018 Budget Request

April 14, 2017

Department: Social Services

Account Title: The Maine Way, Inc.

Department Number: 21127

Account Number: 60819

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$10,560.00	\$0.00	\$0.00	\$0.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$0.00			\$0.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

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## Fiscal Year 2018 Budget Request

April 14, 2017

Department: Social Services

Account Title: Biddeford Free Clinic

Department Number: 21127

Account Number: 60820

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$2,000.00	\$0.00	\$0.00	\$0.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$0.00			\$0.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

Biddeford Free Clinic is not longer open



## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: Community Partners, Inc.

Department Number:            21127

Account Number:            60821

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
				\$0.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.



## Fiscal Year 2018 Budget Request

April 14, 2017

Department: Social Services

Account Title: In A Pinch Program

Department Number: 21127

Account Number: 60823

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$4,000.00	\$5,000.00	\$5,000.00	\$8,000.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$8,000.00			\$0.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

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## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: Day One

Department Number: 21127

Account Number: 60824

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$1,000.00	\$1,200.00	\$1,200.00	\$1,200.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$1,400.00			\$200.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.



## Fiscal Year 2018 Budget Request

April 14, 2017

**Department:** Social Services

Account Title: Coummunity Bicycle Center

Department Number:           21127

Account Number:               60826

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$4,000.00	\$4,000.00	\$4,000.00	\$2,000.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$4,000.00			\$2,000.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.



## Fiscal Year 2018 Budget Request

April 14, 2017

Department: Social Services

Account Title: Seeds of Hope Neighborhood Ctr

Department Number: 21127

Account Number: 60827

FY2015 Actual	FY 2016 Budget	FY 2016 Actual	FY 2017 Budget	FY 2017 Est. Expended
\$8,870.00	\$9,000.00	\$9,000.00	\$7,800.00	\$0.00

FY-2018 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$12,000.00			\$4,200.00

**Support for Budget Request:** Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

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