

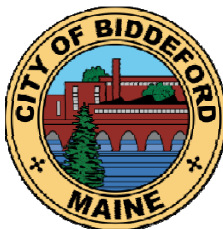
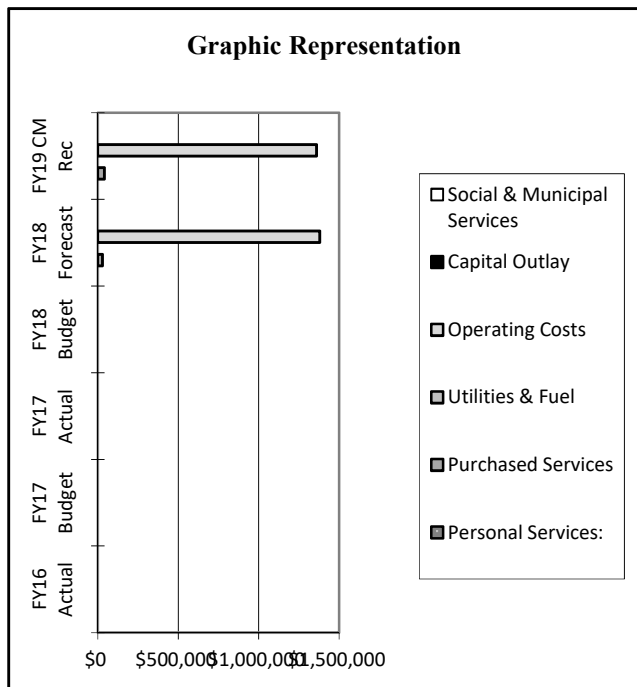
City of Biddeford, Maine

FY2019

Budget: Ambulance Fund

Account Number: 32491

	FY16 Actual	FY17 Budget	FY17 Actual	FY18 Budget	FY18 YTD	FY19	
						Dept Head	Manager's Rec
Personnel Services:	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Purchased Services	\$0	\$0	\$0	\$0	\$27,704	\$40,000	\$40,000
Utilities & Fuel	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Operating Costs	\$0	\$0	\$0	\$0	\$1,380,000	\$1,360,000	\$1,360,000
Capital Outlay	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Social & Municipal Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTALS:	\$0	\$0	\$0	\$0	\$1,407,704	\$1,400,000	\$1,400,000



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

	FY18 Budget	FY19 Manager's Rec	Dollar Change	Percentage Change
Personal Services:	\$0	\$0	\$0	N/A
Purchased Services	\$0	\$40,000	\$40,000	#DIV/0!
Utilities & Fuel	\$0	\$0	\$0	N/A
Operating Costs	\$0	\$1,360,000	\$1,360,000	#DIV/0!
Capital Outlay	\$0	\$0	\$0	N/A
Social & Municipal Services	\$0	\$0	\$0	N/A
TOTALS:	\$0	\$1,400,000	\$1,400,000	#DIV/0!

Purchased Services

Account Number	Description	FY16	FY17	FY17	FY18	FY18	FY19	
		Actual	Budget	Actual	Budget	YTD 02/28/18	Dept Head	Mgr's Rec
60310	Service Contracts	\$0	\$0	\$0	\$0	\$27,704	\$40,000	\$40,000
Totals		\$0	\$0	\$0	\$0	\$27,704	\$40,000	\$40,000

Other Operating Costs

Account Number	Description	FY16	FY17	FY17	FY18	FY18	FY19	
		Actual	Budget	Actual	Budget	YTD 02/28/18	Dept Head	Mgr's Rec
60701	Bad Debt	\$0	\$0	\$0	\$0	\$280,000	\$260,000	\$260,000
60799	Transfer Out	\$0	\$0	\$0	\$0	\$1,100,000	\$1,100,000	\$1,100,000
Totals		\$0	\$0	\$0	\$0	\$1,380,000	\$1,360,000	\$1,360,000



Fiscal Year 2019 Budget Request

March 9, 2018

Department: Ambulance Fund

Account Title: Service Contracts

Department Number: 32491

Account Number: 60310

FY2016 Actual	FY 2017 Budget	FY 2017 Actual	FY 2018 Budget	FY 2018 Est. Expended
\$0.00	\$0.00	\$0.00	\$0.00	\$40,000.00

FY-2019 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$40,000.00	\$40,000.00		\$40,000.00

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 2019 Budget Request

March 9, 2018

Department: Ambulance Fund

Account Title: Bad Debt

Department Number: 32491

Account Number: 60701

FY2016 Actual	FY 2017 Budget	FY 2017 Actual	FY 2018 Budget	FY 2018 Est. Expended
\$0.00	\$0.00	\$0.00	\$0.00	\$280,000.00

FY-2019 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$260,000.00	\$260,000.00		\$260,000.00

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 2019 Budget Request

March 9, 2018

Department: Ambulance Fund

Account Title: Transfer Out

Department Number: 32491

Account Number: 60799

FY2016 Actual	FY 2017 Budget	FY 2017 Actual	FY 2018 Budget	FY 2018 Est. Expended
\$0.00	\$0.00	\$0.00	\$0.00	\$1,100,000.00

FY-2019 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	\$1,100,000.00	\$1,100,000.00		\$1,100,000.00

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.
