FORM OR-LB-1

NOTICE OF BUDGET HEARING

Oregon Department of Revenue

Arlington City Hall 500 West First St. Arlington OR Coatcol) Coatcol) Coatcol) Coatcol	A public meeting of the North Gilliam Co Health Dist (Governing body) will be held		on June 18, 20 (Date)	24 _at6:00 a	.m. at
Secretary Sec		dinatan OD	, ,	م رت	.m.
the budget is presented below. A copy of the budget may be inspected or obtained at 110 On The Mail St Arlington, OR (Street address)		, O	regon. The purpose	of this meeting is to dis	cuss the budget for the
	fiscal year beginning July 1, 2024 as approv			alth Dist Budget Co	mmittee. A summary o
between the hours of _8:30 _ a.m., and _4:00 _ p.m., or online atNGCHealth.org The budget is for an ⊠ annual; ☐ blennial budget period. This budget was prepared on a basis of accounting that is: ☒ the same as; [] the same	the budget is presented below. A copy of the b	udget may be inspe	ected or obtained at		
budget is for an ⊠ annual; □ biennial budget period. This budget was prepared on a basis of accounting that is: ☒ the same as; ☐ the same as					ess)
Contact Carrie Schadewitz FINANCIAL SUMMARY—RESOURCES Actual Amounts This Year: 20, 23, -20, 24 Next Year: 20, 24, -20, 25 Next	between the hours of	8:30 a.m., and	4:00 p.m., or onli	ne atNGCHe	ealth.org This
Contact Telephone number St41-454-2888 administrator@NGCHealth.org	budget is for an ⊠ annual; ☐ biennial budget p	period. This budget v	was prepared on a b	asis of accounting that	is: 🗵 the same as; 🗌
Carrie Schadewitz	different than the preceding year. If different, the	e major changes and	I their effect on the b	udget are:	
Segment Segm	Contact	Telephone number	Į.	-mail	
Actual Amounts	Carrie Schadewitz 541-454-288				
1. Beginning Fund Balance/Net Working Capital 20 22 -20 23		FINANCIAL SUMMA	RY-RESOURCES	· · · · · · · · · · · · · · · · · · ·	
1. Beginning Fund Balance/Net Working Capital	TOTAL OF ALL FUNDS		Actual Amounts 20_22 _20_23	Adopted Budget This Year: 20 23 -20 24	Approved Budget Next Year: 20 24 –20 25
2. Fees, Licenses, Permits, Fines, Assessments & Other Service Charges 3. Federal, State & all Other Grants, Gifts, Allocations & Donations			694,871		
4. Revenue from Bonds & Other Debt					
5. Interfund Transfers/Internal Service Reimbursements	· · · · · · · · · · · · · · · · · · ·				10,000
6. All Other Resources Except Current Year Property Taxes			0	0	0
7. Current Year Property Taxes Estimated to be Received			454 400		
8. Total Resources — add lines 1 through 7					
FINANCIAL SUMMARY - REQUIREMENTS BY OBJECT CLASSIFICATION					
9. Personnel Services					2,054,000
10. Materials and Services		TEGORIEME			1 222 000
11. Capital Outlay					
12. Debt Service					
14. Contingencies 570,540 401,973 15. Special Payments 16. Unappropriated Ending Balance and Reserved for Future Expenditure 17. Total Requirements – add lines 9 through 16 1,073,031 2,113,234 2,054,000 FINANCIAL SUMMARY – REQUIREMENTS AND FULL-TIME EQUIVALENT EMPLOYEES (FTE) BY ORGANIZATIONAL UNIT OR PROGRAM* Name of Organizational Unit or Program FTE for Unit or Program Name 776,103 1,172,150 1,232,990 FTE 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	101,100	52,304
15. Special Payments	13. Interfund Transfers				
15. Special Payments				570,540	401.972
17. Total Requirements—add lines 9 through 16	15. Special Payments				
FINANCIAL SUMMARY—REQUIREMENTS AND FULL-TIME EQUIVALENT EMPLOYEES (FTE) BY ORGANIZATIONAL UNIT OR PROGRAM* Name of Organizational Unit or Program FTE for Unit or Program Name FTE 7 7 7 8 Name FTE Name FTE Name FTE Name FTE Name 7 FTE Name 8 FTE Name 7 FTE Name 8 FTE Ram					
Name of Organizational Unit or Program	TIMANCIAL CHANA BY TECHNOLOGY 16		1,073,031	2,113,234	2,054,000
Name	FINANCIAL SUMMARY—REQUIREMENTS AND F	ULL-TIME EQUIVALE	NT EMPLOYEES (FTE) BY ORGANIZATIONAL	UNIT OR PROGRAM*
Name 776,103 1,172,150 1,232,990 FTE 7 7 7 Name FTE		am			
FTE 7 7 7 8 Name FTE Name FTE Name FTE Name FTE Name FTE Name FTE			770 400	4 450 450	<u> </u>
Name FTE Name FTE Name FTE 150-504-064 (Rev 11-10-11)			776,103	1,172,150	1,232,990
FTE Name FTE Name / FTE 150-504-064 (Rev 11-10-11)					8
FTE // / FTE // / / FTE // / / / / / / / / / / / / / / / / /					
Name / / FTE / / / / / / / / / / / / / / / / / / /					
FTE 150-504-064 (Rev. 11-10-31)	FTE				
150-504-064 (Pay 11-10-31)	Name				
150-504-064 (Rev. 11-19-21)	FTE				
	150-504-064 (Rev. 11-19-21)				20.18.4

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