

**FORM  
LB-20**

**RESOURCES  
General Fund  
(Fund)**

North Gilliam County Health District

	Historical Data			RESOURCE DESCRIPTION	Budget for Next Year 2024-2025		
	Actual		Adopted Budget This Year 2023- 2024		Proposed By Budget Officer	Approved By Budget Committee	Adopted By Governing Body
	2021-2022	First Preceding Year 2022-2023					
1	\$508,773.00	\$864,638.27	\$620,087.00	1. Available Cash on Hand *Cash Bases	\$715,000.00	\$715,000.00	
2	\$722,225.00	\$779,175.27	\$19,086.82	2. Previousley Levied Taxes estimated to be received	\$15,000.00	\$15,000.00	
3	\$3,544.00	\$6,000.00	\$6,000.00	3. Interest	\$20,000.00	\$20,000.00	
4				4			
5				5			
6				6 OTHER RESOURCES			
7	0	0	0	7			
8	\$251,865.21	\$252,016.63	\$250,000.00	8 Supplemental Income Payment SIP	\$250,000.00	\$250,000.00	
9	\$17,260.00	\$15,240.00	\$16,000.00	9 Rent Offset	\$11,000.00	\$11,000.00	
10	\$1,350.03	\$238.86	\$2,000.00	10 Pharmacy	\$500.00	\$500.00	1
11	\$73,164.67	\$81,135.05	\$70,000.00	11 Clinic Patient Fees	\$85,000.00	\$85,000.00	1
12	\$81,843.33	\$69,543.45	\$80,000.00	12 Ambulance Service Fees	\$60,000.00	\$60,000.00	1
13	\$1,000.00	\$685.00	\$500.00	13 Donations	\$500.00	\$500.00	1
14	\$0.00	\$0.00	\$10,000.00	14 Grants	\$10,000.00	\$10,000.00	1
15	\$2,560.00	\$1,695.00	\$1,880.00	15 Tri County Ambulance	\$2,000.00	\$2,000.00	1
16	\$5,502.01	\$4,546.69	\$3,000.00	16 Training	\$3,000.00	\$3,000.00	1
17	\$8,048.11	\$0.00	\$0.00	17 Misc	\$3,000.00	\$3,000.00	1
18				18			1
19				19			1
20				20			2
21				21			2
22				22			2
23				23			2
24				24			2
25				25			2
26				26			2
27				27			2
28				28			2
29	\$1,677,135.36	2074914.22	\$1,837,689.77	29 Total Resources, Except taxes to be levied	\$1,175,000.00	\$1,175,000.00	0
30				30 Taxes estimated to be received	\$879,000.00	\$879,000.00	3
31				31			3
<b>32</b>	<b>\$1,677,135.36</b>	<b>\$2,074,914.22</b>	<b>\$1,837,689.77</b>	<b>32. TOTAL RESOURCES</b>	<b>\$2,054,000.00</b>	<b>\$2,054,000.00</b>	<b>0</b>

\*Includes ending balance from prior year

# DETAILED REQUIREMENTS

FORM  
LB-31

## North Gilliam County Health District General Fund Part 1

	Historical Data			REQUIREMENTS FOR North Gilliam County Health District	Number of Employees	Range*	Budget Year 2024-2025		
	Actual		Adopted Budget				Proposed by Budget Officer	Approved by Budget Committee	Adopted by Governing Body
	Second Preceding 2021-2022	First Preceding 2022-2023	This Year 2023-2024						
1				<b>1 OBJECT CLASSIFICATION</b>					
				<b>DETAIL</b>					
2	\$22,930.97	\$29,635.73	\$35,000.00	2 Material / Services Insurance			\$39,000.00	\$39,000.00	
3				3					
4	\$1,162.83	\$0.00	\$500.00	4 Election Expenses			\$500.00	\$500.00	
5	\$45,107.33	\$16,961.88	\$12,000.00	5 Attorney Fees			\$13,000.00	\$13,000.00	
6	\$8,688.48	\$20,439.54	\$12,000.00	6 Office Supplies			\$15,000.00	\$15,000.00	
7	\$4,479.39	\$5,048.23	\$6,000.00	7 Telephone			\$7,000.00	\$7,000.00	
8	\$1,620.02	\$1,585.35	\$1,500.00	8 IT Supplies			\$2,500.00	\$2,500.00	
9	\$240.00	\$6,560.02	\$6,000.00	9 Board of Directors Expense			\$3,000.00	\$3,000.00	
10	\$327.38	\$0.00	\$1,000.00	10 Publishing			\$1,000.00	\$1,000.00	
11	\$2,456.93	\$5,385.38	\$5,000.00	11 Pharmacy			\$6,000.00	\$6,000.00	
12	\$9,862.13	\$9,008.19	\$12,000.00	12 Clinic Maintenance			\$12,000.00	\$12,000.00	
13	\$610.81	\$8,721.70	\$12,000.00	13 Minor Expenses			\$12,000.00	\$12,000.00	
14	\$0.00	\$0.00	\$2,000.00	14 Equipment, Safety			\$2,000.00	\$2,000.00	
15	\$759.71	\$657.72	\$1,000.00	15 Gases (Oxygen)			\$1,000.00	\$1,000.00	
16									
17				17					
18	\$4,766.26	\$3,857.88	\$8,000.00	18 Dues			\$6,000.00	\$6,000.00	
19	\$211.92	\$1,809.30	\$4,000.00	19 Books & Periodicals			\$4,000.00	\$4,000.00	
20	\$15,086.30	\$19,154.88	\$18,000.00	20 Utilities			\$23,000.00	\$23,000.00	
21	\$21,492.25	\$10,904.51	\$30,000.00	21 Medical Supplies			\$30,000.00	\$30,000.00	
22	\$0.00	\$0.00	\$800.00	22 Vaccinations			\$800.00	\$800.00	
23	\$6,347.78	\$2,192.00	\$12,000.00	23 Training			\$0.00	\$0.00	
24	\$742.31	\$4,590.95	\$3,500.00	24 Travel Reimbursement			\$5,000.00	\$5,000.00	
25	\$2,159.30	\$1,195.78	\$4,000.00	25 Meals			\$0.00	\$0.00	
26	\$345.30	\$918.46	\$2,000.00	26 Misc			\$2,000.00	\$2,000.00	
27				27					
28				28					
29				29					
30				30 Total Fulltime Equivalent (FTE)					
31				31 Ending balance (prior years)					
32				32 UNAPPROPRIATED ENDING FUND BALANCE					
33	\$149,397.40	\$148,627.50	\$188,300.00	<b>33 TOTAL REQUIREMENTS</b>			\$184,800.00	\$184,000.00	0 33

\*Include schedule of pay ranges

## Detailed Requirements

General Fund Part 1a

(Fund)

Historical data			Adopted budget this year 20 <sup>23</sup> - <sub>24</sub>	Requirements for <u>N. Gilliam Co Healt D</u> (Name of program or organizational unit)	Budget for next year 20 <sup>24</sup> - <sub>25</sub>		
Actual		Proposed by Budget Officer			Approved by Budget Committee	Adopted by Governing Body	
Second preceding year 20 <sup>21</sup> - <sub>22</sub>	First preceding year 20 <sup>22</sup> - <sub>23</sub>						
1			1	Object Classification Detail			1
2	2,062.73	2749.00	8000.00	2 Material Services Ambulance Station Mainta	\$8,000.00	\$8,000.00	2
3	11,764.53	13176.52	20000.00	3 Ambulance Maint Fuel	\$20,000.00	\$20,000.00	3
4	5,096.04	12662.78	6000.00	4 Ambulance Supplies	\$6,000.00	\$6,000.00	4
5		46147.74	100.00	5 Ambulance Loan Principle	\$48,000.00	\$48,000.00	5
6	3694.37	28.72	0	6 Ambulance Interest	\$15,600.00	\$15,600.00	6
7			0	7 Stryker EQ Payment	\$12,154.00	\$12,154.00	7
8	220.00	1366.00	2000.00	8 Uniforms	\$4,000.00	\$4,000.00	8
9	232.62	84.35	2000.00	9 Volunteers\ EQ\Clothing	0		9
10				10			10
11	6890.21	9535.33	15000.00	11 Community Relations	\$15,000.00	\$15,000.00	11
12	365.09	71.06	6000.00	12 EMS / Community Educati	\$1,000.00	\$1,000.00	12
13	81.00	3254.23	2000.00	13 Advertising	\$2,000.00	\$2,000.00	13
14	0	0	6000.00	14 Scholarships	\$3,000.00	\$3,000.00	14
15	30.00	88.49	1500.00	15 Donations	\$1,500.00	\$1,500.00	15
16	10316.31	0	0	16 Health Emegency	0	0	16
17	0	0	0	17 Administrators Discretion	\$5,000.00	\$5,000.00	17
18				18			18
19				19			19
20	40752.90	89,164.22	68,600.00	20 General Fund 1a	\$141,254.00	\$141,254.00	20
21				21			21
22				22 From General Fund Part 1	\$184,800.00	\$184,800.00	22
23				23			23
24				24			24
25				25			25
26				26			26
27				27			27
28				28			28
29				29			29
30				30 Total full time equivalent (FTE)*			30
31				31 Ending balance (prior years)			31
32				32 Unappropriated ending fund balance			32
33				33 Total requirements	\$326,054.00	\$326,054.00	33

## Detailed Requirements

General Fund Part 2

(Fund)

Historical data			Adopted budget this year 20 <sup>23</sup> _24	Requirements for <u>N Gilliam Co Health D</u> (Name of program or organizational unit)	Budget for next year 20 <sup>24</sup> _25		
Actual		Proposed by Budget Officer			Approved by Budget Committee	Adopted by Governing Body	
Second preceding year 20 <sup>21</sup> _22	First preceding year 20 <sup>22</sup> _23						
1			1	Object Classification Detail			1
2	179,608.92	114,653.71	147,000.00	2 Personnel Services Administrative Services	\$178,000.00	\$178,000.00	2
3	38,377.77	47,172.78	96,750.00	3 Payroll Taxes	\$96,750.00	\$96,750.00	3
4	223,498.63	227,660.21	394,640.00	4 Medical Providers	\$414,640.00	\$414,640.00	4
5	119,341.20	119,498.96	195,360.00	5 Employee Benefits	\$160,000.00	\$160,000.00	5
6	24,775.46	39,680.27	45,000.00	6 Employee Retirement PERS EE	\$45,000.00	\$45,000.00	6
7	16,778.95	10,303.57	20,000.00	7 AMB Vol Stipends	0	0	7
8	3,292.73	4,779.14	0	8 Payroll Expenses	0	0	8
9	59,395.20	40,194.69	77,000.00	9 NGM Admin Assistant	0	0	9
10	363.00	2,076.75	1,500.00	10 License	\$2,500.00	\$2,500.00	10
11	6,756.75	4,863.32	10,000.00	11 Employee Education	\$12,000.00	\$12,000.00	11
12	0	75,998.27	92,800.00	12 NGM Chief	0	0	12
13	0	29,915.53	30,000.00	13 NGM Driver	0	0	13
14			0	14 EMS Administrative Services	\$178,000.00	\$178,000.00	14
15			0	15 EMS Drivers & Parttime on Call	\$80,000.00	\$80,000.00	15
16				16			16
17				17			17
18				18 Contracted Services			18
19				19			19
20	11,650.00	12,000.00	12,000.00	20 Auditor   Other Service	\$13,000.00	\$13,000.00	20
21	0	1,534.35	100.00	21 Misc   Other	\$100.00	\$100.00	21
22	4,408.24	3,398.30	4,000.00	22 Billing Services	\$4,500.00	\$4,500.00	22
23	32,252.68	34,344.41	34,000.00	23 IT Services	\$35,000.00	\$35,000.00	23
24	0	1,404.59	6,000.00	24 Paychex	\$7,000.00	\$7,000.00	24
25	5,925.00	9,645.00	6,000.00	25 Medical Director   Other Services	\$6,500.00	\$6,500.00	25
26	\$54,235.92	\$62,326.65	\$62,100.00	26 Subtotal*****	\$66,100.00	\$66,100.00	26
27				27			27
28	726,424.53	779,123.86	1,172,150.00	28	\$1,232,990.00	\$1,232,990.00	28
29				29			29
30				30 Total full time equivalent (FTE)*			30
31				31 Ending balance (prior years)			31
32				32 Unappropriated ending fund balance			32
33	726,424.53	779,123.86	1,172,150.00	33 Total requirements	\$1,232,990.00	\$1,232,990.00	33

## Detailed Requirements

### General Fund Part 3

(Fund)

Historical data			Requirements for <u>N Gilliam Co Health D</u> (Name of program or organizational unit)	Budget for next year 20 <sup>24</sup> - <sup>25</sup>			
Actual		Adopted budget this year 20 <sup>23</sup> - <sup>24</sup>		Proposed by Budget Officer	Approved by Budget Committee	Adopted by Governing Body	
Second preceding year 20 <sup>21</sup> - <sup>22</sup>	First preceding year 20 <sup>22</sup> - <sup>23</sup>						
1			1	Object Classification   Detail			1
2			2				2
3			3	Capital Outlay			3
4			4				4
5			5	District Phone System	\$2,200.00	\$2,200.00	5
6			6	District Computers	\$5,500.00	\$5,500.00	6
7			7	Clinic 12 Lead EKG Machine	\$3,700.00	\$3,700.00	7
8			8	Clinic Paint / Flooring Install	\$35,240.00	\$35,240.00	8
9			9	EMS Powerload	\$29,584.00	\$29,584.00	9
10			10	EMS Lucas CPR Machine	\$16,760.00	\$16,760.00	10
11			11				11
12			12				12
13			13	General Fund Part 3 Subtotal *****	\$92,984.00	\$92,984.00	13
14			14				14
15			15				15
16			16	Object Classification   Detail			16
17			17				17
18			18				18
19			19				19
20			20				20
21			21				21
22			22				22
23			23				23
24			24				24
25			25				25
26			26				26
27			27				27
28			28				28
29			29				29
30			30	Total full time equivalent (FTE)*			30
31			31	Ending balance (prior years)			31
32			32	<b>Unappropriated ending fund balance</b>			32
33			33	<b>Total requirements</b>	<b>\$92,984.00</b>	<b>\$92,984.00</b>	33

\*When budgeting for personnel services expenditures, include number of related FTE positions.

## Detailed Requirements

### General Fund Part 4

(Fund)

Historical data			Requirements for <u>N Gilliam Co Health D</u> (Name of program or organizational unit)	Budget for next year 20 <sup>24</sup> - <sup>25</sup>			
Actual		Adopted budget		Proposed by Budget Officer	Approved by Budget Committee	Adopted by Governing Body	
Second preceding year 20 <sup>21</sup> - <sup>22</sup>	First preceding year 20 <sup>22</sup> - <sup>23</sup>	this year 20 <sup>23</sup> - <sup>24</sup>					
1			1			1	
2			2			2	
3			3			3	
4	311,550.00	302,300.00	266,444.00	4	\$326,054.00	\$326,054.00	4
5	959,237.00	1,056,050.00	1,276,250.00	5	\$1,232,990.00	\$1,232,990.00	5
6	520,000.00	506,621.00	570,540.00	6	\$92,984.00	\$92,984.00	6
7				7			7
8	1,790,787.00	\$1,864,971.00	\$2,113,234.00	8	\$1,652,028.00	\$1,652,028.00	8
9				9			9
10				10			10
11				11			11
12				12			12
13				13			13
14				14			14
15				15			15
16				16			16
17				17			17
18				18			18
19				19	CONTINGENCY FUND TRANSFERS		19
20				20			20
21	\$100,000.00	\$200,000.00	\$300,000.00	21	\$200,000.00	\$200,000.00	21
22	\$130,000.00	\$46,621.00	\$125,540.00	22	\$38,236.00	\$38,236.00	22
23	\$80,000.00	\$110,000.00	\$45,000.00	23	\$35,448.00	\$35,448.00	23
24	\$180,000.00	\$150,000.00	\$100,000.00	24	\$128,288.00	\$128,288.00	24
25				25			25
26				26	\$401,972.00	\$401,972.00	26
27				27			27
28				28			28
29				29			29
30	\$490,000.00	\$506,621.00	\$570,540.00	30	Total full time equivalent (FTE)*		30
31				31	Ending balance (prior years)		31
32				32	\$401,972.00	\$401,972.00	32
33				33	Total requirements		33

**Form  
OR-LB-11**

**Reserve Fund  
Resources and Requirements**

Year this reserve fund will be reviewed to be continued or abolished.  
Date can't be more than 10 years after establishment.

This fund is authorized and established by resolution / ordinance number \_\_\_\_\_, on (date) \_\_\_\_\_ for the following specified purpose: \_\_\_\_\_

District Building Fund  
(Fund)

Review year: 2025

North Gilliam County Health District  
(Name of Municipal Corporation)

1	Historical data			1	Description resources and requirements	Budget for next year 20__ - __			1
	Actual		Adopted budget year 20__ - __			Proposed by Budget Officer	Approved by Budget Committee	Adopted by Governing Body	
	Second preceding year 20__ - __	First preceding year 20__ - __							
2				2	Cash on hand* (cash basis), or	0			2
3				3	Working capital (accrual basis)				3
4				4	Previously levied taxes estimated to be received				4
5				5	Interest				5
6				6	Transferred in from other funds	200,000.00			6
7				7					7
8				8					8
9				9					9
10				10	Total resources, except taxes to be levied	200,000.00			10
11				11	Taxes estimated to be received				11
12				12	Taxes collected in year levied				12
13				13	<b>Total resources</b>	200,000.00			13
14				14	<b>Requirements**</b>				14
15				15	Org unit or prog & activity				15
16				16	Object classification				16
17				17	Detail				17
18				18	Capital Outlay				18
19				19	Reserve				19
20				20	For Future Expenditures	\$200,000.00			20
21				21					21
22				22					22
23				23					23
24				24					24
25				25					25
26				26					26
27				27					27
28				28					28
29				29	Ending balance (prior years)				29
30				30	<b>Unappropriated ending fund balance</b>				30
31				31	<b>Total requirements</b>				31

150-504-011 (Rev. 11-16)

\*The balance of cash, cash equivalents and investments in the fund at the beginning of the budget year.

\*\*List requirements by organizational unit or program, activity, object classification, then expenditure detail. If the requirement is "not allocated", then list by object classification and expenditure detail.

**Form  
OR-LB-11**

**Reserve Fund  
Resources and Requirements**

Year this reserve fund will be reviewed to be continued or abolished.  
Date can't be more than 10 years after establishment.

This fund is authorized and established by resolution / ordinance number \_\_\_\_\_, on (date) \_\_\_\_\_ for the following specified purpose: \_\_\_\_\_

District Contingency  
(Fund)

Review year: 2025

North Gilliam County Health District  
(Name of Municipal Corporation)

	Historical data			Description resources and requirements	Budget for next year 20 <u>24</u> - <u>25</u>			
	Actual		Adopted budget year 20 <u>23</u> - <u>24</u>		Proposed by Budget Officer	Approved by Budget Committee	Adopted by Governing Body	
	Second preceding year 20 <u>21</u> - <u>22</u>	First preceding year 20 <u>22</u> - <u>23</u>						
1			1	<b>Resources</b>				1
2			2	Cash on hand* (cash basis), or	0			2
3			3	Working capital (accrual basis)				3
4			4	Previously levied taxes estimated to be received				4
5			5	Interest				5
6			6	Transferred in from other funds	38,236.00			6
7			7					7
8			8					8
9			9					9
10			10	Total resources, except taxes to be levied				10
11			11	Taxes estimated to be received				11
12			12	Taxes collected in year levied				12
13			13	<b>Total resources</b>	38,236.00			13
14			14	<b>Requirements**</b>				14
15			15	Org unit or prog & activity				15
16			16	Object classification				16
17			17	Detail				17
18			18	Reserve	For Future Expenditures	\$38,236.00		18
19			19					19
20			20					20
21			21					21
22			22					22
23			23					23
24			24					24
25			25					25
26			26					26
27			27					27
28			28					28
29			29	Ending balance (prior years)				29
30			30	<b>Unappropriated ending fund balance</b>				30
31			31	<b>Total requirements</b>				31

150-504-011 (Rev. 11-16)

\*The balance of cash, cash equivalents and investments in the fund at the beginning of the budget year.

\*\*List requirements by organizational unit or program, activity, object classification, then expenditure detail. If the requirement is "not allocated", then list by object classification and expenditure detail.



**Form  
OR-LB-11**

**Reserve Fund  
Resources and Requirements**

Year this reserve fund will be reviewed to be continued or abolished.  
Date can't be more than 10 years after establishment.

This fund is authorized and established by resolution / ordinance number \_\_\_\_\_, on (date) \_\_\_\_\_ for the following specified purpose: \_\_\_\_\_

EMS EQUIPMENT  
(Fund)

Review year: 2025

North Gilliam County Health District  
(Name of Municipal Corporation)

	Historical data			Description resources and requirements	Budget for next year 20__ - __			
	Actual		Adopted budget year 20__ - __		Proposed by Budget Officer	Approved by Budget Committee	Adopted by Governing Body	
	Second preceding year 20__ - __	First preceding year 20__ - __						
1				<b>Resources</b>				1
2				2 Cash on hand* (cash basis), or	0			2
3				3 Working capital (accrual basis)				3
4				4 Previously levied taxes estimated to be received				4
5				5 Interest				5
6				6 Transferred in from other funds	\$35,448.00			6
7				7				7
8				8				8
9				9				9
10				10 Total resources, except taxes to be levied				10
11				11 Taxes estimated to be received				11
12				12 Taxes collected in year levied				12
13				<b>Total resources</b>	\$35,448.00			13
14				<b>Requirements**</b>				14
15				15 Org unit or prog & activity				15
16				16 Object classification				16
17				17 Detail				17
18				18 Capital				18
19				19 Outlay				19
20				20 Reserve				20
21				21 For Future Expenditures	\$35,448.00			21
22				22				22
23				23				23
24				24				24
25				25				25
26				26				26
27				27				27
28				28				28
29				29 Ending balance (prior years)				29
30				30 Unappropriated ending fund balance				30
31				31 <b>Total requirements</b>				31

\*The balance of cash, cash equivalents and investments in the fund at the beginning of the budget year.

\*\*List requirements by organizational unit or program, activity, object classification, then expenditure detail. If the requirement is "not allocated", then list by object classification and expenditure detail.

**Form  
OR-LB-11**

**Reserve Fund  
Resources and Requirements**

Year this reserve fund will be reviewed to be continued or abolished.  
Date can't be more than 10 years after establishment.

This fund is authorized and established by resolution / ordinance number \_\_\_\_\_, on (date) \_\_\_\_\_ for the following specified purpose: \_\_\_\_\_

EMS Vehicle Replacement  
(Fund)

Review year: 2025

North Gilliam County Health District  
(Name of Municipal Corporation)

	Historical data			Description resources and requirements	Budget for next year 20 <u>24</u> - <u>25</u>		
	Actual		Adopted budget year 20 <u>23</u> - <u>24</u>		Proposed by Budget Officer	Approved by Budget Committee	Adopted by Governing Body
	Second preceding year 20 <u>21</u> - <u>22</u>	First preceding year 20 <u>22</u> - <u>23</u>					
1			1	<b>Resources</b>			1
2			2	Cash on hand* (cash basis), or	0		2
3			3	Working capital (accrual basis)			3
4			4	Previously levied taxes estimated to be received			4
5			5	Interest			5
6			6	Transferred in from other funds	\$128,288.00		6
7			7				7
8			8				8
9			9				9
10			10	Total resources, except taxes to be levied			10
11			11	Taxes estimated to be received			11
12			12	Taxes collected in year levied			12
13			13	<b>Total resources</b>	\$128,288.00		13
14			14	<b>Requirements**</b>			14
15			15	Org unit or prog & activity	Object classification	Detail	15
16			16		Capital		16
17			17		Outlay	Quick Response Vehicle	17
18			18		Reserve	For Future Expenditures	18
19			19			\$128,288.00	19
20			20				20
21			21				21
22			22				22
23			23				23
24			24				24
25			25				25
26			26				26
27			27				27
28			28				28
29			29	Ending balance (prior years)			29
30			30	<b>Unappropriated ending fund balance</b>			30
31			31	<b>Total requirements</b>			31

150-504-011 (Rev. 11-16)

\*The balance of cash, cash equivalents and investments in the fund at the beginning of the budget year.

\*\*List requirements by organizational unit or program, activity, object classification, then expenditure detail. If the requirement is "not allocated", then list by object classification and expenditure detail.