

ID YEAR CO TYPE KEY

BUDGET ESTIMATE FOR

General Fund- City Hall
 (Office, Board, Commission, Department, Institution or Fund)

City of Beech Grove
 (If City, Town or Fire Protection District Budget, Enter Name)

Marion
 (If County Budget, Enter County Name)

For Calendar Year 2011

		Items	Total Estimate	Approved
1 PERSONAL SERVICES				
Salaries and Wages				
			0	0
Employee Benefits				
			0	0
Other Personal Services				
			0	0
			0	0
Total Personal Services			0	0
2 SUPPLIES				
Office Supplies				
210 OTHER OFFICE SUPPLIES		1000		
			1000	0
Operating Supplies				
			0	0
Repair and Maintenance Supplies				
			0	0
Other Supplies				
			0	0
Total Supplies			1000	0

		Items	Total Estimate	Approved
3 OTHER SERVICES AND CHARGES				
Professional Services				
310	CONTRACTUAL SERVICES	4050		
			4050	0
Communication and Transportation				
			0	0
Printing and Advertising				
			0	0
Insurance				
			0	0
Utility Services				
	ELECTRIC	7000		
	GAS	5000		
	WATER	1500		
	SEWAGE	600		
			14100	0
Repairs and Maintenance				
361	REPAIRS AND MAINTENANCE	4000		
			4000	0
Rentals				
			0	0
Debt Service				
			0	0
Other Services and Charges				
			0	0
Total Other Services and Charges			22150	0

	Items	Total Estimate	Approved
4 CAPITAL OUTLAYS			
Land			

_____		0	0
Buildings			

_____		0	0
Improvements Other Than Building			

_____		0	0
Machinery and Equipment			

_____		0	0
Other Capital Outlays			

_____		0	0
Total Capital Outlays		0	0
TOTAL BUDGET ESTIMATE		23150	0

(I) (We) hereby certify that the foregoing is a true and fair estimate of the necessary expense of the _____

(Name of Office, Board, Commission, Department, Institution or Fund)

for the calendar year _____ for the purposes therein specified.

Dated this _____ day of _____, 20____.

Signature and Title of Officer(s) or Department Head