## Form For Budget, Cumulative Quarterly Report and Annual Settlement For Calendar Year 2023

## Marshall County Sheriff

## Part One - Summary and Reconciliation of All Accounts

Show & Describe All Accounts	2023 Fee Account Budget Estimate	2023 Fee Account Cumulative Actual	Column 3 Tax Account Account (NOT FEE ACCOUNT)	Column 4 Franchise Tax Account (NOT FEE ACCOUNT)	Column 5  Drug Account  Account  (NOT FEE ACCOUNT)
1. Receipts YTD	\$1,969,600.00	1 10 10 10 10 10 10 10 10 10 10 10 10 10			
2. Total Disbursements YTD	\$1,969,600.00				
3. Book Balance/Excess Fees	NAME OF THE PROPERTY OF THE PR				
4. Bank Statement Balance					
5. Plus Deposits in Transit					
6. Less Outstanding Checks					
7. Other					
8. Reconciled Bank Balance		\$0.00	\$0.00	\$0.00	\$0.00
9. Accounts Receivable as of 12/31					
10. Unpaid Obligations as of 12/31		\$0.00			
11. Excess Fees					

Instructions: This form is the required format for the budget and the quarterly report. BUDGET: After completing the budget estimate columns of Parts One, Two and Three, submit to the fiscal court for approval by January 15th and following approval submit to the state local finance officer. QUARTERLY REPORT: The quarterly report is cumulative. Show the status of all funds in the official's charge during calendar year to date in Part One. Line 1 Show total receipts on a cash basis for the year to date in cluding any beginning balances for all accounts. Show current year fee account in COLUMN 2 as calculated in Part Two of report. Line 2 Show total disbursements on a cash basis for the year to date for all accounts. Show current year fee account in COLUMN 2 as calculated in Part Three of report. Line 3 Show difference between lines 1 and 2 for all accounts. Line 4 Show bank statement balance(s) at close of quarter. Line 5 Show total deposits made prior to close of quarter that are not reflected in bank statement(s). Line 6 Show total amount of checks issued prior to close of quarter that are not reflected in bank statement(s). Line 6 Show total amount of checks issued prior to close of quarter that are not reflected in bank statement(s). Line 7 Show investments. Line 8 Show line 4 adjusted for lines 5, 6, and 7. Line 8 should equal line 3 for all accounts. Line 9 Complete for quarter ending 12/31. Show calculation in Part Two of report. Line 10 Complete for quarter ending 12/31. Show calculation in Part Two of report. Line 10 Complete for quarter ending 12/31. Show calculation in Part Two of report. Line 11 Complete for quarter ending 12/31. Show calculation in Part Two of report. Line 11 Complete for quarter ending 12/31. Show lines 9 and 10. All debt to be shown in Part Four. Report due to: State Local Finance Officer, 1024 Capital Center Drive, Suite 340, Frankfort, KY 40601-8204 by the 30th day following the close of each quarter. Fax # 502-573-3712 / Ph # 502-573-3710.

Approved by the fiscal court on the 3rd day of January, 2023.

County Judge/Executive Date

To the best of my knowledge the information reported herein for the budget/quarter ended September 30th , 2019is accurate and complete.

Signature of County Sheriff

Date /2027

Part Two Receipts	Budget Estimate	1/1 thru 3/31	4/1 thru 6/30	7/1 thru 9/30	10/1 thru 12/31	Total YTD
1. Federal Grants						
2. State Grants	\$15,000.00					
3. State - KLEFFP	\$130,000.00					
4. Receipts YTD	New York Control of the Control of t					12.7
<ol><li>Finance and Adminstration Cab.</li></ol>				8		
<ol><li>Cabinet Human Resources</li></ol>			1 4 8			
7. Circuit Clerk						
Sheriff Security Fees	\$11,500.00					
8. Fines/Fees Collected	\$12,000.00					
9. Court Ordered Payments	\$1,000.00			37		
10. Fiscal Court (includes Election Comm.)			1 × 1 80,			
11. County Clerk (Delinquent taxes)	\$40,000.00					
12. Commissions on Taxes Collected	\$1,005,000.00	X		20		
13. Sheriff's Add On Fee			-	4		i i
14. Fees Collected for Services	7 . 1.	1 1				
15. Auto Inspections	\$15,000.00				1 12 12	
16. Accident/Police Reports	\$4,000.00					
17. Serving Papers	\$45,000.00		8	120		
18. CCDW	\$8,000.00					
19. State Fees for Service			<u>.</u>			
20. Prisoner Transport	\$8,000.00					
21. Mental Transport	\$5,000.00					
22. Jury Meals			3			
23. Security Fees			208			
24. Court Security	\$185,000.00		-			
25. Other @ Telecomm Tax/ 2018 Tax Audit			*			
26. SRO reimb/ Ret Cks/ Auctions/ Etc	\$485,000.00					
27. Interest Earned	\$100.00					
28. Total Revenues	\$1,969,600.00					
29. Petty Cash					1	
30. Borrowed Money						
31. State Advancement						
32. Bank Note					-7	-
33. Total Receipts (Total lines 22 through 26)	\$1,969,600.00					

Part Three Disbursements	Budget Estimate	1/1 thru 3/31	4/1 thru 6/30	7/1 thru 9/30	10/1 thru 12/31	Total YTD	Unpaid Obligations 12/31	Settlement Total
Official Expenses		i i		M				
1. Personal Services				300000				
2. Sheriff's Gross Salary	ne in the second							
3. Deputies' Gross Salaries								
4. Part Time Gross Salaries								- >
5. Other Gross Salaries				96.				
6. Overtime Gross		57						
7.						1 4		
8. Employee Benefits					7			
9. Employer's Share Social Security					. *			
10. Employer's Share Retirement					7 17 17 17 17 17	100		
<ol> <li>Employer's Share Haz. Duty Ret.</li> </ol>			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7					
12. Employer's Workmans Compensation								
13. Employer's Unemployment Ins.								
14. Employer Paid Health Ins.								
15. Training Fringe Benefit (HB810)								
16. Contracted Services	700		100	1 1 1 1 1 1 1		100		
17. Advertising					19.0	40.00		
18. Vehicle maintenance and repairs		- AC		97				
19.								
20. Supplies and Materials (Tangible items with limited	lifespan)							
21. Office Materials and supplies								
22. Uniforms	Start Const.	a la Na						
23. Gasoline	Two T	1			100			
24.				V 15 V				
25.								20-
26. Other Charges (Non-contracted services, nontangible iter	ms)	5.00			78.			
27. Convention				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-			
28. Dues								
29. Postage						40-		
30. Mileage on Personal Vehicles	,							
31. Vehicle Expense		\$0.00						
32. Bond		\$0.00						-
33.		30.00				2		-

Part Three Disbursements	Budget Estimate	1/1 thru 3/31	4/1 thru 6/30	7/1 thru 9/30	10/1 thru 12/31	Total YTD	Unpaid Obligations 12/31	Scttlement Total
34. Auto Expenses on Personal Vehicles								
35. Gasoline								
36. Maintenance and repairs								
37. Ret Insurance								
38. Depreciation								
39.								
40. Debt Service (Borrowed money, interest, lease/purchases)	2		-4-				120	
41. State Advancement			7					
42. Notes	man to a little		1 Y	9 9				
43. Interest								
44.		L						
45. Capital Outlay (Outright purchases of tangible items lasting	ig in nature)	7 7 7	100					
46. Office Equipment	A Think and the							
47. Vehicles								
48.								
49.								
50. Total Official Expenses			2 5 5					
or offices that fee pool, pay fees to county prior to December	31, or counties over 70,000	in population, show pay	ments on appropriate line h	elow				
51. Payments to County Treasurer			and the second			40.00		-
52. Payments to State Treasurer	1 100	7- 4-		201		\$0.00	-	
53. Total Disbursements (Total lines 50, 51, and 52)	\$1,969,600.00	- W						

Copy the figures shown on line 53 in the Badget Estimate column to the Summary on page 1, column 1, line 2. Copy the figure shown on Line 53 in the Total YTD column to page 1, column 2, line 2. Copy the figure shown on Line 53 in the Unpaid column (use

## Part Four - Liabilities Outstanding

Quarter ended \_\_\_9/30/2019\_\_\_\_

Multi-year Issues	Issue	Issue	Totals
Where Budgeted			
Description			
Term (# of Years)			
Current Interest Rate			
Issue Date	*-5 **		
Total Principal Amount			
Total Interest Amount			
Total Issue			
Principal Balance Remaining			
Interest Balance Remaining			
Less Reserve Earnings			
Net Outstanding			
Next Payment Date			the state of the s
Next Payment Amount			
Final Payment Date			
Short Term Liabilities	Issue	Issue	
Where Budgeted			
Description			
Term			
Current Interest Rate			
Issue Date			
Total Principal Amount			
Total Interest Amount			
Total Issue			
Principal Balance Remaining	600		
Interest Balance Remaining			
Total Outstanding			
Next Payment Date		1	TELEFORM
Next Payment Amount			
Final Payment Date			
Total Outstanding Debt	(If no outstanding advar		\$0.00

Comments: