

	FY2015 ACTUAL	FY2016 ACTUAL	FY2017 ACTUAL	FY2018 ACTUAL	FY2019 ACTUAL	FY2020 TM ADOPTED	FY2021 REQUESTS	FY2021 PROPOSED
FINANCE DIRECTOR/ACCOUNTING 011350								
<i>Personnel Services</i>								
Salary Department Head	\$99,881	\$103,642	\$106,188	\$109,164	\$132,070	\$125,000	\$127,500	
Salaries Clerical	\$93,398	\$83,381	\$94,077	\$93,627	\$97,404	\$123,252	\$131,929	
Salaries Clerical OT	\$814	\$1,240	\$878	\$5,185	\$11,408	\$1,000	\$1,000	
Longevity	\$4,100	\$3,800	\$4,150	\$4,250	\$750	\$750	\$850	
Total	\$198,193	\$192,063	\$205,294	\$212,227	\$241,632	\$250,002	\$261,279	\$0
<i>Expenses</i>								
Supplies and Expenses	\$2,801	\$4,964	\$9,597	\$4,757	\$3,434	\$4,000	\$4,000	
Dues and Subscriptions	\$185	\$185	\$205	\$145	\$95	\$210	\$210	
Meetings	\$2,214	\$39	\$1,731	\$34	\$2,609	\$2,328	\$2,328	
Total	\$5,200	\$5,188	\$11,533	\$4,936	\$6,138	\$6,538	\$6,538	
TOTAL BUDGET	\$203,393	\$197,251	\$216,827	\$217,163	\$247,770	\$256,540	\$267,817	\$0

BUDGET NARRATIVE

Description of Department Function

Describe the overall mission or purpose of the Department.

Responsible for all town accounts, appropriations and expenditures. Monitors expenditures for all town funds, reconciling cash and various receivables with the Treasurer/Collector's Office, Police/Fire Dept., School Dept. etc.

Responsible for periodic reporting to the Commonwealth of Massachusetts including the Schedule A, Balance Sheet, Free Cash certification, and Recap Sheet for tax rate setting.

Maintains comprehensive financial records.

Responsible for town wide payroll and accounts payable. Oversees the offices of the:

- Finance Department
- Treasurer/Collector
- Assessing Department
- IT Administration
- School Finance

Programs and Sub-Programs

Consider and list the actual Programs and Sub-Programs Executed by the Department

Accomplishments

Describe the major describable accomplishments or measurable activities in FY19 or CY20. Use statistics whenever possible.

FY21 Departmental Goals

Describe the initiatives and accomplishments planned for FY21

Plan to include all departments within the town to have some access to the Munis system. This will include the Accounts Payable entry function and the purchase order functions.

Some administrative functions will be rolled out to the Department Heads such as but not limited to:

- AP Inquiry
- Budget Inquiry
- Account/Account History Inquiry
- Vendor Inquiry

Spending Highlights for FY21

Explain any significant budget changes from FY20

Non-tax Funding

List any expected non-tax revenues that will be use to fund department activities, including an estimate to be received.

TOWN OF MILLIS
FISCAL YEAR 2021 BUDGET
DEPARTMENT:

Form 2

Form #2

PERSONNEL SUMMARY

NAME	POSITION-PAY ITEM	CURRENT TOTAL ANNUAL SALARY	HRS/ WEEK	GRADE	STEP	ANNIV DATE	ANNUAL SALARY # WKS/HRS @ SAL	BASE SALARY	OTHER PAY	LON-GEVITY	TOTAL SALARY
C. Johnston	Finance Director	\$125,000.00	40			7/1	Contract	\$127,500.00	\$0.00	\$0.00	\$127,500.00
L. Morin	Town Accountant	\$80,600.00	40	13	4	10/1	#13wks*40hrs*\$39.72+39wks*40*40.59	\$83,974.80	\$324.72	\$850.00	\$85,149.52
D. Broe	Payroll Administrator	\$45,721.01	35	7	4	6/8	Budget 52wks + 1day #50.5wks*35hrs*\$26.05+#1.5wks*35*24.19+17hrs*26.66	\$47,443.03	\$186.62	\$0.00	\$47,629.65
							Budget 52wks + 1day		6/30/2019		
SUBTOTAL/TOTAL								\$258,917.83	\$511.34	\$850.00	\$260,279.17

\$260,279.17

TOWN OF MILLIS
FISCAL YEAR 2021 BUDGET

FORM #5

EQUIPMENT DETAIL

DEPARTMENT:

CODE	DESCRIPTION	# OF UNITS	VALUE OF TRADE	NEW OR REPLACE	BUDGET REQUEST
	N/A				
					0

DEPARTMENT:

Budget Request Above Level Service

Title:

Description of Request:

N/A

Detailed Cost Impact:

Justification for Request

Attach copies of reports, master plans, or supporting documentation)

CAPITAL PROJECT DETAIL SHEET

Project Title:	
Department:	Category:
<u>Description and Justification:</u> <div style="font-size: 2em; font-weight: bold; text-align: center; margin-top: 50px;">N/A</div>	<div style="transform: rotate(-30deg); font-size: 1.2em; font-weight: bold; color: gray;"> Please send a photo depicting the capital request as a separate file. Do not drop it in to this template. </div>

RECOMMENDED FINANCING

	Source of Funds	Total Six -Year Cost	Estimated Expenditures by Fiscal Year					
			FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026
A. Feasibility Study								
B. Design								
C. Land Acquisition								
D. Construction								
E. Furnishings/Equipment								
F. Departmental Equipment								
G. Contingency								
H. Other								
TOTAL								

Source of Funds Legend

- | | | | |
|------------------------|-----------------|-----------------------------|--------------------------------|
| (1) Operating Revenues | (3) State Aid | (5) EMS Revolving Fund Fees | (7) Sewer Enterprise Fund Fees |
| (2) Municipal GO Bonds | (4) Trust Funds | (6) Free Cash / Other | (8) Water Enterprise Fund Fees |



Town of Millis

Host Community Agreement

Marijuana Impact Funds Request Form

Request Date		IMPORTANT NOTICE By signing and submitting this form you agree that the requested funds will be used for the purposes stated in this form.
Requestor's Name		
E-mail		
Phone		
Department		
Category	Demographic Information	Classification
<input type="checkbox"/> Training <input type="checkbox"/> Materials <input type="checkbox"/> Staffing <input type="checkbox"/> Special Event <input type="checkbox"/> General	<input type="checkbox"/> Child <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> Adult/Parent <input type="checkbox"/> Senior <input type="checkbox"/> General	<input type="checkbox"/> Education <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Security <input type="checkbox"/> Public Infrastructure <input type="checkbox"/> Traffic <input type="checkbox"/> Inspections <input type="checkbox"/> Municipal Officials Time

Description of Request:

Funding Start Date	
Funding End Date	
Total Funding Requested	\$0.00

Detailed Cost Impact:				
Type of Expense	Description of Expense	Daily Expenses (Except Airfare)	# of Days	Total Expenses
Salaries			1	\$0.00
Airfare				\$0.00
Ground Transportation			1	\$0.00
Conference/Registration Fees			1	\$0.00
Lodging			1	\$0.00
Meals and Tips			1	\$0.00
Capital Project			1	\$0.00
Miscellaneous			1	\$0.00
Grand Total				\$0.00

Justification for Request Attach copies of reports, master plans, or supporting documentation)

Requestor Signature		Date Signed	
Approved By			
Approval Signature		Date Approved	