



Florida Department of Agriculture and Consumer Services
 Division of Agricultural Environmental Services
ANNUAL CERTIFIED BUDGET FOR ARTHROPOD CONTROL

Submit to:
 Mosquito Control Program
 3125 Conner Blvd, Bldg 6,
 Tallahassee, FL 32399-1650

ADAM H. PUTNAM
COMMISSIONER

Rule 5E-13.027, F.A.C.
 Telephone: (850) 617-7995; Fax: (850) 617-7969

COUNTY OR DISTRICT _____ FISCAL YEAR OCTOBER 1, 20 _____ TO SEPTEMBER 30, 20 _____ RECEIPTS

RECEIPTS

ACCT NO	DESCRIPTION	TOTAL	LOCAL	STATE
311	Ad Valorem Taxes (Current/Delinquent)			
334.1	State Grant			
362	Equipment Rentals			
337	Grants and Donations			
361	Interest Earnings			
364	Equipment and/or Other Sales			
369	Miscellaneous/Refunds (prior year expenditures)			
380	Other Sources			
389	Loans			
TOTAL RECEIPTS				
BEGINNING FUND BALANCE				
TOTAL BUDGETARY RECEIPTS AND BALANCES				

EXPENDITURES

ACCT NO	Uniform Accounting System Transaction Code	TOTAL	LOCAL	STATE
10	Personal Services 11 - 15			
20	Personal Services Benefits 21 - 25			
30	Operating Expense 31 - 34			
40	Travel and Per Diem 40.1 - 40.3			
41	Communication Services			
42	Freight Services			
43	Utility Services			
44	Rental and Leases			
45	Insurance			
46	Repair and Maintenance Services 46.1 - 46.6			
47	Printing/Binding			
48	Promotional Activities			
49	Other Current Changes and Obligations			
51	Other Supplies/Materials			
52.1	Gas/Oil/Lube			
52.2	Chemical/Solvents/Additives			
52.3	Clothing and Wearing Apparel			
52.4	Miscellaneous Supplies and Incidentals			
52.5	Tools and Small Implements			
54	Books, Publications, Subscriptions, Memberships			
55	Training			
60	Capital Outlay 61 - 64			
71	Principal			
72	Interest			
89	Contingency (current year)			
99	Payment of Prior Year Accounts			
TOTAL BUDGET AND CHARGES				
.001	Reserves - Future Capital Outlay			
.002	Reserves - Self-Insurance			
.003	Reserves - Cash Balance to be Carried Forward			
.004	Reserves - Sick and Annual Leave			
TOTAL RESERVES ENDING BALANCE				
TOTAL BUDGETARY EXPENDITURES AND BALANCES				
ENDING FUND BALANCE				

I certify that the budget shown was adopted on this _____ day of _____ 20__.

SIGNED: _____ DATE: _____ 20__.

Chairman of the Board, or Clerk of Circuit Court

APPROVED: Florida Department of Agriculture and Consumer Services, Bureau of Entomology and Pest Control

SIGNED: _____ DATE: _____ 20__.

Mosquito Control Program