

Category	ACCOUNT #	NAME	FY24 Budget	FY24 Actual	FY25 Budget	FY25 Estimate	% Estimate vs Budget	FY26 Budget	% Change FY26 vs FY25 Budget	Notes
INSURANCE AND WELLNESS FUND										
BUDGETED CASH	08-998-3101	CASH	146,604.16	7,828.62	229,384.19	219,586.69	95.73%	274,003.04	19.45%	
BUDGETED CASH	08-998-3250	INVESTMENTS (UNRESTRICTED)	0.00	0.00	0.00	0.00	0.00%	0.00	0.00%	
BUDGETED CASH		BUDGETED CASH TOTAL	146,604.16	7,828.62	229,384.19	219,586.69	95.73%	274,003.04	19.45%	
MISC. REVENUE	08-028-4504	INTEREST	40.00	342.14	250.00	597.12	238.85%	500.00	100.00%	
MISC. REVENUE	08-028-4560	HRA CONTRIBUTION	182,600.00	129,999.16	150,000.00	98,100.00	65.40%	150,000.00	0.00%	
MISC. REVENUE	08-028-4580	DENTAL & VISION INS DEPOSITS	72,600.00	46,639.56	45,000.00	43,629.00	96.95%	45,000.00	0.00%	
MISC. REVENUE	08-028-4583	FLEX PLAN	6,000.00	0.00	6,000.00	0.00	0.00%	6,000.00	0.00%	
MISC. REVENUE	08-028-4584	COBRA D & V (BL HOUSING)	3,000.00	2,900.50	3,000.00	2,223.00	74.10%	3,000.00	0.00%	
TRANSFER IN OF FUNDS	08-028-4788	TRANS FROM SALES TAX	0.00	0.00	0.00	0.00	0.00%	35,000.00	35000.00%	Wellness Program
MISC. REVENUE		MISC. REVENUE TOTAL	264,240.00	179,881.36	204,250.00	144,549.12	70.77%	239,500.00	17.26%	
		TOTAL REVENUE	410,844.16	187,709.98	433,634.19	364,135.81	83.97%	513,503.04	18.42%	
TRANSFER OUT OF FUNDS	08-028-6320	TRANS TO GENERAL	0.00	0.00	0.00	0.00	0.00%	0.00	0.00%	
TRANSFER OUT OF FUNDS		TRANSFER OUT OF FUNDS TOTAL	0.00	0.00	0.00	0.00	0.00%	0.00	0.00%	
INSURANCE EXPENSE	08-028-5012	HRA	150,000.00	50,381.96	150,000.00	25,501.42	17.00%	150,000.00	0.00%	
INSURANCE EXPENSE	08-028-5014	ADMINISTRATION FEES	2,500.00	0.00	2,000.00	0.00	0.00%	2,000.00	0.00%	
INSURANCE EXPENSE	08-028-5015	FLEX PLAN	6,500.00	17,363.64	10,000.00	11,485.88	114.86%	10,000.00	0.00%	
INSURANCE EXPENSE	08-028-5017	DENTAL INSURANCE	50,000.00	44,358.09	50,000.00	41,914.95	83.83%	50,000.00	0.00%	
INSURANCE EXPENSE	08-028-5018	V S P (VISION CARE)	13,000.00	9,414.20	13,000.00	11,230.52	86.39%	13,000.00	0.00%	
INSURANCE EXPENSE	08-028-5019	INSURANCE (UHC)	0.00	0.00	0.00	0.00	0.00%	0.00	0.00%	
INSURANCE EXPENSE	08-028-XXXX	WELLNESS PROGRAM	0.00	0.00	35,000.00	0.00	0.00%	35,000.00	0.00%	Wellness Program
INSURANCE EXPENSE		INSURANCE EXPENSE TOTAL	222,000.00	121,517.89	260,000.00	90,132.77	34.67%	260,000.00	0.00%	
REQUIREMENTS	08-028-9009	NECESSARY CASH RESERVE	188,844.16	0.00	173,634.19	0.00	0.00%	253,503.04	46.00%	
REQUIREMENTS		REQUIREMENTS TOTAL	188,844.16	0.00	173,634.19	0.00	0.00%	253,503.04	46.00%	
		TOTAL EXPENSES	410,844.16	121,517.89	433,634.19	90,132.77	20.79%	513,503.04	18.42%	
		INSURANCE FUND TOTAL	0.00	66,192.09	0.00	274,003.04		0.00		