

Resolution No 2021-31

FRANKLIN-WILLIAMSON BI-COUNTY HEALTH DEPARTMENT

A RESOLUTION providing for and the making of the Annual Tax Levy for the Franklin-Williamson Bi-County Health Department of Franklin and Williamson Counties, Illinois for the fiscal year beginning December 1, 2021 and ending November 30, 2022, for the uses and purposes as hereinafter set forth.

NOW THEREFORE BE and it is hereby resolved by the County Board of Franklin County, Illinois, that the amounts hereinafter set forth, or so much thereof as may be authorized by law, and the same is hereby levied for such purposes as Multiple County Health Department, for the fiscal year of the said FRANKLIN-WILLIAMSON BI-COUNTY HEALTH DEPARTMENT, Illinois, beginning the 1st day of December, 2021 and ending the 30th day of November, 2022.

The amount levied for each object and purpose is as follows:

Salaries	\$96,047
Insurance (Employee Hospitalization)	\$57,990

*Said amount is hereby levied as the Multiple County Health Tax (55ILCS 5/5-25003 & 5/5-25004 - maximum .10%)

IT IS FURTHER RESOLVED that the following amounts are to be levied by the County Board of Franklin County, Illinois for the following purposes in addition to the Multiple County Health Tax Levy:

Liability Insurance	\$15,305
Unemployment Compensation Insurance	\$2,816
Workmen's Compensation Insurance	\$15,305

*Said amount is hereby levied as the Liability Insurance, Unemployment Compensation Insurance, Workmen's Compensation Insurance Tax (745ILCS 10/9-107-no maximum)

Illinois Municipal Retirement Fund	\$128,045
------------------------------------	-----------

*Said amount is hereby levied as the IMRF Tax (40ILCS 5/7-171-no maximum)

Social Security Tax	\$32,012
---------------------	----------

*Said amount is hereby levied as the Social Security Tax (40ILCS 5/21-110-no maximum)

TB Tax	\$0
--------	-----

*Said amount is hereby levied as the TB Tax (55ILCS 5/5-23002-rate 2c)

PARTIAL INVALIDITY. That if any section, subdivision or sentence or word of this Resolution is for any reason held void or invalid or to be unconstitutional, such decision shall not affect the validity of the remaining portions of this Resolution.

PASSED AND APPROVED by the County Board of the COUNTY OF FRANKLIN, this 19TH day of July, 2021

AYES	<u>9</u>
NAYES	<u>0</u>
ABSENT	<u>0</u>

[Signature]
 CHAIRMAN, COUNTY BOARD

[Signature]
 COUNTY BOARD MEMBER

[Signature]
 COUNTY BOARD MEMBER

FILED THIS 19TH day of July, 2021

[Signature]
 COUNTY CLERK

FRANKLIN-WILLIAMSON BI-COUNTY HEALTH DEPARTMENT

Budget

July 1, 2021 - June 30, 2022

REVENUE

Gen Fund

Property Taxes - Franklin	132,104.00
Property Taxes - Williamson	198,135.00
IDPA Healthy Kids Billings	15,000.00
IDPH Water Program	1,000.00
IDPH Body Art	1,000.00
IDPH Tanning	1,000.00
Vital Records	56,160.00
Public Health Nursing	250,000.00
Environmental Health	70,000.00
Home Nursing - Medicare	880,622.00
Home Nursing - Private Insurance	65,109.00
Interest Income	24,000.00
IDPH Mosquito	26,372.00
IDHS Family Case Management	136,933.00
IDHS High Risk Infant	90,000.00
IDPH Local Health Protection	304,827.00
IDPH Lead	26,000.00
IDPH Emergency Preparedness	88,121.00
WIC	334,139.00
IDHS Breastfeeding	11,500.00

TB Fund

Property Taxes - Franklin

TB Fund

Property Taxes - Williamson

IMRF Fund

Property Taxes - Franklin 136,465.00

Property Taxes - Williamson 136,110.00

INS. Fund

Property Taxes - Franklin 28,616.00

Property Taxes - Williamson 43,347.00

Soc.Sec. Fund

Property Taxes - Franklin 27,440.00

Property Taxes - Williamson 45,530.00

EXPENSES

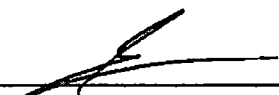
General

Salary	209,483.00
Travel	31,057.00
Medical Supplies	222,036.00
Utilities	46,388.00
Supplies	47,587.00

	Patient Care	3,668.00
	Building Maintenance	20,708.00
	Equipment	3,705.00
	Legal & Accounting	24,903.00
	Vital Records	21,883.00
	Medical Insurance Employer Expense	161,000.00
	Building Improvement	219,645.00
	Contingency	53,094.00
	Salary - Home Nursing	316,000.00
	Travel - Home Nursing	36,191.00
	Medical Supplies - Home Nursing	8,000.00
	Legal & Accounting - Home Nursing	5,400.00
	Physical Therapy - Home Nursing	200,000.00
	Speech Therapy - Home Nursing	14,000.00
	Travel - Physical Therapy	14,000.00
	Travel - Speech Therapy	2,500.00
	Travel - Occupational Therapy	9,000.00
	Occupational Therapy	66,000.00
	Utilities- Home Nursing	1,800.00
	Contingency - Home Nursing	25,000.00
Mosquito	Salary	17,000.00
	Unemployment	6.00
	I.M.R.F. Employer Expense	292.00
	Social Security Employer Expense	149.00
	Medical Insurance Employer Expense	521.00
	Contingency	8,404.00
Family Case Mgmt.	Salary	97,533.00
	Travel	2,145.00
	Supplies	730.00
	Unemployment	228.00
	I.M.R.F. Employer Expense	8,240.00
	Social Security Employer Expense	6,241.00
	Medical Insurance Employer Expense	21,816.00
High Risk Infant	Salary	65,818.00
	Travel	377.00
	Supplies	45.00
	Unemployment	132.00
	I.M.R.F. Employer Expense	5,567.00
	Social Security Employer Expense	4,368.00
	Medical Insurance Employer Expense	13,693.00
Local Health	Salary	293,000.00
	Unemployment	838.00
	I.M.R.F. Employer Expense	24,923.00
	Social Security Employer Expense	18,640.00
	Medical Insurance Employer Expense	65,110.00
Lead	Salary	19,400.00
	Travel	77.00

	Unemployment	64.00
	I.M.R.F. Employer Expense	2,164.00
	Social Security Employer Expense	1,460.00
	Medical Insurance Employer Expense	2,835.00
Tuberculosis	Salary	25,280.00
	Travel	320.00
	Medical Supplies	8,000.00
	Supplies	200.00
	Patient Care	120.00
	Unemployment	60.00
	I.M.R.F. Employer Expense	2,151.00
	Social Security Employer Expense	1,629.00
	Medical Insurance Employer Expense	5,215.00
	Contingency	200.00
Emer.Preparedness	Salary	65,244.00
	Travel	625.00
	Equipment	3,500.00
	Unemployment	109.00
	I.M.R.F. Employer Expense	5,456.00
	Social Security Employer Expense	4,501.00
	Medical Insurance Employer Expense	5,517.00
	Contingency	16,000.00
WIC	Salary	235,354.00
	Travel	450.00
	Medical Supplies	5,000.00
	Supplies	3,500.00
	Equipment	5,000.00
	Unemployment	1,228.00
	I.M.R.F. Employer Expense	20,053.00
	Social Security Employer Expense	15,055.00
	Medical Insurance Employer Expense	48,499.00
WIC Breastfeeding	Salary	8,386.00
	Travel	316.00
	Supplies	78.00
	Unemployment	356.00
	I.M.R.F. Employer Expense	587.00
	Social Security Employer Expense	676.00
	Medical Insurance Employer Expense	546.00
	Contingency	555.00
General	I.M.R.F. Employer Expense	73,900.00
General	Insurance	72,000.00
General	Unemployment	2,000.00
General	Social Security Employer Expense	47,000.00
TOTAL REVENUE		3,129,530.00
TOTAL EXPENSES		3,129,530.00

I certify that this is an accurate representation of the estimated receipts and expenditures of the above designated County Board of Health for the period indicated. I further certify that state, federal and any county funds included herein shall be expended in accordance with applicable state, federal and local laws and regulations.

SIGNED:  DATE: 5/10/21
President, County Board of Health