Town of Lisbon, Maine

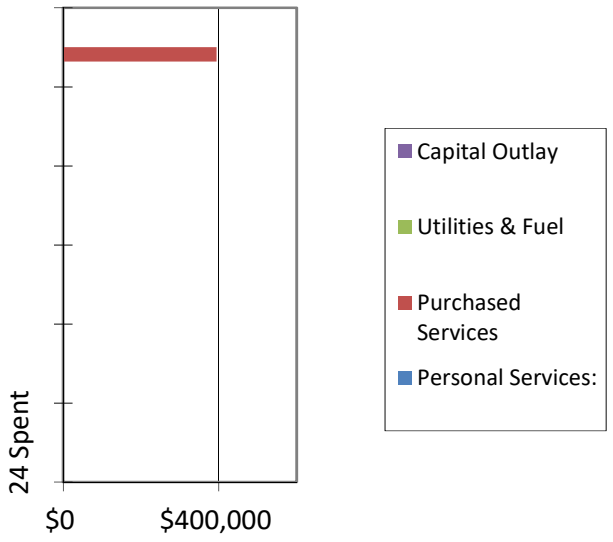
FY2027

Budget: Social Services

Account Number: **160620000**

	FY24 Spent	FY25 Budget	FY25 Spent	FY26 Budget	FY26 Yr to Date Spent	FY2027 Dept Head	FY2027 Manager's Rec	FY2027 Council Rec
Personal Services:	$0	$0	$0	$0	$0	$0	$0	
Contractual Services	$0	$0	$0	$0	$1,000	$394,500	$276,000	
R/M & Operating Supplies	$0	$0	$0	$0	$0	$0	$0	
Capital Outlay	$0	$0	$0	$0	$0	$0	$0	
TOTALS:	**$0**	**$0**	**$0**	**$0**	**$1,000**	**$394,500**	**$276,000**	**$0**

Graphic Representation



FRINGE BENEFIT IMPACT (Estimated):	
FICA	**$0**
Workers Comp	**$0**
Health Insurance	**$0**
Retirement	**$0**
Unemployment	**$0**
Other Insurance	**$0**
# of Full Time Employees	**0.00**

Total Fringe Benefit Impact $0

	FY26 Budget	FY27 Manager's Rec	Dollar Change	Percentage Change
Personal Services:	$0	$0	$0	N/A
Purchased Services	$0	$276,000	$276,000	#DIV/0!
Utilities & Fuel	$0	$0	$0	N/A
Capital Outlay	$0	$0	$0	N/A
TOTALS:	**$0**	**$276,000**	**$276,000**	#DIV/0!

FY2027 Contractual Services

Account Number	Description	FY24 Spent	FY25 Budget	FY25 Spent	FY26 Budget	FY26 Yr to Date Spent	FY2027 Dept Head	FY2027 Mgr's Rec
50610	Bus Transportation	$0	$0	$0	$0	$0	$0	$0
50651	LACO	$0	$0	$0	$0	$1,000	$1,000	$1,000
50670	Contibution to Snowmobile Cut	$0	$0	$0	$0	$0	$0	$0
50671	Donation to SafeVoices	$0	$0	$0	$0	$0	$500	$0
50672	Donation to LifeFlight of Maine	$0	$0	$0	$0	$0	$2,000	$0
50673	Donation to Sweetser	$0	$0	$0	$0	$0	$1,500	$0
50674	Donation to Seniors Plus	$0	$0	$0	$0	$0	$1,500	$0
59999	Senior Tax Credit Funding	$0	$0	$0	$0	$0	$388,000	$275,000
Totals		$0	$0	$0	$0	$1,000	$394,500	$276,000

Fiscal Year 2027
Budget Request

March 4, 2026 **Department:** Social Services

Account Title: Bus Transportation

Department Number: 160620000 Account Number: 50610

FY24 Actual	FY25 Budget	FY25 Actual	FY26 Budget	FY26 Est. Expended
$0.00	$0.00	$0.00	$0.00	

FY27 Budget	Department Request	Town Mgr Recommendation	Council Action	Increase (Decrease)
		$0.00		$0.00

Support for Budget Request: Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

Fiscal Year 2027
Budget Request

March 4, 2026 **Department:** Social Services

Account Title: LACO

Department Number: 160620000 Account Number: 50651

FY24 Actual	FY25 Budget	FY25 Actual	FY26 Budget	FY26 Est. Expended
$0.00	$0.00	$0.00	$0.00	$1,000.00

FY27 Budget	Department Request	Town Mgr Recommendation	Council Action	Increase (Decrease)
	$1,000.00	$1,000.00		$1,000.00

Support for Budget Request: Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

Was funded in FY26 in account
FY26 funded amount was $1,000

Fiscal Year 2027
Budget Request

March 4, 2026 **Department:** Social Services

Account Title: Contibution to Snowmobile Cub

Department Number: 160620000 Account Number: 50670

FY24 Actual	FY25 Budget	FY25 Actual	FY26 Budget	FY26 Est. Expended
$0.00	$0.00	$0.00	$0.00	

FY27 Budget	Department Request	Town Mgr Recommendation	Council Action	Increase (Decrease)
	$0.00	$0.00		$0.00

Support for Budget Request: Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

It appears that the Town has historically donated the snowmobile registration fees to the club.

Fiscal Year 2027
Budget Request

March 4, 2026 **Department:** Social Services

Account Title: Donation to SafeVoices

Department Number: 160620000 Account Number: 50671

FY24 Actual	FY25 Budget	FY25 Actual	FY26 Budget	FY26 Est. Expended
			$ -	$0.00

FY27 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	$500.00	$0.00		$500.00

Support for Budget Request: Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

See attached request forms

Fiscal Year 2027
Budget Request

March 4, 2026 **Department:** Social Services

Account Title: Donation to LifeFlight of Maine

Department Number: 160620000 Account Number: 50672

FY24 Actual	FY25 Budget	FY25 Actual	FY26 Budget	FY26 Est. Expended
				$0.00

FY27 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	$2,000.00	$0.00		$2,000.00

Support for Budget Request: Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

See attached request documents

Fiscal Year 2027
Budget Request

March 4, 2026 **Department:** Social Services

Account Title: Donation to Sweetser

Department Number: 160620000 Account Number: 50673

FY24 Actual	FY25 Budget	FY25 Actual	FY26 Budget	FY26 Est. Expended
				$0.00

FY27 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	$1,500.00	$0.00		$1,500.00

Support for Budget Request: Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

See attached donation request

Fiscal Year 2027
Budget Request

March 4, 2026 **Department:** Social Services

Account Title: Donation to Seniors Plus

Department Number: 160620000 Account Number: 50674

FY24 Actual	FY25 Budget	FY25 Actual	FY26 Budget	FY26 Est. Expended

FY27 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	$1,500.00	$0.00		$1,500.00

Support for Budget Request: Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

See attached donation request

Fiscal Year 2027
Budget Request

March 4, 2026 **Department:** Social Services

Account Title: Senior Tax Credit Funding

Department Number: 160620000 Account Number: 59999

FY24 Actual	FY25 Budget	FY25 Actual	FY26 Budget	FY26 Est. Expended
			$ -	$0.00

FY27 Budget	Department Request	City Mgr Recommendation	Council Action	Increase (Decrease)
	$388,000.00	$275,000.00		$388,000.00

Support for Budget Request: Provide justification for the budget request using as much detail as possible to support it. Examples of acceptable support include unit costs, quantity estimates, price quotes, etc. Requests based solely on a percentage increase above the previous budget will not be accepted. Use additional sheets if necessary.

Calculated maximium cost if all believed to be eligible for program signed up: $388,000

Suggested budgeted amount based on anticipated participation