

ORDINANCE OR RESOLUTION FOR APPROPRIATIONS AND TAX RATES

State Form 55865 (7-15)
 Approved by the State Board of Accounts, 2015
 Prescribed by the Department of Local Government Finance

Budget Form No. 4
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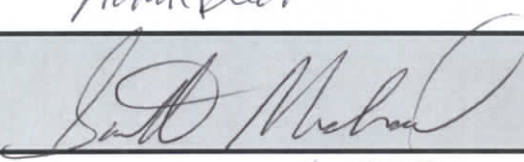

Ordinance / Resolution Number: **2019-6**

Be it ordained/resolved by the **FORT BRANCH TOWN COUNCIL** that for the expenses of **FORT BRANCH CIVIL TOWN** for the year ending December 31, **2020** the sums herein specified are hereby appropriated and ordered set apart out of the several funds herein named and for the purposes herein specified, subject to the laws governing the same. Such sums herein appropriated shall be held to include all expenditures authorized to be made during the year, unless otherwise expressly stipulated and provided for by law. In addition, for the purposes of raising revenue to meet the necessary expenses of **FORT BRANCH CIVIL TOWN**, the property tax levies and property tax rates as herein specified are included herein. Budget Form 4-B for all funds must be completed and submitted in the manner prescribed by the Department of Local Government Finance.

This ordinance/resolution shall be in full force and effect from and after its passage and approval by the **FORT BRANCH TOWN COUNCIL**.

Name of Adopting Entity / Fiscal Body	Type of Adopting Entity / Fiscal Body	Date of Adoption
FORT BRANCH TOWN COUNCIL	Town Council	10/16/2019

Funds				
Fund Code	Fund Name	Adopted Budget	Adopted Tax Levy	Adopted Tax Rate
0061	RAINY DAY	\$20,000	\$0	0.0000
0101	GENERAL	\$419,222	\$294,828	0.4964
0706	LOCAL ROAD & STREET	\$44,500	\$0	0.0000
0708	MOTOR VEHICLE HIGHWAY	\$251,420	\$0	0.0000
1151	CONTINUING EDUCATION	\$7,000	\$0	0.0000
1303	PARK	\$105,205	\$47,000	0.0792
2379	CUMULATIVE CAPITAL IMP (CIG TAX)	\$18,500	\$0	0.0000
2391	CUMULATIVE CAPITAL DEVELOPMENT	\$82,500	\$34,524	0.0494
2411	ECONOMIC DEV INCOME TAX CEDIT	\$120,000	\$0	0.0000
		\$1,068,347	\$376,352	0.6250

Name		Signature
ADAM BLEDSOE	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
SCOTT MICHAEL	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
TOM HAUSCHILD	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	

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ATTEST

Name	Title	Signature
STACY L. ELPERS	CLERK TREASURER	

MAYOR ACTION (For City use only)

Name		Signature	Date
	Approve <input type="checkbox"/> Veto <input type="checkbox"/>		

