

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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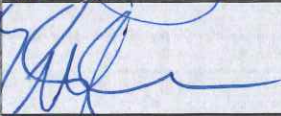

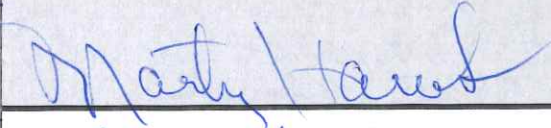

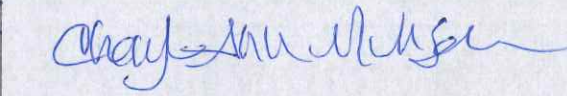

Ordinance / Resolution Number: 2019-37

Be it ordained/~~resolved~~ by the **Monroe County Council** that for the expenses of **MONROE COUNTY SOLID WASTE MANAGEMENT DISTRICT** 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 **MONROE COUNTY SOLID WASTE MANAGEMENT DISTRICT**, 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 **Monroe County Council**.

Name of Adopting Entity / Fiscal Body	Type of Adopting Entity / Fiscal Body	Date of Adoption
Monroe County Council	County Council	10/08/2019

Funds				
Fund Code	Fund Name	Adopted Budget	Adopted Tax Levy	Adopted Tax Rate
1215	NON-REVERTING CAPITAL PROJECTS	\$0	\$0	0.0000
8210	SPECIAL SOLID WASTE MANAGEMENT	\$2,805,596	\$1,835,295	0.0304
8283	SOLID WASTE DISTRICT DEBT SERVICE	\$306,670	\$300,000	0.0050
		\$3,112,266	\$2,135,295	0.0354

Name		Signature
Shelli Yoder	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
Eric Spoonmore	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
Trent Deckard	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
Marty Hawk	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
Geoff McKim	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
Cheryl Munson	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
Kate Wiltz	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	

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ATTEST

Name	Title	Signature
Catherine Smith	Auditor	