

# 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: 2020-38

Be it ordained/resolved by the **Mt. Vernon Community School Corporation** that for the expenses of **MT. VERNON COMMUNITY SCHOOL CORPORATION** for the year ending December 31, **2021** 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 **MT. VERNON COMMUNITY SCHOOL CORPORATION**, 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 **Mt. Vernon Community School Corporation**.

Name of Adopting Entity / Fiscal Body	Type of Adopting Entity / Fiscal Body	Date of Adoption
Mt. Vernon Community School Corporation	School Board	10/05/2020

Funds				
Fund Code	Fund Name	Adopted Budget	Adopted Tax Levy	Adopted Tax Rate
0061	RAINY DAY	\$150,000	\$0	0.0000
0180	DEBT SERVICE	\$10,007,499	\$14,401,388	1.2939
0186	SCHOOL PENSION DEBT	\$255,036	\$255,036	0.0229
3101	EDUCATION	\$27,568,398	\$0	0.0000
3300	OPERATIONS	\$12,534,441	\$5,157,431	0.4552
		<b>\$50,515,374</b>	<b>\$19,813,855</b>	<b>1.7720</b>

Name		Signature
Kellie Freeman	Aye <input type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
Shannon Walls	Aye <input type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
Beth Smith	Aye <input type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
Tony May	Aye <input type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
Michael McCarty	Aye <input type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	

## ATTEST

Name	Title	Signature
Beth Smith	Secretary	