

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
 Generated 9/19/2022 5:04:30 PM

Ordinance / Resolution Number: 2022-85-08

Be it ordained/resolved by the **Wabash County Council** that for the expenses of **WABASH COUNTY** for the year ending December 31, **2023** 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 **WABASH COUNTY**, 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 **Wabash County Council**.

Name of Adopting Entity / Fiscal Body	Type of Adopting Entity / Fiscal Body	Date of Adoption
Wabash County Council	County Council	09/19/2022

Funds				
Fund Code	Fund Name	Adopted Budget	Adopted Tax Levy	Adopted Tax Rate
0005	CASINO/RIVERBOAT	\$80,000	\$0	0.0000
0061	RAINY DAY	\$36,000	\$0	0.0000
0101	GENERAL	\$12,908,064	\$6,964,280	0.4874
0124	2015 REASSESSMENT	\$184,820	\$132,031	0.0092
0702	HIGHWAY	\$4,447,189	\$0	0.0000
0706	LOCAL ROAD & STREET	\$0	\$0	0.0000
0790	CUMULATIVE BRIDGE	\$935,000	\$318,628	0.0223
0801	HEALTH	\$480,688	\$314,822	0.0220
1157	PUBLIC SAFETY ACCESS POINT - OPERATING	\$1,407,886	\$0	0.0000
2391	CUMULATIVE CAPITAL DEVELOPMENT	\$550,000	\$468,654	0.0328
2411	ECONOMIC DEV INCOME TAX CEDIT	\$870,000	\$0	0.0000
		\$21,899,647	\$8,198,415	0.5737

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Home-Ruled Funds (Not Reviewed by DLGF)		
Fund Code	Fund Name	Adopted Budget
9500	HR # 1 Surveyor's Cornerstone Perpetuation(1202)	\$24,000
9501	HR #2 - Clerks Record's Perpetuation (1119)	\$34,450
9502	HR #3 - Recorder's Perpetuation (1189)	\$74,915
9503	HR #4 - Pre-trial Diversion (2501)	\$91,578
9504	HR #5 Security Protection (1160)	\$3,400
9505	HR #6 -Covered Bridges (1134)	\$4,500
9506	HR #7 -Drug Court (2511)	\$13,000
9507	HR #8 - Alcohol & Drug (2510)	\$90,670
9508	HR #9 - Clerk's IV D Incentive (8899)	\$16,674
9509	HR #10 - Emergency Right to Know (1152)	\$6,000
9510	HR #11 - LOIT Special Distribution (1229)	\$100,000
9511	HR #12 - Local Health Trust (1206)	\$19,494
9512	HR #13 - Auditor Plat Book (1181)	\$18,150
9513	HR #14 - Adult Probation User Fee (2100)	\$247,708
9514	HR #15 - Juvenile Probation User Fee (2150)	\$3,000
9515	HR #16 - County Misdemeanant (1175)	\$24,368
9516	HR #17 - Sex Offender (4204)	\$1,000
9517	HR #18 - County Elected Official Training (1217)	\$4,000
9518	HR #19 - Sheriff Pension (1193)	\$18,000
9519	HR #20 - CASA (1212)	\$165,062
9520	HR #21 - Solid Waste Admin Fee (1194)	\$1,800
9521	HR #22-Commissary Payroll (4949)	\$20,454
9522	HR #23 - Statewide 911 (1222)	\$889,750
9523	HR #24- EMA Volunteer Support (4951)	\$4,500
9524	HR #25 - Recorder's Enhanced Access (1154)	\$9,465
9525	HR #26 -Local Health Maintenance (1168)	\$33,139
9526	HR #27 - SPHI - Strengthening Pulic Health (8850)	\$14,000
9527	HR #28 - LIT Public Safety (1170)	\$407,451
9530	HR #31- CASA Donation Fund (4112)	\$2,150
9533	HR #34 Auditor Ineligible Deduction (1216)	\$2,000
9534	HR #35- Accident Report (1101)	\$1,000
9535	HR #36 Firearms Fund (1156)	\$18,000
9539	HR #40- Unsafe Premises (1207)	\$27,500
9540	HR #41-21.027 American Rescue Plan	\$1,900,000
		\$4,291,178

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Name		Signature
Kyle Bowman	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	<i>Kyle Bowman</i>
Matthew Mize	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	<i>Matthew Mize</i>
Sam Hann	Aye <input type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	
Philip Dale	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	<i>Philip R. Dale</i>
Matt Dillon	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	<i>Matt Dillon</i>
Lorissa Sweet	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	<i>Lorissa Sweet</i>
Barbara Pearson	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	<i>Barbara Pearson</i>

ATTEST

Name	Title	Signature
Marcie Shepherd	Auditor	<i>Marcie Shepherd</i>

In accordance with IC 6-1.1-17-16(k), we state our intent to issue debt after December 1 and before January 1 Yes No

In accordance with IC 6-1.1-17-16(k), we state our intent to file a shortfall appeal after December 1 and before December 31 Yes No