

2020 School District Tax Rate Information Worksheet

1 _____
 School District Name (Note: Name on Public Notices may differ from that shown on tax statement)

2 _____
 Entity Mailing Address

3 Contact for calculations:
 Contact Phone and Email: _____

4 Contact Email for Property Owner Comments: _____
 Contact Telephone for Property Owners: _____

5 Entity Website: _____

6 Elected Officials Info (for GCTO and CAD websites):

<i>Name & Title/Position</i>	<i>Email</i>	<i>Telephone</i>

7 2020 Total Debt To Be Paid With Property Taxes: <i>(Schedule may be attached but is not required)</i>	Principal:	\$ _____
	Interest:	_____
	Other Costs:	_____
	Total	\$ _____

Amount of debt to be paid from other sources: \$ _____

8 Total Bonded Indebtedness \$ _____

9 Projected Fund Balances:

General Fund:	\$	_____
Long Term Debt Fund:	\$	_____

10 Comparison of proposed budget with last year's budget::

	<u>Last Fiscal Year</u>	<u>This Fiscal Year</u>
Amount Budgeted for M&O	\$ _____	\$ _____
Amount Budgeted for Debt Service	\$ _____	\$ _____
Total Expenditures Budgeted	\$ _____	\$ _____

11 2020 Exemptions (if different from 2019):	<u>Y or N</u>	<u>Amount or Percentage</u>
A. Local Option	_____	\$ _____
B. Regular Homestead	Y	\$25,000
C. Over 65	_____	\$ _____
D. Disabled Person	_____	\$ _____

2020 School District Tax Rate Information Worksheet

School District Name (Note: Name on Public Notices may differ from that shown on tax statement)

12 Compressed tax rate (provided by TEA): _____

13 GCTO to publish tax rate notices? _____ Yes _____ No

Preferred Newspaper: _____

14 School districts are required to publish one notice no later than 10 nor earlier than 30 days before meeting to discuss budget and proposed rate. Upon receipt of all necessary information, a draft notice will be emailed to the individual specified above for approval. Is permission granted for GCTO to review and approve ad proof to facilitate publication? If yes, individual will be copied on publication request to newspaper.

_____ Yes or No

15 Date of Meeting to Propose Rate: _____ Time: _____

Date of Budget Meeting: _____ Time: _____

Location (provide actual address): _____

Return this form with all known information via fax (409-766-2479) or email no later than July 1st to galcotax@co.galveston.tx.us or Erma.Evans@co.galveston.tx.us or Cheryl.E.Johnson@co.galveston.tx.us