

TAX LEVY ORDINANCE

TOWNSHIP

ORDINANCE No. _____

An ordinance levying taxes for all town purposes for Collinsville _____ Township,
Madison _____ County, Illinois, for the tax year 2018_, collectable in 2019_.

BE IT ORDAINED by the Board of Trustees of Collinsville _____ Township,
Madison _____ County, Illinois, as follows:

SECTION 1: That the sum of One Million Two Hundred Six Thousand Six Hundred Seventy-Seven _____
_____ Dollars (\$1,206,677 _____) are hereby levied upon all
property subject to taxation within the Township as that property is assessed and equalized, in order to
meet and defray all the necessary expenses and liabilities of the Township as required by statute or voted
by the people in accordance with the law, for such purposes as:

General _____, Social Security _____,

Audit _____, General Assistance _____,

Insurance _____,

Ill Muni Retirement Fund _____,

for the year 2018.

SECTION 2: That the amount levied for each object and purpose shall be as follows:

	Amount Levied
<u>GENERAL TOWN FUND</u>	
<u>ADMINISTRATION</u>	
Personnel	389,303
Contractual Services	97,347
Commodities	12,974
Capital Outlay	33,414
Other Expenditures	103,070
TOTAL ADMINISTRATION:	636,108
<u>ASSESSOR</u>	
Personnel	305,571
Contractual Services	46,719
Commodities	5,831
Capital Outlay	27,316
Other Expenditures	55,850
TOTAL ASSESSOR:	441,287
<u>CEMETERY</u>	
Personnel	0
Contractual Services	0
Commodities	0
Capital Outlay	0
Other Expenditures	0
TOTAL CEMETERY:	0
<hr/>	
Personnel	0
Contractual Services	0
Commodities	0
Capital Outlay	0
Other Expenditures	0
TOTAL _____:	0
TOTAL GENERAL TOWN FUND:	1,077,395

REF: General Corporate Tax 60 ILCS 1/235-10

	Amount Levied	
<u>AUDIT FUND</u>		
Contractual Services	0	
TOTAL AUDIT FUND:		0

REF: Audit Tax 50 ILCS 310/9

INSURANCE FUND

Personnel	0	
Contractual Services	0	
TOTAL INSURANCE FUND:		0

REF: Insurance Tax 745 ILCS 10/9-107

ILLINOIS MUNICIPAL RETIREMENT FUND (IMRF)

Personnel	69,938	
TOTAL IMRF FUND:		69,938

REF: IMRF Tax 40 ILCS 5/7-171

SOCIAL SECURITY FUND

Personnel	59,344	
TOTAL SOCIAL SECURITY FUND:		59,344

REF: Social Security Tax 40 ILCS 5/21-110 & 110.1

CEMETERY FUND

Personnel	0	
Contractual Services	0	
Commodities	0	
Capital Outlay	0	
Other Expenditures	0	
TOTAL CEMETERY FUND		0

REF: Cemetery Tax 50 ILCS 610c & 60 ILCS 1/135-50

	Amount Levied	
<u>GENERAL ASSISTANCE FUND</u>		
<u>ADMINISTRATION</u>		
Personnel	0	
Contractual Services	0	
Commodities	0	
Capital Outlay	0	
Other Expenditures	0	
TOTAL ADMINISTRATION:		0
<u>HOME RELIEF</u>		
Contractual Services	0	
Commodities	0	
Other Expenditures	0	
TOTAL HOME RELIEF:		0
TOTAL GENERAL ASSISTANCE FUND:		0

REF: Public Assistance Tax 60 ILCS 1/235-20

<u>FUND</u>		
Personnel	0	
Contractual Services	0	
Commodities	0	
Capital Outlay	0	
Other Expenditures	0	
TOTAL _____ FUND:		0

REF: _____ Tax _____ ILCS _____

TAX LEVY SUMMARY

General Corporate Tax	1,077,395	
Audit Tax	0	
Insurance Tax	0	
Illinois Municipal Retirement Tax	69,938	
Social Security Tax	59,344	
Public Assistance Tax	0	
Cemetery Tax	0	
_____ Tax	0	
TOTAL TAXES LEVIED:		1,206,677

SECTION 3: That the Town Clerk shall make and file with the County Clerk of said County of Madison _____, on or before the last Tuesday of December, a duly certified copy of this ordinance.

SECTION 4: That if any section, subdivision, or sentence of this ordinance shall for any reason be held invalid or to be unconstitutional, such finding shall not effect the validity of the remaining portion of this ordinance.

SECTION 5: That this ordinance shall be in full force and effect after its adoption, as provided by law.

ADOPTED this _____ day of _____, 201____, pursuant to a roll call vote by the Board of Trustees of Collinsville _____ Township, Madison _____ County, Illinois.

<u>BOARD OF TRUSTEES</u>	<u>AYE</u>	<u>NAY</u>	<u>ABSENT</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Town Clerk

Chairman - Board of Trustees

CERTIFICATION OF TAX LEVY ORDINANCE

TOWNSHIP

The undersigned, duly elected, qualified and acting Clerk of _____
Township, _____ County, Illinois, does hereby certify that the attached
hereto is a true and correct copy of the Tax Levy Ordinance, of said Township for the year 201__, as
adopted this ____ day of _____, 201__.

This certification is made and filed pursuant to the requirements of (60 ILCS 1/75-20) and on behalf of
_____ Township, _____ County, Illinois.

This certification must be filed by the last Tuesday in December.

Date this ____ day of _____, 201__

Town Clerk

Filed this ____ day of _____, 201__

County Clerk