



Ordinance / Resolution No. 2018-10
RCW 84.55.120

WHEREAS, the Commission of San Juan County Public Hospital District #2 has met and considered its budget for the calendar year 2019; and,

WHEREAS, the districts actual levy amount from the previous year was \$ 833,662.27; and,

WHEREAS, the population of this district is less than 10,000; and now, therefore,

BE IT RESOLVED by the governing body of the taxing district that an increase in the regular property tax levy is hereby authorized for the levy to be collected in the 2019 tax year.

The dollar amount of the increase over the actual levy amount from the previous year shall be \$ 8,336.62 which is a percentage increase of 1% from the previous year.

additional revenue resulting from new construction, improvements to property, newly constructed wind turbines, solar, biomass, and geothermal facilities, and any increase in the value of state assessed property, any annexations that have occurred and refunds made.

Adopted this 8th day of November, 2018.

Handwritten signature of Jim Swindle

Handwritten signature of Rebecca Bradley

If additional signatures are necessary, please attach additional page.

This form or its equivalent must be submitted to your county assessor prior to their calculation of the property tax levies. A certified budget/levy request, separate from this form is to be filed with the County Legislative Authority no later than November 30th. As required by RCW 84.52.020, that filing certifies the total amount to be levied by the regular property tax levy. The Department of Revenue provides the "Levy Certification" form (REV 64 0100) for this purpose. The form can be found at: http://dor.wa.gov/docs/forms/PropTx/Forms/LevyCertf.doc.

To ask about the availability of this publication in an alternate format, please call 1-800-647-7706. Teletype (TTY) users may use the Washington Relay Service by calling 711. For tax assistance, call (360) 534-1400.



Levy Certification

Submit this document to the county legislative authority on or before November 30 of the year preceding the year in which the levy amounts are to be collected and forward a copy to the assessor.

In accordance with RCW 84.52.020, I, Christa Campbell,
(Name)

Chair, for San Juan County Public Hospital, do hereby certify to
(Title) District #2
(District Name)

the San Juan County legislative authority that the Commissioners
(Name of County) (Commissioners, Council, Board, etc.)

of said district requests that the following levy amounts be collected in 2019 as provided in the district's
(Year of Collection)

budget, which was adopted following a public hearing held on 11/08/18 :
(Date of Public Hearing)

Regular Levy: \$853,000.00
(State the total dollar amount to be levied)

Excess Levy: \$0.00
(State the total dollar amount to be levied)

Refund Levy: \$0.00
(State the total dollar amount to be levied)

Signature: 

Date: 11/8/18