Prescribed by the
State Board of Accounts

County Form
No. 22 (Rev 1970)

# COUNTY AUDITOR'S CERTIFICATE OF TAX DISTRIBUTION

C.A.G.I.T.

GOSHEN, Indiana, December 21, 2015

PREPARE FOUR COPIES:
1. Taxing Unit
2. County Treasurer
3. County Auditor
4. DLGF

I, hereby certify that I have this day issued Warrant No. _____ on the Treasurer of ELKHART County, Indiana, in favor of TOWN OF WAKARUSA
who is _____ of _____
in the sum of _____ $ 33,723.50 _____ Dollars
On account of taxes due said governmental unit as follows:

COUNTY ADJUSTED GROSS INCOME TAX DISTRIBUTION

| NAME OF FUND DLGF #'S | TAXES | | | | | DEDUCTIONS | | | NET TOTAL DISTRIBUTION |
|---|---|---|---|---|---|---|---|---|---|
| | General Property | | Certified Shares | P.T.R.C. | TOTAL | Advances | Exam. of Records | | |
| 0101 General Fund | | | 27,460.12 | 6,263.38 | 33,723.50 | | | | 33,723.50 |
| December | | | | | | | | | |
| Totals | | | 27,460.12 | 6,263.38 | 33,723.50 | | | | 33,723.50 |

12/1/15
C:\Bev\SpSheets\Fm22\CAGIT\2015\December\15 C&T Wak.xls

Pauline E. Groff
County Auditor