**S U P P O R T I V E I N F O R M A T I O N**

Fiscal Year Ending June 30, 2018

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AVC/County/District Name County/District ID

**[ 1 ]** ASSESSED VALUATION AND MILLS LEVIED **AS OF DECEMBER 31, 2017**

Value of all taxable property within this school district $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current Operations Debt Service**

**Total Mills** Levied for K-12 Education: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Of the total mills levied listed above, specify how many mills (if any) were levied for the County Board of Education and/or for special purposes.

**Current Operations Debt Service**

**Mills Levied for:**

County Board \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Area Vocational Center \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County-Wide \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special Purposes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**[ 2 ]** NUMBER OF FULL-TIME EQUIVALENT (FTE) TEACHERS FUNDED THROUGH THE GENERAL FUND:

For EFA audit purposes, each district must maintain the appropriate documentation (payroll, Master Teacher Schedule, etc.) to support the FTE counts calculated. **IN EACH OF THE FOLLOWING AREAS,** **PLEASE EXPRESS FTEs IN HUNDREDTHS (Example: 12.07).**

1. Kindergarten \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 9. Visually Handicapped \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Primary \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 10. Hearing Handicapped \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Elementary \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 11. Speech Handicapped \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 12. Learning Disabilities \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Vocational \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 13. Emotionally Handicapped \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Educ. Ment. Handicapped \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 14. Autism \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Train. Ment. Handicapped \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **\***15. Homebound \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Orthoped. Handicapped \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL**

**\***To determine the FTE teacher count for Homebound teachers, divide the total number of hours of Homebound instruction provided by 900.

**Hourly Pay Rate for Homebound Instruction** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**[ 3 ]** INDIRECT COST INFORMATION (For unrestricted rates):

Buildings & Improvements **Acquisition Cost Use Percentage (2%) Use Allowance**

(Cumulative costs for all years) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** X .02 = **\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Usable Equipment

(Include all items on inventory **Depreciation Allowable**

not fully depreciated as of **Acquisition Cost** **Percentage (6 2/3%)** **Depreciation**

current year) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** X .066 = **\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SUBMIT COMPLETED FORM WITH AUDIT REPORT**

**BY: DECEMBER 1, 2018**

**by accessing the LEA Audit Reporting System.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Respondent Completing This Form

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Superintendent/Representative Signature