This form is to be completed and submitted through the Indiana Gateway for Government Units at https://gateway.ifionline.org/login.aspx. Proof of Publication is to be submitted separately.

Prescribed by the Department of Local Government Finance
Approved by the State Board of Accounts

Budget Form No. 3 (Rev. 2011)

NOTICE TO TAXPAYERS

Complete details of budget estimates by fund and/or department may be seen by visiting the office of this unit of government.

Notice is hereby given to taxpayers of (Unit Name), (County Name), Indiana that the proper officers of (Adopting Unit Name) at (Location of Public Hearing) on (Date of Public Hearing) at (Time of Public Hearing) will conduct a public hearing on the year (Year Number) budget. Following this meeting, any ten or more taxpayers may object to a budget, tax rate, or tax levy by filing an objection petition with the proper officers of (Adopting Unit Name) within seven days after the hearing. The objection petition must identify the provisions of the budget, tax rate, or tax levy that taxpayers object to. If a petition is filed, the (Adopting Unit Name) shall adopt with its budget a finding concerning the objections filed and testimony presented. Following the aforementioned hearing, the (Adopting Unit Name) will meet at (Location of Adoption Meeting) on (Date of Adoption Meeting) at (Time of Adoption Meeting) to adopt the following budget:

Public Hearing	Date: Time:	Adoption Meeting	Date: Time:
Net Assessed Valuation			
Estimated Max Levy			

1 Fund Name	2 Budget Estimate	3 Maximum Estimated Funds to be Raised (including appeals and levies exempt from maximum levy limitations)	4 Excessive Levy Appeals	5 Current Tax Levy
Totals				

Name:	
Title:	
PIN:	
Date:	

I hereby acknowledge that the submission of this document through the Gateway password and PIN system constitutes an "electronic signature" as defined in IC 5-24-2-2. This submission is intended to, and hereby does, constitute authentication and approval of the submitted document as required by the Indiana Code. I understand that this electronic signature takes the place of my handwritten signature and accomplishes the same purposes as would my handwritten signature in the same circumstance. I further acknowledge that this electronic signature has the same force and effect as my handwritten signature and can and will be used for all lawful purposes. I affirm that I have the real and apparent authority to electronically sign and submit this document on behalf of the unit.

SAMPLE - USE GATEWAY FORMS