

Federal Identification Number
35-1879954

TOWNSHIP FORM 15(Revised 2008)
PRESCRIBED BY
THE STATE BOARD OF ACCOUNTS

STATE OF INDIANA
STATE BOARD OF ACCOUNTS
302 WEST WASHINGTON STREET, ROOM E418
INDIANAPOLIS, INDIANA 46204-2765
TELEPHONE: (317)-232-2513

TOWNSHIP: BOONE
COUNTY: MADISON

ID: _____
(State Board of Accounts USE ONLY)

TOWNSHIP TRUSTEES ANNUAL REPORT TO:
THE TOWNSHIP BOARD
THE COUNTY AUDITOR
THE STATE BOARD OF ACCOUNTS
THE U.S. BUREAU OF CENSUS
TOWNSHIP: BOONE
COUNTY: MADISON
FOR THE YEAR ENDED DECEMBER 31, 2008
FILED IN THE COUNTY AUDITOR'S OFFICE
2009

CONTENTS:

- PART 1 - STATEMENT OF RECEIPTS, DISBURSEMENTS, CASH BALANCES AND INVESTMENT BALANCES (ADVERTISE)
- PART 2 - RECEIPTS (ADVERTISE)
- PART 3A - DISBURSEMENTS
- PART 3B - DISBURSEMENTS (ADVERTISE)
- PART 4 - CASH AND INVESTMENTS
- PART 5 - INDEBTEDNESS (ADVERTISE)
- PART 6 - INTERGOVERNMENTAL EXPENDITURES
- PART 7 - STATEMENT OF FEDERAL GRANT RECEIPTS
- PART 8 - STATEMENT OF STATE GRANT RECEIPTS
- PART 9 - CERTIFICATE (ADVERTISE)
- PART 10 - ADVERTISEMENT AND NOTE TO PUBLISHERS
- PART 11 - TOWNSHIP ASSISTANCE STATISTICAL REPORT
- PART 12 - REPORT OF FINANCIAL ASSISTANCE TO NONGOVERNMENTAL ENTITIES

JAN 29 2009

FILED
Sherry Roberts
AUDITOR, MADISON COUNTY

TRUSTEE'S NAME TERESA K. HIATT
TRUSTEE'S ADDRESS 17769 NORTH 500 WEST
ELWOOD Indiana 46036-0000
(city/town) (state) (zip)
(street)

TELEPHONE (BEWTEEN THE HOURS OF 8:00 AM AND 4:00 PM) : PHONE (765)536-2711

ANNUAL FINANCIAL REPORT - INDIANA TOWNSHIPS

TOWNSHIP: BOONE

TOWNSHIP FORM 15(Revised 2008)

COUNTY: MADISON

ID: _____
(State Board of Accounts USE ONLY)

PART 3A - Page 1: DISBURSEMENTS BY FUNCTION FOR TOWNSHIP, FEDERAL REVENUE SHARING AND TOWNSHIP ASSISTANCE (REPORT IN DOLLARS AND CENTS ONLY)

TOWNSHIP FUND	Code	Township General Government	Township Public Safety	Township Culture/ Recreation	Township Misc	Code	Federal Rev Sharing Misc	TOTAL REV SHARING FUND	TOTAL TOWNSHIP ASSISTANCE FUND	Code
		0101-410	0101-420	0101-450	0101-490					
Personal Services	1000	5,274.15				1000				1000
Supplies	2000					2000				2000
Other Services And Charges	3000	8,702.35				3000				3000
Capital Outlay	4000					4000				4000
Purchase Of Investments	7000					7000				7000
Transfers Of Funds	6000					6000				6000
Total Expenditures		13,976.50	0.00	0.00	0.00		0.00	0.00	0.00	13,976.50
FEDERAL REVENUE SHARING FUND	Code	Federal Rev Sharing Gen Government	Federal Rev Sharing Public Safety	Federal Rev Sharing Culture/ Recreation	Federal Rev Sharing Township Assist	Code	Federal Rev Sharing Misc	TOTAL REV SHARING FUND	TOTAL TOWNSHIP ASSISTANCE FUND	Code
Personal Services	1000	4501-410	4501-420	4501-450	4501-442	1000	4501-490	N/A	N/A	1000
Supplies	2000				//////////	2000				2000
Other Services And Charges	3000				//////////	3000				3000
Capital Outlay	4000				//////////	4000				4000
Purchase Of Investments	7000				//////////	7000				7000
Transfers Of Funds	6000					6000				6000
Total Expenditures		0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00
TOWNSHIP ASSISTANCE FUND	Code	Township Assistance Admin.	Township Assist Direct Assistance	Township Assist Other Assistance	Township Misc. Inv. Assist	Code		TOTAL TOWNSHIP ASSISTANCE FUND	TOTAL TOWNSHIP ASSISTANCE FUND	Code
Personal Services	1000	0840-441	0840-442	0840-443	0840-490	1000		N/A	N/A	1000
Supplies	2000					2000				2000
Other Services And Charges	3000					3000				3000
Capital Outlay	4000					4000				4000
Purchase Of Investments	7000					7000				7000
Transfers Of Funds	6000					6000				6000
Medical hospital, burial	8000					8000				8000
Other Disbursements	5000		1,006.67			5000				5000
Total Expenditures		0.00	1,006.67	0.00	0.00		0.00	0.00	0.00	1,006.67

ANNUAL FINANCIAL REPORT - INDIANA TOWNSHIPS

TOWNSHIP: BOONE

TOWNSHIP FORM 15(Revised 2008)

COUNTY: MADISON

ID: _____
(State Board of Accounts USE ONLY)

PART 3A - Page 2: DISBURSEMENTS BY FUNCTION FOR OTHER TOWNSHIP FUNDS (REPORT IN DOLLARS AND CENTS ONLY)

	Code	Fire Fighting Fund	Dog Fund	Recreation Fund	Cumulative Fire Fund	Code	Ambulance Fund	Fire Equip Debt Fund	Cemetery Trust	Debt Service Fund	Code
		2010	0108	0061	1181		1101	1182	2120	0180	
ALL FUNDS	1000	1111	0202	1312	1190	1000	1101	1182	2120	0180	1000
Personal Services	1000					1000					1000
Supplies	2000					2000					2000
Other Services And Charges	3000	23,268.00				3000					3000
Capital Outlay	4000					4000					4000
Purchase Of Investments	7000					7000					7000
Transfers Of Funds	6000					6000					6000
Total Expenditures	9999	23,268.00	0.00	0.00	0.00	9999	0.00	0.00	0.00	0.00	9999
ALL FUNDS	1000					1000					1000
Personal Services	1000					1000					1000
Supplies	2000					2000					2000
Other Services And Charges	3000					3000					3000
Capital Outlay	4000					4000					4000
Purchase Of Investments	7000					7000					7000
Transfers Of Funds	6000		2,421.00			6000					6000
Total Expenditures	9999	0.00	2,421.00	0.00	0.00	9999	0.00	0.00	0.00	0.00	9999
ALL FUNDS	Code					Code					Code
Personal Services	1000					1000					1000
Supplies	2000					2000					2000
Other Services And Charges	3000					3000					3000
Capital Outlay	4000					4000					4000
Purchase Of Investments	7000					7000					7000
Transfers Of Funds	6000					6000					6000
Total Expenditures	9999	0.00	0.00	0.00	0.00	9999	0.00	0.00	0.00	0.00	9999

**ANNUAL FINANCIAL REPORT -
INDIANA TOWNSHIPS**

TOWNSHIP FORM 15 (Revised 2008)

ID: _____
(State Board of Accounts USE ONLY)
TOWNSHIP: BOONE
COUNTY: MADISON

PART 3B - DISBURSEMENTS

To Whom Paid	Gross Amount	To Whom Paid	Gross Amount
TOWNSHIP FUND		EMPIRE GAS	239.90
JOHN R. HIATT, TWP BOARD	200.00	INDIANA MICHIGAN POWER	445.36
RON HIATT, TWP CLERK	300.00	**TOTAL OTHER DISBURSEMENTS	1006.67
TERESA K. HIATT, SALARY	4000.00	**TOTAL TWP ASSISTANCE-DIRECT ASSIST.	1006.67
INTERNAL REVENUE SERVICE	374.15	**TOTAL TOWNSHIP ASSISTANCE	1006.67
JUDI KITTS, TOWNSHIP BOARD	200.00	FIRE FIGHTING	
CHARLES MAYNARD, TWP BD	200.00	MADISON CO SHERIFF'S DEPT	5268.00
**TOTAL PERSONAL SERVICES	5274.15	VAN BUREN TOWNSHIP	18000.00
BUREAU OF MOTOR VEHICLES	16.75	**TOTAL OTHER SERVICES AND CHARGES	23268.00
BOARD OF ACCOUNTS	360.00	**TOTAL FIRE FIGHTING FUND	23268.00
CRIMANS INSURANCE AGENCY	100.00	**TOTAL FIRE FIGHTING	23268.00
DAVISSON & DAVISSON	100.00		
ELWOOD CALL LEADER	214.05		
ELWOOD TIRE & AUTO SERVICE	29.00		
TERESA K. HIATT, RENT	150.00		
INDIANA FARMERS MUTUAL INS	328.00		
IDLEWINE LAWNMOWER SALES	450.32		
INDIANA MEDIA GROUP	146.20		
WILLIAM IDLEWINE, CEM CARE	882.25		
KIRK KITTS, CEM CARE	307.13		
KIRT KITTS, STORAGE	502.50		
LAIRD LOCAL GOV'T SERVICE	2500.00		
MADISON COUNTY TREASURER	10.00		
NHI HOLDINGS, INC	75.65		
REA LOGAN & CO, INC	20.00		
JEFF SOLMS, CEMETERY CARE	2110.50		
STAFFORD TREE SERVICE	400.00		
**TOTAL OTHER SERVICES AND CHARGES	8702.35		
**TOTAL TOWNSHIP-GENERAL GOVERNMENT	13976.50		
**TOTAL TOWNSHIP FUND	13976.50		
LEVY EXCESS			
FIRE FIGHTING FUND	1661.00		
TOWNSHIP FUND	760.00		
**TOTAL TRANSFERS OF FUNDS	2421.00		
**TOTAL LEVY EXCESS	2421.00		
**TOTAL LEVY EXCESS	2421.00		
TOWNSHIP ASSISTANCE			
TOWNSHIP ASSISTANCE-442			
AMERICAN ELECTRIC POWER	238.21		
A T & T	83.20		

BE SURE TO REPORT TOWNSHIP ASSISTANCE DISBURSEMENTS IN DETAIL LIKE ALL OTHERS

ANNUAL FINANCIAL REPORT - INDIANA TOWNSHIPS

TOWNSHIP: BOONE

TOWNSHIP FORM 15 (Revised 2008)

COUNTY: MADISON

ID: _____
(State Board of Accounts USE ONLY)

PART 5 - INDEBTEDNESS AS OF December 31, 2008

	Outstanding 01/01/08 (Beginning Year)	Issued During Year 2008	Retired During Year 2008	Outstanding 12/31/08 (Ending Year)	Interest Paid During 2008 (Full Year)
	0.00	0.00	0.00	0.00	0.00

PART 6 - INTERGOVERNMENTAL EXPENDITURES

OF THE EXPENDITURES REPORTED IN PART 3, HOW MUCH WAS PAID TO OTHER GOVERNMENTAL UNITS FOR:

Purpose	Amount
1. E.M.S Services	7,000.00
2. Fire Protection	16,268.00
3. Parks and Recreation	
4. All Other	
Total (Add lines 1 through 4)	23,268.00

PART 9 - CERTIFICATION

Note: Prepare six copies of this report to be presented to the Township Board for approval on or before the third Tuesday after the first Monday in January. After approval, one copy is to be retained by the Chairman of the Township Board. One copy is to be kept on file by the Township Trustee. Within ten (10) days, one copy, together with all vouchers, shall be filed with the County Auditor (IC 36-6-4-13(d)). In addition, one copy, along with advertising instructions, is to be submitted to each newspaper for which the report is to be published, within four (4) weeks after the third Tuesday following the first Monday in January (IC 5-3-1 and IC 36-6-4-13(b)). The advertisement must state that a complete and detailed annual report, and the accompanying vouchers showing the names of persons paid money by the township, have been filed with the County Auditor. Also, that the Chairman of the Township Board has a copy of the report that is available for inspection by any taxpayer of the township. One copy is to be mailed to the State Board of Accounts, by the trustee, by January 30 (IC 5-11-1-4).

State of Indiana

SS:

MADISON County

I, TERESA K. HIATT, Trustee of BOONE Township, MADISON County, Indiana

do solemnly affirm under the penalty of perjury that the preceding report is complete, true and correct; that the sum with which I am charged in this report are all of the sums received by me; and that the various items of expenditures credited have been fully paid in the sums stated; that such payments were made without express or implied agreement that any portion thereof shall be retained by or repaid to me or to any other person. I further affirm that a complete and detailed annual report, together with all accompanying vouchers showing the names of persons having been paid money by the township, have been filed as required by law in the office of the County Auditor, and that copies of such annual report are in custody of the Township Board and the State Board of Accounts. Said report is subject to inspection by any taxpayer of the township.

Teresa K. Hiatt (sign)
TERESA K. HIATT Township Trustee

Telephone: (765)536-2711

Date this report was to be published: _____

Subscribed and sworn (or affirmed) to before me, the Chairman of the Township Board of BOONE Township at its annual meeting, this 20 th day of January, 2009

Charles Maynard (sign)
CHARLES MAYNARD Township Board Chairman

OPTION 1

This report was received, accepted, and approved by the Township Board at its annual meeting, this 20 th day of January 2009

BOONE Township Board
Charles Maynard (sign) CHARLES MAYNARD
Judi Kitts (sign) JUDI KITTS
John R. Hiatt (sign) JOHN R. HIATT

OPTION 2

This report was received, accepted, and approved except for Part(s) _____ by the following Township Board Member(s) at its annual meeting, this 20 th day of January 2009

_____ (sign) CHARLES MAYNARD
_____ (sign) JUDI KITTS
_____ (sign) JOHN R. HIATT

Note: Option 1 to be used where the Township Board approves the annual report.
Option 2 to be used where a member or all members of the Township Board disapproves part or all of the annual report.
(DO NOT ADVERTISE)

**ANNUAL FINANCIAL REPORT -
INDIANA TOWNSHIPS**

ID: _____
(State Board of Accounts USE ONLY)

TOWNSHIP FORM 15 (Revised 2008)

TOWNSHIP: BOONE
COUNTY: MADISON

PART 10 - NOTE TO PUBLISHERS

NOTE TO PUBLISHERS:

This form of report is prescribed by the State Board of Accounts in compliance with IC 36-6-4-13.

All legal advertisements shall be set in solid type not larger than the type used in the regular reading of the newspaper, without any leads or other devices for increasing space. All such advertisements shall be headed by no more than two (2) lines, neither of which shall total more than four (4) solid lines of the type in which the body of the advertisement is set.

NOTE TO TOWNSHIP TRUSTEE:

IC 36-6-4-13 requires this form to be prepared for publication within four weeks after the third Tuesday following the first Monday in January. Publication is to be made ONE TIME ONLY in two (2) newspapers published in the Township. if only one (1) newspaper is published in the township, than the notice shall be published in that newspaper and if another newspaper is published in the county and circulates within the township, in the other newspaper. If no newspaper is published in the township, than publication shall be made in a newspaper published in the county and that circulates within the township.

In all instances tax, retirement or any other withholding is made from salaries, list the GROSS amount of payment. This will eliminate the necessity of listing in this report the payments made to the Internal revenue

PART 3B - DISBURSEMENTS

TOWNSHIP FUND:

To Whom Paid:	Gross Amount:
John Doe	\$1,200.00
ABC Supply	\$175.00
Public Serv Inc	\$675.00
TOTAL TOWNSHIP FUND	\$2,050.00 *

* This total shall agree with the total disbursements per Fund shown in PART 1 and PART 3A.

BOONE

TOWNSHIP,

MADISON

COUNTY

TOWNSHIP ASSISTANCE STATISTICAL REPORT (IC 12-20-28-3)
FOR THE PERIOD ENDING DECEMBER 31, 2007

1. TOTAL NUMBER OF REQUESTS FOR TOWNSHIP ASSISTANCE	<u>2</u>
2. (A) TOTAL NUMBER OF RECIPIENTS OF TOWNSHIP ASSISTANCE	<u>6</u>
2. (B) TOTAL NUMBER OF HOUSEHOLDS CONTAINING RECIPIENTS OF TOWNSHIP ASSISTANCE	<u>2</u>
2. (C) (i) TOTAL NUMBER OF CASE CONTACTS MADE WITH OR ON BEHALF OF RECIPIENTS OF TOWNSHIP ASSISTANCE	<u>3</u>
2. (C) (ii) TOTAL NUMBER OF CASE CONTACTS MADE WITH OR ON BEHALF OF MEMBERS OF A HOUSEHOLD RECEIVING TOWNSHIP ASSISTANCE	1006.67 <u>3</u>
3. TOTAL VALUE OF BENEFITS PROVIDED TO RECIPIENTS OF TOWNSHIP ASSISTANCE	\$ <u>1006.67</u>
4. TOTAL VALUE OF BENEFITS PROVIDED THROUGH EFFORTS OF TOWNSHIP STAFF FROM SOURCES OTHER THAN TOWNSHIP FUNDS	\$ <u>600.00</u> 1006.67
<hr/>	
5. (A) TOTAL NUMBER RECEIVING UTILITY ASSISTANCE - RECIPIENTS	<u>6</u> 1006.67
5. (A) (i) TOTAL NUMBER RECEIVING UTILITY ASSISTANCE - HOUSEHOLDS	<u>2</u>
5. (B) TOTAL NUMBER OF RECIPIENTS ASSISTED BY TOWNSHIP STAFF IN RECEIVING UTILITY ASSISTANCE FROM SOURCES OTHER THAN TOWNSHIP FUNDS	<u>6</u>
6. (i) TOTAL VALUE OF BENEFITS PROVIDED FOR PAYMENT OF UTILITIES - TOWNSHIP	\$ <u>1006.67</u>
6. (ii) TOTAL VALUE OF BENEFITS PROVIDED FOR PAYMENT OF UTILITIES - NONTOWNSHIP SOURCES	\$ <u>0</u>
6. (iii) TOTAL VALUE OF ALL BENEFITS PROVIDED FOR PAYMENT OF UTILITIES	\$ <u>1006.67</u>
<hr/>	
7. (A) TOTAL NUMBER RECEIVING HOUSING ASSISTANCE - RECIPIENTS	<u>0</u>
7. (A) (i) TOTAL NUMBER RECEIVING HOUSING ASSISTANCE - HOUSEHOLDS	<u>0</u>
7. (B) TOTAL NUMBER OF RECIPIENTS ASSISTED BY TOWNSHIP STAFF IN RECEIVING HOUSING ASSISTANCE FROM SOURCES OTHER THAN TOWNSHIP FUNDS	<u>0</u>
8. (i) TOTAL VALUE OF BENEFITS PROVIDED FOR HOUSING ASSISTANCE - TOWNSHIP	\$ <u>0</u>
8. (ii) TOTAL VALUE OF BENEFITS PROVIDED FOR HOUSING ASSISTANCE - NONTOWNSHIP SOURCES	\$ <u>0</u>
8. (iii) TOTAL VALUE OF ALL BENEFITS PROVIDED FOR PAYMENT OF HOUSING ASSISTANCE	\$ <u>0</u>
<hr/>	
9. (A) TOTAL NUMBER RECEIVING FOOD ASSISTANCE - RECIPIENTS	<u>0</u>
9. (A) (i) TOTAL NUMBER RECEIVING FOOD ASSISTANCE - HOUSEHOLDS	<u>0</u>
9. (B) TOTAL NUMBER OF RECIPIENTS ASSISTED BY TOWNSHIP STAFF IN RECEIVING FOOD ASSISTANCE FROM SOURCES OTHER THAN TOWNSHIP FUNDS	<u>0</u>
10. (i) TOTAL VALUE PROVIDED FOR FOOD ASSISTANCE - TOWNSHIP	\$ <u>0</u>
10. (ii) TOTAL VALUE PROVIDED FOR FOOD ASSISTANCE - NONTOWNSHIP SOURCES	\$ <u>0</u>
10. (iii) TOTAL VALUE ALL FOOD ASSISTANCE PROVIDED	\$ <u>0</u>

FILED

JAN 29 2009

Kathy Hoops-Wright
AUDITOR, MADISON COUNTY

BOONE

TOWNSHIP

MADISON

COUNTY

TOWNSHIP ASSISTANCE STATISTICAL REPORT (IC 12-20-28-3)

FOR THE PERIOD ENDING DECEMBER 31, 2007

(Continued)

11. (A) TOTAL NUMBER PROVIDED HEALTH CARE - RECIPIENTS	0
11. (A) (i) TOTAL NUMBER PROVIDED HEALTH CARE - HOUSEHOLDS	0
11. (B) NUMBER OF RECIPIENTS ASSISTED BY TOWNSHIP STAFF IN RECEIVING HEALTH CARE ASSISTANCE FROM SOURCES OTHER THAN TOWNSHIP FUNDS	0
12. (i) TOTAL VALUE OF HEALTH CARE PROVIDED - TOWNSHIP	\$ 0
12. (ii) TOTAL VALUE OF HEALTH CARE PROVIDED - NONTOWNSHIP SOURCES	\$ 0
12. (iii) TOTAL VALUE OF ALL OF HEALTH CARE PROVIDED	\$ 0
13. TOTAL NUMBER OF FUNERALS, BURIALS, AND CREMATIONS	0
14. (A) TOTAL ACTUAL VALUE OF FUNERALS, BURIALS, AND CREMATIONS	\$ 0
14. (B) (i) TOTAL PAID BY TOWNSHIP FUNDS FOR FUNERALS, BURIALS, AND CREMATIONS	\$ 0
14. (B) (ii) DIFFERENCE BETWEEN ACTUAL VALUE AND AMOUNT PAID BY TOWNSHIP FUNDS FOR FUNERALS, BURIALS, AND CREMATIONS	\$ 0
15. (A) TOTAL NUMBER OF NIGHTS OF EMERGENCY SHELTER PROVIDED TO THE HOMELESS	0
15. (B) TOTAL NUMBER OF NIGHTS OF EMERGENCY SHELTER PROVIDED TO THE HOMELESS THROUGH EFFORTS OF TOWNSHIP STAFF FROM SOURCES OTHER THAN TOWNSHIP FUNDS	0
15. (C) (i) TOTAL VALUE OF EMERGENCY SHELTER FOR HOMELESS INDIVIDUALS - TOWNSHIP	\$ 0
15. (C) (ii) TOTAL VALUE OF EMERGENCY SHELTER FOR HOMELESS INDIVIDUALS - NONTOWNSHIP SOURCES	\$ 0
15. (C) (iii) TOTAL VALUE OF ALL EMERGENCY SHELTER PROVIDED FOR HOMELESS INDIVIDUALS	\$ 0
16. (A) TOTAL NUMBER OF REFERRALS OF TOWNSHIP ASSISTANCE APPLICANTS TO OTHER PROGRAMS	7
16. (B) TOTAL VALUE OF TOWNSHIP SERVICES IN MAKING REFERRALS TO OTHER PROGRAMS	\$ 600.00
17. TOTAL NUMBER OF TRAINING PROGRAMS OR JOB PLACEMENTS FOUND FOR TOWNSHIP ASSISTANCE RECIPIENTS WITH ASSISTANCE OF TOWNSHIP TRUSTEE	2
18. NUMBER OF HOURS SPENT BY TOWNSHIP ASSISTANCE RECIPIENTS AT WORKFARE	0
19. (i) TOTAL VALUE OF SERVICES PROVIDED BY WORKFARE TO THE TOWNSHIP	\$ 0
19. (ii) TOTAL VALUE OF SERVICES PROVIDED BY WORKFARE TO OTHER AGENCIES	\$ 0
19. (iii) TOTAL VALUE OF ALL SERVICES PROVIDED BY WORKFARE	\$ 0
20. (A) TOTAL AMOUNT OF REIMBURSEMENT FOR ASSISTANCE RECEIVED FROM RECIPIENTS	\$ 0
20. (B) TOTAL AMOUNT OF REIMBURSEMENT FOR ASSISTANCE RECEIVED FROM MEMBERS OF RECIPIENTS' HOUSEHOLDS	\$ 0
20. (C) TOTAL AMOUNT OF REIMBURSEMENT FOR ASSISTANCE RECEIVED FROM RECIPIENTS' ESTATES	\$ 0
21. TOTAL AMOUNT OF REIMBURSEMENT FOR ASSISTANCE RECEIVED FROM MEDICAL PROGRAMS UNDER IC 12-20-16-2(e)	\$ 0
22. (A) TOTAL NUMBER OF INDIVIDUALS ASSISTED THROUGH A REPRESENTATIVE PAYEE PROGRAM	0
22. (B) TOTAL AMOUNT OF FUNDS PROCESSED THROUGH THE REPRESENTATIVE PAYEE PROGRAM THAT ARE NOT TOWNSHIP FUNDS	\$ 0

Boone TOWNSHIP, MADISON COUNTY

TOWNSHIP ASSISTANCE STATISTICAL REPORT (IC 12-20-28-3)
FOR THE PERIOD ENDING DECEMBER 31, 2007
(Continued)

23. (A) TOTAL NUMBER OF INDIVIDUALS ASSISTED THROUGH SPECIAL NONTRADITIONAL PROGRAMS PROVIDED THROUGH THE TOWNSHIP WITHOUT THE EXPENDITURE OF TOWNSHIP FUNDS	<u>0</u>
23. (B) TOTAL AMOUNT OF NONTOWNSHIP FUNDS USED TO PROVIDE THE SPECIAL NONTRADITIONAL PROGRAMS	\$ <u>0</u>
24. (A) (i) TOTAL NUMBER OF HOURS AN INVESTIGATOR OF TOWNSHIP ASSISTANCE SPENDS ON CASE MANAGEMENT SERVICES - RECIPIENTS	<u>7</u>
24. (A) (ii) TOTAL NUMBER OF HOURS AN INVESTIGATOR OF TOWNSHIP ASSISTANCE SPENDS ON CASE MANAGEMENT SERVICES - HOUSEHOLDS	<u>7</u>
24. (B) TOTAL VALUE OF CASE MANAGEMENT SERVICES PROVIDED	\$ <u>70</u>
25. TOTAL NUMBER OF HOUSING INSPECTIONS PERFORMED BY THE TOWNSHIP	<u>0</u>

DATE 1/27/09 TRUSTEE'S SIGNATURE [Signature]

The State Board of Accounts is of the audit position, with the concurrence of the Attorney for the Township Trustees Association, the following procedures should be followed for a consistent compilation and completion of Township Assistance Form TA-7.

When completing the form please keep in mind reconciliation or cross-checking cannot, necessarily, be achieved; i.e., Total Value of Benefits Provided TOWNSHIP ASSISTANCE Recipients (Item 3), will not necessarily be the summation of Total Value of Benefits Provided for Utilities (Item 6 (i)); Total Value of Benefits Provided for Housing Assistance (Item 8 (i)); Total Value of Food Assistance Provided (Item 10 (i)); and, Total Value of Health Care Provided (Item 12 (i)); because IC 12-20-28-3 does not specifically require separate reporting of certain Township Assistance provided by townships; i.e., clothing, household supplies,