Notice About 2020 Tax Rates

current year)

Property Tax Rates in	Rates in Travis County Healthcare District d/b/a Central Health							
	(taxing unit's name)							
This notice concerns the	2020 property tax	rates forTrav	Travis County Healthcare District d/b/a Central Health (taxing unit's name)					
amount of taxes as last y can adopt without holding	rmation about two tax rates used i rear if you compare properties tax g an election. In each case, these by state law. The rates are given	ed in both years. In mos rates are calculated by	t cases, the voter-a dividing the total an	pproval tax rate is the highe	st tax rate a taxing unit			
Taxing units preferring to	list the rates can expand this sec	tion to include an explar	nation of how these	tax rates were calculated.				
This year's no-new-r	evenue tax rate		\$_	0.102271 _{/\$}	100			
This year's voter-app	proval tax rate		\$_	0.111435 _{/\$}	100			
To see the full calculation		.travistaxes.com for e address)	a copy of the Tax F	Rate Calculation Worksheet.				
Unencumbered Fu	nd Balances							
The following estimated balances will be left in the taxing unit's accounts at the end of the fiscal year. These balances are not encumbered by corresponding debt obligation.								
	Type of	Type of Fund						
	Maintenance 8	Maintenance & Operations						
Current Year Debt	Service							
The following amounts ar additional sales tax rever	re for long-term debts that are secundes, if applicable).	ured by property taxes. I	hese amounts will	pe paid from upcoming prope	erty tax revenues <i>(or</i>			
Desc	ription of Debt	Principal or Contract Payment to be Paid From Property Taxes	Interest to be Paid From Property Taxes	Other Amounts to be Paid	Total Payment			
Gen Obligation T	axable Bond Series 2020	\$ 1,180,000.00	\$ 84,357.00	\$	\$ 1,264,357.00			

(expand as needed)

Notice of Tax Rates	Total required for 202				. \$	1,264,357.00)	Form 50-212
_	Amount (if any) paid from	n funds listed in un	encumbered fur	nds	. \$		_	
_	Amount (if any) paid from	n other resources .			. \$		_	
-	Excess collections last y	ear			. \$		_	
	= Total to be paid fro	m taxes in 202			. \$	1,264,357.00)	
	+ Amount added in a	anticipation that the	taxing unit will	collect				
	only 100 % (collection rate)	of its taxes in20	20		. \$		_	
=	Total Debt Levy							
Voter-Approval 1	ax Rate Adjustmen	<u>ts</u>						
State Criminal Ju	ustice Mandate							
The(county n	County Auc	itor certifies that _	(county n	C	County has spen	: \$(amount)	(minus	any amount
received from state re	venue for such costs) in the	ne previous 12 mor	nths for the mair	ntenance and o	perations cost o	keeping inmates	sentenced	to the Texas
Department of Crimina	al Justice.	county name)	_ County Sherif	f has provided	(county	info	ormation o	n these costs,
minus the state reven	ues received for the reimb	ursement of such of	costs. This incre	ased the voter-	approval tax rate	e by \$(amount of	increase)	/\$100.
Indigent Health (Care Compensation	Expenditures						
The	(county name)		spent \$		from July 1	to Jur	า 30	
	(county name)			(amount)	()	orior year)	(cu	rrent year)
on indigent health care	e compensation procedure	es at the increased	minimum eligib	ility standards,	less the amount	of state assistance	e. For the	current tax
year, the amount of in	crease above last year's e	enhanced indigent l	health care expe	enditures is \$_		. This increased th	ne voter-ap	oproval tax
rate by \$		/\$100.						
Indigent Defense	Compensation Ex	penditures						
The			spent \$		from .lul	v 1 to	June 30	
	(county name)		σροιιι ψ	(amount)		y 1 to to	((current year)
to provide appointed o	counsel for indigent individ	uals, less the amou	unt of state grar	its received by	the county. In th	e preceding year,	the county	spent
\$ fo	or indigent defense compe	ensation expenditur	res. The amount	of increase ab	ove last year's i	ndigent defense ex	xpenditure	s is
\$ The contract of the con	nis increased the voter-ap		ount of increase)	\$100 to recoup	(use one phrase	to complete sentence		

Notice of Tax Rates Eligible Count	ty Hospital Expenditures					Form 50-212
The	(name of taxing unit)	spent \$	(amount)	from July 1	(prior year)	to June 30
on expenditures to	maintain and operate an eligible county hospita	al. In the pred	ceding year, the _	(t	axing unit nam	e)
spent \$	for county hospital expenditures. For the curre	nt tax year, tl	ne amount of incre	ease above last year	's expenditur	es is
\$(amount of increase	. This increased the voter-approval tax rate by			(use one phrase to con	•	e: the increased eceding year's expenditures,
This notice contain	ns a summary of the no-new-revenue and voter-	approval cald	culations as			
certified by Jeff I	Knodel, CFO August 7, 2020					
	(designated individual's name and pos	ition) (date)				