



**STATE OF ILLINOIS  
COMPTROLLER**

**SUSANA A. MENDOZA**

DO NOT SEND THIS PAPER COPY - THIS IS YOUR COPY.

MAKE SURE YOU HAVE CLICKED THE SUBMIT BUTTON IN THE COMPTROLLER CONNECT PROGRAM. THIS WILL PROVIDE THE COMPTROLLER'S OFFICE WITH A COPY OF YOUR ANNUAL FINANCIAL REPORT.

**FY 2023 Annual Financial Report  
Special Purpose Long Form**

CCIF Copy - 9/13/2023 12:57:35 PM

Unit Name : Pearl City Public Library District

County : Stephenson

Unit Code : 089/060/10

I attest that, to the best of my knowledge, this report represents a complete and accurate statement of the financial position, the Contact Information, the TIF status, the FEIN status, the Total Appropriations, and the Legal Debt Limitation of Pearl City Public Library District as of the end of this fiscal year.

Written signature of government official  
**Pennie Miller, Director**

Please Sign : \_\_\_\_\_

Date : \_\_\_\_\_

Unit Name : Pearl City Public Library District

Unit Code : 089/060/10

Please be sure to fill out this section accurately. The information you provide below is (1) our primary way of contacting your government, (2) the information we supply to external agencies, and (3) is the name and title we will list on our website. This section should NOT contain ANY of your Accounting Professional's information.

**STEP 1: ENTER CONTACT INFORMATION**

Is the following information correct and complete? \_\_\_\_\_ Yes \_\_\_\_\_ No

<b>A. Contact Person</b> (elected or appointed official responsible for filling out this form.)		<b>B. Chief Executive Officer</b> (Enter your name here ONLY if you are the elected or appointed official <u>responsible</u> for the EXECUTIVE ADMINISTRATION, i.e. mayor, supervisor, or chairman. Your name will be listed with this responsibility on our website.)		<b>C. Chief Financial Officer</b> (Enter your name here ONLY if you are the elected or appointed official <u>responsible</u> for MAINTAINING THE GOVERNMENT'S FINANCIAL RECORDS. Your name will be listed with this responsibility on our website.)	
Pennie	Miller	Richard	Miche	Marvin	Edler
Director		President		Treasurer	
221 S Main St		4988 IL RT 73 South		12116 W Loran Rd	
Pearl City		Pearl City		Pearl City	
IL 61062		IL 61062		IL 61062	
Phone: (815) 443-2832 Ext.		Phone: (815) 443-2832 Ext.		Phone: (815) 443-2832 Ext.	
Fax: (815) 443-2832		Fax: (815) 443-2832		Fax: (815) 443-2832	
E-Mail: pearlcitypubliclibrary@yahoo.com		E-Mail: pearlcitypubliclibrary@yahoo.com		E-Mail: pearlcitypubliclibrary@yahoo.com	
<b>D. Purchasing Agent</b> (Enter the Purchasing Agent or if there is no Purchasing Agent, the name of the person responsible for oversight of all competitively bid contracts should be listed.)		<b>E. FOIA Officer</b> (Enter the FOIA Officer or if there is no FOIA Officer, the name of the person responsible for oversight of all FOIA requests should be listed.)			
Marvin	Edler	Pennie	Miller		
Treasurer		Director			
12116 W Loran Rd		221 S Main St			
Pearl City		Pearl City			
IL 61062		IL 61062			
Phone: (815) 443-2832 Ext.		Phone: (815) 443-2832 Ext.			
Fax: (815) 443-2832		Fax: (815) 443-2832			
E-Mail: pearlcitypubliclibrary@yahoo.com		E-Mail: pearlcitypubliclibrary@yahoo.com			

If the Chief Executive Officer and the Chief Financial Officer are the same person as the Contact Person, please check this box and skip to Step 2.

Unit Name : Pearl City Public Library District

Unit Code : 089/060/10

**STEP 2: VERIFY FISCAL YEAR END**

FY END DATE: 6/30/2023

If the fiscal year end date listed above is incorrect, follow the steps outlined in the Comptroller Connect application to provide your official documentation that confirms your fiscal year end date. Upon receipt and approval of this documentation, your fiscal year end date can be officially amended.

**STEP 3: GASB 34, ACCOUNTING SYSTEM, DEBT, UTILITY, HOME RULE, TIF, AND PENSION / RETIREMENT BENEFITS**

**P1. Has your government commenced dissolution proceedings?**     \_\_\_ Yes     X No     **Dissolution Filing Date**     \_\_\_

**A. Has your government implemented GASB 34 in FY 2023 reporting or in previous reporting years?**     \_\_\_ Yes     X No

**B. Which type of accounting system does Pearl City Public Library District use?**

X Cash - with no assets (Cash Basis)     \_\_\_ Modified Accrual/Accrual  
\_\_\_ Cash - with assets (Modified Cash Basis)     \_\_\_ Combination (Explain) \_\_\_\_\_

**C. Does the government have bonded debt this reporting fiscal year?**     \_\_\_ Yes     X No

If "Yes", indicate the type(s) of debt and complete the Statement of Indebtedness and Debt Limitations and Future Debt pages, located on page F5 and F6.

\_\_\_ G.O.Bonds     \_\_\_ Revenue Bonds     \_\_\_ Alternative Revenue Bonds

**D. Does the government have debt, other than bonded debt this reporting fiscal year?**     \_\_\_ Yes     X No

If "Yes", indicate the type(s) of debt and complete the Statement of Indebtedness and Debt Limitations and Future Debt pages, located on page F5 and F6.

\_\_\_ Contractual Commitments     \_\_\_ Other (Explain) \_\_\_\_\_

**E. Does the government own or operate a public utility company?**     \_\_\_ Yes     X No

If "Yes", indicate the type(s) of utilities and enter the expenditures in Code 271.

\_\_\_ Water/Sewer     \_\_\_ Electric/Gas/Transit     \_\_\_ 911 Telephone/Telecommunications     \_\_\_ Other \_\_\_\_\_

**F. Does the government have a pension funds or other retirement benefits this reporting fiscal year?**     \_\_\_ Yes     X No

If Yes, indicate the type(s) of pension funds or other retirement benefits and complete the Pension Funds/Retirement Benefits section.

\_\_\_ Illinois Municipal Retirement Fund (IMRF)     \_\_\_ Police Pension     \_\_\_ Fire Pension     \_\_\_ Sheriff's Law Enforcement Personnel Plan (SLEP)  
\_\_\_ Other Pension \_\_\_\_\_     \_\_\_ Other Post Employment Benefits (OPEB)

Unit Name : Pearl City Public Library District

Unit Code : 089/060/10

**STEP 4: POPULATION, EAV AND EMPLOYEES**

What is the total <b>population</b> of Pearl City Public Library District?^	2,432
What is the total <b>EAV</b> of Pearl City Public Library District?	\$68,885,007
How many <b>full time employees</b> are paid?*	1
How many <b>part time employees</b> are paid?*	2
What is the <b>total salary</b> paid to all employees?	\$44,506

^ Or provide estimated population.

\* Do not include contractual employees.

**STEPS 5 AND 6: COMPONENT UNITS AND APPROPRIATIONS**

**Provide the appropriation for the primary government listed in the first row of the table below.**

In the remaining rows, provide the names of all component units along with their appropriations. Indicate if the component units are blended or discretely presented, its fiscal year end date and if the component unit was funded with governmental fund types or enterprise fund types. If the component units are already indicated, that data is based on forms submitted last year. If you have more component units than the rows provided below, please indicate them on an attachment.

If you need assistance with the terms indicated below, refer to the *Chart of Accounts and Definitions* and the *How to Fill Out An AFR* documents.

Name of Unit/Component <b>FUNDS SHOULD NOT BE LISTED HERE*</b>	Appropriation^	Type of Component Unit (Blended or Discretely Presented)	Fiscal Year End	Enterprise Fund Type or Governmental Fund Type
Pearl City Public Library District	\$217,225		06/30	
<b>Total Appropriations</b>	\$217,225			

\* Do not enter funds such as Joint Bridge, Permanent Road, Town Fund, Equipment, Water & Sewer, General Assistance, etc. These funds should be included in Step 8.

^ If the Primary Government or Component Unit does NOT budget or levy taxes, please enter the unit's TOTAL EXPENDITURES.

Unit Name : Pearl City Public Library District

Unit Code : 089/060/10

**STEP 7: OTHER GOVERNMENTS**

Indicate any payments Pearl City Public Library District made to other governments for services or programs (include programs performed on a reimbursement, cost-sharing basis or federal payroll taxes).

Intergovernmental agreements - indicate how much was paid	\$0
Federal government payroll taxes	\$3,405
All other intergovernmental payments	\$0

**STEP 8: FUND LISTING & ACCOUNT GROUPS**

A. List all funds and how much was spent in FY 2023 for each fund. Also, indicate the Fund Type (Fund Types are at the top of each column beginning on page F1). If any fund names appear below, the data is based on forms submitted last year. Please make all necessary corrections. If you have more fund names than the rows provided below, please indicate them on an attachment.

Fund Name	Expenditure	Fund Type	FY End
General Fund	\$88,288	General Fund	06/30
<b>Total Expenditures</b>	<b>\$88,288</b>		

B. Does Pearl City Public Library District have assets or liabilities that should be recorded as a part of Account Groups? See Chart of Accounts and Definitions and the How to Fill Out An AFR documents for more information about Account Groups.

Yes  No

Unit Name : Pearl City Public Library District

Unit Code : 089/060/10

**STEP 9: GOVERNMENTAL ENTITIES**

List of governmental entities that are part of or related to the primary government. Exclude component units detailed in Steps 5 & 6. Most small governments do not have governmental entities.

Entity Name	Relationship

**STEP 10: REPORTING**

Check any state or local entity where financial reports are filed.

STATE AGENCIES	
___ - Board of Education	___ - Board of Higher Education
___ - DCEO	___ - Department of Insurance
OTHER STATE OR LOCAL OFFICES	
<u>X</u> - Illinois Comptroller	___ - Secretary of State
___ - General Assembly - House	___ - General Assembly - Senate
<u>X</u> - County Clerk	___ - Circuit Clerk
___ - Governor's Office	___ - Other - _____

**Statement of Financial Position**

**All Funds and Discretely Presented Component Units**

<b>Code</b>	<b>Enter All Amounts in Whole Numbers</b>	<b>General</b>	<b>Special Revenue</b>	<b>Capital Projects</b>	<b>Debt Service</b>	<b>Enterprise</b>	<b>Internal Service</b>	<b>Fiduciary</b>	<b>Account Groups</b>	<b>Discretely Presented Component Units</b>
<b>Assets</b>		<b>Report In Whole Numbers</b>								
<b>101t</b>	Cash and Cash Equivalent	\$12,859	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>102t</b>	Investments	\$270,361	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>115t</b>	Receivables	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>109t</b>	Inventories	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>111t</b>	Fixed Assets	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>112t</b>	Other Assets (Explain)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>113t</b>	Amount available for retirement of long-term debt	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>114t</b>	Amount to be provided for payment of long-term debt	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>120t</b>	<b>Total Assets</b>	\$283,220	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>122t</b>	All Payables	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>132t</b>	Deferred Revenues	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>133t</b>	Debt Service Payable - Principal	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>134t</b>	Debt Service Payable - Interest	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>128t</b>	Other Liabilities (Explain)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>135t</b>	<b>Total Liabilities</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Equity</b>										
<b>136t</b>	Fund Balance - Reserved	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>137t</b>	Fund Balance - Unreserved	\$283,220	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>138t</b>	Retained Earnings - Reserved	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>139t</b>	Retained Earnings - Unreserved	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>140t</b>	Contributed Capital	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>141t</b>	Investment in General Fixed Assets	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>142t</b>	<b>Total Equity</b>	\$283,220	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>145t</b>	<b>Total Liability and Equity</b>	\$283,220	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

**Revenues and Receipts**

Code	Enter All Amounts in Whole Numbers	General	Special Revenue	Capital Projects	Debt Service	Enterprise	Internal Service	Fiduciary	Discretely Presented Component Units
<b>Local Taxes</b>		<b>Report In Whole Numbers</b>							
201t	Property Tax	\$93,771	\$0	\$0	\$0	\$0	\$0	\$0	\$0
203t	Utilities Tax	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
204t	Other Taxes (Explain)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Intergovernmental Receipts &amp; Grants</b>									
212t	State Sales Tax	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
213t	State Motor Fuel Tax	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
214t	State Replacement Tax	\$3,068	\$0	\$0	\$0	\$0	\$0	\$0	\$0
205t	State Gaming Tax(es)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
215t	Other State Sources (Explain)	\$3,587	\$0	\$0	\$0	\$0	\$0	\$0	\$0
225t	Federal Sources	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
226t	Other Intergovernmental Sources (Explain)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Other Local Sources</b>									
231t	Licenses and Permits	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
233t	Fines and Forfeitures	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
234t	Charges for Services	\$222	\$0	\$0	\$0	\$0	\$0	\$0	\$0
235t	Interest	\$3,549	\$0	\$0	\$0	\$0	\$0	\$0	\$0
236t	Miscellaneous (Explain)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
240t	<b>Total Receipts and Revenue</b>	\$104,197	\$0	\$0	\$0	\$0	\$0	\$0	\$0



**Disbursements, Expenditures and Expenses**

<b>Code</b>	<b>Enter All Amounts in Whole Numbers</b>	<b>General</b>	<b>Special Revenue</b>	<b>Capital Projects</b>	<b>Debt Service</b>	<b>Enterprise</b>	<b>Internal Service</b>	<b>Fiduciary</b>	<b>Discretely Presented Component Units</b>
<b>Report In Whole Numbers</b>									
251t	General Government	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
252t	Public Safety	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
254t	Judiciary and Legal	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
255t	Transportation and Public Works	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
256t	Social Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
257t	Culture and Recreation	\$88,288	\$0	\$0	\$0	\$0	\$0	\$0	\$0
258t	Housing	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
275t	Environment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
259t	Debt	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
271t	Public Utility Company	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
272t	Depreciation	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
280t	Capital Outlay	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
260t	Other Expenditures/Expenses (Explain)	\$3,405	\$0	\$0	\$0	\$0	\$0	\$0	\$0
270t	Total Expenditures/Expense	\$91,693	\$0	\$0	\$0	\$0	\$0	\$0	\$0

**Fund Balances and Other Financing Sources (Uses)**

<b>Code</b>	<b>Enter All Amounts in Whole Numbers</b>	<b>General</b>	<b>Special Revenue</b>	<b>Capital Projects</b>	<b>Debt Service</b>	<b>Enterprise</b>	<b>Internal Service</b>	<b>Fiduciary</b>	<b>Discretely Presented Component Units</b>
<b>Report In Whole Numbers</b>									
<b>301t</b>	<b>Excess of receipts/revenues over (under) expenditures/expenses (240t-270t)</b>	\$12,504	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>302t</b>	Operating transfers in	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>303t</b>	Operating transfers out	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>304t</b>	Bond proceeds	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>305t</b>	Other long term debt (Explain)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>306t</b>	<b>Net increase (decrease) in fund balance (301t + 302t - 303t + 304t + 305t)</b>	\$12,504	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>307t</b>	Previous year fund balance	\$283,219	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>308t</b>	Other (Explain)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>310t</b>	<b>Current Year Ending Fund Balance (306t + 307t + 308t)</b>	\$295,723	\$0	\$0	\$0	\$0	\$0	\$0	\$0

**Statement of Indebtedness (Governmental & Proprietary combined)**

<b>Debt Instruments for All Funds</b>	<b>Code</b>	<b>Outstanding Beginning of Year</b>	<b>Code</b>	<b>Issued Current Fiscal Year</b>	<b>Code</b>	<b>Retired Current Fiscal Year</b>	<b>Code</b>	<b>Outstanding End of Year</b>	<b>Original Issue Amount</b>	<b>Final Maturity Date</b>	<b>Interest Rate Ranges-Lowest</b>	<b>Interest Rate Ranges-Highest</b>
<b>Report In Whole Numbers</b>												
<b>General Obligation Bonds</b>	<b>400</b>	\$0	<b>406</b>	\$0	<b>412</b>	\$0	<b>418</b>	\$0	\$0		0.00%	0.00%
<b>Revenue Bonds</b>	<b>401</b>	\$0	<b>407</b>	\$0	<b>413</b>	\$0	<b>419</b>	\$0	\$0		0.00%	0.00%
<b>Alternate Revenue Bonds</b>	<b>402</b>	\$0	<b>408</b>	\$0	<b>414</b>	\$0	<b>420</b>	\$0	\$0		0.00%	0.00%
<b>Contractual Commitments</b>	<b>403</b>	\$0	<b>409</b>	\$0	<b>415</b>	\$0	<b>421</b>	\$0	\$0		0.00%	0.00%
<b>Other (Explain)</b>	<b>404</b>	\$0	<b>410</b>	\$0	<b>416</b>	\$0	<b>422</b>	\$0	\$0		0.00%	0.00%
<b>Total Debt</b>	<b>405</b>	\$0	<b>411</b>	\$0	<b>417</b>	\$0	<b>423</b>	\$0				

**Debt Limitations and Future Debt**

X I certify that Pearl City Public Library District does not have Legal Debt Limitation

Based on Statute

X Based on Other

Explanation: District has no current debt

Total Legal Debt Limitation: \$0

Total Debt Applicable to the limit: \$0

Legal Debt Margin: \$0

Legal Debt Margin (%): 0.00%

Future Debt Service Requirements for Bonded Debt listed above			
Year Ending	Principal	Interest	Total
2024	\$0	\$0	\$0
2025	\$0	\$0	\$0
2026	\$0	\$0	\$0
2027	\$0	\$0	\$0
2028	\$0	\$0	\$0
2029-2033	\$0	\$0	\$0
2034-2038	\$0	\$0	\$0
2039-2043	\$0	\$0	\$0
<b>TOTAL</b>	\$ 0	\$ 0	\$ 0

Please provide a summary of the authorized debt limitations, including any statutory references.

**Pension Funds / Retirement Benefits**

Code	Enter All Amounts in Whole Numbers	IMRF			Police Pension			Fire Pension		
		Year 1	Year 2	Year 3	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
500	Actuarial Valuation Date (VD)									
500a	Reporting Date (RD)									
500b	Measurement Date (MD)									
501	Total Pension Liability (TPL)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
502	Plan Fiduciary Net Position (FNP)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
503	Net Pension Liability (NPL)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
504	Plan Fiduciary Net Position as a Percentage of Total Pension Liability	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
505	Net Pension Obligation/ Net OPEB Obligation	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

**Enter All Amounts in Whole Numbers**

Code		SLEP			Other Pension			OPEB (Net)		
		Year 1	Year 2	Year 3	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
500	Actuarial Valuation Date (VD)									
500a	Reporting Date (RD)									
500b	Measurement Date (MD)									
501	Total Pension Liability (TPL)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
502	Plan Fiduciary Net Position (FNP)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
503	Net Pension Liability (NPL)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
504	Plan Fiduciary Net Position as a Percentage of Total Pension Liability	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
505	Net Pension Obligation / Net OPEB Obligation	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

**Capital Outlay\***

Code	Function	These are not funds	
		Construction	Land, Structures, and Equipment
601t	General Government	\$0	\$0
602t	Law Enforcement	\$0	\$0
603t	Corrections	\$0	\$0
604t	Fire	\$0	\$0
605t	Sewerage	\$0	\$0
606t	Sanitation and Wastewater	\$0	\$0
607t	Parks and Recreation	\$0	\$0
608t	Housing and Community Development	\$0	\$0
609t	Highways, Roads and Bridges	\$0	\$0
610t	Parking Facilities	\$0	\$0
611t	Welfare	\$0	\$0
612t	Hospital	\$0	\$0
613t	Water	\$0	\$0
614t	Nursing Homes	\$0	\$0
615t	Conservation and Natural Resources	\$0	\$0
616t	Libraries	\$0	\$0
617t	Other	\$0	\$0

\*This page should only be filled out if you have spent funds for capital projects or development.

\*The Capital Outlay page is requested by the U.S. Census Bureau and is considered optional by the State Comptroller.

\*If you complete this page you WILL NOT have to complete the Survey of Government Finances from the U.S. Census Bureau.

\*If you do NOT complete this page the U.S. Census Bureau will contact you for further information.

Explanation or Comments

<u>Type</u>	<u>Explanation</u>
260t	Payroll taxes \$3405
GENrev	215t Other State Sources - Public Library Per Capita State Grant \$3587

Office of the Comptroller, Susana A. Mendoza  
FY 2023 AFR  
Special Purpose Form

**CPA Information**

According to the Governmental Account Audit Act [50 ILCS 310], an Annual Audit submitted to the IL Office of the Comptroller shall be performed by a licensed public accountant, with a valid certificate as a public accountant under the Illinois Public Accounting Act [225 ILCS 450]. Please access the website of the Illinois General Assembly ([www.ilga.gov/legislation/ilcs/ilcs.asp](http://www.ilga.gov/legislation/ilcs/ilcs.asp)) to view these Acts. **If your government is required to submit an Annual Audit, please complete the following:**

Is the Licensed Certified Public Accountant performing your audit working as an individual licensed in Illinois, or are they working in association with a Public Accounting Firm or a Professional Service Corporation licensed in Illinois, or are they licensed in another state? Please use a checkmark to select one choice:

Individual Licensed Certified Public Accountant
  Public Accounting Firm (IL License)
  Professional Service Corporation (IL License)

Out-of-State (Individual / Public Accounting Firm / Professional Service Corporation)

**If you selected Out of State / Individual Licensed Certified Public Accountant / Public Accounting Firm / Professional Service Corp, please complete the licensee information below.** Please provide the following information for the entity performing the Annual Audit for your government.

Enter the complete active Licensee #: \_\_\_\_\_ State License is Issued: \_\_\_\_\_

License Status: \_\_\_\_\_

License Type (Please select one. If 'Other', enter type information)

Individual Licensed Certified Public Accountant
  Public Accounting Firm
  Professional Service Corporation

Out-of-State (Individual / Public Accounting Firm / Professional Service Corporation)
  Other \_\_\_\_\_

**Provide information for the business entity performing the audit for your government.**

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Ext. \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Ext. \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Provide information for the Licensed Certified Public Accountant performing the audit for your government.**

Enter the active 9-digit License#: \_\_\_\_\_ License Status: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Ext. \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_



**Critical**

Reminder: Option #2 Selected for FY 2023 ? Certified Copy of Vote document Is Due

Office of the Comptroller, Susana A. Mendoza  
FY 2023 AFR  
Special Purpose Form