

## **Levy Certification**

11-19-12

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MARSHA WEYAND KITTITAS COUNTY ASSESSOR

Submit this document to the county legislative authority on or before November 30 of the year preceding the year in which the levy amounts are to be collected and forward a copy to the assessor.

In accordance with RCW 84.52.020, I, Libby Allgood ,					
			(Name)		
	Treasurer	, for	Kittitas County Public Hospital, do h		, do hereby certify to
(Title)			(District Name)		
the	Kitttias (Name of County)		ounty legislative authority that the Board of		ommissioners oners, Council, Board, etc.)
of said d	istrict requests that the follow	wing levy am			provided in the district's
budget, which was adopted following a public hearing held on 10/25/12 (Date of Public Hearing):					
Regular l	Levy: \$8,200.00 (State the total dollar	ar amount to be l	evied)		
Excess L	Levy: \$1,107,513 (State the total dollar	er amount to be l	evied)		
Refund I	Levy: \$0.00 (State the total dollar	er amount to be l	evied)		
Signature	: Why De	ljou	<u>Q</u>	Dat	e: 10/25/2012

For tax assistance, visit <a href="http://dor.wa.gov/content/taxes/property/default.aspx">http://dor.wa.gov/content/taxes/property/default.aspx</a> or call (360) 570-5900. To inquire about the availability of this document in an alternate format for the visually impaired, please call (360) 705-6715. Teletype (TTY) users may call 1-800-451-7985.