

Print Form



DR-420 R. 5/12 Rule 12D-16.002 Florida Administrative Code Effective 11/12

Year :	2020		County : VOLUSIA						
	pal Authority : FAX HOSPITAL		Taxing Authority : HALIFAX HOSPITAL						
SECT	ION I: COMPLETED BY PROPERTY APP	RAISER							
1.	Current year taxable value of real property for oper	erating pur	poses	\$	18,	606,120,099	(1)		
2.	Current year taxable value of personal property for	\$	1,	269,092,537	(2)				
3.	Current year taxable value of centrally assessed pro	operty for	operating purposes	\$		23,347,228	(3)		
4.	Current year gross taxable value for operating purp	poses (Lin	e 1 plus Line 2 plus Line 3)	\$	19,	898,559,864	(4)		
5.	 Current year net new taxable value (Add new construction, additions, rehabilitative improvements increasing assessed value by at least 100%, annexations, and tangible personal property value over 115% of the previous year's value. Subtract deletions.) 					347,396,267	(5)		
6.	Current year adjusted taxable value (Line 4 minus L	Line 5)		\$	19,	551,163,597	(6)		
7.	Prior year FINAL gross taxable value from prior yea	ar applicat	ole Form DR-403 series	\$	18,	538,282,837	(7)		
8.	Does the taxing authority include tax increment fir of worksheets (DR-420TIF) attached. If none, enter		reas? If yes, enter number	✓ YES	□ NO	Number 11	(8)		
9.	Does the taxing authority levy a voted debt service years or less under s. 9(b), Article VII, State Constitu DR-420DEBT, <i>Certification of Voted Debt Millage</i> form	ution? If ye	es, enter the number of	YES	✓ NO	Number 0	(9)		
						correct to the best of my knowledge.			
	Property Appraiser Certification	certify the	taxable values above are	correct to t	he best o	f my knowled	dge.		
SIGN	Property Appraiser CertificationLoSignature of Property Appraiser:	certify the	taxable values above are	correct to t Date :	he best o	f my knowlec	dge.		
		certify the	taxable values above are	1			lge.		
SIGN HERE	Signature of Property Appraiser:		taxable values above are	Date :			dge.		
SIGN HERE	Signature of Property Appraiser: Electronically Certified by Property Appraiser	ORITY FULL your	r taxing authority will be o	Date : 6/24/20 denied TRIM	020 11:0	6 AM	dge.		
SIGN HERE	Signature of Property Appraiser: Electronically Certified by Property Appraiser ION II : COMPLETED BY TAXING AUTH If this portion of the form is not completed in	ORITY FULL your le for the ta	r taxing authority will be o ax year. If any line is not a	Date : 6/24/20 denied TRIM pplicable, e	020 11:0	6 AM	lge. (10)		
SIGN HERE SECT	Signature of Property Appraiser: Electronically Certified by Property Appraiser ION II : COMPLETED BY TAXING AUTH If this portion of the form is not completed in possibly lose its millage levy privilege Prior year operating millage levy (<i>If prior year millage</i>)	ORITY FULL your le for the ta ge was adju	r taxing authority will be o ax year. If any line is not a usted then use adjusted	Date : 6/24/20 denied TRIM pplicable, e	20 11:0 I certifica nter -0	6 AM tion and			
SIGN HERE SECT	Signature of Property Appraiser: Electronically Certified by Property Appraiser TON II : COMPLETED BY TAXING AUTH If this portion of the form is not completed in possibly lose its millage levy privilege Prior year operating millage levy (<i>If prior year millag</i> <i>millage from Form DR-422</i>)	FULL your FULL your e for the ta ge was adju by Line 10, c	taxing authority will be o ax year. If any line is not a usted then use adjusted divided by 1,000) n obligation measured by a	Date : 6/24/20 Jenied TRIM pplicable, e 0.3	20 11:0 I certifica nter -0	6 AM tion and per \$1,000	(10)		
SIGN HERE SECT 10. 11. 12.	Signature of Property Appraiser: Electronically Certified by Property Appraiser TON II : COMPLETED BY TAXING AUTH If this portion of the form is not completed in possibly lose its millage levy privilege Prior year operating millage levy (<i>If prior year millag</i> <i>millage from Form DR-422</i>) Prior year ad valorem proceeds (<i>Line 7 multiplied b</i> , Amount, if any, paid or applied in prior year as a consequ	FULL your FULL your e for the ta ge was adju by Line 10, co uence of an e 7a for all D	r taxing authority will be o ax year. If any line is not a usted then use adjusted divided by 1,000) n obligation measured by a IR-420TIF forms)	Date : 6/24/20 denied TRIM pplicable, e 0.3	20 11:0 I certifica nter -0	6 AM tion and per \$1,000 6,573,675	(10)		
SIGN HERE SECT 10. 11. 12.	Signature of Property Appraiser: Electronically Certified by Property Appraiser TON II : COMPLETED BY TAXING AUTHO If this portion of the form is not completed in possibly lose its millage levy privilege Prior year operating millage levy (<i>If prior year millag</i> <i>millage from Form DR-422</i>) Prior year ad valorem proceeds (<i>Line 7 multiplied b</i> Amount, if any, paid or applied in prior year as a conseque dedicated increment value (<i>Sum of either Lines 6c or Line</i>)	ORITY FULL your le for the ta ge was adju by Line 10, c uence of an e 7a for all D minus Line	taxing authority will be of ax year. If any line is not a <i>usted then use adjusted</i> divided by 1,000) n obligation measured by a <i>R-420TIF forms</i>)	Date : 6/24/20 Jenied TRIM pplicable, en 0.3 \$ \$	020 11:0 I certifica nter -0 546	6 AM tion and per \$1,000 6,573,675 349,155	(10) (11) (12)		
SIGN HERE SECT 10. 11. 12. 13. 14.	Signature of Property Appraiser: Electronically Certified by Property Appraiser TON II : COMPLETED BY TAXING AUTHORNAL STATES STATES	ORITY FULL your le for the ta ge was adju by Line 10, co luence of an e 7a for all D minus Line or Line 7e fo	taxing authority will be of ax year. If any line is not a <i>usted then use adjusted</i> divided by 1,000) n obligation measured by a <i>R-420TIF forms</i>)	Date : 6/24/20 Jenied TRIM pplicable, e 0.3 \$ \$ \$ \$	020 11:0 I certifica nter -0 546	6 AM tion and per \$1,000 6,573,675 349,155 6,224,520	(10) (11) (12) (13)		
SIGN HERE SECT 10. 11. 12. 13. 14.	Signature of Property Appraiser: Electronically Certified by Property Appraiser TON II : COMPLETED BY TAXING AUTHO If this portion of the form is not completed in possibly lose its millage levy privilege Prior year operating millage levy (<i>If prior year millag</i> <i>millage from Form DR-422</i>) Prior year ad valorem proceeds (<i>Line 7 multiplied b</i> , Amount, if any, paid or applied in prior year as a consequent dedicated increment value (<i>Sum of either Lines 6c or Line</i> Adjusted prior year ad valorem proceeds (<i>Line 11 r</i> Dedicated increment value, if any (<i>Sum of either Line 6b o</i>	ORITY FULL your le for the ta ge was adju by Line 10, c uence of an e 7a for all D minus Line or Line 7e fo Line 14)	r taxing authority will be o ax year. If any line is not a usted then use adjusted divided by 1,000) n obligation measured by a uR-420TIF forms) 12) or all DR-420TIF forms)	Date : 6/24/20 Jenied TRIM pplicable, ei 0.3 \$ \$ \$ \$ \$ \$ \$ \$	020 11:0 I certifica nter -0 546 1, 18,	6 AM tion and per \$1,000 6,573,675 349,155 6,224,520 070,734,992	 (10) (11) (12) (13) (14) 		
SIGN HERE SECT 10. 11. 12. 13. 14. 15.	Signature of Property Appraiser: Electronically Certified by Property Appraiser ION II : COMPLETED BY TAXING AUTHO If this portion of the form is not completed in possibly lose its millage levy privilege Prior year operating millage levy (<i>If prior year millag</i> <i>millage from Form DR-422</i>) Prior year ad valorem proceeds (<i>Line 7 multiplied b</i> Amount, if any, paid or applied in prior year as a consequent dedicated increment value (<i>Sum of either Lines 6c or Line</i> Adjusted prior year ad valorem proceeds (<i>Line 11 r</i> Dedicated increment value, if any (<i>Sum of either Line 6b o</i> Adjusted current year taxable value (<i>Line 6 minus L</i>	ORITY FULL your le for the ta ge was adju by Line 10, c uence of an e 7a for all D minus Line or Line 7e fo Line 14)	r taxing authority will be o ax year. If any line is not a usted then use adjusted divided by 1,000) n obligation measured by a uR-420TIF forms) 12) or all DR-420TIF forms)	Date : 6/24/20 Jenied TRIM pplicable, ei 0.3 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	20 11:0 I certifica nter -0 546 1, 18, 368	6 AM tion and per \$1,000 6,573,675 349,155 6,224,520 070,734,992 480,428,605	 (10) (11) (12) (13) (14) (15) 		

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										Page 2	
19.	Т	YPE of principa	al authority (check	one)	County		✓	·	t Special District	(19)	
					Munici	pality		Water Mana	gement District		
20.	A	pplicable taxir	ng authority (check	<u> </u>	Princip MSTU	al Authority			Special District gement District Basin	(20)	
21.	ls	millage levied i	n more than one co			Yes	✓	No		(21)	
		DEPENDENT	SPECIAL DISTRIC	TS AND MST	Us	STOP	S	TOP HERE	- SIGN AND SUB	ЛІТ	
22.		endent special dist	l prior year ad valorem p ricts, and MSTUs levying				20	\$	6,224,520	(22)	
23.	Curr	rent year aggrega	ate rolled-back rate (Lin	ne 22 divided by	Line 15,	multiplied by 1,0)00)	0.336	68 per \$1,000	(23)	
24.	Current year aggregate rolled-back taxes			ine 4 multiplied	by Line	23, divided by 1,0	000)	\$	6,701,835	(24)	
25.	Enter total of all operating ad valorem taxe							\$	19,657,787	(25)	
26.	Current year proposed aggregate millage		ate (Line 25 divid	ded by L	ine 4, multiplied		0.987	79 per \$1,000	(26)		
27.		rent year propose 23, <mark>minus 1</mark> , mu	ed rate as a percent ch <i>ultiplied by 100)</i>	ange of rolled-b	oack rat	e (Line 26 dividec	l by		193.32 %	(27)	
		rst public get hearing	Date : 9/9/2020	Time : 5:05 PM EST		Place : 303 N. Clyde Mc 32114; Virtual vi			Fower, Daytona Beach althdistrict.org	i, FL	
	5	Taxing Autho	ority Certification	The millages	s comp		visio		est of my knowled <u>c</u> .065 and the provisi		
) I	Signature of Chi	ef Administrative Offic	er:				Date	:		
	G	Electronically Co	ertified by Taxing Auth	nority				7/30)/2020 11:30 AM		
	N	Title :				Contact Name					
ł	H Eric M. Peburn, Chief Financial Officer				Eric M. Peburi	n, Ch	ief Financial (Officer			
	E R E	Mailing Address 303 N Clyde Mo				Physical Addre 303 N Clyde N		s Blvd			
	-	City, State, Zip :				Phone Numbe	er:		Fax Number :		
	Daytona Beach, FL 32114				386-425-4568	8		Phone Number : Fax Number : 386-425-4568 386-425-4575			

CERTIFICATION OF TAXABLE VALUE INSTRUCTIONS

"Principal Authority" is a county, municipality, or independent special district (including water management districts).

"Taxing Authority" is the entity levying the millage. This includes the principal authority, any special district dependent to the principal authority, any county municipal service taxing unit (MSTU), and water management district basins.

Each taxing authority must submit to their property appraiser a DR-420 and the following forms, as applicable:

- · DR-420TIF, Tax Increment Adjustment Worksheet
- · DR-420DEBT, Certification of Voted Debt Millage
- · DR-420MM-P, Maximum Millage Levy Calculation Preliminary Disclosure

Section I: Property Appraiser

Use this DR-420 form for all taxing authorities except school districts. Complete Section I, Lines 1 through 9, for each county, municipality, independent special district, dependent special district, MSTU, and multicounty taxing authority. Enter only taxable values that apply to the taxing authority indicated. Use a separate form for the principal authority and each dependent district, MSTU and water management district basin.

Line 8

Complete a DR-420TIF for each taxing authority making payments to a redevelopment trust fund under Section 163.387 (2)(a), Florida Statutes or by an ordinance, resolution or agreement to fund a project or to finance essential infrastructure.

Check "Yes" if the taxing authority makes payments to a redevelopment trust fund. Enter the number of DR-420TIF forms attached for the taxing authority on Line 8. Enter 0 if none.

Line 9

Complete a DR-420DEBT for each taxing authority levying either a voted debt service millage (s.12, Article VII, State Constitution) or a levy voted for two years or less (s. 9(b), Article VII, State Constitution).

Check "Yes" if the taxing authority levies either a voted debt service millage or a levy voted for 2 years or less (s. 9(b), Article VII, State Constitution). These levies do not include levies approved by a voter referendum not required by the State Constitution. Complete and attach DR-420DEBT. Do not complete a separate DR-420 for these levies.

Send a copy to each taxing authority and keep a copy. When the taxing authority returns the DR-420 and the accompanying forms, immediately send the original to:

Florida Department of Revenue Property Tax Oversight - TRIM Section P. O. Box 3000 Tallahassee, Florida 32315-3000

Section II: Taxing Authority

Complete Section II. Keep one copy, return the original and one copy to your property appraiser with the applicable DR-420TIF, DR-420DEBT, and DR-420MM-P within 35 days of certification. Send one copy to the tax collector. "Dependent special district" (ss. 200.001(8)(d) and 189.403(2), F.S.) means a special district that meets at least one of the following criteria:

- The membership of its governing body is identical to that of the governing body of a single county or a single municipality.
- All members of its governing body are appointed by the governing body of a single county or a single municipality.
- During their unexpired terms, members of the special district's governing body are subject to removal at will by the governing body of a single county or a single municipality.
- The district has a budget that requires approval through an affirmative vote or can be vetoed by the governing body of a single county or a single municipality.

"Independent special district" (ss. 200.001(8)(e) and 189.403 (3), F.S.) means a special district that is not a dependent special district as defined above. A district that includes more than one county is an independent special district unless the district lies wholly within the boundaries of a single municipality.

"Non-voted millage" is any millage not defined as a "voted millage" in s. 200.001(8)(f), F.S.

Lines 12 and 14

Adjust the calculation of the rolled-back rate for tax increment values and payment amounts. See the instructions for DR-420TIF. On Lines 12 and 14, carry forward values from the DR-420TIF forms.

Line 24

Include only those levies derived from millage rates.



MAXIMUM MILLAGE LEVY CALCULATION

PRELIMINARY DISCLOSURE

R. 5/12 Rule 12D-16.002 Florida Administrative Code Effective 11/12

DR-420MM-P

Print Form

Reset Form

For municipal governments, counties,	and special districts
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Ye	ar: 2020	County: VC	DLUSIA		
	ncipal Authority : LIFAX HOSPITAL	Taxing Authority: HALIFAX HOSPITAL			
1.	ls your taxing authority a municipality or independent special distri ad valorem taxes for less than 5 years?	ict that has levied	Yes	V No	(1)
	IF YES, STOP STOP HERE. SIGN AND	SUBMIT. You are	not subject t	o a millage limitati	ion.
2.	Current year rolled-back rate from Current Year Form DR-420, Line	16	0.3368	per \$1,000	(2)
3.	Prior year maximum millage rate with a majority vote from 2019 For	m DR-420MM, Line 1	3 5.4573	per \$1,000	(3)
4.	Prior year operating millage rate from Current Year Form DR-420, L	0.3546	per \$1,000	(4)	
	If Line 4 is equal to or greater than Line 3, ski	ⁱ less, conti	inue to Line 5.		
	Adjust rolled-back rate based on prior year	majority-vote max	kimum millag	je rate	
5.	Prior year final gross taxable value from Current Year Form DR-420,	Line 7	\$	18,538,282,837	(5)
6.	Prior year maximum ad valorem proceeds with majority vote (Line 3 multiplied by Line 5 divided by 1,000)		\$	101,168,971	(6)
7.	Amount, if any, paid or applied in prior year as a consequence of ar measured by a dedicated increment value from Current Year Form		\$	349,155	(7)
8.	Adjusted prior year ad valorem proceeds with majority vote (Line of	ნ minus Line 7)	\$	100,819,816	(8)
9.	Adjusted current year taxable value from Current Year form DR-420	0 Line 15	\$	18,480,428,605	(9)
10.	Adjusted current year rolled-back rate (Line 8 divided by Line 9, mo	ultiplied by 1,000)	5.4555	per \$1,000	(10)
	Calculate maximum millage levy		-		
11.	Rolled-back rate to be used for maximum millage levy calculation (<i>Enter Line 10 if adjusted or else enter Line 2</i>)		5.4555	per \$1,000	(11)
12.	Adjustment for change in per capita Florida personal income (See I	Line 12 Instructions)		1.0322	(12)
13.	Majority vote maximum millage rate allowed (Line 11 multiplied by	y Line 12)	5.6312	per \$1,000	(13)
14.	Two-thirds vote maximum millage rate allowed (Multiply Line 13 b	y 1.10)	6.1943	per \$1,000	(14)
15.	Current year proposed millage rate		0.9879	per \$1,000	(15)
16.	Minimum vote required to levy proposed millage: (Check one)				(16)
\checkmark	a. Majority vote of the governing body: Check here if Line 15 is less to the majority vote maximum rate. Enter Line 13 on Line 1		ne 13. The maxi	mum millage rate is	equal
	b. Two-thirds vote of governing body: Check here if Line 15 is less maximum millage rate is equal to proposed rate. <i>Enter Line</i> 1	•	e 14, but greate	r than Line 13. The	
	c. Unanimous vote of the governing body, or 3/4 vote if nine mem The maximum millage rate is equal to the proposed rate. Enter			is greater than Line 1	4.
	d. Referendum: The maximum millage rate is equal to the propose	ed rate. Enter Line	15 on Line 1	7.	
17.	The selection on Line 16 allows a maximum millage rate of (Enter rate indicated by choice on Line 16)		5.6312	per \$1,000	(17)
18.	Current year gross taxable value from Current Year Form DR-420, Li	ine 4	\$	19,898,559,864	(18)

		Authority : X HOSPITAL					DR	-420MM-P R. 5/12 Page 2
19.	Curi	rent year proposed taxes (Line 15 multipl	lied by Line 18, divide	d by 1,000)	\$		19,657,78	37 (19)
20.		al taxes levied at the maximum millage ra ,,000)	te (<i>Line 17 multiplied</i>	l by Line 18, divided	\$		112,052,72	70 (20)
	STUP					E. SIGN A	ND SUE	MIT.
	1. Enter the current year proposed taxes of all dependent special districts & MSTUs levying a millage. (<i>The sum of all Lines 19 from each district's Form DR-420MM-P</i>)							0 (21)
22.	22. Total current year proposed taxes (Line 19 plus Line 21)						19,657,78	37 (22)
	Total Maximum Taxes							
		er the taxes at the maximum millage of al ring a millage (The sum of all Lines 20 fro			\$			0 (23)
24.	Tota	al taxes at maximum millage rate (Line 20) plus Line 23)		\$		112,052,72	70 (24)
		al Maximum Versus Total Taxes Le						
25.		total current year proposed taxes on Line kimum millage rate on Line 24? (Check on		an total taxes at the	✓ YES		NO	(25)
	5	Taxing Authority Certification	I certify the millages a comply with the prov 200.081, F.S.	nd rates are correct to th isions of s. 200.065 and t	ne best of he provisi	my knowledg ons of either s	e. The milla <u>c</u> 5. 200.071 or	es s.
	1	Signature of Chief Administrative Officer	:		Date :			
	J V	Electronically Certified by Taxing Author	rity		7/30/20	020 11:30 AN	1	
-	Title : Contact Na H Eric M. Peburn, Chief Financial Officer Eric M. Peb E Eric M. Peb Eric M. Peb							
	R Mailing Address : Physical Address B 303 N Clyde Morris Blvd 303 N Clyde Morris							
		City, State, Zip : Daytona Beach, FL 32114		Phone Number : 386-425-4568		Fax Numbe 386-425-45		

Complete and submit this form DR-420MM-P, Maximum Millage Levy Calculation-Preliminary Disclosure, to your property appraiser with the form DR-420, Certification of Taxable Value.

MAXIMUM MILLAGE LEVY CALCULATION PRELIMINARY DISCLOSURE INSTRUCTIONS

General Instructions

Each of the following taxing authorities must complete a DR-420MM-P.

- County
- Municipality
- Special district dependent to a county or municipality
- County MSTU
- Independent special district, including water management districts
- Water management district basin

Voting requirements for millages adopted by a two-thirds or a unanimous vote are based on the full membership of the governing body, not on the number of members present at the time of the vote.

This form calculates the maximum tax levy for 2020 allowed under s. 200.065(5), F.S. Counties and municipalities, including dependent special districts and MSTUs, which adopt a tax levy at the final hearing higher than allowed under s. 200.065, F.S., may be subject to the loss of their half-cent sales tax distribution.

DR-420MM-P shows the preliminary maximum millages and taxes levied based on your proposed adoption vote. Each taxing authority must complete, sign, and submit this form to their property appraiser with their completed DR-420, Certification of Taxable Value.

The vote at the final hearing and the resulting maximum may change. After the final hearing, each taxing authority will file a final Form DR-420MM, Maximum Millage Levy Calculation Final Disclosure, with Form DR-487, Certification of Compliance, with the Department of Revenue.

Specific tax year references in this form are updated each year by the Department.

Line Instructions

Lines 5-10

Only taxing authorities that levied a 2019 millage rate less than their maximum majority vote rate must complete these lines. The adjusted rolled-back rate on Line 10 is the rate that would have been levied if the maximum vote rate for 2019 had been adopted. If these lines are completed, enter the adjusted rate on Line 11.

Line 12

This line is entered by the Department of Revenue. The same adjustment factor is used statewide by all taxing authorities. It is based on the change in per capita Florida personal income (s. 200.001(8)(i), F.S.), which Florida Law requires the Office of Economic and Demographic Research to report each year.

Lines 13 and 14

Millage rates are the maximum that could be levied with a majority or two-thirds vote of the full membership of the governing body. With a unanimous vote of the full membership (three-fourths vote of the full membership if the governing body has nine or more members) or a referendum, the maximum millage rate that can be levied is the taxing authority's statutory or constitutional cap.

Line 16

Check the box for the minimum vote necessary at the final hearing to levy your adopted millage rate.

Line 17

Enter the millage rate indicated by the box checked in Line 16. If the proposed millage rate is equal to or less than the majority vote maximum millage rate, enter the majority vote maximum. If a two-thirds vote, a unanimous vote, or a referendum is required, enter the proposed millage rate. For a millage requiring more than a majority vote, the proposed millage rate must be entered on Line 17, rather than the maximum rate, so that the comparisons on Lines 21 through 25 are accurate.

All TRIM forms for taxing authorities are available on our website at http://floridarevenue.com/property/Pages/Forms.aspx



Print Form

Year :		2020		County :	V	OLUSIA		
		Authority : HOSPITAL		Taxing Au HALIFAX				
		ty Redevelopment Area : Beach-North Mainland / Ormond Crossi	ngs	Base Year 2006	:			
SECTI	ON	I: COMPLETED BY PROPERTY APPR	AISER					
1. Cı	urre	nt year taxable value in the tax increme	nt area		\$ 38,228,87			(1)
2. Ba	ase y	ear taxable value in the tax increment a	irea			\$	10,124,427	(2)
3. Cı	Current year tax increment value (Line 1 minus Line 2)					\$	28,104,452	(3)
4. Pr	· · , · · · · · · · · · · · · · · · · ·					\$	20,040,422	(4)
5. Pr	5. Prior year tax increment value (Line 4 minus Line 2)					\$	9,915,995	(5)
SIG	SIGN Property Appraiser Certification I certify the taxable values a				e values ab	ove are correct to	the best of my knowled	dge.
HER		Signature of Property Appraiser :		_		Date :		
	Electronically Certified by Property Appraiser					6/24/2020 11:0	06 AM	
SECTI	ON	II: COMPLETED BY TAXING AUTHORIT	Y Complete	EITHER lin	e 6 or line	7 as applicable.	Do NOT complete both	ı.
6. lf th	e an	nount to be paid to the redevelopment	trust fund IS BA	SED on a s	pecific pro	portion of the tax	increment value:	
6a. Er	nter	the proportion on which the payment is	s based.				95.00 %	(6a)
6b. De		ated increment value <i>(Line 3 multiplied</i> value is zero or less than zero, then en			ia)	\$	26,699,229	(6b)
6c. Ar	mou	int of payment to redevelopment trust f	und in prior ye	ar		\$	3,340	(6c)
7. lf th	e an	nount to be paid to the redevelopment	trust fund IS NO	OT BASED o	on a specifi	c proportion of th	e tax increment value:	
7a. Ar	mou	int of payment to redevelopment trust f	und in prior ye	ar		\$	0	(7a)
7b. Pr	ior y	/ear operating millage levy from Form D	R-420, Line 10			0.0000) per \$1,000	(7b)
		levied on prior year tax increment value 5 multiplied by Line 7b, divided by 1,000)	2			\$	0	(7c)
7d. Pr (Li	ior y ine 7	year payment as proportion of taxes levi 7a divided by Line 7c, multiplied by 100)	ied on increme	nt value			0.00 %	(7d)
7e. De		ated increment value <i>(Line 3 multiplied</i> value is zero or less than zero, then en			7d)	\$	0	(7e)
		axing Authority Certification	-	lculations,	millages an	d rates are correct	to the best of my knowle	dge.
S	S	gnature of Chief Administrative Officer	:			Date :		
I	E	lectronically Certified By Taxing Author	ity			7/30/2020 11:30	AM	
G N	THE .					ame and Contact burn, Chief Finan		
H E R	Imailing Address : 303 N Clyde Morris Blvd R				Physical A 303 N Cly	ddress : de Morris Blvd		
E	C	ïty, State, Zip :			Phone Nu	mber :	Fax Number :	
	[Daytona Beach, FL 32114			386-425-4			

Property appraisers must complete and sign Section I of this worksheet and provide it with form DR-420, *Certification of Taxable Value*, to all taxing authorities who make payments to a redevelopment trust fund under:

- s. 163.387(2)(a), Florida Statutes, or
- An ordinance, resolution, or agreement to fund a project or to finance essential infrastructure.

"Tax increment value" is the cumulative increase in taxable value from the base year to the current year within the defined geographic area. It is used to determine the payment to a redevelopment trust fund under:

- s. 163.387(1), F.S. or
- An ordinance, resolution, or agreement to fund a project or finance essential infrastructure. In this case, the taxing authority must certify the boundaries and beginning date to the property appraiser.

"Dedicated increment value" is the portion of the tax increment value used to determine the payment to the redevelopment trust fund. (See s. 200.001(8)(h), F.S.) Calculate the dedicated increment value on this form and enter on either Line 6b or Line 7e.

"Specific proportion," used to determine whether to complete Line 6 or Line 7, refers to the calculation of the tax increment payment. Examples:

• Example 1.

Section.163.387(1), F.S., states the payment made by the taxing authority should equal 95% of the millage levied times the tax increment value. The specific proportion in this case is 95%. The ordinance providing for the payment may set a percentage lower than 95%. In these cases, the lower percentage would be the specific proportion.

• Example 2.

Some required tax increment payments are not directly related to the tax increment value. A constant dollar payment is a payment not based on a specific proportion of the tax increment value. Line 7 converts these payments into a proportion based on the prior year's payment and tax increment value to reach the current year's dedicated increment value.

Section I: Property Appraiser

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Florida Department of Revenue Property Tax Oversight Program - TRIM Section P. O. Box 3000

Tallahassee, Florida 32315-3000

B. Enter only tax increment values that apply to the value located within the taxing authority indicated.

Section II: Taxing Authority

Complete Section II of the form, keep one copy, and return the original and one copy to your property appraiser with DR-420 within 35 days of certification. Send one copy to your tax collector.

Additional Instructions for Lines 6 and 7

Complete Line 6 if the payment into the redevelopment trust fund is a specific proportion of the tax increment value.



Yea	ar:	2020		County :	V	OLUSIA		
		l Authority: X HOSPITAL		Taxing Aut HALIFAX H				
Cor	nmu	nity Redevelopment Area :		Base Year	•			
		a Beach-South Atlantic		2000	•			
SEC		II: COMPLETED BY PROPERTY APPRA	AISER					
1.	Curr	ent year taxable value in the tax incremen	nt area		\$ 84,496,			(1)
2.	Base	e year taxable value in the tax increment a	rea			\$	63,521,382	(2)
3.	Curr	ent year tax increment value (Line 1 minu	s Line 2)			\$	20,975,377	(3)
4.	Prio	r year Final taxable value in the tax increm			\$	80,187,168	(4)	
5.	Prior year tax increment value (Line 4 minus Line 2)					\$	16,665,786	(5)
S	SIGN Property Appraiser Certification I certify the taxable values				e values ab	ove are correct to	the best of my knowled	lge.
	ERE	Signature of Property Appraiser :				Date :		
	Electronically Certified by Property Appraiser					6/24/2020 11:0	06 AM	
SEC	ΤΙΟΙ	II: COMPLETED BY TAXING AUTHORIT	Y Complete	EITHER line	e 6 or line	7 as applicable.	Do NOT complete both	ı .
6. lf	the a	mount to be paid to the redevelopment t	trust fund IS BA	SED on a s	pecific pro	portion of the tax	increment value:	
6a.		r the proportion on which the payment is					95.00 %	(6a)
6b.		icated increment value <i>(Line 3 multiplied b</i> If value is zero or less than zero, then en			a)	\$	19,926,608	(6b)
6с.	Amo	ount of payment to redevelopment trust f	und in prior ye	ar				
7. lf	the a	mount to be paid to the redevelopment t	trust fund IS NO	OT BASED o	n a specifi	c proportion of th	e tax increment value:	
7a.	Amo	ount of payment to redevelopment trust f	und in prior ye	ar		\$	0	(7a)
7b.	Prio	r year operating millage levy from Form D	R-420, Line 10	1		0.0000) per \$1,000	(7b)
7c.		es levied on prior year tax increment value e 5 multiplied by Line 7b, divided by 1,000)				\$	0	(7c)
7d.		r year payment as proportion of taxes levie ? <i>Ta divided by Line 7c, multiplied by 100</i>)	ed on increme	nt value			0.00 %	(7d)
7e.	Ded	icated increment value <i>(Line 3 multiplied b</i>			7d)	\$	0	(7e)
		Taxing Authority Certification	l certify the ca	lculations, r	nillages an	d rates are correct	to the best of my knowle	dge.
	s	Signature of Chief Administrative Officer :				Date :		
	I	Electronically Certified By Taxing Authori	ty			7/30/2020 11:30	AM	
	G Title : N Eric M. Peburn, Chief Financial Officer					ame and Contact burn, Chief Finan		
I F	H Mailing Address : 303 N Clyde Morris Blvd R E				Physical A 303 N Cly	ddress : de Morris Blvd		
	-	City, State, Zip :			Phone Nu	mber :	Fax Number :	
		Daytona Beach, FL 32114			386-425-4			

Property appraisers must complete and sign Section I of this worksheet and provide it with form DR-420, *Certification of Taxable Value*, to all taxing authorities who make payments to a redevelopment trust fund under:

- s. 163.387(2)(a), Florida Statutes, or
- An ordinance, resolution, or agreement to fund a project or to finance essential infrastructure.

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Tallahassee, Florida 32315-3000

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Complete Line 6 if the payment into the redevelopment trust fund is a specific proportion of the tax increment value.



Print Form

Yea	r:	2020		County :		/olusia		
		Authority :		Taxing Aut				
		KHOSPITAL		HALIFAX				
		nity Redevelopment Area :		Base Year	:			
Por	t Ora	inge-Town Center		1998				
SEC	ΓΙΟΝ	II: COMPLETED BY PROPERTY APPRA	ISER	I				
1.	Curr	ent year taxable value in the tax increment	area		50,101,767	(1)		
2.	Base	year taxable value in the tax increment are	ea			\$	29,558,416	(2)
3.	Curr	ent year tax increment value (Line 1 minus	Line 2)			\$	20,543,351	(3)
4.	Prio	year Final taxable value in the tax increme	ent area			\$	45,836,467	(4)
5.	Prio	year tax increment value (Line 4 minus Lin	e 2)			\$	16,278,051	(5)
CI.	CN	Property Appraiser Certification	۱ l certify	the taxable	e values a	bove are correct to	the best of my knowled	lge.
	SIGN HERE Signature of Property Appraiser :					Date :		
	Electronically Certified by Property Appraiser					6/24/2020 11:0	06 AM	
SEC	ECTION II: COMPLETED BY TAXING AUTHORITY Complete E			EITHER line	e 6 or line	7 as applicable.	Do NOT complete both	ı.
6. lf 1	the a	mount to be paid to the redevelopment tr	ust fund IS BA	ASED on a sp	pecific pro	oportion of the tax	increment value:	
6a.	Ente	r the proportion on which the payment is l	based.				95.00 %	(6a)
6b.		icated increment value <i>(Line 3 multiplied by</i> If value is zero or less than zero, then ente			a)	\$	19,516,183	(6b)
6c.	Amc	ount of payment to redevelopment trust fu	nd in prior ye	ar		\$	5,484	(6c)
7. lf 1	the a	mount to be paid to the redevelopment tr	ust fund IS N	OT BASED o	n a specif	ic proportion of th	e tax increment value:	
7a.	Amc	ount of payment to redevelopment trust fu	nd in prior ye	ar		\$	0	(7a)
7b.	Prio	r year operating millage levy from Form DR	-420, Line 10			0.000) per \$1,000	(7b)
		es levied on prior year tax increment value 25 multiplied by Line 7b, divided by 1,000)				\$	0	(7c)
		year payment as proportion of taxes levie	d on increme	nt value			0.00 %	(7d)
		e 7a divided by Line 7c, multiplied by 100)			7 -1)		0.00	(* 57)
7e.	Dea	icated increment value (Line 3 multiplied by If value is zero or less than zero, then ente	r the percenta er zero on Lin	ge on Line / <mark>e 7e</mark>	'a)	\$	0	(7e)
		Taxing Authority Certification	l certify the ca	lculations, r	nillages a	nd rates are correct	to the best of my knowle	dge.
s	;	Signature of Chief Administrative Officer :				Date :		
1		Electronically Certified By Taxing Authority	ý			7/30/2020 11:30	AM	
G		Title :				Name and Contact		
N		Eric M. Peburn, Chief Financial Officer			Eric M. P	eburn, Chief Finan	cial Officer	
H		Mailing Address :			Physical <i>i</i>	Address :		
E		303 N Clyde Morris Blvd				yde Morris Blvd		
R	:							
	•	City, State, Zip :			Phone N	umber :	Fax Number :	
		Daytona Beach, FL 32114			386-425-	-4568	386-425-4575	

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Tallahassee, Florida 32315-3000

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Additional Instructions for Lines 6 and 7

Complete Line 6 if the payment into the redevelopment trust fund is a specific proportion of the tax increment value.



Yea	r:	2020		County :	V	OLUSIA		
		Authority : (HOSPITAL		Taxing Au HALIFAX I				
		nity Redevelopment Area : a Beach-West Side		Base Year 1997	:			
SECT		II: COMPLETED BY PROPERTY APPR	AISER					
1. (Curr	ent year taxable value in the tax incremer	nt area		\$ 117,712,860			
2.	Base	year taxable value in the tax increment a	rea			\$	60,641,706	(2)
3. (Current year tax increment value (Line 1 minus Line 2)					\$	57,071,154	(3)
4.	Prior year Final taxable value in the tax increment area					\$	108,364,355	(4)
5.	5. Prior year tax increment value (Line 4 minus Line 2)					\$	47,722,649	(5)
CI/	SIGN Property Appraiser Certification I certify the taxable values a				e values ab	ove are correct to	the best of my knowled	lge.
	RE	Signature of Property Appraiser :				Date :		
		Electronically Certified by Property Ap	praiser			6/24/2020 11:0	06 AM	
SECT		III: COMPLETED BY TAXING AUTHORIT	Y Complete	EITHER line	e 6 or line	7 as applicable.	Do NOT complete both	ı.
6. lf t	he a	mount to be paid to the redevelopment	trust fund IS BA	SED on a s	pecific pro	portion of the tax	increment value:	
6a. [Ente	r the proportion on which the payment is	based.				95.00 %	(6a)
6b. [[]		cated increment value <i>(Line 3 multiplied l</i> If value is zero or less than zero, then en			a)	\$	54,217,596	(6b)
6c. /	Amo	ount of payment to redevelopment trust f	und in prior ye	ar		\$	16,087	(6c)
7. lf t	he a	mount to be paid to the redevelopment	trust fund IS N	OT BASED o	n a specifio	proportion of th	e tax increment value:	
7a. /	Amc	ount of payment to redevelopment trust f	und in prior ye	ar		\$	0	(7a)
7b. [Prio	year operating millage levy from Form D	R-420, Line 10)		0.0000) per \$1,000	(7b)
		s levied on prior year tax increment value 5 multiplied by Line 7b, divided by 1,000)	2			\$	0	(7c)
7d.	Prio (<i>Line</i>	year payment as proportion of taxes levi 7a divided by Line 7c, multiplied by 100)	ed on increme	nt value			0.00 %	(7d)
7e. [[]		icated increment value <i>(Line 3 multiplied l</i> If value is zero or less than zero, then en			7d)	\$	0	(7e)
		Taxing Authority Certification	l certify the ca	lculations, i	millages an	d rates are correct	to the best of my knowle	dge.
S		Signature of Chief Administrative Officer	:			Date :		
I		Electronically Certified By Taxing Authori	ty			7/30/2020 11:30	AM	
	G Title :N Eric M. Peburn, Chief Financial Officer					ame and Contact burn, Chief Finan		
E R	H Mailing Address : E 303 N Clyde Morris Blvd R				Physical A 303 N Cly	ddress : de Morris Blvd		
E	ĺ	City, State, Zip :			Phone Nu	mber :	Fax Number :	
		Daytona Beach, FL 32114			386-425-4			

Property appraisers must complete and sign Section I of this worksheet and provide it with form DR-420, *Certification of Taxable Value*, to all taxing authorities who make payments to a redevelopment trust fund under:

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Complete Line 6 if the payment into the redevelopment trust fund is a specific proportion of the tax increment value.



Yea	r:	2020		County :	V	OLUSIA		
		l Authority: K HOSPITAL		Taxing Au HALIFAX I				
		nity Redevelopment Area : aytona		Base Year 1997	:			
SECT		II: COMPLETED BY PROPERTY APPR	AISER					
1. (Curr	ent year taxable value in the tax incremer	nt area		\$ 257,620			(1)
2.	Base	year taxable value in the tax increment a	rea			\$	116,601,454	(2)
3. (Current year tax increment value (Line 1 minus Line 2)					\$	141,018,618	(3)
4.	· Prior year Final taxable value in the tax increment area					\$	239,091,964	(4)
5.	Prior year tax increment value (Line 4 minus Line 2)					\$	122,490,510	(5)
<u> </u>	SIGN Property Appraiser Certification I certify the taxable values				e values ab	ove are correct to	the best of my knowled	dge.
	RE	Signature of Property Appraiser :				Date :		
		Electronically Certified by Property Ap	praiser			6/24/2020 11:0	06 AM	
SECT		III: COMPLETED BY TAXING AUTHORIT	Y Complete	EITHER line	e 6 or line i	7 as applicable.	Do NOT complete both	ı.
6. lf t	he a	mount to be paid to the redevelopment	trust fund IS BA	SED on a s	pecific pro	portion of the tax	increment value:	
6a.	Ente	r the proportion on which the payment is	based.				95.00 %	(6a)
6b.		icated increment value <i>(Line 3 multiplied l</i> If value is zero or less than zero, then en			a)	\$	133,967,687	(6b)
6c. ,	Amo	ount of payment to redevelopment trust f	und in prior ye	ar		\$	41,389	(6c)
7. lf t	he a	mount to be paid to the redevelopment	trust fund IS N	OT BASED o	n a specifio	proportion of th	e tax increment value:	
7a. ,	Amo	ount of payment to redevelopment trust f	und in prior ye	ar		\$	0	(7a)
7b. I	Prio	r year operating millage levy from Form D	R-420, Line 10			0.0000) per \$1,000	(7b)
		es levied on prior year tax increment value 5 multiplied by Line 7b, divided by 1,000)	2		\$			(7c)
7d.	Prio (<i>Line</i>	year payment as proportion of taxes levi 7 a divided by Line 7c, multiplied by 100)	ed on increme	nt value			0.00 %	(7d)
7e.	Ded	icated increment value <i>(Line 3 multiplied l</i> If value is zero or less than zero, then en			7d)	\$	0	(7e)
		Taxing Authority Certification	l certify the ca	lculations, I	millages an	d rates are correct	to the best of my knowle	dge.
S		Signature of Chief Administrative Officer	:			Date :		
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		Daytona Beach, FL 32114			386-425-4			

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Yea	ar:	2020	V	OLUSIA				
		l Authority: X HOSPITAL		Taxing Aut HALIFAX H				
		nity Redevelopment Area :		Base Year	:			
Hol	lly Hi	11		1995				
SEC	ΤΙΟΙ	II: COMPLETED BY PROPERTY APPR	AISER	I				
1.	Curr	ent year taxable value in the tax increme	nt area			\$ 300,059,700 (1)		
2.	Base	year taxable value in the tax increment a	area			\$ 88,342,219 (2		
3.	Curr	ent year tax increment value (Line 1 minu	ıs Line 2)			\$	211,717,481	(3)
4.	Prio	r year Final taxable value in the tax incren	nent area			\$	286,679,777	(4)
5.	Prio	r year tax increment value <i>(Line 4 minus L</i>	ine 2)			\$	198,337,558	(5)
cı	SIGN Property Appraiser Certification I certify the taxable values a				e values ab	ove are correct to	the best of my knowled	dge.
	ERE	Signature of Property Appraiser:				Date :		
	Electronically Certified by Property Appraiser					6/24/2020 11:0	06 AM	
SEC	SECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 or line				6 or line	7 as applicable.	Do NOT complete both	ı.
6. lf	the a	amount to be paid to the redevelopment	trust fund IS BA	SED on a sp	pecific pro	portion of the tax	increment value:	
ба.	Ente	r the proportion on which the payment is	s based.				95.00 %	(6a)
6b.		icated increment value <i>(Line 3 multiplied</i> <i>If value is zero or less than zero, then en</i>			a)	\$	201,131,607	(6b)
6c.	Amo	ount of payment to redevelopment trust f	fund in prior yea	ar		\$ 66,741 (6c)		
7. lf	the a	amount to be paid to the redevelopment	trust fund IS NO	DT BASED oi	n a specifi	c proportion of th	e tax increment value:	
7a.	Amo	ount of payment to redevelopment trust f	fund in prior yea	ar		\$	0	(7a)
7b.	Prio	r year operating millage levy from Form D	0R-420, Line 10			0.0000) per \$1,000	(7b)
7c.	(Line	es levied on prior year tax increment value e 5 multiplied by Line 7b, divided by 1,000)				\$	0	(7c)
7d.	Prio (Line	r year payment as proportion of taxes leve 7 a divided by Line 7c, multiplied by 100)	ied on increme	nt value			0.00 %	(7d)
7e.	Ded	icated increment value <i>(Line 3 multiplied If value is zero or less than zero, then en</i>			'd)	\$	0	(7e)
		Taxing Authority Certification	l certify the ca	lculations, n	nillages an	d rates are correct	to the best of my knowle	dge.
5	5	Signature of Chief Administrative Officer	:			Date :		
1		Electronically Certified By Taxing Author	ity			7/30/2020 11:30	AM	
N N		Title : Eric M. Peburn, Chief Financial Officer				ame and Contact burn, Chief Finan		
E					Physical A 303 N Cly	ddress : de Morris Blvd		
E		City, State, Zip :			Phone Nu	Number : Fax Number :		
		Daytona Beach, FL 32114			386-425-4			

Property appraisers must complete and sign Section I of this worksheet and provide it with form DR-420, *Certification of Taxable Value*, to all taxing authorities who make payments to a redevelopment trust fund under:

- s. 163.387(2)(a), Florida Statutes, or
- An ordinance, resolution, or agreement to fund a project or to finance essential infrastructure.

"Tax increment value" is the cumulative increase in taxable value from the base year to the current year within the defined geographic area. It is used to determine the payment to a redevelopment trust fund under:

- s. 163.387(1), F.S. or
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"Dedicated increment value" is the portion of the tax increment value used to determine the payment to the redevelopment trust fund. (See s. 200.001(8)(h), F.S.) Calculate the dedicated increment value on this form and enter on either Line 6b or Line 7e.

"Specific proportion," used to determine whether to complete Line 6 or Line 7, refers to the calculation of the tax increment payment. Examples:

• Example 1.

Section.163.387(1), F.S., states the payment made by the taxing authority should equal 95% of the millage levied times the tax increment value. The specific proportion in this case is 95%. The ordinance providing for the payment may set a percentage lower than 95%. In these cases, the lower percentage would be the specific proportion.

• Example 2.

Some required tax increment payments are not directly related to the tax increment value. A constant dollar payment is a payment not based on a specific proportion of the tax increment value. Line 7 converts these payments into a proportion based on the prior year's payment and tax increment value to reach the current year's dedicated increment value.

Section I: Property Appraiser

A. Complete Section I of this form for each county, municipality, independent special district, dependent special district, and MSTU that:

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- Is not exempted from making payments to a community redevelopment trust fund based on tax increments (s. 163.387(2)(c), F.S.).

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Florida Department of Revenue Property Tax Oversight Program - TRIM Section P. O. Box 3000

Tallahassee, Florida 32315-3000

B. Enter only tax increment values that apply to the value located within the taxing authority indicated.

Section II: Taxing Authority

Complete Section II of the form, keep one copy, and return the original and one copy to your property appraiser with DR-420 within 35 days of certification. Send one copy to your tax collector.

Additional Instructions for Lines 6 and 7

Complete Line 6 if the payment into the redevelopment trust fund is a specific proportion of the tax increment value.



Year	r:	2020		County :	V	OLUSIA		
		l Authority: K HOSPITAL		Taxing Au HALIFAX I				
		nity Redevelopment Area : inge-East Port		Base Year 1995	:			
SECT		II: COMPLETED BY PROPERTY APPR	AISER					
1. (Curr	ent year taxable value in the tax incremer	nt area		\$ 40,172,32			(1)
2.	Base	year taxable value in the tax increment a	rea			\$	13,693,302	(2)
3. (Current year tax increment value (Line 1 minus Line 2)					\$	26,479,020	(3)
4. F	• Prior year Final taxable value in the tax increment area					\$	37,180,889	(4)
5. F	5. Prior year tax increment value (Line 4 minus Line 2)					\$	23,487,587	(5)
sid	Property Appraiser Certification I certify the taxable values a				e values ab	ove are correct to	the best of my knowled	dge.
	SIGN HERE Signature of Property Appraiser : Electronically Certified by Property Appraiser					Date : 6/24/2020 11:0	06 AM	
SECT		I II: COMPLETED BY TAXING AUTHORIT	Y Complete	EITHER line	e 6 or line	7 as applicable.	Do NOT complete both	n.
6. lf t	he a	mount to be paid to the redevelopment	trust fund IS BA	SED on a s	pecific pro	portion of the tax	increment value:	
6a. [Ente	r the proportion on which the payment is	based.				95.00 %	(6a)
6b. [[]		icated increment value <i>(Line 3 multiplied)</i> If value is zero or less than zero, then en			a)	\$	25,155,069	(6b)
6c. /	٩mc	ount of payment to redevelopment trust f	und in prior ye	ar		\$	7,912	(6c)
7. lf t	he a	mount to be paid to the redevelopment	trust fund IS N	OT BASED o	n a specifio	proportion of th	e tax increment value:	
7a.	٩mc	ount of payment to redevelopment trust f	und in prior ye	ar		\$	0	(7a)
7b. F	Prio	r year operating millage levy from Form D	R-420, Line 10			0.0000) per \$1,000	(7b)
		es levied on prior year tax increment value s 5 multiplied by Line 7b, divided by 1,000)		\$			0	(7c)
7d. <mark>(</mark>	Prio <i>Line</i>	r year payment as proportion of taxes levi ? <i>Ta divided by Line 7c, multiplied by 100</i>)	ed on increme	nt value			0.00 %	(7d)
7e. [[]		icated increment value <i>(Line 3 multiplied)</i> If value is zero or less than zero, then en			7d)	\$	0	(7e)
	- L	Taxing Authority Certification	-	lculations,	millages an	d rates are correct	to the best of my knowle	edge.
S		Signature of Chief Administrative Officer	:			Date :		
I		Electronically Certified By Taxing Authori	ty			7/30/2020 11:30	AM	
	G Title :N Eric M. Peburn, Chief Financial Officer					ame and Contact burn, Chief Finan		
E R	H Mailing Address : E 303 N Clyde Morris Blvd R				Physical A 303 N Cly	ddress : de Morris Blvd		
E		City, State, Zip :			Phone Nu	mber :	Fax Number :	
		Daytona Beach, FL 32114			386-425-4	1568	386-425-4575	

Property appraisers must complete and sign Section I of this worksheet and provide it with form DR-420, *Certification of Taxable Value*, to all taxing authorities who make payments to a redevelopment trust fund under:

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Florida Department of Revenue Property Tax Oversight Program - TRIM Section P. O. Box 3000

Tallahassee, Florida 32315-3000

B. Enter only tax increment values that apply to the value located within the taxing authority indicated.

Section II: Taxing Authority

Complete Section II of the form, keep one copy, and return the original and one copy to your property appraiser with DR-420 within 35 days of certification. Send one copy to your tax collector.

Additional Instructions for Lines 6 and 7

Complete Line 6 if the payment into the redevelopment trust fund is a specific proportion of the tax increment value.



Year : 2020				County :	V	OLUSIA				
Principal Authority: HALIFAX HOSPITAL			Taxing Authority: HALIFAX HOSPITAL							
Community Redevelopment Area : Daytona Beach-Ballough Rd					Base Year : 1985					
SEC	SECTION I : COMPLETED BY PROPERTY APPRAISER									
1.	Curr	ent year taxable value in the tax increme	nt area			\$	26,708,517	(1)		
2.	Base	year taxable value in the tax increment a	irea			\$	9,086,882	(2)		
3.	Curr	ent year tax increment value <i>(Line 1 minu</i>	is Line 2)			\$ 17,621,635 (3)				
4.	Prio	year Final taxable value in the tax incren	nent area			\$ 26,350,154 (4				
5.	Prio	year tax increment value (Line 4 minus L	ine 2)			\$ 17,263,272 (5)				
SI	GN	Property Appraiser Certification	on l certify	the taxable	e values ab	ove are correct to	the best of my knowled	dge.		
	ERE	Cignature of Droparty Appraisar				Date :				
		Electronically Certified by Property Ap	praiser		6/24/2020 11:06 AM					
SEC	TION	II: COMPLETED BY TAXING AUTHORIT	Y Complete	EITHER line	e 6 or line i	7 as applicable.	Do NOT complete both	ı.		
6. lf 1	the a	mount to be paid to the redevelopment	trust fund IS BA	SED on a s	pecific pro	portion of the tax	increment value:			
6a.	Ente	r the proportion on which the payment is	s based.				95.00 %	(6a)		
6b.	6b. Dedicated increment value (Line 3 multiplied by the percentage on Line 6a) If value is zero or less than zero, then enter zero on Line 6b					\$ 16,740,553 (6b)				
6c.	Amo	ount of payment to redevelopment trust f	und in prior ye	ar		\$	5,815	(6c)		
7. lf 1	the a	mount to be paid to the redevelopment	trust fund IS NO	OT BASED o	n a specifio	c proportion of th	e tax increment value:			
7a.	7a. Amount of payment to redevelopment trust fund in prior year \$ 0						(7a)			
7b.	b. Prior year operating millage levy from Form DR-420, Line 10					0.0000 per \$1,000				
						\$ 0 (7				
	Prior year payment as proportion of taxes levied on increment value (<i>Line 7a divided by Line 7c, multiplied by 100</i>)					0.00 % (7d)				
7e.	e. Dedicated increment value (Line 3 multiplied by the percentage on Line 7d) If value is zero or less than zero, then enter zero on Line 7e						(7e)			
		Taxing Authority Certification	-	lculations, r	nillages an	d rates are correct	to the best of my knowle	dge.		
S	;	Signature of Chief Administrative Officer	:			Date :				
I	Electronically Certified By Taxing Authority				7/30/2020 11:30 AM					
G N		The .			Contact Name and Contact Title : Eric M. Peburn, Chief Financial Officer					
H E R	2	Mailing Address : 303 N Clyde Morris Blvd			Physical Address : 303 N Clyde Morris Blvd					
					Phone Number : Fax Number		Fax Number :			
					386-425-4	86-425-4568 386-425-4575				

Property appraisers must complete and sign Section I of this worksheet and provide it with form DR-420, *Certification of Taxable Value*, to all taxing authorities who make payments to a redevelopment trust fund under:

- s. 163.387(2)(a), Florida Statutes, or
- An ordinance, resolution, or agreement to fund a project or to finance essential infrastructure.

"Tax increment value" is the cumulative increase in taxable value from the base year to the current year within the defined geographic area. It is used to determine the payment to a redevelopment trust fund under:

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"Dedicated increment value" is the portion of the tax increment value used to determine the payment to the redevelopment trust fund. (See s. 200.001(8)(h), F.S.) Calculate the dedicated increment value on this form and enter on either Line 6b or Line 7e.

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• Example 2.

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Section I: Property Appraiser

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Tallahassee, Florida 32315-3000

B. Enter only tax increment values that apply to the value located within the taxing authority indicated.

Section II: Taxing Authority

Complete Section II of the form, keep one copy, and return the original and one copy to your property appraiser with DR-420 within 35 days of certification. Send one copy to your tax collector.

Additional Instructions for Lines 6 and 7

Complete Line 6 if the payment into the redevelopment trust fund is a specific proportion of the tax increment value.



Year : 2020				County :	V	OLUSIA			
Principal Authority: HALIFAX HOSPITAL				Taxing Authority: HALIFAX HOSPITAL					
Community Redevelopment Area : Daytona Beach-Main Street					Base Year : 1982				
SECT	SECTION I : COMPLETED BY PROPERTY APPRAISER								
1. (Curr	ent year taxable value in the tax incremer	nt area			\$	446,686,570	(1)	
2.	Base	year taxable value in the tax increment a	rea			\$	68,695,639	(2)	
3. (Curr	ent year tax increment value <i>(Line 1 minu</i>	s Line 2)			\$ 377,990,931 (3			
4.	Prio	year Final taxable value in the tax increm	ient area			\$ 439,656,836 (4			
5.	Prio	year tax increment value <i>(Line 4 minus Li</i>	ne 2)			\$	370,961,197	(5)	
SIC		Property Appraiser Certification	n l certify	the taxable	e values ab	ove are correct to	the best of my knowled	dge.	
	RE	Signature of Property Appraiser :				Date :			
		Electronically Certified by Property Ap	praiser		6/24/2020 11:06 AM				
SECT		I II: COMPLETED BY TAXING AUTHORIT	Y Complete	EITHER line	e 6 or line i	7 as applicable.	Do NOT complete both	ı .	
6. lf t	he a	mount to be paid to the redevelopment	trust fund IS BA	SED on a s	pecific pro	portion of the tax	increment value:		
6a. [Ente	r the proportion on which the payment is	based.				95.00 %	(6a)	
6b. [[]	5b. Dedicated increment value (Line 3 multiplied by the percentage on Line 6a) If value is zero or less than zero, then enter zero on Line 6b					\$ 359,091,384 (6b)			
6c. ,	Amo	ount of payment to redevelopment trust f	und in prior ye	ar		\$	124,997	(6c)	
7. lf t	he a	mount to be paid to the redevelopment	trust fund IS N	OT BASED o	n a specifio	c proportion of th	e tax increment value:		
7a. /	7a. Amount of payment to redevelopment trust fund in prior year \$ 0 (7							(7a)	
7b. [7b. Prior year operating millage levy from Form DR-420, Line 10 0.0000 per \$1,000						(7b)		
	Taura la da la miana antan tau in mana antan lua					\$ 0			
7d. [Prior year payment as proportion of taxes levied on increment value (<i>Line 7a divided by Line 7c, multiplied by 100</i>)					0.00 % (7d)			
7e.	e. Dedicated increment value (Line 3 multiplied by the percentage on Line 7d) If value is zero or less than zero, then enter zero on Line 7e (7)						(7e)		
		Taxing Authority Certification	l certify the ca	lculations, ı	millages an	d rates are correct	to the best of my knowle	dge.	
S		Signature of Chief Administrative Officer :				Date :			
I		Electronically Certified By Taxing Authority			7/30/2020 11:30 AM				
G N	The :			Contact Name and Contact Title : Eric M. Peburn, Chief Financial Officer					
H Mailing Address : 303 N Clyde Morris Blvd R					Physical A 303 N Cly	Address : Iyde Morris Blvd			
E	E City, State, Zip :				Phone Number : Fax Number		Fax Number :		
	Daytona Beach, FL 32114 386-				386-425-4568 386-425-4575		386-425-4575		

Property appraisers must complete and sign Section I of this worksheet and provide it with form DR-420, *Certification of Taxable Value*, to all taxing authorities who make payments to a redevelopment trust fund under:

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Additional Instructions for Lines 6 and 7

Complete Line 6 if the payment into the redevelopment trust fund is a specific proportion of the tax increment value.



Year : 2020				County :	V	OLUSIA			
Principal Authority: HALIFAX HOSPITAL				Taxing Authority: HALIFAX HOSPITAL					
Community Redevelopment Area : Daytona Beach-Downtown					Base Year : 1982				
SECT	SECTION I : COMPLETED BY PROPERTY APPRAISER								
1. (Curr	ent year taxable value in the tax incremer	nt area		\$ 151,56			(1)	
2. E	Base	year taxable value in the tax increment a	rea			\$ 49,000,577 (2)			
3. (Curr	ent year tax increment value <i>(Line 1 minu</i>	s Line 2)			\$ 102,565,297 (3)			
4. F	Prior	year Final taxable value in the tax increm	ient area			\$ 144,104,237 (4			
5. F	Prior	year tax increment value (Line 4 minus Li	ne 2)			\$ 95,103,660 (5)			
SIG	- 11	Property Appraiser Certification	n l certify	the taxable	e values ab	ove are correct to	the best of my knowled	lge.	
HE		Signature of Property Appraiser :				Date :			
		Electronically Certified by Property Ap	praiser		6/24/2020 11:06 AM				
SECT	ION	I II: COMPLETED BY TAXING AUTHORIT	Y Complete	EITHER line	e 6 or line	7 as applicable.	Do NOT complete both	ı .	
6. lf tl	he a	mount to be paid to the redevelopment	trust fund IS BA	SED on a s	pecific pro	portion of the tax	increment value:		
6a. E	nte	r the proportion on which the payment is	based.			95.00 % (6a)			
6b. [[]	bb. Dedicated increment value (Line 3 multiplied by the percentage on Line 6a) If value is zero or less than zero, then enter zero on Line 6b					\$ 97,437,032 (6b)			
6c. <i>J</i>	٩mc	ount of payment to redevelopment trust f	und in prior ye	ar		\$	32,038	(6c)	
7. If the amount to be paid to the redevelopment trust fund IS NOT BASED on a specific proportion of the tax increment value:									
7a. 🌶	7a. Amount of payment to redevelopment trust fund in prior year \$ 0 (7							(7a)	
7b. F) per \$1,000	(7b)	
	Taura la dia dia mainina dan tau in anana anto alua				\$			(7c)	
7d. (Prior year payment as proportion of taxes levied on increment value (Line 7a divided by Line 7c, multiplied by 100)					0.00 % (7d)			
7e. ^[]	Dedicated increment value (Line 3 multiplied by the percentage on Line 7d) If value is zero or less than zero, then enter zero on Line 7e (7)						(7e)		
	1	Taxing Authority Certification	l certify the ca	lculations, i	millages an	d rates are correct	to the best of my knowle	dge.	
S		Signature of Chief Administrative Officer :				Date :			
I		Electronically Certified By Taxing Authority			7/30/2020 11:30 AM				
G N	The :			Contact Name and Contact Title : Eric M. Peburn, Chief Financial Officer					
H E R	-	Mailing Address : 303 N Clyde Morris Blvd			Physical Address : 303 N Clyde Morris Blvd				
E	E City, State, Zip :				Phone Number : Fax Number		Fax Number :		
	Daytona Beach, FL 32114 386-				386-425-4568 386-425-4575		386-425-4575		

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Additional Instructions for Lines 6 and 7

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Year : 2020					County : VOLUSIA				
Principal Authority: HALIFAX HOSPITAL					Taxing Authority: HALIFAX HOSPITAL				
Community Redevelopment Area : Ormond Beach					Base Year : 1984				
SEC	SECTION I : COMPLETED BY PROPERTY APPRAISER								
1.	Curr	ent year taxable value in the tax increme	nt area			\$	168,488,373	(1)	
2.	Base	year taxable value in the tax increment a	area			\$ 45,486,221			
3.	Curr	ent year tax increment value (Line 1 minu	us Line 2)			\$ 123,002,152 (3)			
4.	Prio	r year Final taxable value in the tax incren	nent area			\$ 162,442,889 (4)			
5.	Prio	r year tax increment value <i>(Line 4 minus L</i>	ine 2)			\$ 116,956,668 (5)			
s	GN	Property Appraiser Certification	on l certify	the taxabl	e values ab	ove are correct to	o the best of my knowled	lge.	
	ERE	Signature of Property Appraiser :			Date :				
		Electronically Certified by Property Ap	praiser		6/24/2020 11:06 AM				
SEC	TION	II: COMPLETED BY TAXING AUTHORIT	ry Complete	EITHER line	e 6 or line	7 as applicable.	Do NOT complete both	ı.	
6. lf	the a	mount to be paid to the redevelopment	trust fund IS BA	SED on a s	pecific pro	portion of the tax	increment value:		
ба.	Ente	r the proportion on which the payment i			95.00 %	(6a)			
6b.	6b. Dedicated increment value (Line 3 multiplied by the percentage on Line 6a) If value is zero or less than zero, then enter zero on Line 6b					\$ 116,852,044 (6b)			
6c.	Amo	ount of payment to redevelopment trust	fund in prior yea	ar		\$	39,767	(6c)	
7. lf	the a	amount to be paid to the redevelopment	trust fund IS NO	OT BASED o	on a specifio	c proportion of th	e tax increment value:		
7a.	7a. Amount of payment to redevelopment trust fund in prior year \$ 0 ((7a)		
7b.	p. Prior year operating millage levy from Form DR-420, Line 10					0.0000 per \$1,000			
7c.	rc. Taxes levied on prior year tax increment value (<i>Line 5 multiplied by Line 7b, divided by 1,000</i>)					\$ 0 (7			
7d.	Prior year payment as proportion of taxes levied on increment value (<i>Line 7a divided by Line 7c, multiplied by 100</i>)					0.00 % (7d)			
7e.	Dedicated increment value (Line 3 multiplied by the percentage on Line 7d) If value is zero or less than zero, then enter zero on Line 7e					\$ 0 (7e)			
Taxing Authority Certification I certify the calculations, millages and rates are correct to the best of my knowledge							dge.		
5	5	Signature of Chief Administrative Officer :				Date :			
I G N		Electronically Certified By Taxing Authority				7/30/2020 11:30 AM			
		Title : Eric M. Peburn, Chief Financial Officer			Contact Name and Contact Title : Eric M. Peburn, Chief Financial Officer				
F	E R	Mailing Address : 303 N Clyde Morris Blvd			Physical A 303 N Cly	Address : Iyde Morris Blvd			
	E City, State, Zip :				Phone Number : Fax Number :		Fax Number :		
	Daytona Beach, FL 32114 386-425					386-425-4568 386-425-4575			

Property appraisers must complete and sign Section I of this worksheet and provide it with form DR-420, *Certification of Taxable Value*, to all taxing authorities who make payments to a redevelopment trust fund under:

- s. 163.387(2)(a), Florida Statutes, or
- An ordinance, resolution, or agreement to fund a project or to finance essential infrastructure.

"Tax increment value" is the cumulative increase in taxable value from the base year to the current year within the defined geographic area. It is used to determine the payment to a redevelopment trust fund under:

- s. 163.387(1), F.S. or
- An ordinance, resolution, or agreement to fund a project or finance essential infrastructure. In this case, the taxing authority must certify the boundaries and beginning date to the property appraiser.

"Dedicated increment value" is the portion of the tax increment value used to determine the payment to the redevelopment trust fund. (See s. 200.001(8)(h), F.S.) Calculate the dedicated increment value on this form and enter on either Line 6b or Line 7e.

"Specific proportion," used to determine whether to complete Line 6 or Line 7, refers to the calculation of the tax increment payment. Examples:

• Example 1.

Section.163.387(1), F.S., states the payment made by the taxing authority should equal 95% of the millage levied times the tax increment value. The specific proportion in this case is 95%. The ordinance providing for the payment may set a percentage lower than 95%. In these cases, the lower percentage would be the specific proportion.

• Example 2.

Some required tax increment payments are not directly related to the tax increment value. A constant dollar payment is a payment not based on a specific proportion of the tax increment value. Line 7 converts these payments into a proportion based on the prior year's payment and tax increment value to reach the current year's dedicated increment value.

Section I: Property Appraiser

A. Complete Section I of this form for each county, municipality, independent special district, dependent special district, and MSTU that:

- Has a tax increment value and
- Is not exempted from making payments to a community redevelopment trust fund based on tax increments (s. 163.387(2)(c), F.S.).

If a taxing authority has more than one tax increment value, they must complete a separate form for each tax increment value. Send a copy to each taxing authority with the DR-420 and keep a copy. When the taxing authority returns the completed forms, immediately send the original to:

Florida Department of Revenue Property Tax Oversight Program - TRIM Section P. O. Box 3000

Tallahassee, Florida 32315-3000

B. Enter only tax increment values that apply to the value located within the taxing authority indicated.

Section II: Taxing Authority

Complete Section II of the form, keep one copy, and return the original and one copy to your property appraiser with DR-420 within 35 days of certification. Send one copy to your tax collector.

Additional Instructions for Lines 6 and 7

Complete Line 6 if the payment into the redevelopment trust fund is a specific proportion of the tax increment value.