



CERTIFICATION OF TAXABLE VALUE

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

Year :	2023		County :	VOLUSIA				
	pal Authority : FAX HOSPITAL		Taxing Autl HALIFAX H					
SECT	ION I: COMPLETED BY PROPERTY AP	PRAISER						
1.	Current year taxable value of real property for op	perating pur	poses		\$	25,	287,349,136	(1)
2.	Current year taxable value of personal property f	or operating	g purposes		\$	\$ 1,577,344,165 (2		
3.	Current year taxable value of centrally assessed p	property for	operating p	urposes	\$		27,449,401	(3)
4.	Current year gross taxable value for operating pu	urposes (Lin	ne 1 plus Line	2 plus Line 3)	\$	26,	892,142,702	(4)
5.	Current year net new taxable value (Add new co improvements increasing assessed value by at le personal property value over 115% of the previo	ast 100%, a	nnexations, a	and tangible	\$		636,242,404	(5)
6.	6. Current year adjusted taxable value (Line 4 minus Line 5)						255,900,298	(6)
7.	7. Prior year FINAL gross taxable value from prior year applicable Form DR-403 series						980,256,507	(7)
8.	Does the taxing authority include tax increment of worksheets (DR-420TIF) attached. If none, ent	nter number	VES	🗌 NO	Number 11	(8)		
9.	Does the taxing authority levy a voted debt service millage or a millage voted for 2 9. years or less under s. 9(b), Article VII, State Constitution? If yes, enter the number of DR-420DEBT, <i>Certification of Voted Debt Millage</i> forms attached. If none, enter 0					V NO	Number 0	(9)
	Property Appraiser Certification	l certify the	taxable valu	ies above are	correct to t	he best o	f my knowled	dge.
SIGN	Property Appraiser Certification Signature of Property Appraiser:	l certify the	taxable valu	ies above are	correct to t Date :	he best o	f my knowled	dge.
		l certify the	taxable valu	ies above are				dge.
SIGN HERE	Signature of Property Appraiser:		taxable valu	ies above are	Date :			lge.
SIGN HERE	Signature of Property Appraiser: Electronically Certified by Property Appraiser	HORITY n FULL your	r taxing auth	ority will be d	Date : 6/23/20 enied TRIM	23 9:50 certifica	AM	lge.
SIGN HERE SECT	Signature of Property Appraiser: Electronically Certified by Property Appraiser ION II : COMPLETED BY TAXING AUT If this portion of the form is not completed i	HORITY n FULL your	r taxing auth ax year. If an	ority will be d y line is not ap	Date : 6/23/20 enied TRIM	23 9:50 certifica nter -0	AM	dge. (10)
SIGN HERE SECT	Signature of Property Appraiser: Electronically Certified by Property Appraiser ION II : COMPLETED BY TAXING AUT If this portion of the form is not completed i possibly lose its millage levy privile Prior year operating millage levy (<i>If prior year mill</i>	HORITY n FULL your ge for the ta lage was adj	r taxing auth ax year. If an iusted then us	ority will be d y line is not ap se adjusted	Date : 6/23/20 enied TRIM oplicable, en	23 9:50 certifica nter -0	AM tion and	
SIGN HERE SECT	Signature of Property Appraiser: Electronically Certified by Property Appraiser ION II : COMPLETED BY TAXING AUT If this portion of the form is not completed i possibly lose its millage levy privile Prior year operating millage levy (<i>If prior year mill</i> <i>millage from Form DR-422</i>)	HORITY n FULL your ge for the ta lage was adj by Line 10, o	r taxing auth ax year. If an <i>iusted then us</i> divided by 1,0 n obligation m	ority will be d y line is not ap se adjusted 2000) neasured by a	Date : 6/23/20 enied TRIM oplicable, en 0.80	23 9:50 certifica nter -0	AM tion and per \$1,000	(10)
SIGN HERE SECT 10. 11. 12.	Signature of Property Appraiser: Electronically Certified by Property Appraiser ION II : COMPLETED BY TAXING AUT If this portion of the form is not completed i possibly lose its millage levy privile Prior year operating millage levy (<i>If prior year mill</i> <i>millage from Form DR-422</i>) Prior year ad valorem proceeds (<i>Line 7 multiplied</i> Amount, if any, paid or applied in prior year as a conse	HORITY n FULL your ge for the ta lage was adj by Line 10, o equence of ar ne 7a for all D	r taxing auth ax year. If any <i>iusted then us</i> <i>divided by 1,0</i> n obligation m <i>R-420TIF form</i>	ority will be d y line is not ap se adjusted 2000) neasured by a	Date : 6/23/20 enied TRIM oplicable, en 0.80 \$	23 9:50 certifica nter -0	AM tion and per \$1,000 20,637,409	(10)
SIGN HERE SECT 10. 11. 12.	Signature of Property Appraiser: Electronically Certified by Property Appraiser TON II : COMPLETED BY TAXING AUT If this portion of the form is not completed i possibly lose its millage levy privile Prior year operating millage levy (<i>If prior year mill</i> <i>millage from Form DR-422</i>) Prior year ad valorem proceeds (<i>Line 7 multiplied</i> Amount, if any, paid or applied in prior year as a conse dedicated increment value (<i>Sum of either Lines 6c or Li</i>	HORITY on FULL your oge for the ta lage was adj by Line 10, o equence of ar ne 7a for all D 1 minus Line	r taxing auth ax year. If an <i>iusted then us</i> <i>divided by 1,0</i> n obligation m <i>DR-420TIF form</i>	ority will be d y line is not ap se adjusted 2000) heasured by a is)	Date : 6/23/20 enied TRIM oplicable, en 0.84 \$ \$	23 9:50 certifica nter -0 606	AM tion and per \$1,000 20,637,409 1,218,420	(10) (11) (12)
SIGN HERE SECT 10. 11. 12. 13. 14.	Signature of Property Appraiser: Electronically Certified by Property Appraiser ION II : COMPLETED BY TAXING AUT If this portion of the form is not completed i possibly lose its millage levy privile Prior year operating millage levy (<i>If prior year mill</i> <i>millage from Form DR-422</i>) Prior year ad valorem proceeds (<i>Line 7 multiplied</i> Amount, if any, paid or applied in prior year as a conse dedicated increment value (<i>Sum of either Lines 6c or Line 1</i>)	HORITY on FULL your oge for the ta lage was adj by Line 10, o equence of ar ne 7a for all D 1 minus Line ib or Line 7e fo	r taxing auth ax year. If an <i>iusted then us</i> <i>divided by 1,0</i> n obligation m <i>DR-420TIF form</i>	ority will be d y line is not ap se adjusted 2000) heasured by a is)	Date : 6/23/20 enied TRIM oplicable, en 0.80 \$ \$ \$	23 9:50 certificanter -0 606	AM tion and per \$1,000 20,637,409 1,218,420 19,418,989	(10) (11) (12) (13)
SIGN HERE SECT 10. 11. 12. 13. 14.	Signature of Property Appraiser: Electronically Certified by Property Appraiser ION II : COMPLETED BY TAXING AUT If this portion of the form is not completed i possibly lose its millage levy privile Prior year operating millage levy (<i>If prior year mill millage from Form DR-422</i>) Prior year ad valorem proceeds (<i>Line 7 multiplied</i> Amount, if any, paid or applied in prior year as a conse dedicated increment value (<i>Sum of either Lines 6c or Li</i> Adjusted prior year ad valorem proceeds (<i>Line 1</i> Dedicated increment value, if any (<i>Sum of either Line 6</i>	HORITY n FULL your ge for the ta lage was adj l by Line 10, o equence of ar ne 7a for all D 1 minus Line ib or Line 7e fo s Line 14)	r taxing auth ax year. If an <i>iusted then us</i> <i>divided by 1,0</i> n obligation m <i>DR-420TIF form</i> 2 12) or all <i>DR-420TI</i>	ority will be d y line is not ap se adjusted 2000) heasured by a ls) F forms)	Date : 6/23/20 enied TRIM pplicable, en 0.80 \$ \$ \$ \$ \$ \$	23 9:50 certificanter -0 506	AM tion and per \$1,000 20,637,409 1,218,420 19,418,989 604,802,292	(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 AUT If this portion of the form is not completed i possibly lose its millage levy privile Prior year operating millage levy (<i>If prior year mill millage from Form DR-422</i>) Prior year ad valorem proceeds (<i>Line 7 multiplied</i> Amount, if any, paid or applied in prior year as a conse dedicated increment value (<i>Sum of either Lines 6c or Li</i> Adjusted prior year ad valorem proceeds (<i>Line 1</i> Dedicated increment value, if any (<i>Sum of either Line 6</i> Adjusted current year taxable value (<i>Line 6 minu</i>)	HORITY n FULL your ge for the ta lage was adj l by Line 10, o equence of ar ne 7a for all D 1 minus Line ib or Line 7e fo s Line 14)	r taxing auth ax year. If an <i>iusted then us</i> <i>divided by 1,0</i> n obligation m <i>DR-420TIF form</i> 2 12) or all <i>DR-420TI</i>	ority will be d y line is not ap se adjusted 2000) heasured by a ls) F forms)	Date : 6/23/20 enied TRIM pplicable, en 0.80 \$ \$ \$ \$ \$ \$ \$ \$	23 9:50 certifica nter -0 606 1, 24, 878	AM tion and per \$1,000 20,637,409 1,218,420 19,418,989 604,802,292 651,098,006	 (10) (11) (12) (13) (14) (15)

DR-420 R. 5/12

									Page 2
19.	Т	YPE of principa	al authority (check	one) Count	у	✓ Inde	pendent Spec	ial District	(19)
				Munic	cipality	Wate	er Managemei	nt District	
20.	A	pplicable taxir	ng authority (check	k one) 🔽 Princi	pal Authority	_	endent Specia er Managemer	l District nt District Basin	(20)
21.	ls	millage levied i	n more than one co	unty? (check one)	Yes	✔ No			(21)
	·	DEPENDENT	SPECIAL DISTRIC	TS AND MSTUs	STOP	STOP	HERE - SIG	N AND SUBN	IIT
22.		endent special dist	l prior year ad valorem p ricts, and MSTUs levying) \$		19,418,989	(22)
23.	Curr	ent year aggrega	ate rolled-back rate (Li	ne 22 divided by Line 1	5, multiplied by 1,00	0)	0.7878	per \$1,000	(23)
24.	Curr	ent year aggrega	ate rolled-back taxes (L	Line 4 multiplied by Line	e 23, divided by 1,00	0) \$		21,185,630	(24)
25.	Enter total of all operating ad valorem taxes proposed taxing authority, all dependent districts, and MSTUs, if <i>DR-420 forms</i>)					all \$		21,185,630	(25)
26.				ate (Line 25 divided by	Line 4, multiplied		0.7878	per \$1,000	(26)
27.		rent year propose 23, <mark>minus 1</mark> , mu	ed rate as a percent ch <i>ıltiplied by 100)</i>	ange of rolled-back ra	te (Line 26 divided l	by		0.00 %	(27)
		rst public get hearing	Date : 9/13/2023	Time : 5:05 PM EST	Place : 303 N. Clyde Mor Daytona Beach, F		France Tower	Conference Roo	m A,
	5	Taxing Autho	ority Certification	I certify the millag The millages com either s. 200.071 o	oly with the prov				
'	ן ו	Signature of Chi	ef Administrative Offic	cer :			Date :		
	G	Electronically Co	ertified by Taxing Auth	nority			7/20/202	3 9:24 AM	
	N Title :			Contact Name					
	H Eric M. Peburn, Chief Financial Off		Chief Financial Officer		Eric M. Peburn,	Chief Fir	nancial Officer		
	E R	Mailing Address 303 N Clyde Mo			Physical Addres 303 N Clyde Mo		l		
	E	City, State, Zip :			Phone Number	:	Fax N	lumber :	
	Daytona Beach, FL 321		FL 32114		386-425-4568		386-4	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

For municipal governments, counties, and special districts

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

Print Form

Reset Form

Yea	ar: 2023	County:	VOLU	JSIA			
	ncipal Authority : LIFAX HOSPITAL	Taxing Authori HALIFAX HOSF	•				
1.	Is your taxing authority a municipality or independent special dist ad valorem taxes for less than 5 years?	rict that has levie	ed [Yes	V No	(1)	
	IF YES, STOP STOP HERE. SIGN AND	D SUBMIT. You	u are no	ot subject to	a millage limitat	tion.	
2.	Current year rolled-back rate from Current Year Form DR-420, Line	16		0.7878	per \$1,000	(2)	
3.	Prior year maximum millage rate with a majority vote from 2022 Fo	orm DR-420MM, L	ine 13	3 5.9694 per \$1,000			
4.	Prior year operating millage rate from Current Year Form DR-420, I	_ine 10		0.8606	per \$1,000	(4)	
	If Line 4 is equal to or greater than Line 3, sk	ip to Line 11	I. If le	ess, contin	ue to Line 5.		
	Adjust rolled-back rate based on prior year	majority-vote	e maxin	num millage	rate		
5.	Prior year final gross taxable value from Current Year Form DR-420	, Line 7	Ş	5	23,980,256,507	(5)	
6.	Prior year maximum ad valorem proceeds with majority vote (Line 3 multiplied by Line 5 divided by 1,000)	ç	5	143,147,743	(6)		
7.	Amount, if any, paid or applied in prior year as a consequence of a measured by a dedicated increment value from Current Year Forn		<u></u>	5	1,218,420	(7)	
8.	Adjusted prior year ad valorem proceeds with majority vote <i>(Line</i>	6 minus Line 7)	Ş	5	141,929,323	(8)	
9.	Adjusted current year taxable value from Current Year form DR-42	20 Line 15	¢	5	24,651,098,006	(9)	
10.	Adjusted current year rolled-back rate (Line 8 divided by Line 9, m	ultiplied by 1,00	00)	5.7575	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>)			5.7575	per \$1,000	(11)	
12.	Adjustment for change in per capita Florida personal income (See	Line 12 Instruct	tions)		1.0284	(12)	
13.	Majority vote maximum millage rate allowed (Line 11 multiplied b	y Line 12)		5.9210	per \$1,000	(13)	
14.	Two-thirds vote maximum millage rate allowed (Multiply Line 13	by 1.10)		6.5131	per \$1,000	(14)	
15.	Current year proposed millage rate			0.7878	per \$1,000	(15)	
16.	Minimum vote required to levy proposed millage: (Check one)				(16)	
~	a. Majority vote of the governing body: Check here if Line 15 is le to the majority vote maximum rate. Enter Line 13 on Line 1		to Line	13. The maxim	um millage rate is	equal	
	b. Two-thirds vote of governing body: Check here if Line 15 is less than or equal to Line 14, but greater than Line 13. Th maximum millage rate is equal to proposed rate. <i>Enter Line 15 on Line 17.</i>						
	c. Unanimous vote of the governing body, or 3/4 vote if nine men The maximum millage rate is equal to the proposed rate. Ente			greater than Line	14.		
	d. Referendum: The maximum millage rate is equal to the propos	on Line 17.					
17.	The selection on Line 16 allows a maximum millage rate of (Enter rate indicated by choice on Line 16)		5.9210	per \$1,000	(17)		
18.	Current year gross taxable value from Current Year Form DR-420, L	ine 4	Ş		26,892,142,702	(18)	

		Authority : X HOSPITAL							0MM-P R. 5/12 Page 2
19.	Curr	rent year proposed taxes (Line 15 multipl	lied by Line 18, divid	ded by 1,000)	\$		21,185	,630	(19)
1 20 1		al taxes levied at the maximum millage ra ,,000)	te <i>(Line 17 multipli</i>		\$		159,228		(20)
	DE	PENDENT SPECIAL DISTRICTS	AND MSTUs	STOP STOI	PHERI	E. SIGN A	AND SU	JBM	IT.
		er the current year proposed taxes of all d illage . <i>(The sum of all Lines 19 from eac</i> l			\$			0	(21)
22.	Tota	al current year proposed taxes (Line 19 pl	us Line 21)		\$		21,185	,630	(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)		\$		159,228	,377	(24)
7	Tota	al Maximum Versus Total Taxes Le	evied		-				
		total current year proposed taxes on Line kimum millage rate on Line 24? (Check on		than total taxes at the	VES		NO		(25)
5		Taxing Authority Certification			ct to the best of my knowledge. The millages 5 and the provisions of either s. 200.071 or s.				
	1	Signature of Chief Administrative Officer	:		Date :				
	-	Electronically Certified by Taxing Author	rity		7/20/20	023 9:24 AM			
		Title :		Contact Name and C					
<i>F</i> <i>E</i>	-	Eric M. Peburn, Chief Financial Officer		Eric M. Peburn, Chie	Financia	al Officer			
F	7	Mailing Address :	Physical Address :						
E	Ξ	303 N Clyde Morris Blvd	303 N Clyde Morris E	Blvd					
		City, State, Zip :		Phone Number :		Fax Number :			
		Daytona Beach, FL 32114	386-425-4568		386-425-4	575			

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 2023 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 2022 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 2022 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



Year :	2023		County :	V	OLUSIA			
	al Authority: AX HOSPITAL		Taxing Aut HALIFAX I					
	unity Redevelopment Area :		Base Year	:				
N MA	NLAND/ORMOND CROSSINGS		2006					
SECTIO	ON I : COMPLETED BY PROPERTY APPRAISE	R						
1. Cu	rrent year taxable value in the tax increment are	ea			\$ 49,419,272			
2. Ba	se year taxable value in the tax increment area				\$	10,124,427	(2)	
3. Cı	rrent year tax increment value (Line 1 minus Lin	e 2)			\$ 39,294,845			
4. Pr	or year Final taxable value in the tax increment	area			\$	46,486,186	(4)	
5. Pr	or year tax increment value (Line 4 minus Line 2))			\$	36,361,759	(5)	
SIG	Property Appraiser Certification	l certify	the taxable	e values ab		o the best of my knowled	lge.	
HER	E Signature of Property Appraiser :				Date :			
	Electronically Certified by Property Apprais	ser			6/23/2023 9:50	D AM		
SECTIO	ECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 o				7 as applicable.	Do NOT complete both	l .	
6. lf the	amount to be paid to the redevelopment trust	pecific pro	portion of the tax	increment value:				
	ter the proportion on which the payment is bas					95.00 %	(6a)	
6b. ^{D€}	dicated increment value <i>(Line 3 multiplied by th</i> <i>If value is zero or less than zero, then enter z</i>			a)	\$	37,330,103	(6b)	
бс. Ar	nount of payment to redevelopment trust fund	in prior yea	ar		\$	29,728	(6c)	
7. lf the	amount to be paid to the redevelopment trust	fund IS NO	OT BASED o	n a specifi	c proportion of th	e tax increment value:		
7a. Ar	nount of payment to redevelopment trust fund	in prior yea	ar		\$	0	(7a)	
7b. Pr	or year operating millage levy from Form DR-42	20, Line 10			0.000	0 per \$1,000	(7b)	
	xes levied on prior year tax increment value ne 5 multiplied by Line 7b, divided by 1,000)				\$	0	(7c)	
	or year payment as proportion of taxes levied o ne 7a divided by Line 7c, multiplied by 100)	n incremei	nt value			0.00 %	(7d)	
7e. De	dicated increment value <i>(Line 3 multiplied by th</i> If value is zero or less than zero, then enter z			'd)	\$	0	(7e)	
	Taxing Authority Certification	ertify 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 Authority				7/20/2023 9:24 /	AM		
G	Title :				ame and Contact			
N	N Eric M. Peburn, Chief Financial Officer			Eric M. Pe	burn, Chief Finan	cial Officer		
H Mailing Address :				Physical A	ddress :			
E 303 N Clyde Morris Blvd R			303 N Clyde 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
- 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:

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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	r:	2023		County :	V	OLUSIA			
		Authority :		Taxing Au					
	LIFA	X HOSPITAL		HALIFAX I	HOSPITAL				
Con	nmu	nity Redevelopment Area :		Base Year	:				
DB	- SO	UTH ATLANTIC CRA		2000					
SEC	τιοι	NI: COMPLETED BY PROPERTY APPRAISER		1					
1.	Curr	ent year taxable value in the tax increment area				\$	101,652,594	(1)	
2.	Base	e year taxable value in the tax increment area				\$ 63,521,382			
3.	Curr	ent year tax increment value (Line 1 minus Line 2	2)		\$ 38,131,212				
4.	Prio	r year Final taxable value in the tax increment ar	ea			\$	93,270,601	(4)	
5.	Prio	r year tax increment value <i>(Line 4 minus Line 2)</i>				\$	29,749,219	(5)	
SI	GN	Property Appraiser Certification	l certify	the taxable	e values ab		o the best of my knowled	lge.	
H	ERE	Signature of Property Appraiser :				Date :			
		Electronically Certified by Property Appraise	•			6/23/2023 9:50	0 AM		
SEC	ECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 or				e 6 or line	7 as applicable.	Do NOT complete both	ı .	
6. lf	the a	amount to be paid to the redevelopment trust fu	ind IS BA	SED on a s	pecific pro	portion of the tax			
6a.		er the proportion on which the payment is based					95.00 %	(6a)	
6b.		icated increment value <i>(Line 3 multiplied by the p</i> If value is zero or less than zero, then enter zer			a)	\$	36,224,651	(6b)	
6c.	Amo	ount of payment to redevelopment trust fund in	prior ye	ar		\$	24,322	(6c)	
7. lf	the a	amount to be paid to the redevelopment trust fu	und IS NO	OT BASED o	n a specifi	c proportion of th	e tax increment value:		
7a.	Amo	ount of payment to redevelopment trust fund in	prior ye	ar		\$	0	(7a)	
7b.	Prio	r year operating millage levy from Form DR-420,	Line 10			0.000	0 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.	Prio (Line	r year payment as proportion of taxes levied on a <i>7a divided by Line 7c, multiplied by 100</i>)	increme	nt value			0.00 %	(7d)	
7e.	Ded	icated increment value <i>(Line 3 multiplied by the p</i> If value is zero or less than zero, then enter zer			7d)	\$	0	(7e)	
					nillages an	d rates are correct	t to the best of my knowle	dge.	
5	5	Signature of Chief Administrative Officer :				Date :			
1		Electronically Certified By Taxing Authority				7/20/2023 9:24	AM		
C		Title :				ame and Contact			
	N Eric M. Peburn, Chief Financial Officer				Eric M. Pe	burn, Chief Finan	icial Officer		
H Mailing Address :				Physical A	ddress :				
	E 303 N Clyde Morris Blvd			303 N Clyde Morris Blvd					
				Dhar - N					
		City, State, Zip :			Phone Nu		Fax Number :		
		Daytona Beach, FL 32114			500-425-4	-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:

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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.

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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:	2023		County :	V	OLUSIA			
		Authority : (HOSPITAL		Taxing Auth HALIFAX HC					
		nity Redevelopment Area : RANGE TOWN CENTER CRA		Base Year : 1998					
SEC	TION	II: COMPLETED BY PROPERTY APPR	AISER						
1.	Curr	ent year taxable value in the tax increme	nt area			\$	62,485,794	(1)	
2.	Base	year taxable value in the tax increment a	rea			\$ 29,558,416			
3.	Curr	ent year tax increment value (Line 1 minu	s Line 2)			\$	32,927,378	(3)	
4.	Prio	year Final taxable value in the tax increm	nent area			\$	53,484,531	(4)	
5.	Prio	year tax increment value <i>(Line 4 minus Li</i>	ine 2)			\$	23,926,115	(5)	
61	GN	Property Appraiser Certification	on l certify	the taxable v	alues ab	ove are correct to	the best of my knowled	lge.	
	ERE	Signature of Property Appraiser:				Date :			
		Electronically Certified by Property Ap	praiser			6/23/2023 9:50) AM		
SEC	ECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 or					7 as applicable.	Do NOT complete both	ı.	
6. lf	the a	mount to be paid to the redevelopment	trust fund IS BA	ASED on a spe	cific prop	portion of the tax	increment value:		
6a. Enter 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				\$	31,281,009	(6b)	
6c.	Amo	ount of payment to redevelopment trust f	und in prior yea	ar		\$	19,561	(6c)	
7. lf 1	the a	mount to be paid to the redevelopment	trust fund IS NO	OT BASED on	a specific	proportion of th	e tax increment value:		
7a.	Amo	ount of payment to redevelopment trust f	und in prior yea	ar		\$	0	(7a)	
7b.	Prio	year operating millage levy from Form D	R-420, Line 10)		0.0000) per \$1,000	(7b)	
7c.	(Line	s levied on prior year tax increment value 5 multiplied by Line 7b, divided by 1,000)				\$	0	(7c)	
7d.	Prio (Line	year payment as proportion of taxes levi 7a divided by Line 7c, multiplied by 100)	ed on increme	nt value			0.00 %	(7d)	
7e.	Ded	cated increment value <i>(Line 3 multiplied)</i> If value is zero or less than zero, then en)	\$	0	(7e)	
		Taxing Authority Certification	-	lculations, mi	llages an	d rates are correct	to the best of my knowle	dge.	
S	;	Signature of Chief Administrative Officer	:			Date :			
I		Electronically Certified By Taxing Author	ty			7/20/2023 9:24 A	M		
						ame and Contact burn, Chief Finan			
E	E 303 N Clyde Morris Blvd 303 N Cly R 303 N Cly				•	Address : Iyde Morris Blvd			
	E City, State, Zip : Pho					Number : Fax Number :			
	Daytona Beach, FL 32114 38					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:

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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.



Yea	r:	2023		County :	V	OLUSIA			
		Authority :		Taxing Aut					
	.I⊦A.	X HOSPITAL		HALIFAX H	HOSPITAL				
Com	nmu	nity Redevelopment Area :		Base Year	:				
		STSIDE (MIDTOWN) CRA		1997					
SECT		II: COMPLETED BY PROPERTY APPRAISER							
1.	Curr	ent year taxable value in the tax increment area	3			\$ 153,338,448			
2.	Base	year taxable value in the tax increment area				\$ 60,641,706			
3.	Curr	ent year tax increment value (Line 1 minus Line	2)			\$	92,696,742	(3)	
4.	Prio	r year Final taxable value in the tax increment a	rea			\$	136,589,769	(4)	
5.	Prio	r year tax increment value <i>(Line 4 minus Line 2)</i>	•			\$	75,948,063	(5)	
SI	GN	Property Appraiser Certification	l certify	the taxable	e values ak	oove are correct to	the best of my knowled	lge.	
_	RE	Signature of Property Appraiser :				Date :			
		Electronically Certified by Property Appraise	r			6/23/2023 9:50) AM		
SECT	ECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 or				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 f	und IS BA	SED on a sp	pecific pro	portion of the tax			
		r the proportion on which the payment is based					95.00 %	(6a)	
6b.		icated increment value <i>(Line 3 multiplied by the</i> <i>If value is zero or less than zero, then enter zer</i>			a)	\$	88,061,905	(6b)	
6c.	Amo	ount of payment to redevelopment trust fund in	n prior ye	ar		\$ 62,093			
7. lf t	he a	mount to be paid to the redevelopment trust f	und IS NO	OT BASED o	n a specifi	c proportion of th	e tax increment value:		
7a.	Amo	ount of payment to redevelopment trust fund in	n prior ye	ar		\$	0	(7a)	
7b.	Prio	r year operating millage levy from Form DR-420	, Line 10			0.0000) per \$1,000	(7b)	
		es levied on prior year tax increment value <i>5 multiplied by Line 7b, divided by 1,000</i>)				\$	0	(7c)	
7d.	Prio (Line	r year payment as proportion of taxes levied on 2 <i>7a divided by Line 7c, multiplied by 100)</i>	increme	nt value			0.00 %	(7d)	
7e.		icated increment value <i>(Line 3 multiplied by the</i> <i>If value is zero or less than zero, then enter zer</i>			'd)	\$	0	(7e)	
					nillages ar	d rates are correct	to the best of my knowle	dge.	
s		Signature of Chief Administrative Officer :				Date :		-	
I		Electronically Certified By Taxing Authority				7/20/2023 9:24	AM		
G		Title :				lame and Contact			
N	N Eric M. Peburn, Chief Financial Officer				Eric M. Pe	eburn, Chief Finan	cial Officer		
н	H Mailing Address :				Physical A	\ddress :			
	E 303 N Clyde Morris Blvd			303 N Clyde Morris Blvd					
		City, State, Zip :			Phone Nu		Fax Number :		
	Daytona Beach, FL 32114				386-425-	425-4568 386-425-4575			

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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	ar: 2023 County:				V	OLUSIA			
		l Authority: K HOSPITAL		Taxing Aut HALIFAX H					
Con	าmu	nity Redevelopment Area :		Base Year	:				
SOL	JTH	DAYTONA CRA		1997					
SEC	TION	II: COMPLETED BY PROPERTY APPR	AISER						
1.	Curr	ent year taxable value in the tax incremen	nt area			\$	376,055,262	(1)	
2.	Base	year taxable value in the tax increment a	irea			\$ 116,601,454			
3.	Curr	ent year tax increment value (Line 1 minu	ıs Line 2)			\$ 259,453,808			
4.	Prio	year Final taxable value in the tax increm	nent area			\$ 346,280,365 (4			
5.	Prio	year tax increment value <i>(Line 4 minus Li</i>	ine 2)			\$	229,678,911	(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	Signature of Property Appraiser:				Date :			
		Electronically Certified by Property Ap	praiser			6/23/2023 9:50) AM		
SEC	ECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 or					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 sp	pecific pro	portion of the tax	increment value:		
6a. Enter the proportion on which the payment is based.95.00						95.00 %	(6a)		
6b.		icated increment value <i>(Line 3 multiplied)</i> If value is zero or less than zero, then en			a)	\$	246,481,118	(6b)	
6c.	Amo	ount of payment to redevelopment trust f	und in prior yea	ar		\$	187,779	(6c)	
7. lf 1	the a	mount to be paid to the redevelopment	trust fund IS NC	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 yea	ar		\$	0	(7a)	
7b.	Prio	r year operating millage levy from Form D	R-420, Line 10			0.000) per \$1,000	(7b)	
		es levied on prior year tax increment value s 5 multiplied by Line 7b, divided by 1,000)	2			\$	0	(7c)	
		r year payment as proportion of taxes levi ? <i>Ta divided by Line 7c, multiplied by 100</i>)	ied on incremei	nt value			0.00 %	(7d)	
7e.	Ded	icated increment value <i>(Line 3 multiplied)</i> If value is zero or less than zero, then en			'd)	\$	0	(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 Author	ity			7/20/2023 9:24 /	AM		
						ame and Contact burn, Chief Finan			
E	E 303 N Clyde Morris Blvd 303 N Clyde R 303 N Clyde Morris Blvd 303 N Clyde				•	cal Address : N Clyde Morris Blvd			
E		City, State, Zip :			Phone Nu	Number : Fax Number :			
	Daytona Beach, FL 32114 386-4					4568 386-425-4575			

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Tallahassee, Florida 32315-3000

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Yea	ır:	2023		County :	V	OLUSIA			
	•	l Authority: K HOSPITAL		Taxing Au HALIFAX I					
		nity Redevelopment Area : HILL CRA		Base Year 1995	:				
SEC	ΤΙΟΙ	II: COMPLETED BY PROPERTY APPR	AISER			1			
1.	Curr	ent year taxable value in the tax increme	nt area			\$ 371,538,625			
2.	Base	year taxable value in the tax increment a	area			\$ 88,342,219			
3.	Curr	ent year tax increment value <i>(Line 1 minu</i>	ıs Line 2)			\$	283,196,406	(3)	
4.	Prio	year Final taxable value in the tax incren	nent area			\$	334,545,361	(4)	
5.	Prio	r year tax increment value <i>(Line 4 minus L</i>	ine 2)			\$	246,203,142	(5)	
cı	GN	Property Appraiser Certification	on l certify	the taxable	e values ab	ove are correct to	the best of my knowled	dge.	
	ERE	Signature of Property Appraiser:				Date :			
		Electronically Certified by Property Ap	praiser			6/23/2023 9:50	AM		
SEC	ECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 o					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:		
6a.	Ente	r the proportion on which the payment i	s based.				95.00 %	(6a)	
6b.	Ded	icated increment value <i>(Line 3 multiplied</i> If value is zero or less than zero, then en	by the percentage ter zero on Line	ge on Line 6 e 6b	a)	\$	269,036,586	(6b)	
6c.	Amo	ount of payment to redevelopment trust	fund in prior yea	ar		\$	201,288	(6c)	
7. lf	the a	mount to be paid to the redevelopment	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	fund in prior yea	ar		\$	0	(7a)	
7b.	Prio	year operating millage levy from Form D	DR-420, Line 10			0.0000) per \$1,000	(7b)	
7c.		es levied on prior year tax increment value <i>5 multiplied by Line 7b, divided by 1,000</i>)	e			\$	0	(7c)	
7d.		r year payment as proportion of taxes lev ? <i>Ta divided by Line 7c, multiplied by 100</i>)	ied 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)	
		Taxing Authority Certification	-	lculations, I	millages an	d rates are correct	to the best of my knowle	dge.	
5	5	Signature of Chief Administrative Officer	:			Date :			
I	I	Electronically Certified By Taxing Author	ity			7/20/2023 9:24 A	M		
	 G Title : N Eric M. Peburn, Chief Financial Officer 					ame and Contact burn, Chief Finan			
H Mailing Address : S 303 N Clyde Morris Blvd R					Physical Address : 303 N Clyde Morris Blvd				
E	E City, State, Zip : Phot				Phone Nu	Number : Fax Number :			
						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
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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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> 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:	2023		County :	V	OLUSIA			
		l Authority: X HOSPITAL		Taxing Aut HALIFAX H					
					IOSITIAL				
		nity Redevelopment Area :		Base Year	:				
PO	RT O	RANGE CRA		1995					
SEC	τιοι	I : COMPLETED BY PROPERTY APPRA	AISER			1			
1.	Curr	ent year taxable value in the tax incremer	nt area			\$ 65,616,002			
2.	Base	year taxable value in the tax increment a	rea		\$ 13,693,			(2)	
3.	Curr	ent year tax increment value <i>(Line 1 minu</i>	s Line 2)			\$	51,922,700	(3)	
4.	Prio	r year Final taxable value in the tax increm	nent area			\$	52,674,800	(4)	
5.	Prio	r year tax increment value <i>(Line 4 minus Li</i>	ine 2)			\$	38,981,498	(5)	
SI	GN	Property Appraiser Certification	n l certify	the taxable	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			6/23/2023 9:50) AM		
SEC	SECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 or				e 6 or line	7 as applicable.	Do NOT complete both	ı .	
6. If	the a	mount to be paid to the redevelopment	trust fund IS BA	ASED 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.	Ded	icated increment value <i>(Line 3 multiplied l</i> If value is zero or less than zero, then en			a)	\$	49,326,565	(6b)	
6c.	Amo	ount of payment to redevelopment trust f	und in prior ye	ar		\$ 31,870			
7. lf	the 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.	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			0.000) per \$1,000	(7b)	
7c.		es levied on prior year tax increment value <i>5 multiplied by Line 7b, divided by 1,000</i>)	2			\$	0	(7c)	
7d.		r year payment as proportion of taxes levi ? <i>7a 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 l</i> If value is zero or less than zero, then en			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.	
9	5	Signature of Chief Administrative Officer :	:			Date :			
	I	Electronically Certified By Taxing Authori	ty			7/20/2023 9:24 /	λM		
	 G Title : N Eric M. Peburn, Chief Financial Officer 					ame and Contact burn, Chief Finan			
				<u></u>					
E	Mailing Address : Phys				•	cal Address : N Clyde Morris Blvd			
	F				Phone Nu	Number : Fax Number :			
						-4568 386-425-4575			

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

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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:	2023		County :	V	OLUSIA			
		Authority :		Taxing Au					
HAI	LIFA.	X HOSPITAL		HALIFAX I	HOSPITAL				
Con	nmu	nity Redevelopment Area :		Base Year	:				
		LLÓUGH RD CRA		1985					
SEC	τιοι	NI: COMPLETED BY PROPERTY APPRAISER							
1.	Curr	ent year taxable value in the tax increment area				\$	32,296,233	(1)	
2.	Base	e year taxable value in the tax increment area			\$ 9,086,882				
3.	Curr	ent year tax increment value (Line 1 minus Line 2	2)			\$	23,209,351	(3)	
4.	Prio	r year Final taxable value in the tax increment ar	ea			\$	29,638,915	(4)	
5.	Prio	r year tax increment value (Line 4 minus Line 2)				\$	20,552,033	(5)	
si	GN	Property Appraiser Certification	l certify	the taxable	e values ab		o the best of my knowled	lge.	
H	ERE	Signature of Property Appraiser :				Date :			
		Electronically Certified by Property Appraise	ſ			6/23/2023 9:50	0 AM		
SEC	ECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 or				e 6 or line	7 as applicable.	Do NOT complete both	.	
		amount to be paid to the redevelopment trust fu		SED on a s	pecific pro	portion of the tax			
-		er the proportion on which the payment is based					95.00 %	(6a)	
6b.		icated increment value (<i>Line 3 multiplied by the p</i> If value is zero or less than zero, then enter zer			a)	\$	22,048,883	(6b)	
6c.	Amo	ount of payment to redevelopment trust fund in	prior ye	ar		\$	16,803	(6c)	
7. lf	the a	amount to be paid to the redevelopment trust fu	und IS NO	OT BASED o	n a specifi	c proportion of th	e tax increment value:		
7a.	Amo	ount of payment to redevelopment trust fund in	prior ye	ar		\$	0	(7a)	
7b.	Prio	r year operating millage levy from Form DR-420,	Line 10			0.000	0 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.	Prio (Line	r year payment as proportion of taxes levied on 2 <i>7a divided by Line 7c, multiplied by 100</i>)	increme	nt value			0.00 %	(7d)	
7e.	Ded	icated increment value <i>(Line 3 multiplied by the p</i> If value is zero or less than zero, then enter zer			7d)	\$	0	(7e)	
					millages an	d rates are correct	t to the best of my knowle	dge.	
S	5	Signature of Chief Administrative Officer :				Date :			
		Electronically Certified By Taxing Authority				7/20/2023 9:24	AM		
6		Title :				ame and Contact			
	N Eric M. Peburn, Chief Financial Officer				Eric M. Pe	burn, Chief Finan	icial Officer		
H Mailing Address :				Physical A	ddress :				
	E 303 N Clyde Morris Blvd			303 N Clyde Morris Blvd					
		City, State, Zip :			Phone Nu		Fax Number :		
	Daytona Beach, FL 32114 386				386-425-4568 386-425-4575				

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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

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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:	2023	County : VOLUSIA				
		l Authority: X HOSPITAL	Taxing Authority : HALIFAX HOSPITAL				
Com	าmu	nity Redevelopment Area :	Base Year :				
DB	- MA	IN ST CRA	1981				
SEC	SECTION I : COMPLETED BY PROPERTY APPRAISER						
1.	Curr	ent year taxable value in the tax increment area	\$	572,531,312	(1)		
2.	Base	Base year taxable value in the tax increment area			68,695,639	(2)	
3.	Curr	Current year tax increment value <i>(Line 1 minus Line 2)</i>			503,835,673	(3)	
4.	Prior year Final taxable value in the tax increment area			\$	530,777,114	(4)	
5.	Prior year tax increment value <i>(Line 4 minus Line 2)</i>			\$	462,081,475	(5)	
	SIGN Property Appraiser Certification I certify the taxable values above are correct to the best of my knowledge.						
	ERE	Signature of Property Appraiser :		Date :			
	Electronically Certified by Property Appraiser			6/23/2023 9:50 AM			
SEC	SECTION II: COMPLETED BY TAXING AUTHORITY Complete EITHER line 6 or line 7 as applicable. Do NOT complete both.					ı .	
6. lf 1	the a	amount to be paid to the redevelopment trust fund IS BA	ASED on a specific pr	oportion of the tax	increment value:		
6a.	Enter the proportion on which the payment is based.				95.00 %	(6a)	
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			\$ 478,643,889 (6)			
6c.	^{6c.} Amount of payment to redevelopment trust fund in prior year				\$ 377,784		
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					(7a)	
7b.	Prio	r year operating millage levy from Form DR-420, Line 10	0.0000 per \$1,000 (7b)				
/C.	Taxes levied on prior year tax increment value (Line 5 multiplied by Line 7b, divided by 1,000)			\$ 0 ((7c)	
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 (<i>Line 3 multiplied by the percentage on Line 7d</i>) If value is zero or less than zero, then enter zero on Line 7e			\$ 0 (7e)			
			lculations, millages a	nd rates are correct	to the best of my knowle	dge.	
S	Signature of Chief Administrative Officer :			Date :			
		Electronically Certified By Taxing Authority	7/20/2023 9:24 AM				
G N		Title : Eric M. Peburn, Chief Financial Officer	Name and Contact Title : eburn, Chief Financial Officer				
H E R	R	Mailing Address : 303 N Clyde Morris Blvd		Physical Address : 303 N Clyde Morris Blvd			
E	City, State, Zip : Phone N			umber : Fax Number :			
	Daytona Beach, FL 32114 386			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:

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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	Year : 2023			County :	County: VOLUSIA			
Principal Authority: HALIFAX HOSPITAL				Taxing Authority: HALIFAX HOSPITAL				
Community Redevelopment Area :				Base Year :				
DB	- DC	WNTOWN CRA		1982				
SEC	τιοι	I : COMPLETED BY PROPERTY APPRA	AISER					
1.	Curr	ent year taxable value in the tax incremer	nt area			\$	240,045,682	(1)
2.	Base year taxable value in the tax increment area					\$ 49,000,577 (2		
3.	Curr	Current year tax increment value <i>(Line 1 minus Line 2)</i>				\$ 191,045,105 (
4.	Prio	Prior year Final taxable value in the tax increment area				\$ 218,507,667		
5.	Prior year tax increment value <i>(Line 4 minus Line 2)</i>				\$ 169,507,090 (5)			
SI	GN	Property Appraiser Certification	n l certify	the taxable	e values ab	ove are correct to	o the best of my knowled	lge.
	ERE	Cignature of Dranauty Annuaican			Date :			
		Electronically Certified by Property Appraiser			6/23/2023 9:50 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	ASED on a sp	pecific pro	portion of the tax	increment value:	
6a.	Ente	r the proportion on which the payment is	based.				95.00 %	(6a)
6b.	Dedicated increment value <i>(Line 3 multiplied by the percentage on Line 6a)</i> If value is zero or less than zero, then enter zero on Line 6b				a)	\$	181,492,850	(6b)
6c.	бс. Amount of payment to redevelopment trust fund in prior year					\$	138,584	(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	(7a)	
7b.	Prior year operating millage levy from Form DR-420, Line 10				0.0000 per \$1,000		(7b)	
7c.	Taxes levied on prior year tax increment value (<i>Line 5 multiplied by Line 7b, divided by 1,000</i>)				\$	0	(7c)	
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 <i>(Line 3 multiplied by the percentage on Line 7d)</i> If value is zero or less than zero, then enter zero on Line 7e			'd)	\$ 0 (7e)			
		Taxing Authority Certification	l certify the ca	lculations, r	nillages an	d rates are correct	to the best of my knowle	dge.
	5	Signature of Chief Administrative Officer :				Date :		
I		Electronically Certified By Taxing Authority				7/20/2023 9:24 AM		
	The .		Contact Name and Contact Title : Eric M. Peburn, Chief Financial Officer					
_	Mailing Address :			Physical Address :				
	E 303 N Clyde Morris Blvd R City, State, Zip : Daytona Beach, FL 32114			303 N Clyde Morris Blvd				
E					Phone Number : Fax Number :		Fax Number :	
					386-425-4568 386-425-4575		386-425-4575	

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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 : 2023				County : VOLUSIA					
Principal Authority : HALIFAX HOSPITAL				Taxing Authority : HALIFAX HOSPITAL					
Community Redevelopment Area :				Base Year :					
ORI	MON	ID BEACH CRA		1984					
SECTION I : COMPLETED BY PROPERTY APPRAISER									
1.	1. Current year taxable value in the tax increment area					\$	219,038,571	(1)	
2.	Base year taxable value in the tax increment area				\$ 45,486,221 (
3.	Current year tax increment value <i>(Line 1 minus Line 2)</i>			\$ 173,552,350					
4.	Prior year Final taxable value in the tax increment area			\$ 202,791,714					
5.	Prior year tax increment value <i>(Line 4 minus Line 2)</i>					\$	157,305,493	(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	Construct of Droporty Approximately			Date :				
	Electronically Certified by Property Appraiser					6/23/2023 9:50 AM			
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 1	the a	mount to be paid to the redevelopment	trust fund IS BA	ASED on a sp	pecific pro	portion of the tax	increment value:		
6a.	Enter the proportion on which the payment is based.						95.00 %	(6a)	
6b.	Dedicated increment value <i>(Line 3 multiplied by the percentage on Line 6a)</i> If value is zero or less than zero, then enter zero on Line 6b				\$	164,874,733	(6b)		
6c.	6c. Amount of payment to redevelopment trust fund in prior year					\$ 128,608 (6			
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					(7a)			
7b.	Prior year operating millage levy from Form DR-420, Line 10					0.0000 per \$1,000 (7b)			
7c.	Taxes levied on prior year tax increment value (<i>Line 5 multiplied by Line 7b, divided by 1,000</i>)				\$	0	(7c)		
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 <i>(Line 3 multiplied by the percentage on Line 7d) If value is zero or less than zero, then enter zero on Line 7e</i> (7e)					(7e)			
		Taxing Authority Certification	-	lculations, n	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			7/20/2023 9:24 AM				
						Name and Contact Title : eburn, Chief Financial Officer			
H	2				•	cal Address : N Clyde Morris Blvd			
E		City, State, Zip :			Phone Number : Fax Number :		Fax Number :		
	Daytona Beach, FL 32114 386-4				386-425-4	-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.