

TAN ELIGIBILITY QUESTIONNAIRE

Please return completed forms on or before

Friday, May 24, 2019 to:

SCAGO Program Administrator

c/o Compass Municipal Advisors, LLC

1310 Pulaski Street

Columbia, South Carolina 29201

Please call with questions or email to
Brian Nurick - brian.nurick@compassmuni.com
803.733.1604

Mike Gallagher - mike.gallagher@compassmuni.com
803.765.1004

Bob Damron - bob.damron@compassmuni.com
843.284.8628

1.	District Name:				
2.	District Address:				
3.					
4.	Phone Number: 5. Fax Number:				
6.	Date(s) of May and June 2019 Board meeting(s):				
	If your B	oard is meeting after June 28, 2019, ple	ase call Compass Municipal Advis	sors, LLC as soon as possible.	
7.	Federal Tax Identification Number:				
8.	Indicate the total amount of bonds* (excluding any TAN amount) that your District plans to issue during calendar year 2019. Include <u>all</u> financings such as leases, notes, bonds, etc.				
	☐ Small Issuer	☐ Large Issuer			
	\$	Bonds	\$		
	\$	Bond Anticipation Notes	\$		
	\$	Leases	\$		
9.	Please list the following Cash Flow Projections		nancial Information (comparable to	the 2019-2020 data contained on the attached	
	\$	State Funds	\$	Support Services Expenses	
:	\$	Federal Funds	\$	_ Community Service Expenses	
;	\$	Local Tax Receipts	\$	Non-Programmed Charges	
(\$	Instruction Expenses			
10.	Ending Fund Balance a	ing Fund Balance as of June 30, 2018: Projected Ending Fund Balance as of June 30, 2019:			
11.	Attach your signed and	dated Cash Flow Projection Spreadsheet t	for 2019-2020.		
12.	Attach your signed Fed	eral Tax Compliance Questionnaire			

13. Include a copy of your Fiscal Year Ending June 30, 2019 Budget, as amended (via e-mail to the above is acceptable).