

MUTUAL FINANCE ASSISTANCE APPLICATION

	an Fire Protection District (FPD)	_	
Organization Name: County:			
Please list all Municipalities or FPD's included in your application:			
Municipality of FPD	Contact Name	Title	Tax Levy Rate
			
			
The agreed-upon	tax levy rate for the 3 year period	d is%.	
What is the durat	ion of the Interlocal agreement?	(example 3 years	5)
	ore) of the three years does your of evy rate? (example all 3 years)		ose the

Signature:	
-	ities participating in the MFO have followed State Statutes and have use forms that the Treasurer's Office requires.
E-mail (required):	
Phone #:	
City, State, Zip:	
Address:	
Contact Person:	
	Stat. § 35-1204 State Treasurer's IVII O Calculation Spreadsheet Stat. § 35-1207 Distribution of Prior Year Funding
	Stat. § 35-1204 State Treasurer's MFO Calculation Spreadsheet
duration of at least that agreed-upon tax rate	nree years; b) the entities participating in the MFO have levied the same for one out of every three tax years; c) all members levy no more than such for the remaining tax years.
•	u included the following information. v. Stat. § 35-1204 Included is a new agreement which shall include: a) a
TOOL USING the cor	rect forms will result in a delay in processing your application.**
Assistance Act shall	35-1207any organization seeking funds pursuant to the mutual Finance submit an application and any forms required by the State Treasurer.

Nebraska State Treasurer's Office State Capitol, Suite 2005 PO Box 94788 Lincoln, NE 68509