



ANNEXATION REPORT

State Form 56707 (R / 5-20)

PRESCRIBED BY THE DEPARTMENT OF LOCAL GOVERNMENT FINANCE

Taxing Unit Name	Taxing District	Ordinance Number	Effective Date (month, day, year)	Net Assessed Value of Annexed Area¹ (Show as positive or negative.)	Will this annexation create a new taxing district? (Yes / No)

County Auditor Name

County

Date (month, day, year)

Note 1: Annexation Report must include activity from both the annexed and annexing unit and taxing district. The “Net Assessed Value of Annexed Area” column will generally net to \$0.00. If the column does not, please include an explanation along with the annexation submission.