Illinois Public Library Annual Report (IPLAR) FY2024-2025 Worksheet

Note: Please refer to the links available on the Counting Opinions login screen at https://il.countingopinions.com/, which provides definitions, examples, and guides. Previous year data are available online in the Data Input Screen under "Period".

IDENTIFICATION

| 1.1 ISL Control # (prefilled) |
|--|
| 1.2 ISL Branch # (prefilled) |
| 1.3a FSCS ID (prefilled) |
| 1.3b FSCS_SEQ (prefilled) |
| 1.4a Legal Name of Library (prefilled) |
| 1.4b If the library's name has changed, then enter the updated answer here. |
| 1.5a Facility Street Address (prefilled) |
| 1.5b If the facility's street address has changed, then enter the updated answer here. |
| 1.5c Was this a physical location change? |
| |

| 1.6a Facility City (prefilled) |
|---|
| 1.6b If the facility's city has changed, then enter the updated answer here. |
| 1.7a Facility Zip (prefilled) |
| 1.7b If the facility's zip code has changed, then enter the updated answer here. |
| 1.8a Mailing Address (prefilled) |
| 1.8b If the facility's mailing address has changed, then enter the updated answer here. |
| 1.9a Mailing City (prefilled) |
| 1.9b If the facility's mailing city has changed, then enter the updated answer here. |
| 1.10a Mailing Zip (prefilled) |
| 1.10b If the facility's mailing zip code has changed, then enter the updated answer here. |
| 1.11a Library Telephone Number (prefilled) |
| 1.11b If the telephone number has changed, then enter the updated answer here. |

| 1.20 IF YES, list the name(s) of the library(ies) with whom you contract (Enter each in a separate repeating field) |
|---|
| 1.21a County in which the administrative entity is located (prefilled) |
| 1.21b If the administrative entity's county has changed, then enter the updated answer here. |
| 1.22a Did the administrative entity's legal service area boundaries change during the past year? |
| 1.22b IF YES, indicate the reason for the boundary change. |
| 1.23a Population residing in tax base (Use the latest official federal census figure- this is prefilled) |
| 1.23b If the population residing in the tax base has had a LEGAL change, then enter the updated answer here |
| 1.23c Documentation of legal population change |
| 1.24 If the population has changed from the prior year's answer, then indicate the reason. |

| 1.25a This library is currently a member of what Illinois library system? (prefilled) |
|--|
| 1.25b If the library's system has changed, then enter the updated answer here. |
| 1.26 Does this library have an organized collection of printed or other library materials, or a combination thereof? |
| 1.27 Does this library have paid staff? |
| 1.28 Does this library have an established schedule in which services of the staff are available to the public? |
| 1.29 Does the library have the facilities necessary to support such a collection, staff, and schedule? |
| 1.30 Is this library supported in whole or in part with public funds? |
| 1.31 Does this public library meet ALL the criteria of the PLSC public library definition? |

| SERVICE OUTLETS |
|--|
| 2.1a Total number of bookmobiles |
| 2.1b Total number of branch libraries |
| 2.2a Are any of the branch libraries a combined public and school library? |
| 2.2b If YES, provide the name of the branch or branches in the box provided |
| 2.3a Service Outlet Legal Name (prefilled) |
| 2.3b If the outlet's legal name has changed, then enter the updated answer here. |
| 2.3c Was this an official name change? |
| 2.4 ISL Control # (prefilled) |

| 2.5 ISL Branch # (prefilled) |
|--|
| 2.6a Street Address (prefilled) |
| 2.6b If the outlet's street address has changed, then enter the updated answer here. |
| 2.6c Was this a physical location change? |
| 2.7a City (prefilled) |
| 2.7b If the outlet's city has changed, then enter the updated answer here. |
| 2.8a Zip Code (prefilled) |
| 2.8b If the outlet's zip code has changed, then enter the updated answer here. |
| 2.9a County (prefilled) |

| 2.9b If the outlet's county has changed, then enter the updated answer here. |
|---|
| 2.10a Telephone (prefilled) |
| 2.10b If the outlet's phone number has changed, then enter the updated answer here. |
| 2.11a Square Footage of Outlet (prefilled) |
| 2.11b If the facility's square footage has changed, then enter the updated answer here. |
| 2.11c Indicate the reason for the change/variance in square footage for this annual report as compared to the previous annual report. |
| 2.12 Total public service hours PER YEAR for this service outlet |
| 2.13 Total number of weeks, during the fiscal year, this service outlet was open for service to the public |

| ANNUAL REPORT DATA 3.1 Fiscal Year Start Date (mm/dd/year) 3.2 Fiscal Year End Date (mm/dd/year) 3.3 Number of months in this fiscal year 3.4 Name of person preparing this annual report 3.5 Telephone Number of Person Preparing Report |
|--|
| 3.1 Fiscal Year Start Date (mm/dd/year) 3.2 Fiscal Year End Date (mm/dd/year) 3.3 Number of months in this fiscal year 3.4 Name of person preparing this annual report |
| 3.2 Fiscal Year End Date (mm/dd/year) 3.3 Number of months in this fiscal year 3.4 Name of person preparing this annual report |
| 3.3 Number of months in this fiscal year 3.4 Name of person preparing this annual report |
| 3.4 Name of person preparing this annual report |
| |
| 3.5 Telephone Number of Person Preparing Report |
| |
| 3.6 FAX Number |
| 3.7 E-Mail Address |

REFERENDA 4.1a Was your library involved in a referendum during the fiscal year reporting period? 4.1b How many referenda was your library involved in? **4.2 Referendum Type** 4.3 Examples are: Annexation, Bond issue, District Establishment, Tax Increase 4.4 Referendum Date (mm/dd/year) 4.5 Passed or Failed? 4.6 If PASSED, enter the effective date (mm/dd/year)

4.7 Referendum ballot language documentation

CURRENT LIBRARY BOARD 5.1 Total number of board seats (select the number of board members from the menu) **5.2a Total number of vacant board seats** 5.2b If there are vacancies, please explain 5.3 This public library board of trustees attests that the current board is legally established, organized, and the terms of office for library trustees are all unexpired. 5.4 IF NO, please explain **5.5 Name 5.6 Trustee Position**

5.7 Present Term Ends (mm/year)

| 5.8 Telephone Number |
|--|
| 5.9 E-mail Address |
| 5.10 Home Address |
| 5.11 City |
| 5.12 State |
| 5.13 Zip Code |
| |
| FACILITY/FACILITIES 6.1 Does the library address the environmental needs of patrons on the autism spectrum? |
| 6.1b If so, please describe |

| 6.2 Total Number of Meeting Rooms |
|--|
| 6.2b Total number of times meeting room(s) used by the public during the fiscal year. |
| 6.3 Total Number of Study Rooms |
| 6.3b Total number of times study room(s) used by the public during the fiscal year. |
| ASSETS AND LIABILITIES 7.1 What is the estimated current fair market value for the library's real estate (land and buildings including garages, sheds, etc.)? |
| 7.2 During the last fiscal year, did the library acquire any real and/or personal property? |
| 7.3 Purchase |
| 7.4 Legacy |

| 7.5 Gift |
|--|
| 7.6 Other |
| 7.7 Provide a general description of the property acquired. |
| 7.8 Does your library have fiscal accumulations (reserve funds, outstanding fund balances, etc.)? |
| 7.9 IF YES, then provide a statement that details the dollar amount(s) and the reason(s) for the fiscal accumulations. |
| 7.10 Does your library have any outstanding liabilities including bonds, judgments, settlements, etc.? |
| 7.11 IF YES, what is the total amount of the outstanding liabilities? |
| 7.12 IF YES, then prepare a statement that identifies each outstanding liability and its specific dollar amount. |

OPERATING RECEIPTS BY SOURCE

| 8.1 Local government (includes all local government funds designated by the community, district, or region and available for expenditure by the public library, except capital income from bond sales which must be reported in 12.1a only) |
|--|
| 8.1a Is this library's annual tax levy/fiscal appropriation subject to tax caps [the Property Tax Extension Limitation Law, 35 ILCS 200/18-185, et seq.]? |
| 8.1b Local government funds for the ensuing or upcoming/current fiscal year (includes all local government funds designated by the community, district, or region and available for expenditure by the public library, except capital income from bond sales which must be reported in 12.1a only) |
| 8.2 Per capita grant |
| 8.3 Equalization aid grant |
| 8.4 Personal property replacement tax |

| 8.5 Other State Government funds received |
|--|
| 8.6 If Other, please specify |
| |
| 8.7 Total State Government Funds (8.2 + 8.3 + 8.4 + 8.5) |
| 8.8 LSTA funds received |
| 8.9 E-Rate funds received |
| 8.10 Other federal funds received |
| 8.11 If Other, please specify |
| 8.12 Total Federal Government Funds (8.8 + 8.9 + 8.10) |
| 8.13 Monetary Gifts and Donations |

| 8.20 Is the amount of the surety bond, insurance policy or other insurance instrument in compliance with library law? |
|--|
| 8.21 The designated custodian of the library's funds is: |
| OPERATING EXPENDITURES BY CATEGORY |
| 9.1 Salaries and wages for all library staff |
| 9.2a Fringe benefits, for all library staff, paid for from either the library's or the municipal corporate authority's appropriation |
| 9.2b If this library answered question 9.2a as zero, please select an explanation from the drop-down box. |
| 9.3 Total Staff Expenditures (9.1 + 9.2) |
| COLLECTION EXPENDITURES |
| 10.1 Printed Materials (books, newspapers, etc.) |

| 10.2 Electronic Materials (e-books, databases, etc.) |
|--|
| 10.3a Other Materials (CDs, DVDs, video games, etc.) |
| 10.3b Please provide an explanation of the other types of material expenditures. |
| 10.4 TOTAL Collection Expenditures (10.1 + 10.2 + 10.3) |
| OTHER EXPENDITURES 11.1 All other operating expenditures not included above (supplies, utilities, legal fees, etc.) |
| 11.2 TOTAL operating expenditures (9.3 + 10.4 + 11.1) |
| CAPITAL REVENUE 12.1a Local Government: Capital Income from Bond Sales |
| 12.1b Local Government: Other |

| 12.1c Total Local Government (12.1a + 12.1b) |
|---|
| 12.2 State Government |
| 12.3 Federal Government |
| 12.4 Other Capital Revenue |
| 12.5 If Other, please specify |
| 12.6 Total Capital Revenue (12.1c + 12.2 + 12.3 + 12.4) |
| CAPITAL EXPENDITURES 12.7 Total Capital Expenditures |

PERSONNEL

Please refer to the links available on the Counting Opinions login screen, which provide instructions, definitions, examples, and guides.

GROUP A

ALL LIBRARIANS with MASTER'S DEGREES from an American Library Association (ALA) ACCREDITED program of Library and Information Studies

| 13.1 Position Title |
|---|
| |
| 13.2 Primary Work Area |
| 13.3 Hourly Rate |
| 13.4 Total Hours/Week |
| 13.5 Total Group A: FTE ALA-MLS (13.4/40) |
| GROUP B Other librarians. Include employees with the TITLE of LIBRARIAN who either have other types of library education (non-American Library Association (ALA) accredited library degrees; undergraduate library science majors or minors) OR do paid work that usually requires professional training and skill in the theoretical or scientific aspects of library work, or both, as distinct from its mechanical or clerical aspects. 13.6 Position Title |
| 13.7 Primary Work Area |
| 13.8 Education Level |

| 13.9 Hourly Rate |
|---|
| 13.10 Total Hours/Week |
| 13.11 Total Group B: FTE Other Librarians (13.10/40) |
| 13.12 Total FTE Librarians (13.5 + 13.11) GROUP C Full-time and part-time professional staff without the title of librarian and administrative support specialists (personnel director, business manager, public relations, other non-library specialists), information technology professionals (IT director, webmaster) and other technical and clerical employees. 13.13 Total hours worked in a typical week by all Group C employees. |
| |
| 13.14 Minimum hourly rate actually paid |
| 13.15 Maximum hourly rate actually paid |
| 13.16 Total FTE Group C employees (13.13/40) |

| GROUP D Full-time and part-time pages or shelvers. |
|--|
| 13.17 Total Hours worked in a typical week by all Group D employees |
| 13.18 Minimum hourly rate actually paid |
| 13.19 Maximum hourly rate actually paid |
| 13.20 Total FTE Group D employees (13.17/40) |
| GROUP E Full-time and part-time building maintenance, security, or plant operation employees. 13.21 Total hours worked in a typical week by all Group E employees |
| 13.22 Minimum hourly rate actually paid |
| 13.23 Maximum hourly rate actually paid |
| 13.24 Total FTE Group E employees (13.21/40) |

| 13.25 Total FTE Other Paid Employees from Groups C, D, and E (13.16 + 13.20 + 13.24) |
|--|
| 13.26 Total FTE Paid Employees (13.12 + 13.2) |
| LIBRARIAN VACANCIES 13.27 Position Title |
| 13.28 Primary Work Area |
| 13.29 Education Level |
| 13.30 Total Hours/Week |
| 13.31 Number of Weeks Vacant during report period. |
| 13.32 Annual Salary Range Minimum |

| 13.33 Annual Salary Range Maximum | |
|---|--|
| NEWLY CREATED LIBRARIAN POSITIONS 13.34 Position Title | |
| 13.35 Primary Work Area | |
| 13.36 Education Level | |
| 13.37 Total Hours/Week | |
| 13.38 Current Status: Filled or Unfilled | |
| 13.39 Date Filled (mm/year, if applicable) | |
| ELIMINATED LIBRARIAN POSITIONS 13.40 Position Title | |

| 13.41 Primary Work Area |
|--|
| 13.42 Education Level |
| 13.43 Total Hours/Week |
| 13.44 Date Eliminated (mm/year) |
| 13.45 Last Annual Salary Paid |
| 13.46 Reason Eliminated |
| LIBRARY VISITS |
| 14.1 Total annual visits/attendance in the library [auto filled] |
| 14.1a Library Visits Reporting Method |

PROGRAMS, SELF-DIRECTED ACTIVITIES AND ATTENDANCE AND VIEWS

Synchronous Programs:

Please refer to the 2023 IPLAR Instructions available on the Counting Opinions login screen, which provides definitions, examples, and guides for counting programs

| Self-Directed Activities: Please refer to the 2023 IPLAR Instructions available on the Counting Opinions login screen, which provides definitions and examples. |
|---|
| 15.1 Number of Synchronous Programs for Children Ages 0-5 |
| 15.2 Attendance at Synchronous Programs for Children Ages 0-5 |
| 15.3 Number of Children's Self-Directed (Asynchronous) Activities Ages 0-5 |
| 15.4 Participants at Children's Self-Directed (Asynchronous) Activities Ages 0-5 |
| 15.5 Number of Synchronous Programs for Children Ages 6-11 |
| 15.6 Attendance at Synchronous Programs for Children Ages 6-11 |
| 15.7 Number of Children's Self-Directed (Asynchronous) Activities Ages 6-11 |

| 15.8 Participants at Children's Self-Directed (Asynchronous) Activities Ages 6-11 |
|---|
| 15.9 Number of Synchronous Program Sessions for Young Adults Ages 12-18 |
| 15.10 Attendance at Synchronous Programs for Young Adults Ages 12-18 |
| 15.11 Number of Young Adult Self-Directed (Asynchronous) Activities Ages 12-18 |
| 15.12 Participants at Young Adult Self-Directed (Asynchronous) Activities Ages 12-18 |
| 15.13 Number of Synchronous Programs for Adults Ages 19 and over |
| 15.14 Attendance at Synchronous Programs for Adults Ages 19 and over |
| 15.15 Number of Self-Directed (Asynchronous) Activities for Adults Ages 19 and over |
| 15.16 Participants at Self-Directed (Asynchronous) Activities for Adults ages 19 and over |

| 15.17 Number of Synchronous Programs for General Interest (All Ages) |
|---|
| 15.18 Attendance at Synchronous Programs for General Interest (All Ages) |
| 15.19 Number of Self-Directed (Asynchronous) Activities for General Interest (All Ages) |
| 15.20 Participants at Self-Directed (Asynchronous) Activities for General Interest (All Ages) |
| 15.21 Total Number at Synchronous Programs |
| 15.22 Total Attendance at Synchronous Programs |
| 15.23 Total Number of Self-Directed (Asynchronous) Activities |
| 15.24 Total Participants at Self-Directed (Asynchronous) Activities |
| |

Note: There are four subtotaled fields that are not seen in this grid.

| Onsite, Offsite and Virtual (All Group Programs by Type) |
|--|
| 15.29 Synchronous In-Person Onsite Program Sessions |
| 15.30 Synchronous In-Person Onsite Program Attendance |
| 15.31 Synchronous In-Person Offsite Program Sessions |
| 15.32 Synchronous In-Person Offsite Program Attendance |
| 15.33 Synchronous Virtual Program Sessions |
| 15.34 Synchronous Virtual Program Session Attendance |
| 15.35 Total Synchronous Program Sessions |
| 15.36 Total Synchronous Program Session Attendance |

| Asynchronous Virtual Presentations (Subset of Self-Directed Activities) |
|--|
| 15.37 Total Number of Asynchronous (Virtual) Program Presentations |
| 15.38 Total Views of Asynchronous (Virtual) Program Presentations |
| Special Programming |
| 15.39a Did the library provide any special programming for patrons on the autism spectrum? |
| 15.39b Please describe the programming provided |
| REGISTERED USERS 16.1 Total Number of Unexpired Resident Cards |
| |
| 16.2a Total Number of Unexpired Non-resident Cards |
| 16.2a (1) Of the total in 16.2a, how many Cards for Kids Act cards were issued? |
| 16.2a (2) Of the total in 16.2a, how many Disabled Veterans cards were issued? |

| 16.2b What was the total amount of the fees collected from the sale of non-resident cards during the past fiscal year? |
|---|
| 16.3 Total Number of Registered Cards (16.1 + 16.2a) |
| 16.4 Is your library's registered user/patron file purged a minimum of one time every three years? |
| 16.5 Does the library charge overdue fines to any users when they fail to return physical print materials by the date due? |
| 16.6 Did your library board adopt a policy to waive the non-resident fee for persons under the age of 18? |
| RESOURCES OWNED Please refer to the 2024 IPLAR guidance links on the Counting Opinions login screen, which provide definitions, examples, and guides for tracking collections and usage. |
| 17.1 Books Held at end of the fiscal year (volume count) |
| 17.2 Current Print Serial Subscriptions |
| 17.3 Total Print Materials (17.1 + 17.2) |

| 17.4 Audio Recordings: Physical Units Held at end of the fiscal year |
|---|
| 17.5 DVDs/Videos: Physical Units Held at end of the fiscal year |
| 17.6 Other Circulating Physical Items |
| 17.7 Total Physical Items (this is prefilled) |
| Electronic Materials and Collections 17.8 Did your library provide access to e-Books purchased solely by the library? Answer yes or no. |
| 17.9 Did your library provide access to e-Books purchased via a consortium, cooperative, or other similar group at the local, regional, or state level? Answer yes or no. |
| 17.10 Did your library provide access to e-Books provided by the State Library at no or minimal cost to your library? This is prefilled. |
| 17.11 Did your library provide access to e-Serials purchased solely by the library? Answer yes or no. |

| 17.12 Did your library provide access to e-Serials purchased via a consortium, cooperative, or other similar group at the local, regional, or state level? Answer yes or no. |
|--|
| 17.13 Did your library provide access to e-Serials provided by the State Library at no or minimal cost to your library? This is prefilled. |
| 17.14 Did your library provide access to e-Audio purchased solely by the library? Answer yes or no. |
| 17.15 Did your library provide access to e-Audio purchased via a consortium, cooperative, or other similar group at the local, regional, or state level? Answer yes or no. |
| 17.16 Did your library provide access to e-Audio provided by the State Library at no or minimal cost to your library? This is prefilled. |
| 17.17 Did your library provide access to e-Video purchased solely by the library? Answer yes or no. |
| 17.18 Did your library provide access to e-Video purchased via a consortium, cooperative, or other similar group at the local, regional, or state level? Answer yes or no. |
| 17.19 Did your library provide access to e-Video provided by the State Library at no or minimal cost to your library? This is prefilled. |
| |

| 17.20 Did your library provide access to research databases purchased solely by the library? Answer yes or no. |
|---|
| 17.21 Did your library provide access to research databases purchased via a consortium, cooperative, or other similar group at the local, regional, or state level? Answer yes or no. |
| Note: The statewide Database Package provided by the State Library is part of question 17.22 |
| 17.22 Did your library provide access to research databases provided by the State Library at no or minimal cost to the administrative entity? This is prefilled. |
| Note: this question is prefilled and refers to the Statewide Database Package (Illinois' Reliable Information Sources) |
| 17.23 Did your library provide access to online learning platforms purchased solely by the library? Answer yes or no. |
| Note: Examples of Online Learning Platforms are Tutor.com, Mango Languages, Rocket Languages, and e-Prep. |
| 17.24 Did your library provide access to research databases provided via a consortium, cooperative, or other similar group at the local, regional, or state level? Answer yes or no. |
| 17.25 Did your library provide access to online learning platforms provided by the State Library at no or minimal cost to your library? This is prefilled. |
| USE OF RESOURCES |
| 18.1 Circulation of Adult Physical Material |

| 18.2 Circulation of Young Adult Physical Material |
|---|
| 18.3 Circulation of Children's Physical Material |
| 18.4 Total number of physical materials loaned |
| 18.5 Books - Physical |
| 18.6 Videos/DVDs - Physical |
| 18.7 Audios (include music) - Physical |
| 18.8 Magazines/Periodicals - Physical |
| 18.9 Other Items - Physical |
| 18.10 Physical Item Circulation |

| Note: Count all physical materials in all formats that are charged out for use outside the library. |
|---|
| 18.11 Did your library offer automatic renewal for any physical materials during the reporting period? Answer yes or no. |
| Note: Patrons do not have to take any action for automatic renewals. The Integrated Library System (ILS) policy determines how/when automatic renewals occur. 18.12 e-Book Circulation |
| 18.13 e-Serial Circulation |
| 18.14 e-Audio Circulation |
| 18.15 e-Video Circulation |
| 18.16 Use of Electronic Materials |
| 18.17 Total Circulation of Materials |
| 18.18 Interlibrary Loans Provided TO Other Libraries |

18.19 Interlibrary Loans Received FROM Other Libraries PATRON SERVICES 19.1 Total Annual Reference Transactions 19.1a Reference Transactions Reporting Method **19.2 Total Annual One-on-One Tutorials AUTOMATION** 20.1 Total number of ALL computers in the library 20.2 Total number of PUBLIC USE (Internet and non-Internet accessible) computers in the library) 20.3 Is your library's catalog automated?

20.4 Is your library's catalog accessible via the web?

| 20.5 Does your library have a telecommunications messaging device for the hearing impaired? |
|---|
| |
| <u>INTERNET</u> |
| 21.1 Does your library have Internet access? |
| 21.2a What is the maximum speed of your library's Internet connection? (Select one) |
| 21.2b If Other, please specify |
| 21.3 What is the monthly cost of the library's internet access? |
| 21.4 Number of Internet Computers Available for Public Use |
| 21.5 Number of Uses (Sessions) of Public Internet Computers Per Year |
| 21.5a Reporting Method for Number of Uses of Public Internet Computers Per Year |

| 21.6 Wireless Sessions Per Year |
|--|
| 21.6a Reporting Method for Wireless Sessions |
| 21.7 Does your library utilize Internet filters on some or all the public access computers? |
| 21.8 Does your library provide instruction (workshops, classes) to patrons on the use of the internet? |
| E-RATE |
| 22.1 Did your library apply directly for E-rate discounts for the fiscal year? |
| 22.2a If YES, did your library apply for Category 1, Category 2, or both? |
| 22.2b IF YES, what is the dollar amount that your library was awarded for the fiscal year report period? |
| 22.3 If NO, why did your library NOT participate in the E-rate program? |

| STAFF DEVELOPMENT AND TRAINING |
|---|
| 23.1 How much money did your library spend on staff development and training this fiscal year? (Round answer to the nearest whole dollar.) |
| 23.2 Does the above amount include travel expenses? |
| 23.3 How many hours of training did employees receive this year? |
| COMMENTS AND SUGGESTIONS 24.1 Are there any other factors that may have affected your library's annual report data of which you would like to make us aware? |
| 24.2 Are there any unique programs or services your library provided during the report period of which you would like to make us aware? |
| 24.3 Please provide any comments, suggestions, or concerns about the Illinois Public Library Annual Report (IPLAR). |

| PUBLIC LIBRARY DISTRICT SECRETARY'S AUDIT (DISTRICT LIBRARIES ONLY) |
|--|
| 25.1 Were the secretary's records found to be complete and accurate? (check N/A if not a district) |
| 25.2 If NO, please list and explain any errors or discrepancies. (check N/A if not a district) |
| 25.3 First board member completing the audit (check N/A if not a district) |
| 25.4 Second board member completing the audit (check N/A if not a district) |
| 25.5 Date the Secretary's Audit was completed (check N/A if not a district) |