

RESOLUTION NO. 2017-45

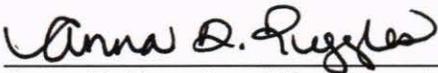
**RESOLUTION DECLARING THE CITY'S ELECTION
TO RECEIVE STATE REVENUES**

The City of Forest Grove resolves as follows:

Section 1: Pursuant to ORS 221.770, the City hereby elects to receive state revenues for Fiscal Year 2017-18.

Section 2: This resolution is effective immediately upon its enactment by the City Council.

PRESENTED AND PASSED this 26th day of June, 2017.



Anna D. Ruggles, City Recorder

APPROVED By the Mayor this 26th day of June, 2017.



Peter B. Truax, Mayor

I certify that a Public Hearing before the Budget Committee was held May 4, 2017, and a Public Hearing before the City Council was held June 26, 2017, giving citizens an opportunity to comment on use of State Revenue Sharing.

Attested: 

Anna D. Ruggles, City Recorder



A place where families and businesses thrive.

<i>CITY RECORDER USE ONLY:</i>	
AGENDA ITEM #:	<u>12. & 13.</u>
MEETING DATE:	<u>6/26/17</u>
FINAL ACTION:	<u>Reso 2017-45</u> <u>Reso 2017-46</u>

CITY COUNCIL STAFF REPORT

TO: *City Council*

FROM: *Jesse VanderZanden, City Manager*

MEETING DATE: *June 26, 2017*

PROJECT TEAM: *Paul Downey, Administrative Services Director*

SUBJECT TITLE: *State Revenue Sharing Resolutions*

ACTION REQUESTED:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Ordinance	Order	X	Resolution	Motion	Informational

X all that apply

ISSUE STATEMENT: In order to receive State Revenue Sharing, the City is required by the State to elect to participate in the State Revenue Sharing Program and to certify services. The attached resolutions fulfill the requirement of certifying the services provided by the City and electing to receive state revenues for FY 2017-18.

BACKGROUND: Before the City can elect to participate in the State Revenue Sharing Program, the City is required to hold two hearings on the use of the funds. The Budget Committee meeting of May 4, 2017, was one of those meetings and the second will occur June 26, 2017, when the Council holds its public hearing on the budget. For fiscal year 2017-18, the City is projected to receive \$392,863 in alcohol tax revenue, \$28,050 in cigarette tax revenue and \$275,004 in State Revenue Sharing. For budgetary purposes, the Alcohol Tax is allocated to the Police Department, the Cigarette Tax is allocated to the Fire Department, and the State Shared Revenue is put in General Fund Discretionary Revenue.

FISCAL IMPACT: If the City decided not to accept the State Shared Revenue, the City will have to reduce General Fund expenditures by \$695,917 or use General Fund reserves to make up for the loss of that revenue.

STAFF RECOMMENDATION: Staff recommends the City Council approve the attached resolutions so the City can receive State Shared Revenue in FY 2017-18.

ATTACHMENT(s): Resolution Certifying Services Provided by the City of Forest Grove and Resolution Declaring the City's Election to Receive State Revenues

Date: June 26, 2017

Agenda Item: 12.

Subject: PUBLIC HEARING AND RESOLUTION NO. 2017-45 DECLARING THE CITY'S ELECTION TO RECEIVE STATE REVENUES

CITY COUNCIL MEETING

Request to Testify at Public Hearing

Public Hearings – Public hearings are held on each matter required by state law or City policy. Anyone wishing to testify should sign-in for the Public Hearing prior to the meeting. The Mayor or presiding officer will review the complete hearing instructions prior to testimony. The Mayor or presiding officer will call the individual or group by the name given on the sign-in form. When addressing the Mayor and Council, please move to the witness table (center front of the room). Each person should speak clearly into the microphone and must state their first and last name and provided a mailing address for the record. All testimony is electronically recorded. In the interest of time, Public Hearing testimony is limited to three minutes unless the Mayor or presiding officer grants an extension. Written or oral testimony is heard prior to any Council action.

Please sign-in below to testify.

PROPONENTS: *(Please print legibly)*

First & Last Name:

Address:

City, State & Zip Code:

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OPPONENTS: *(Please print legibly)*

First & Last Name:

Address:

City, State & Zip Code:

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OTHERS: *(Please print legibly)*

First & Last Name:

Address:

City, State & Zip Code:

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