AGENDA OF THE COMMON COUNCIL
City of Angola, Indiana
210 N. Public Square

Monday, March 16, 2026 – 7:00 p.m.

CALL TO ORDER BY MAYOR MARTIN

1. Council Member roll call by Clerk-Treasurer Herbert.

   Coffey _____ Olson _____ Sharkey _____ Dowe_____ McDermid _____

2. Remarks by Mayor Martin

3. Request approval of the March 2 minutes. (attachment)

UNFINISHED BUSINESS

1. Other unfinished business.

NEW BUSINESS

1. <u>Ordinance No. 1798-2026.</u> AN ORDINANCE AMENDING THE CITY OF ANGOLA, INDIANA EMPLOYEE HANDBOOK, EMPLOYEE BENEFITS – LEAVE PROGRAMS. (first reading) (attachment)

2. <u>Resolution No. 2026-900.</u> A RESOLUTION PROVIDING FOR THE TRANSFER OF CASH TO THE LOCAL ROAD AND BRIDGE MATCHING GRANT FUND. (attachment)

3. Request approval of Change Order No. 1 for Pokagon Utility Project Division 3. (Angola Wastewater Improvements) (Wage Rate Changes) (attachment)

4. Review and determine if Univertical LLC located at 203 Weatherhead Street is or is not in compliance with Statement of Benefits for ... (attachment)
   - Personal Property (Resolution No. 2019-766, five years)
   - Real Estate Improvements (Resolution No. 2021-798, ten years)
   - Personal Property (Resolution No. 2024-865, five years)
   - Real Estate Improvements (Resolution No. 2024-866, five years)

5. Review and determine if Angola Wire Products, Inc. located at 803 Wohlert Street is or is not in substantial compliance with the Statement of Benefits for Personal Property… (attachment)
   - Resolution No. 2020-786, five years
   - Resolution No. 2024-871, five years

6. Review and determine if R. R. Donnelley Inc. located at 611 W Mill Street is or is

not in compliance with Statement of Benefits for Personal Property. (Resolution No. 2018-725, ten years) (attachment)

7. Clerk-Treasurer's Depository Statement and Cash Reconcilement for the month ending February 2026 is presented for Council information. (attachment)

8. Reports:
   - Clerk-Treasurer
   - Department head

9. Request approval of the Allowance of Accounts Payable Vouchers 78855 through 79089 totaling $1,370,225.71 which includes interfund transfers of $50,308.00. (separate attachment)

10. Other new business.

NEXT MEETING

The next Common Council meeting is Monday, April 6, 2026.

ADJOURNMENT

This in-person meeting will be livestreamed on www.youtube.com/@AngolaIN

Individuals with disabilities who require accommodations for participation in meetings must request accommodations at least three business days ahead of scheduled meeting. Contact the Clerk-Treasurer, 210 North Public Square, Angola, IN 46703, (260) 665-2514 extension 7353, clerktreasurer@angolain.org as soon as possible but no later than three business days before the scheduled event.

March 2, 2026

The regular meeting of the Common Council of the City of Angola, Indiana was called to order at 7:03 p.m. at City Hall, 210 North Public Square, with Mayor David B. Martin presiding. Council Members Randy Coffey, David A. Olson, Charles P. Dowe, Jennifer L. Sharkey, and Jerold D. McDermid answered roll. No Council Member was absent. Clerk-Treasurer Ryan P. Herbert recorded the minutes.

Among those present were City Attorney Kim Shoup, Economic Development and Planning Director Retha Hicks, Fire Chief William Harter, Street Commissioner Chad Ritter, and Police Patrol Officer Allie Curdes.

Also among those present were Khelley Adams, Jorge Ruiz, Taylor Kerner, and Simardeep Sethi.

APPROVAL OF THE MINUTES

Council Member McDermid moved to approve the February 16, 2026 minutes. Council Member Olson seconded the motion. The motion carried 5-0.

NEW BUSINESS

Council Member McDermid moved to find Duke & Billy's Realty LLC (DBA Duke Imports Inc.) located at 1105 N Williams St. in substantial compliance with the Statement of Benefits for Real Estate Improvements. (Resolution No. 2021-797, seven years) Council Member Olson seconded the motion. Discussion followed. The motion carried 5-0.

Executive Director Khelley Adams provided the annual report for Angola Main Street.

DEPARTMENT HEAD REPORTS

Economic Development and Planning Director Hicks reported that the Voices and Votes , exhibit at the library will be available to the public March 28th through May 10th. An invite only reception will be held to kick off on March 27th.

APPROVAL OF ACCOUNTS PAYABLE VOUCHERS

Council Member McDermid moved to approve the Allowance of Accounts Payable Vouchers 78684 through 78854 totaling $1,312,926.41. Council Member Sharkey seconded the motion. The motion carried 5-0.

ADJOURNMENT

There being no further business, the meeting was considered adjourned at 7:15 p.m.

David B. Martin, Mayor
Presiding Officer

Attest:

Ryan P. Herbert, Clerk-Treasurer

DRAFT

ORDINANCE NO. 1798-2026

AN ORDINANCE AMENDING THE CITY OF ANGOLA, INDIANA EMPLOYEE HANDBOOK, EMPLOYEE BENEFITS – LEAVE PROGRAMS

BE IT HEREBY ORDAINED by the Common Council of the City of Angola, Indiana that the Employee Handbook is being amended by the text of existing provisions in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~:

Section 1. Employee Benefits – Leave Programs- Personal Time Off (PTO) is amended to read as follows:

Personal Time Off (PTO)

Full-time employees hired on or after January 1, 2023, are provided upon hire paid time-off (PTO) leave on their hire date in accordance with the following schedule:

Fire Department	1st Quarter Hire	2nd Quarter Hire	3rd Quarter Hire	4th Quarter Hire
PTO days	9	6	3	0
Police Department	1st Quarter Hire	2nd Quarter Hire	3rd Quarter Hire	4th Quarter Hire
PTO days	15	10	5	0
Dispatch	1st Quarter Hire	2nd Quarter Hire	3rd Quarter Hire	4th Quarter Hire
PTO days	12	8	4	0
All other employees	1st Quarter Hire	2nd Quarter Hire	3rd Quarter Hire	4th Quarter Hire
PTO days	6	4	2	0

<u>Hire Dates</u>

1st Quarter – January 1 through March 31

2nd Quarter – April 1 through June 30

3rd Quarter – July 1 through September 30

4th Quarter – October 1 through December 31

Fire department employees will be provided with nine (9) PTO days annually beginning January 1st.

Police department employees will be provided with fifteen (15) PTO days annually beginning January 1st.

Dispatch employees will be provided with twelve (12) PTO days annually beginning January 1st.

All other full-time employees will be provided with six (6) PTO days annually beginning January 1st.

For the purpose of this policy, a day is equal to the number of hours an employee would work on a routinely scheduled day. Current PTO time balances are shown on your payroll stub. Employees may take PTO leave in increments as little as one-quarter (¼) hour.

At the request of your supervisor, employees should complete the Request for Leave form 11-018. Forms are available in your department or in the Human Resources folder on the Common Drive. Emergency requests for time-off should be discussed with your supervisor.

Approval of leave requests is the responsibility of your supervisor and is subject to the operational needs of the department. The City reserves the right to deny PTO requests when such time-off would interfere with busy times, limited staff or other circumstances which jeopardize the operations of the department.

PTO time does not carry forward to the next calendar year and must be taken prior to each January 1st. Employees are not permitted to work in the same job classification while on PTO for the purposes of receiving extra pay.

Employees who voluntarily resign from employment or are the subject of reduction in force/layoff will receive payment for any unused PTO time. **Employees who voluntarily resign with less than one (1) year of continuous service will not receive payment for any unused PTO time.**

Employees who are involuntarily terminated from employment due to disciplinary action documented through the Human Resources office will not receive payment for any unused PTO time.

PTO leave is not considered work time and does not apply toward the calculation of overtime.

Section 2. Employee Benefits – Leave Programs- Sick Leave is amended to read as follows:

Sick Leave

The City provides a sick leave program for all full-time employees. The sick leave program is designed to assist the employee with the continuation of wages in the case of illness or injury. Employees are expected to manage their sick leave effectively to ensure a positive balance to provide a safety net if illness or injury should occur.

Employees will be credited with one (1) workday of sick leave for each full calendar month of work. Earned sick leave is credited to your "sick leave account" on the first of each month and current balances are shown on your payroll stub. Newly hired employees are awarded sick time beginning on the first of the month following their hire date.

For the purposes of this policy, a workday is equal to the number of hours an employee would work on a routinely scheduled workday.

Employees may take paid sick leave in increments as little as one-quarter (1/4) hour. Approval of leave requests is the responsibility of your supervisor.

Use of Paid Leave with FMLA: Generally, FMLA leave is unpaid. However, if an employee also has accrued paid leave available, and if the employee's leave request meets the requirements for use of that paid leave, the employee must use the available paid leave at the same time as the FMLA leave. Similarly, if an employee requests accrued paid leave for a purpose that is also covered by the FMLA, the employee must use FMLA leave at the same time as the paid leave. If the purpose for the leave would not ordinarily qualify as a reason to use the accrued paid leave, then the employee will not receive pay under that leave program while on FMLA.

The maximum balance allowable in an employee's sick leave account is ninety (90) workdays.

Paid sick leave may be requested for the following circumstances:

- Illness, injury, pregnancy or childbirth-related conditions of the employee which renders the employee unable to work,
- To provide care for a member of the employee's immediate family during illness, injury, pregnancy or pregnancy-related condition,
- Adoption or adoption-related obligations where the employee's presence is reasonably required, or
- Exposure of the employee or a member of the employee's immediate family to a contagious disease which could potentially jeopardize the health of the employee or others in the workplace.

- Medical, dental, vision or other health-related exams or appointments of the employee or a member of the employee's immediate family where the employee's presence is reasonably required, and the appointment could not be made during an employee's non-work time.
- In the event of a declared emergency. Refer to Page 30 of the Employee Handbook for information.

For the purposes of this policy, immediate family is defined as the employee's spouse, child or stepchild, parent or stepparent, brother or brother-in-law, sister or sister-in-law, parent-in-law or child-in-law, grandparent or grandchild or in legal guardianship cases.

At the request of your supervisor, employees should complete a Request for Leave form 11-018. Forms are available in your department or on the Common Drive in the Human Resources folder.

The City reserves the right to request any and all appropriate documentation to substantiate any request or to investigate in order to approve payment of sick leave. Should investigation reveal improper, misleading or fraudulent use or paid sick leave, the employee will be subject to disciplinary action, up to and including discharge.

Employees who resign or retire or are the subject of reduction in force/layoff from employment with the City are eligible to receive payment for any unused sick time at the rate of ten dollars ($10.00) for each full day of unused sick time up to a maximum of ninety (90) days. **Employees who voluntarily resign with less than one (1) year of continuous service will not receive payment for any unused sick time.**

Employees who are involuntarily terminated from employment due to documented disciplinary action through the Human Resources office will not receive payment for any sick time.

Sick leave is not considered work time and does not apply toward the calculation of overtime.

This ordinance shall become effective following passage and adoption by the Common Council and approval by the Mayor.

DULY PASSED AND ADOPTED by the Common Council of the City of Angola, Indiana, on the ______ day of April 2026 by the vote of ___ ayes and ____ nays.

____
David B. Martin, Mayor
Presiding Officer

Attest:

____
Ryan P. Herbert, Clerk-Treasurer

This ordinance presented by me, the Clerk-Treasurer of the City of Angola, Indiana to the Mayor at the hour of _______ a.m./p.m. this _____ day of April 2026.

____
Ryan P. Herbert, Clerk-Treasurer

This ordinance signed and approved by me, the Mayor of the City of Angola, Indiana this ________ day of April 2026.

____
David B. Martin, Mayor

RESOLUTION NO. 2026-900

A RESOLUTION PROVIDING FOR THE TRANSFER OF CASH TO THE LOCAL ROAD AND BRIDGE MATCHING GRANT FUND

WHEREAS, the Community Crossing Matching Grant is an opportunity provided by the Indiana Legislature whereby communities are awarded moneys for infrastructure improvement projects;

WHEREAS, communities that are awarded grants are required to match the grant amount as a condition of the Community Crossing Matching Grant program;

WHEREAS, the City of Angola applied for and received a Community Crossing Matching Grant for $234,174.36 to perform pavement replacement on Shawnee Drive including HMA overlay along with sidewalk, curbing, and ADA ramp replacement.

WHEREAS, bids for this project were received on January 20 and subsequently awarded in the amount of $216,700.00 of which the City's 20% share is $43,340.00;

WHEREAS, the Common Council, pursuant to HEA 1001-2016, established a Local Road and Bridge Matching Grant Fund for the receipt of said grant funds;

WHEREAS, the State Board of Accounts has directed units who receive grant funds to transfer any cash match to the Local Road and Bridge Matching Grant Fund;

THEREFORE, BE IT HEREBY RESOLVED BY THE COMMON COUNCIL OF THE CITY OF ANGOLA, INDIANA that for the expenses of the city government to meet the matching grants requirements $43,400.00 is hereby transferred to the Local Road and Bridge Matching Grant Fund.

$43,400.00 from 203 Motor Vehicle Highway Restricted Fund

PASSED AND ADOPTED by the Common Council of the City of Angola, Steuben County, Indiana this ___ day of March 2026.

____

David B. Martin, Mayor
Presiding Officer

Attest:

____

Ryan P. Herbert, Clerk-Treasurer

This resolution presented by me, the Clerk-Treasurer of the City of Angola, Indiana to the Mayor at the hour of ______ a.m./p.m. this ______ day of March 2026.

____
Ryan P. Herbert, Clerk-Treasurer

This resolution signed and approved by me, the Mayor of the City of Angola, Indiana this ______ day of March 2025.

____
David B. Martin, Mayor

EJCDC
ENGINEERS JOINT CONTRACT DOCUMENTS COMMITTEE

Change Order No. 01

Date of Issuance:	3/2/26	Effective Date:	3/16/26
Owner:	The City of Angola, Indiana	Owner's Contract No.:	N/A
Contractor:	Parrish Excavating	Contractor's Project No.:	N/A
Engineer:	Wessler Engineering	Engineer's Project No.:	276824
Project:	Kings and Metal Spinners Lift Station Rehab	Contract Name:	Div 3: Angola Wastewater Improvements

The Contract is modified as follows upon execution of this Change Order:

Description: Additional costs due to pipe diameter change at Kings Lift Station and pump size upgrade at Metal Spinners Lift Station. Also additional cost adjustments due to revised Davis Bacon wage rates. Updated contract times per equipment lead times.

Attachments: Attachment A, Parrish Excavating Price Quotes,Parrish Wage Rate Change

CHANGE IN CONTRACT PRICE	**CHANGE IN CONTRACT TIMES** *[note changes in Milestones if applicable]*
Original Contract Price: $ 629,558.00	Original Contract Times: Substantial Completion: 240 days Ready for Final Payment: 270 days days or dates
[Increase] [Decrease] from previously approved Change Orders No. __ to No. __: $ N/A	[Increase] [Decrease] from previously approved Change Orders No. __ to No. __: Substantial Completion: N/A Ready for Final Payment: N/A days
Contract Price prior to this Change Order: $ 629,558.00	Contract Times prior to this Change Order: Substantial Completion: 240 days Ready for Final Payment: 270 days days or dates
[**Increase**] [Decrease] of this Change Order: $ 22,405.90	[**Increase**] [Decrease] of this Change Order: Substantial Completion: 111 days Ready for Final Payment: 111 days days or dates
Contract Price incorporating this Change Order: $ 651,963.90	Contract Times with all approved Change Orders: Substantial Completion: 351 days (6/30/2026) Ready for Final Payment: 381 days (7/30/2026) days or dates

RECOMMENDED:	ACCEPTED:	ACCEPTED:
By: Nathan A. Brune	By:	By: [signature]
Engineer (if required)	Owner (Authorized Signature)	Contractor (Authorized Signature)
Title: Project Manager	Title	Title Project Superintendent
Date: 3/2/2026	Date	Date 3/2/26

Approved by Funding Agency (if applicable)

By: __________ Date:

Title: __________

ATTACHMENT A

DESCRIPTION, PURPOSE & JUSTIFICATION | **WESSLER PROJECT**
CHANGE ORDER NO. 01 | **276824**

PROJECT: Division 3: Angola Wastewater Improvements
Kings and Metal Spinners Lift Station Rehab
OWNER: **City of Angola, Indiana**

CONTRACTOR: **Parrish Excavating**

DESCRIPTION, PURPOSE & JUSTIFICATION OF CHANGE	ADD	DEDUCT
Item No. 1 – Pump Size Reduction		
Pump size reduction at Metal Spinners Lift Station	$0.00	$1,600.00
Item No. 2 – Discharge Piping Upsize		
Discharge piping upsize at Kings Lift Station	$19,031.04	$0.00
Item No. 3 – Davis Bacon Wage Rates		
Davis Bacon wage rates adjustment for project (Clear Lake Electric: Kings Lift Station +$858.90) (BLD Services LLC [Epoxy Lining]: +$672.00) (Parrish Excavating, Inc: +$3,443.96)	$4,974.86	$0.00
Total Additions and Deletions	$24,005.90	$1,600.00
Total Cost of Change Order No. 01		**$22,405.90** **+111 Days**

Parrish
EXCAVATING, Inc.
Since 1972 • Quincy, MI

July 31, 2025

Ms. Jessica Lestinsky
Wessler Engineering

RE: RFQ 001: Pokagon Infrastructure Improvements: Division III

Jessica, we are grateful for the opportunity to offer the following quotation for the updates to the Metal Spinners pump package and the Kings discharge piping upsizing.

SCOPE:

Metal Spinners Lift Station Pump Package: **DEDUCT- $1,600.00**
-Pricing Valid through 9/18/2025

Kings Lift Station Discharge Piping Upsize: **ADD- $19,031.04**
-Pricing valid through 8/14/2025

Material Lead Times:
Flanged Ductile Iron Pipe- 7-9 Weeks
AIS Check Valves- 34-40 Weeks (Import in Stock)
AIS Plug Valves- 34-40 Weeks (Import in Stock)
Flygt Pumps- 14-16 Weeks after submittal Approval
Control Panels- 16 Weeks after submittal Approval

If you have any questions or need further information, please let me know.

Thank you!

Respectfully,

Zach Brockway
Parrish Excavating, Inc.
517-677-6618 C

February 6, 2026

Mr. Nathan Brune
Wessler Engineering
1(260)223-4519

RE: Change Order #1- Wage Rate Change

Nathan, please find the below the changes to contract pricing due to the new Wage Determination #17, dated 7/18/2025

Subcontractors:

Clear Lake Electric:
Kings L.S. – ADD $818.00 x 5% G.C.'s = $858.90

BLD Services, LLC (Epoxy Lining):
ADD - $640.00 x 5% G.C.'s = $672.00

General Contractor:
Parrish Excavating, Inc.:
ADD- $2,994.75 x 15% G.C.'s = $3,443.96

Overall Price Change: $4,974.86

Respectfully,

Zach Brockway
Parrish Excavating, Inc.
517-677-6618
zach.brockway@parrish-excavating.com

Univertical

February 27, 2026

Retha Hicks
Angola City Hall
210 N. Public Square
Angola, IN 46703

Retha,

Enclosed are the CF-1 reports for projects: 2019-766 (PP), 2021-798 (RP), 2024-866(RP), and 2024-865 (PP).

For these projects, please note the following:

- Headcounts included both full-time employees and part-time employees as of the 12/31/2025 assessment date. As of the assessment date, Univertical had 87 Full Time and 9 Part-Time employees (1/2 employee).
- Salaries were based on the previous four-quarter 941's and included all compensation.
- Actual spending on the 2019-766, 2021-798, 2024-866 and 2024-865 projects are complete.

We added positions on 1/1/2026 to hire in the New year due to expected growth. 7 of the positions below were open carry over from 2025

- Sales – 2
- Lab- 1
- Administration-2
- Purchasing -1
- Logistics -2 (have been filled)
- Engineering -3
- Maintenance -4
- Chemical -2 (have been filled)
- Metals -7

Univertical continues to recruit through Indeed and Facebook postings as well as direct hire through Staffing Agency. Additionally, the company has been attending more job fairs and getting involved with the Angola High School manufacturing class for tours and to help where needed. Our hourly wages range from $20.00 to $39.75 per hour with an average hourly rate of $26.48.

Please let me know if you have any questions or need anything else. Please let me know the date these will be presented at council.

Sincerely,

KFrench

Kathleen French

203 Weatherhead Street Angola, Indiana 46703
Tel: 260-665-1500 Fax: 260-665-1400 www.univertical.com

COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

State Form 51765 (R7 / 12-22)

Prescribed by the Department of Local Government Finance

PRIVACY NOTICE
This form contains confidential information pursuant to IC 6-1.1-35-9 and IC 6-1.1-12.1-5.6.

FORM CF-1 / PP

20___ Pay 20___

INSTRUCTIONS:

1. *Property owners whose Statement of Benefits was approved must file this form with the local designating body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)*
2. *This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15, unless a filing extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file between January 1 and the extended due date of each year.*
3. *With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (CF-1).*

SECTION 1 — TAXPAYER INFORMATION

Name of Taxpayer Univertical LLC		County Steuben
Address of Taxpayer *(number and street, city, state, and ZIP code)* 203 Weatherhead Street, Angola, IN 46703		DLGF Taxing District Number 076-012
Name of Contact Person Kathleen French	Telephone Number (260)-6651500	Email Address kfrench@univertical.com

SECTION 2 — LOCATION AND DESCRIPTION OF PROPERTY

Name of Designating Body City of Angola Common Council	Resolution Number 2019-766	Estimated State Date *(month, day, year)* 12/01/2019
Location of Property 203 Weatherhead Street, Angola, IN 46703		Actual Start Date *(month, day, year)* 12/01/2019
Description of new manufacturing equipment, new research and development equipment, new information technology equipment, or new logistical distribution equipment to be acquired. New manufacturing equipment to improve technology and reduce costs		Estimated Completion Date *(month, day, year)* 06/30/2021 Actual Completion Date *(month, day, year)* 11/04/2022

SECTION 3 — EMPLOYEES AND SALARIES

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current Number of Employees	70	91.5
Salaries	$4,750,000	$7,359,248
Number of Employees Retained	70	70
Salaries	$4,750,000	$5,639,248
Number of Additional Employees	2	21.5
Salaries	$80,000	$1,720,000

SECTION 4 — COST AND VALUES

	MANUFACTURING EQUIPMENT		RESEARCH & DEVELOPMENT EQUIPMENT		LOGISTICAL DISTRIBUTION EQUIPMENT		IT EQUIPMENT	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values Before Project	$ 10,843,725	$	$	$	$	$	$	$
Plus: Values of Proposed Project	$ 4,100,000	$	$	$	$	$	$	$
Less: Values of Any Property Being Replaced	$	$	$	$	$	$	$	$
Net Values Upon Completion of Project	$ 14,943,725	$	$	$	$	$	$	$
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values Before Project	$ 10,843,725	$	$	$	$	$	$	$
Plus: Values of Proposed Project	$ 8,646,842	$	$	$	$	$	$	$
Less: Values of Any Property Being Replaced	$	$	$	$	$	$	$	$
Net Values Upon Completion of Project	$ 19,490,567	$	$	$	$	$	$	$

NOTE: The **COST** of the property is confidential pursuant to IC 6-1.1-12.1-5.6(c).

SECTION 5 — WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER

WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of Solid Waste Converted		
Amount of Hazardous Waste Converted		
Other Benefits:		

SECTION 6 — TAXPAYER CERTIFICATION

I hereby certify that the representations in this statement are true.

Signature of Authorized Representative K French	Title Assistant Controller	Date Signed *(month, day, year)* 02/27/2026

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.9)

1. *Within forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits.*
2. *If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination, including the date, time, and place of a hearing to be conducted by the designating body. If a notice is mailed to a property owner, a copy of the written notice will be sent to the county assessor and the county auditor.*
3. *Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made a reasonable effort to substantially comply with the Statement of Benefits and whether any failure to substantially comply was caused by factors beyond the control of the property owner.*
4. *If the designating body determines that the property owner has **NOT** made a reasonable effort to comply, the designating body shall adopt a resolution terminating the deduction. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.*

We have reviewed the CF-1 and find that:

☑	The property owner **IS** in substantial compliance
☐	The property owner **IS NOT** in substantial compliance
☐	Other *(specify)* ______

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*
	March 16, 2026

Attested By	Designating Body
	Common Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.

Time of Hearing		Date of Hearing *(month, day, year)*	Location of Hearing
	☐ AM ☐ PM		

HEARING RESULTS *(to be completed after the hearing)*

☐ Approved ☐ Denied *(see Instruction 5 above)*

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*

Attested By	Designating Body

APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the clerk of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

COMPLIANCE WITH STATEMENT OF BENEFITS
REAL ESTATE IMPROVEMENTS

State Form 51766 (R6 / 4-23)
Prescribed by the Department of Local Government Finance

20____ PAY 20____
FORM CF-1 / Real Property

PRIVACY NOTICE
The cost and any specific individual's salary information is confidential; the balance of the filing is public record per IC 6-1.1-12.1-5.3 (k) and (l).

INSTRUCTIONS:

1. *Property owners must file this form with the county auditor and the designating body for their review regarding the compliance of the project with the Statement of Benefits (Form SB-1/Real Property).*
2. *This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.*
3. *This form must also be updated each year in which the deduction is applicable. It is filed with the county auditor and the designating body before May 15 or by the due date of the real property owner's personal property return that is filed in the township where the property is located. (IC 6-1.1-12.1-5.3(j))*
4. *With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (Form CF-1/Real Property).*

SECTION 1 — TAXPAYER INFORMATION

Name of Taxpayer: Univertical LLC		County: Steuben
Address of Taxpayer *(number and street, city, state, and ZIP code)*: 203 Weatherhead Street, Angola, IN 46703		DLGF Taxing District Number: 076-012
Name of Contact Person: Kathleen French	Telephone Number: (260) 6651500	Email Address: kfrench@univertical.com

SECTION 2 — LOCATION AND DESCRIPTION OF PROPERTY

Name of Designating Body: City of Angola Common Council	Resolution Number: 2021-798	Estimated Start Date *(month, day, year)*: 03/01/2021
Location of Property: 203 Weatherhead Street, Angola, IN 46703		Actual Start Date *(month, day, year)*: 03/01/2021
Description of Real Property Improvements: 15,000 square foot building addition. The addition will include 3 truck loading bays, heating system, fire suppression system, and LED lighting. In addition, a new building tower will be built to support new manufacturing equipment.		Estimated Completion Date *(month, day, year)*: 06/30/2021
		Actual Completion Date *(month, day, year)*: 12/31/2021

SECTION 3 — EMPLOYEES AND SALARIES

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current Number of Employees	74	91.5
Salaries	$4,750,000	$7,359,248
Number of Employees Retained	74	74
Salaries	$4,750,000	$5,959,248
Number of Additional Employees	1	17.5
Salaries	$40,000	$1,400,000

SECTION 4 — COST AND VALUES

COST AND VALUES	REAL ESTATE IMPROVEMENTS	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE
Values Before Project	$ 4,495,945	$
Plus: Values of Proposed Project	$ 1,700,000	$
Less: Values of Any Property Being Replaced	$	$
Net Values Upon Completion of Project	$ $6,195,945	$
ACTUAL	COST	ASSESSED VALUE
Values Before Project	$ 4,495,945	$
Plus: Values of Proposed Project	$ 1,860,767	$
Less: Values of Any Property Being Replaced	$	$
Net Values Upon Completion of Project	$ 6,356,712	$

SECTION 5 — WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER

WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of Solid Waste Converted		
Amount of Hazardous Waste Converted		
Other Benefits:		

SECTION 6 — TAXPAYER CERTIFICATION

I hereby certify that the representations in this statement are true.

Signature of Authorized Representative	Title	Date Signed *(month, day, year)*
KFrench	Assistant Controller	02/27/2026

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.3 and IC 6-1.1-12.1-5.9)

1. *Not later than forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits (Form SB-1/Real Property).*
2. *If the property owner is found* **NOT** *to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination, including the date, time, and place of a hearing to be conducted by the designating body. The date of this hearing may not be more than thirty (30) days after the date this notice is mailed. A copy of the notice may be sent to the county auditor and the county assessor.*
3. *Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable efforts to substantially comply with the Statement of Benefits (Form SB-1/Real Property), and whether any failure to substantially comply was caused by factors beyond the control of the property owner.*
4. *If the designating body determines that the property owner has* **NOT** *made reasonable efforts to comply, the designating body shall adopt a resolution terminating the property owner's deduction. If the designating body adopts such a resolution, the deduction does not apply to the next installment of property taxes owed by the property owner or to any subsequent installment of property taxes. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.*

We have reviewed the CF-1 and find that:

- [x] The Property Owner **IS** in Substantial Compliance
- [ ] The Property Owner **IS NOT** in Substantial Compliance
- [ ] Other *(specify)* ______

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*
	March 16, 2026

Attested By	Designating Body
	Common Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance. (Hearing must be held within thirty (30) days of the date of mailing of this notice.)

Time of Hearing		Date of Hearing *(month, day, year)*	Location of Hearing
	☐ AM ☐ PM		

HEARING RESULTS *(to be completed after the hearing)*

☐ Approved ☐ Denied *(see Instruction 4 above)*

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*
	March 16, 2026

Attested By	Designating Body
	Common Council

APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the clerk of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

State Form 51765 (R7 / 12-22)

Prescribed by the Department of Local Government Finance

PRIVACY NOTICE
This form contains confidential information pursuant to IC 6-1.1-35-9 and IC 6-1.1-12.1-5.6.

FORM CF-1 / PP

20___ Pay 20___

INSTRUCTIONS:
1. *Property owners whose Statement of Benefits was approved must file this form with the local designating body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)*
2. *This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15, unless a filing extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file between January 1 and the extended due date of each year.*
3. *With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (CF-1).*

SECTION 1 — TAXPAYER INFORMATION

Name of Taxpayer: Univertical LLC		County: Steuben
Address of Taxpayer *(number and street, city, state, and ZIP code)*: 203 Weatherhead Street, Angola, IN 46703		DLGF Taxing District Number: 076-012
Name of Contact Person: Kathleen French	Telephone Number: (260)-6651500	Email Address: kfrench@univertical.com

SECTION 2 — LOCATION AND DESCRIPTION OF PROPERTY

Name of Designating Body: City of Angola Common Council	Resolution Number: 2024-865	Estimated State Date *(month, day, year)*: 01/01/2024
Location of Property: 203 Weatherhead Street, Angola, IN 46703		Actual Start Date *(month, day, year)*: 01/01/2024
Description of new manufacturing equipment, new research and development equipment, new information technology equipment, or new logistical distribution equipment to be acquired. Semi-Conductor (personal property)		Estimated Completion Date *(month, day, year)*: 07/01/2024
		Actual Completion Date *(month, day, year)*: 10/31/2024

SECTION 3 — EMPLOYEES AND SALARIES

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current Number of Employees	84	91.5
Salaries	$6,200,000	$7,359,248
Number of Employees Retained	84	84
Salaries	$6,200,000	$6,759,248
Number of Additional Employees	1	7.5
Salaries	$50,000	$600,000

SECTION 4 — COST AND VALUES

	MANUFACTURING EQUIPMENT		RESEARCH & DEVELOPMENT EQUIPMENT		LOGISTICAL DISTRIBUTION EQUIPMENT		IT EQUIPMENT	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values Before Project	$ 21,443,784	$	$	$	$	$	$	$
Plus: Values of Proposed Project	$ 870,000	$	$	$	$	$	$	$
Less: Values of Any Property Being Replaced	$	$	$	$	$	$	$	$
Net Values Upon Completion of Project	$ 22,313,784	$	$	$	$	$	$	$
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values Before Project	$ 21,443,784	$	$	$	$	$	$	$
Plus: Values of Proposed Project	$ 856,893	$	$	$	$	$	$	$
Less: Values of Any Property Being Replaced	$	$	$	$	$	$	$	$
Net Values Upon Completion of Project	$ 22,300,677	$	$	$	$	$	$	$

NOTE: The **COST** of the property is confidential pursuant to IC 6-1.1-12.1-5.6(c).

SECTION 5 — WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER

WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of Solid Waste Converted		
Amount of Hazardous Waste Converted		
Other Benefits:		

SECTION 6 — TAXPAYER CERTIFICATION

I hereby certify that the representations in this statement are true.

Signature of Authorized Representative	Title	Date Signed *(month, day, year)*
[signature]	Assistant Controller	02/27/2026

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.9)

1. *Within forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits.*
2. *If the property owner is found* ***NOT*** *to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination, including the date, time, and place of a hearing to be conducted by the designating body. If a notice is mailed to a property owner, a copy of the written notice will be sent to the county assessor and the county auditor.*
3. *Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made a reasonable effort to substantially comply with the Statement of Benefits and whether any failure to substantially comply was caused by factors beyond the control of the property owner.*
4. *If the designating body determines that the property owner has* ***NOT*** *made a reasonable effort to comply, the designating body shall adopt a resolution terminating the deduction. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.*

We have reviewed the CF-1 and find that:

☑	The property owner **IS** in substantial compliance
☐	The property owner **IS NOT** in substantial compliance
☐	Other *(specify)* ______

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)* March 16, 2026
Attested By	Designating Body Common Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.

Time of Hearing	☐ AM ☐ PM	Date of Hearing *(month, day, year)*	Location of Hearing

HEARING RESULTS *(to be completed after the hearing)*

☐ Approved ☐ Denied *(see Instruction 5 above)*

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*
Attested By	Designating Body

APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the clerk of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

COMPLIANCE WITH STATEMENT OF BENEFITS
REAL ESTATE IMPROVEMENTS

State Form 51766 (R6 / 4-23)

Prescribed by the Department of Local Government Finance

20_____ PAY 20_____
FORM CF-1 / Real Property

PRIVACY NOTICE
The cost and any specific individual's salary information is confidential; the balance of the filing is public record per IC 6-1.1-12.1-5.3 (k) and (l).

INSTRUCTIONS:

1. *Property owners must file this form with the county auditor and the designating body for their review regarding the compliance of the project with the Statement of Benefits (Form SB-1/Real Property).*
2. *This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.*
3. *This form must also be updated each year in which the deduction is applicable. It is filed with the county auditor and the designating body before May 15 or by the due date of the real property owner's personal property return that is filed in the township where the property is located. (IC 6-1.1-12.1-5.3(j))*
4. *With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (Form CF-1/Real Property).*

SECTION 1 — TAXPAYER INFORMATION

Name of Taxpayer: Univertical LLC		County: Steuben
Address of Taxpayer *(number and street, city, state, and ZIP code)*: 203 Weatherhead Street, Angola, IN 46703		DLGF Taxing District Number: 076-012
Name of Contact Person: Kathleen French	Telephone Number: (260) 6651500	Email Address: kfrench@univertical.com

SECTION 2 — LOCATION AND DESCRIPTION OF PROPERTY

Name of Designating Body: City of Angola Common Council	Resolution Number: 2024-866	Estimated Start Date *(month, day, year)*: 01/01/2024
Location of Property: 203 Weatherhead Street, Angola, IN 46703		Actual Start Date *(month, day, year)*: 01/01/2024
Description of Real Property Improvements: Framed, climate-controlled, semiconductor cleaning and packaging room. The intention of this project is to vertically integrate semiconductor anode machining, cleaning, and packaging processes in one place.		Estimated Completion Date *(month, day, year)*: 07/01/2024 Actual Completion Date *(month, day, year)*: 03/31/2024

SECTION 3 — EMPLOYEES AND SALARIES

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current Number of Employees	84	91.5
Salaries	$6,200,000	$7,359,248
Number of Employees Retained	84	84
Salaries	$6,200,000	$6,759,248
Number of Additional Employees	1	7.5
Salaries	$50,000	$600,000

SECTION 4 — COST AND VALUES

COST AND VALUES	REAL ESTATE IMPROVEMENTS	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE
Values Before Project	$ 9,627,443	$
Plus: Values of Proposed Project	$ 235,000	$
Less: Values of Any Property Being Replaced	$	$
Net Values Upon Completion of Project	$ 9,862,443	$
ACTUAL	COST	ASSESSED VALUE
Values Before Project	$ 9,627,443	$
Plus: Values of Proposed Project	$ 195,635	$
Less: Values of Any Property Being Replaced	$	$
Net Values Upon Completion of Project	$ 9,823,078	$

SECTION 5 — WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER

WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of Solid Waste Converted		
Amount of Hazardous Waste Converted		
Other Benefits:		

SECTION 6 — TAXPAYER CERTIFICATION

I hereby certify that the representations in this statement are true.

Signature of Authorized Representative	Title	Date Signed *(month, day, year)*
K French	Assistant Controller	02/27/2026

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.3 and IC 6-1.1-12.1-5.9)

1. *Not later than forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits (Form SB-1/Real Property).*
2. *If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination, including the date, time, and place of a hearing to be conducted by the designating body. The date of this hearing may not be more than thirty (30) days after the date this notice is mailed. A copy of the notice may be sent to the county auditor and the county assessor.*
3. *Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable efforts to substantially comply with the Statement of Benefits (Form SB-1/Real Property), and whether any failure to substantially comply was caused by factors beyond the control of the property owner.*
4. *If the designating body determines that the property owner has **NOT** made reasonable efforts to comply, the designating body shall adopt a resolution terminating the property owner's deduction. If the designating body adopts such a resolution, the deduction does not apply to the next installment of property taxes owed by the property owner or to any subsequent installment of property taxes. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.*

We have reviewed the CF-1 and find that:

- ☑ The Property Owner **IS** in Substantial Compliance
- ☐ The Property Owner **IS NOT** in Substantial Compliance
- ☐ Other *(specify)* ______

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*
	March 16, 2026

Attested By	Designating Body
	Common Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance. (Hearing must be held within thirty (30) days of the date of mailing of this notice.)

Time of Hearing		Date of Hearing *(month, day, year)*	Location of Hearing
	☐ AM ☐ PM		

HEARING RESULTS *(to be completed after the hearing)*

☐ Approved ☐ Denied *(see Instruction 4 above)*

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*
	March 16, 2026

Attested By	Designating Body
	Common Council

APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the clerk of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

Angola Wire Products, Inc.
803 Wohlert Street
Angola, IN 46703

January 1, 2026 – CF-1/PP Attachment, Resolution # 2020-786

Section #3 - Employees and Salaries

The taxpayer had a total of 133 employees on December 31, 2025 with salaries of $7,233,305. They have retained 133 employees with associated salaries of $7,233,305. The company has hired an additional 5 employees with salaries of $269,141. The salaries exceed the amounts projected on the SB-1/PP.

These numbers reflect net new jobs and do not include natural employee turnover through resignations, retirement, or terminations. The company had additional wages paid to employees who terminated employment of $205,995 which are not included in numbers above.

When the taxpayer applied for the abatement, the 150 employees included out of state resident staff in late 2020. The company has much less out of state staff now. The company reports 100 base level staff for the state incentive received related to the Hoosier Business Investment tax credit. The company has exceeded staffing from that base level perspective.

The abatement was approved on 10/5/2020. The taxpayer has added $2,920,880 in taxable personal property since the abatement was approved. The amount of investment made outside of the abatement period was $1,515,905. The total equipment cost has been included in the pools for tax year 2021, 2022, 2023, 2024, 2025 and 2026. The company has continued to invest in equipment and to seek eligible employees since the approval of the abatement. The company plans to make additional investment during 2026 and continue to add employees.

The project was approved in the last quarter of 2020 and has made good progress through calendar year 2026 through a challenging national business environment.

The project is moving forward as proposed to the Council.

COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

State Form 51765 (R7 / 12-22)
Prescribed by the Department of Local Government Finance

PRIVACY NOTICE
This form contains confidential information pursuant to IC 6-1.1-35-9 and IC 6-1.1-12.1-5.6.

FORM CF-1 / PP

2026 PAY 2027

INSTRUCTIONS:
1. *Property owners whose Statement of Benefits was approved must file this form with the local Designating Body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)*
2. *This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15, unless a filing extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file between January 1 and the extended due date of each year.*
3. *With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (CF-I).*

SECTION 1 — TAXPAYER INFORMATION

Name of taxpayer ANGOLA WIRE PRODUCTS, INC.		County Steuben
Address of Taxpayer *(street and number, city, state and ZIP code)* 803 WOHLERT STREET ANGOLA IN 46703		DLGF Taxing District Number 76012
Name of Contact Person CHRIS HEROY, CEO	Telephone Number 260-250-2881	Email Address CCHEROY@ANGOLAWIRE.COM

SECTION 2 — LOCATION AND DESCRIPTION OF PROPERTY

Name of Designating Body ANGOLA CITY COUNCIL	Resolution Number 2020-786	Estimated Start Date *(month, day, year)* 11/01/2020
Location of Property 803 WOHLERT ST. ANGOLA IN 46703		Actual Start Date *(month, day, year)* 11/01/2020
Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired. See attached		Estimated Completion Date *(month, day, year)* 12/31/2022
		Actual Completion Date *(month, day, year)* 12/31/2022

SECTION 3 — EMPLOYEES AND SALARIES

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current Number of Employees	150	133
Salaries	5,000,000	7,233,305
Number of Employees Retained	150	133
Salaries	5,000,000	7,233,305
Number of Additional Employees	5	5
Salaries	150,000	269,141

SECTION 4 — COST AND VALUES

	MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values Before Project								
Plus: Values of Proposed Project	1,500,000	450,000						
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	1,500,000	450,000						
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values Before Project								
Plus: Values of Proposed Project	1,158,256	147,909						
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	1,159,256	147,909						

NOTE: The **COST** of the property is confidential pursuant to IC 6-1.1-12.1-5.6 (c).

SECTION 5 — WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER

WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of Solid Waste Converted		
Amount of Hazardous Waste Converted		
Other Benefits:		

SECTION 6 — TAXPAYER CERTIFICATION

I hereby certify that the representations in this statement are true.

Signature of Authorized Representative	Title	Date Signed *(month, day, year)*
	CEO	

Prepared by: RSM US LLP • 4100 EDISON LAKES PARKWAY, STE. 210, MISHAWAKA, IN 46545 • 574-234-4047

ATTACHMENT TO FORM CF-1, page 1, Section 2

Name of taxpayer

ANGOLA WIRE PRODUCTS, INC.

SECTION 2 — **LOCATION AND DESCRIPTION OF PROPERTY**

Description of real property improvements and/or new manufacturing equipment to be acquired

COMPANY IS PLANNING $1.5M IN NEW HIGHLY AUTOMATED CNC/WELDING EQUIPMENT PURCHASES AND IS RAMPING UP WITH PERSONAL PROTECTIVE EQUIPMENT (PPE) PRODUCTION.

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.9)

1. *Within forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits.*
2. *If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination, including the date, time, and place of a hearing to be conducted by the designating body. If a notice is mailed to a property owner, a copy of the written notice will be sent to the county assessor and the county auditor.*
3. *Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made a reasonable effort to substantially comply with the Statement of Benefits and whether any failure to substantially comply was caused by factors beyond the control of the property owner.*
4. *If the designating body determines that the property owner has **NOT** made a reasonable effort to comply, the designating body shall adopt a resolution terminating the deduction. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.*

We have reviewed the CF-1 and find that:

- ☑ The property owner **IS** in substantial compliance
- ☐ The property owner **IS NOT** in substantial compliance
- ☐ Other *(specify)* ______

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)* March 16, 2026
Attested By	Designating Body Common Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.

Time of Hearing ☐ AM ☐ PM	Date of Hearing *(month, day, year)*	Location of Hearing

HEARING RESULTS ***(to be completed after the hearing)***

☐ Approved ☐ Denied *(see Instruction 5 above)*

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*
Attested By	Designating Body

APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the clerk of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

Angola Wire Products, Inc.
803 Wohlert Street & 1300 Wohlert Street
Angola, IN 46703

January 1, 2026 – CF-1/PP Attachment, Resolution # 2024-871

Section #3 - Employees and Salaries

The taxpayer had a total of 133 employees on December 31, 2025 with salaries of $7,233,305. They have retained 133 employees with associated salaries of $7,233,305. The company has hired an additional 5 employees with salaries of $258,717. The additional employees' salaries did not represent a full year of salaries due to their start date being after the abatement approval date. The average rate per hour is $25.95 for these employees, and the average annualized employee salary for these employees is $51,743 which exceeds the projected average salary of $45,000. Based on the resolution, the taxpayer had until 12/31/2025 to meet these projections.

These numbers reflect net new jobs and do not include natural employee turnover through resignations, retirement, or terminations. The company had additional wages paid to employees who terminated employment of $205,995 which are not included in numbers above.

The abatement was approved on 7/2/2024. The taxpayer has added $1,096,955 in taxable personal property since the abatement was approved. The total equipment cost has been included in the pools for tax year 2026. The company has continued to invest in equipment and to seek eligible employees since the approval of the abatement. The company plans to make additional investment during 2026 and continue to add employees.

The project is moving forward as proposed to the Council.

FORM CF-1 / PP

2026 PAY 2027

COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

State Form 51765 (R7 / 12-22)
Prescribed by the Department of Local Government Finance

PRIVACY NOTICE
This form contains confidential information pursuant to IC 6-1.1-35-9 and IC 6-1.1-12.1-5.6.

INSTRUCTIONS:
1. *Property owners whose Statement of Benefits was approved must file this form with the local Designating Body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)*
2. *This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15, unless a filing extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file between January 1 and the extended due date of each year.*
3. *With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (CF-I).*

SECTION 1 — TAXPAYER INFORMATION

Name of taxpayer ANGOLA WIRE PRODUCTS, INC.		County Steuben
Address of Taxpayer *(street and number, city, state and ZIP code)* 803 WOHLERT STREET ANGOLA IN 46703		DLGF Taxing District Number 76012
Name of Contact Person CHRIS HEROY, CEO	Telephone Number 260-250-2881	Email Address CCHEROY@ANGOLAWIRE.COM

SECTION 2 — LOCATION AND DESCRIPTION OF PROPERTY

Name of Designating Body ANGOLA CITY COUNCIL	Resolution Number 2024-871	Estimated Start Date *(month, day, year)* 07/15/2024
Location of Property 803 WOHLERT ST. ANGOLA IN 46703		Actual Start Date *(month, day, year)* 09/15/2024
Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired. COMPANY IS PLANNING $2.5M IN NEW COBOTS/LASER EQUIPMENT PURCHASES ALONG WITH HIGHLY AUTOMATED CNC/WELDING EQUIPMENT.		Estimated Completion Date *(month, day, year)* 12/31/2025 Actual Completion Date *(month, day, year)* / /

SECTION 3 — EMPLOYEES AND SALARIES

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current Number of Employees	123	133
Salaries	6,390,902	7,233,305
Number of Employees Retained	123	133
Salaries	6,390,902	7,233,305
Number of Additional Employees	5	5
Salaries	225,000	258,717

SECTION 4 — COST AND VALUES

	MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values Before Project								
Plus: Values of Proposed Project	2,500,000	750,000						
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	2,500,000	750,000						
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values Before Project								
Plus: Values of Proposed Project	1,072,152	983,783						
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	1,072,152	983,783						

NOTE: The **COST** of the property is confidential pursuant to IC 6-1.1-12.1-5.6 (c).

SECTION 5 — WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER

WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of Solid Waste Converted		
Amount of Hazardous Waste Converted		
Other Benefits:		

SECTION 6 — TAXPAYER CERTIFICATION

I hereby certify that the representations in this statement are true.

Signature of Authorized Representative	Title	Date Signed *(month, day, year)*
	CEO	

Prepared by: RSM US LLP • 4100 EDISON LAKES PARKWAY, STE. 210, MISHAWAKA, IN 46545 • 574-234-4047

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.9)

1. *Within forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits.*
2. *If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination, including the date, time, and place of a hearing to be conducted by the designating body. If a notice is mailed to a property owner, a copy of the written notice will be sent to the county assessor and the county auditor.*
3. *Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made a reasonable effort to substantially comply with the Statement of Benefits and whether any failure to substantially comply was caused by factors beyond the control of the property owner.*
4. *If the designating body determines that the property owner has **NOT** made a reasonable effort to comply, the designating body shall adopt a resolution terminating the deduction. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.*

We have reviewed the CF-1 and find that:

- ☑ The property owner **IS** in substantial compliance
- ☐ The property owner **IS NOT** in substantial compliance
- ☐ Other *(specify)* ______________________

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)* March 16, 2026
Attested By	Designating Body Common Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.

Time of Hearing ☐ AM ☐ PM	Date of Hearing *(month, day, year)*	Location of Hearing

HEARING RESULTS *(to be completed after the hearing)*

☐ Approved ☐ Denied *(see Instruction 5 above)*

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*
Attested By	Designating Body

APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the clerk of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

Angola Wire Products, Inc. d/b/a A.W. Machine & Repair
803 Wohlert Street & 1300 Wohlert Street
Angola, IN 46703

January 1, 2026 – CF-1/PP Attachment, Resolution # 2024-871

Section #3 - Employees and Salaries

The taxpayer had a total of 133 employees on December 31, 2025 with salaries of $7,233,305. They have retained 133 employees with associated salaries of $7,233,305. The company has hired an additional 5 employees with salaries of $258,717. The additional employees' salaries did not represent a full year of salaries due to their start date being after the abatement approval date. The average rate per hour is $25.95 for these employees, and the average annualized employee salary for these employees is $51,743 which exceeds the projected average salary of $45,000. Based on the resolution, the taxpayer had until 12/31/2025 to meet these projections.

These numbers reflect net new jobs and do not include natural employee turnover through resignations, retirement, or terminations. The company had additional wages paid to employees who terminated employment of $205,995 which are not included in numbers above.

The abatement was approved on 7/2/2024. The taxpayer has added $219,162.62 in taxable personal property since the abatement was approved. The total equipment cost has been included in the pools for tax year 2026. The company has continued to invest in equipment and to seek eligible employees since the approval of the abatement. The company plans to make additional investment during 2026 and continue to add employees.

The project is moving forward as proposed to the Council.

COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

State Form 51765 (R7 / 12-22)
Prescribed by the Department of Local Government Finance

PRIVACY NOTICE
This form contains confidential information pursuant to IC 6-1.1-35-9 and IC 6-1.1-12.1-5.6.

FORM CF-1 / PP

2026 PAY 2027

INSTRUCTIONS:

1. *Property owners whose Statement of Benefits was approved must file this form with the local Designating Body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)*
2. *This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15, unless a filing extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file between January 1 and the extended due date of each year.*
3. *With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (CF-I).*

SECTION 1 — TAXPAYER INFORMATION

Name of taxpayer ANGOLA WIRE PRODUCTS, INC.		County STEUBEN
Address of Taxpayer *(street and number, city, state and ZIP code)* 803 & 1300 WOHLERT STREET ANGOLA IN 46703		DLGF Taxing District Number 76012
Name of Contact Person CHRIS HEROY, CEO	Telephone Number 260-250-2881	Email Address CCHEROY@ANGOLAWIRE.COM

SECTION 2 — LOCATION AND DESCRIPTION OF PROPERTY

Name of Designating Body ANGOLA CITY COUNCIL	Resolution Number 2024-871	Estimated Start Date *(month, day, year)* 07/15/2024
Location of Property 1300 WOHLERT ST. ANGOLA IN 46703		Actual Start Date *(month, day, year)* 09/15/2024
Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired. COMPANY IS PLANNING $2.5M IN NEW COBOTS/LASER EQUIPMENT PURCHASES ALONG WITH HIGHLY AUTOMATED CNC/WELDING EQUIPMENT		Estimated Completion Date *(month, day, year)* 12/31/2025 Actual Completion Date *(month, day, year)* / /

SECTION 3 — EMPLOYEES AND SALARIES

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current Number of Employees	123	133
Salaries	6,390,902	7,233,305
Number of Employees Retained	123	133
Salaries	6,390,902	7,233,305
Number of Additional Employees	5	5
Salaries	225,000	258,717

SECTION 4 — COST AND VALUES

	MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
AS ESTIMATED ON SB-1	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**
Values Before Project								
Plus: Values of Proposed Project	2,500,000	750,000						
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	2,500,000	750,000						
ACTUAL	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**
Values Before Project								
Plus: Values of Proposed Project	219,163	85,478						
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	219,163	85,478						

NOTE: The **COST** of the property is confidential pursuant to IC 6-1.1-12.1-5.6 (c).

SECTION 5 — WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER

WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of Solid Waste Converted		
Amount of Hazardous Waste Converted		
Other Benefits:		

SECTION 6 — TAXPAYER CERTIFICATION

I hereby certify that the representations in this statement are true.

Signature of Authorized Representative	Title CEO	Date Signed *(month, day, year)*

Prepared by: RSM US LLP • 4100 EDISON LAKES PARKWAY, STE. 210, MISHAWAKA, IN 46545 • 574-234-4047

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.9)

1. *Within forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits.*
2. *If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination, including the date, time, and place of a hearing to be conducted by the designating body. If a notice is mailed to a property owner, a copy of the written notice will be sent to the county assessor and the county auditor.*
3. *Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made a reasonable effort to substantially comply with the Statement of Benefits and whether any failure to substantially comply was caused by factors beyond the control of the property owner.*
4. *If the designating body determines that the property owner has **NOT** made a reasonable effort to comply, the designating body shall adopt a resolution terminating the deduction. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.*

We have reviewed the CF-1 and find that:

- [x] The property owner **IS** in substantial compliance
- [ ] The property owner **IS NOT** in substantial compliance
- [ ] Other *(specify)* ______

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*
	March 16, 2026

Attested By	Designating Body
	Common Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.

Time of Hearing	Date of Hearing *(month, day, year)*	Location of Hearing
☐ AM ☐ PM		

HEARING RESULTS *(to be completed after the hearing)*

☐ Approved ☐ Denied *(see Instruction 5 above)*

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*

Attested By	Designating Body

APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the clerk of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

State Form 51765 (R7 / 12-22)

Prescribed by the Department of Local Government Finance

PRIVACY NOTICE
This form contains confidential information pursuant to IC 6-1.1-35-9 and IC 6-1.1-12.1-5.6.

FORM CF-1 / PP

20___ Pay 20___

INSTRUCTIONS:

1. *Property owners whose Statement of Benefits was approved must file this form with the local designating body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)*
2. *This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15, unless a filing extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file between January 1 and the extended due date of each year.*
3. *With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (CF-1).*

SECTION 1 — TAXPAYER INFORMATION

Name of Taxpayer RR Donnelley & Sons Company	County Steuben
Address of Taxpayer *(number and street, city, state, and ZIP code)* 611 W. Mill St, Angola, IN 46703	DLGF Taxing District Number

Name of Contact Person Brett Eager	Telephone Number (260) 316-6231	Email Address brett.eager@rrd.com

SECTION 2 — LOCATION AND DESCRIPTION OF PROPERTY

Name of Designating Body Common Council City of Angola	Resolution Number	Estimated Start Date *(month, day, year)* 02/12/2018
Location of Property 611 W. Mill St, Angola, IN 46703		Actual Start Date *(month, day, year)* 02/12/2018
Description of new manufacturing equipment, new research and development equipment, new information technology equipment, or new logistical distribution equipment to be acquired. (1) new automated turret rewinder for running large diameter rolls for targeted (		Estimated Completion Date *(month, day, year)* 04/30/2018 Actual Completion Date *(month, day, year)* 04/30/2018

SECTION 3 — EMPLOYEES AND SALARIES

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current Number of Employees	180	162
Salaries	$8,264,000	$10,077,944
Number of Employees Retained	180	162
Salaries	$8,264,000	$10,077,944
Number of Additional Employees	3	
Salaries	137,280	

SECTION 4 — COST AND VALUES

	MANUFACTURING EQUIPMENT		RESEARCH & DEVELOPMENT EQUIPMENT		LOGISTICAL DISTRIBUTION EQUIPMENT		IT EQUIPMENT	
AS ESTIMATED ON SB-1	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**
Values Before Project	$ 35,404,589	$ 10,312,326	$	$	$	$	$	$
Plus: Values of Proposed Project	$ 1,378,746	$ 1,240,871	$	$	$	$	$	$
Less: Values of Any Property Being Replaced	$ (633	$ (63355)	$	$	$	$	$	$
Net Values Upon Completion of Project	$ 36,149,777	$ 11,489,842	$	$	$	$	$	$
ACTUAL	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**	**COST**	**ASSESSED VALUE**
Values Before Project	$ 35,404,589	$ 10,312,326	$	$	$	$	$	$
Plus: Values of Proposed Project	$ 1,378,746	$ 1,240,871	$	$	$	$	$	$
Less: Values of Any Property Being Replaced	$ (633,558)	$ (63,355)	$	$	$	$	$	$
Net Values Upon Completion of Project	$ 36,149,777	$ 11,489,842	$	$	$	$	$	$

NOTE: The **COST** of the property is confidential pursuant to IC 6-1.1-12.1-5.6(c).

SECTION 5 — WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER

WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of Solid Waste Converted		
Amount of Hazardous Waste Converted		
Other Benefits:		

SECTION 6 — TAXPAYER CERTIFICATION

I hereby certify that the representations in this statement are true.

Signature of Authorized Representative	Title	Date Signed *(month, day, year)*
B Egy	Vice President Operations	03/06/2026

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.9)

1. *Within forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits.*
2. *If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination, including the date, time, and place of a hearing to be conducted by the designating body. If a notice is mailed to a property owner, a copy of the written notice will be sent to the county assessor and the county auditor.*
3. *Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made a reasonable effort to substantially comply with the Statement of Benefits and whether any failure to substantially comply was caused by factors beyond the control of the property owner.*
4. *If the designating body determines that the property owner has **NOT** made a reasonable effort to comply, the designating body shall adopt a resolution terminating the deduction. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.*

We have reviewed the CF-1 and find that:

- ☑ The property owner **IS** in substantial compliance
- ☐ The property owner **IS NOT** in substantial compliance
- ☐ Other *(specify)* ____________________

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)* March 16, 2026
Attested By	Designating Body Common Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.

Time of Hearing ☐ AM ☐ PM	Date of Hearing *(month, day, year)*	Location of Hearing

HEARING RESULTS *(to be completed after the hearing)*

☐ Approved ☐ Denied *(see Instruction 5 above)*

Reasons for the Determination *(attach additional sheets if necessary)*

Signature of Authorized Member	Date Signed *(month, day, year)*
Attested By	Designating Body

APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the clerk of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

CITY OF ANGOLA
Prescribed by State Board of Accounts

CLERK-TREASURER'S DEPOSITORY STATEMENT AND CASH RECONCILEMENT
MONTH ENDING FEBRUARY 2026

FUNDS	Total Jan. 1 Balance And Receipts to Date 1	Receipts For Month 2	Total Balance And Receipts 3	Disbursed To Date 4	Disbursed For Month 5	Total Disbursements 6	Treasurer's Ending Balance 7
General	$ 8,367,782.98	$ 304,056.95	$ 8,671,839.93	$ 799,221.30	$ 448,429.28	$ 1,247,650.58	$ 7,424,189.35
COVID Indiana CRF	$ -		$ -	$ -	$ -	$ -	$ -
COVID CDBG OCRA Response	$ -	$ -	$ -	$ -	$ -	$ -	$ -
COVID FEMA 2020 FF Supplemental	$ 1,755.91	$ -	$ 1,755.91	$ -	$ -	$ -	$ 1,755.91
COVID CDBG OCRA Response Phase 3	$ -	$ -	$ -	$ -	$ -	$ -	$ -
ARP Coronavirus Local Fiscal Recovery	$ 15,975.99	$ -	$ 15,975.99	$ 5,000.00	$ 2,800.00	$ 7,800.00	$ 8,175.99
Motor Vehicle Highway	$ 3,141,384.76	$ 16,874.77	$ 3,158,259.53	$ 193,939.79	$ 213,513.17	$ 407,452.96	$ 2,750,806.57
Local Road & Street	$ 307,218.09	$ 7,766.87	$ 314,984.96	$ -	$ -	$ -	$ 314,984.96
Motor Vehicle Highway Restricted	$ 185,088.53	$ 16,874.78	$ 201,963.31	$ -	$ -	$ -	$ 201,963.31
Parks & Recreation Operating	$ 1,051,132.73	$ 750.00	$ 1,051,882.73	$ 100,337.15	$ 77,667.80	$ 178,004.95	$ 873,877.78
LIT Economic Development	$ 3,569,855.26	$ 71,438.83	$ 3,641,294.09	$ 15,880.00	$ 24,050.00	$ 39,930.00	$ 3,601,364.09
Donation	$ 151,221.49	$ 16,852.50	$ 168,073.99	$ 177.99	$ 598.65	$ 776.64	$ 167,297.35
Federal Grants Operating	$ -	$ 2,923.03	$ 2,923.03	$ -	$ 2,923.03	$ 2,923.03	$ -
Local Law Enforcement Continuing Ed	$ 44,228.79	$ 172.00	$ 44,400.79	$ 2,100.00	$ -	$ 2,100.00	$ 42,300.79
Riverboat	$ 187,254.92	$ -	$ 187,254.92	$ -	$ -	$ -	$ 187,254.92
Local Road & Bridge Matching Grant	$ 91,398.51	$ -	$ 91,398.51	$ 34,805.13	$ -	$ 34,805.13	$ 56,593.38
Rainy Day	$ 4,200,000.00	$ -	$ 4,200,000.00	$ -	$ -	$ -	$ 4,200,000.00
Hazardous Materials Response	$ 15,229.58	$ 450.00	$ 15,679.58	$ -	$ -	$ -	$ 15,679.58
LIT Public Safety	$ 907,369.13	$ 79,161.42	$ 986,530.55	$ 109,316.95	$ 110,420.17	$ 219,737.12	$ 766,793.43
Opioid Settlement Unrestricted	$ 49,060.26	$ -	$ 49,060.26	$ -	$ -	$ -	$ 49,060.26
Opioid Settlement Restricted	$ 22,490.68	$ -	$ 22,490.68	$ -	$ -	$ -	$ 22,490.68
Fire Operating	$ 2,358,228.86	$ -	$ 2,358,228.86	$ 218,471.77	$ 159,136.50	$ 377,608.27	$ 1,980,620.59
Redevelopment General	$ 1,253,714.91	$ -	$ 1,253,714.91	$ 11,310.00	$ -	$ 11,310.00	$ 1,242,404.91
Law Enforcement Trust	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Cumulative Capital Improvement	$ 171,414.05	$ -	$ 171,414.05	$ -	$ -	$ -	$ 171,414.05
Cumulative Capital Development	$ 1,335,411.42	$ -	$ 1,335,411.42	$ -	$ -	$ -	$ 1,335,411.42
Park Nonreverting Capital	$ 188,431.97	$ 1,493.96	$ 189,925.93	$ 87.04	$ 173.94	$ 260.98	$ 189,664.95
Park Cumulative Building	$ 367,023.55	$ -	$ 367,023.55	$ -	$ -	$ -	$ 367,023.55
Local Major Moves Construction	$ 157,142.49	$ 2,830.25	$ 159,972.74	$ -	$ 98,500.00	$ 98,500.00	$ 61,472.74
Capital Projects	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Water Operating & Maintenance	$ 615,447.11	$ 178,587.96	$ 794,035.07	$ 312,519.91	$ 176,127.27	$ 488,647.18	$ 305,387.89
Water Sinking	$ 168,428.81	$ 24,090.00	$ 192,518.81	$ 141,103.13	$ -	$ 141,103.13	$ 51,415.68
Water Improvement	$ 3,099,381.25	$ 1,175.00	$ 3,100,556.25	$ 35,708.17	$ -	$ 35,708.17	$ 3,064,848.08
Water Customer Deposit	$ 72,890.00	$ 1,500.00	$ 74,390.00	$ 2,640.00	$ 1,070.00	$ 3,710.00	$ 70,680.00
Water Construction	$ 1,516,777.00	$ 554,458.00	$ 2,071,235.00	$ 1,516,777.00	$ 554,458.00	$ 2,071,235.00	$ -
Water Debt Service Reserve	$ 291,172.11	$ 888.84	$ 292,060.95	$ -	$ -	$ -	$ 292,060.95
Wastewater Operating & Maintenance	$ 849,576.78	$ 260,832.82	$ 1,110,409.60	$ 410,771.66	$ 215,987.83	$ 626,759.49	$ 483,650.11
Wastewater Sinking	$ 346,920.04	$ 18,608.31	$ 365,528.35	$ 107,500.00	$ -	$ 107,500.00	$ 258,028.35
Wastewater Improvement	$ 4,047,315.76	$ 1,106.00	$ 4,048,421.76	$ 28,070.66	$ 60,896.44	$ 88,967.10	$ 3,959,454.66
Wastewater Construction	$ 702,393.00	$ 253,693.00	$ 956,086.00	$ 702,393.00	$ 253,693.00	$ 956,086.00	$ -
Police Pension	$ 271,481.68	$ -	$ 271,481.68	$ 11,682.86	$ 11,682.86	$ 23,365.72	$ 248,115.96
Payroll Withholding	$ 420,861.83	$ 387,549.61	$ 808,411.44	$ 384,122.60	$ 387,160.24	$ 771,282.84	$ 37,128.60
Escrow	$ 49,100.00	$ 600.00	$ 49,700.00	$ 350.00	$ 200.00	$ 550.00	$ 49,150.00
TOTAL - CASH FUNDS	$ 40,591,560.23	$ 2,204,734.90	$ 42,796,295.13	$ 5,144,286.11	$ 2,799,488.18	$ 7,943,774.29	$ 34,852,520.84

Investments By Funds	Total Jan. 1 Balance And Purchases to Date	Investments Purchased For Month	Total Balance And Investments Purchased	Investments Cashed To Date	Investments Cashed For Month	Total Investments Cashed	Treasurer's Balance of Investments
Moneys on Deposit (interest only) (2)	$ 6,397.18	$ 2,813.91	$ 9,211.09	$ -	$ -	$ -	$ 9,211.09
Moneys on Deposit (interest only) (8)	$ 166,381.97	$ 71,676.01	$ 238,057.98	$ -	$ -	$ -	$ 238,057.98
Local Major Moves Construction (2)	$ 2,945,716.78	$ 8,236.25	$ 2,953,953.03	$ -	$ -	$ -	$ 2,953,953.03
Total of Investments by Funds	$ 3,118,495.93	$ 82,726.17	$ 3,201,222.10	$ -	$ -	$ -	$ 3,201,222.10
TOTAL - ALL FUNDS	$ 43,710,056.16	$ 2,287,461.07	$ 45,997,517.23	$ 5,144,286.11	$ 2,799,488.18	$ 7,943,774.29	$ 38,053,742.94

CITY OF ANGOLA
Prescribed by State Board of Accounts

City or Town Form No. 206 (Rev. 1975)
General Form No. 206 (Rev 1975)

CLERK-TREASURER'S DEPOSITORY STATEMENT AND CASH RECONCILEMENT
MONTH ENDING FEBRUARY 2026

Names of Depositories and Accounts		Depository Balance End of Month		Outstanding Warrants		Net Depository Balance
Bank of New York						
Wastewater Sinking - Bond & Interest (20)	$	37,113.67	$	-	$	37,113.67
Wastewater Sinking - Debt Service Reserve (20)	$	220,914.68	$	-	$	220,914.68
Water- Debt Service Reserve (20)	$	292,060.95	$	-	$	292,060.95
Farmers State Bank						
General Checking (3)	$	8,013,664.18	$	(229,781.43)	$	7,783,882.75
General Savings (8)	$	25,738,057.98	$	-	$	25,738,057.98
First Federal Savings Bank of Angola						
Police Operations (9)	$	853.58	$	-	$	853.58
Trust INdiana						
Moneys on Deposit (2)	$	1,009,211.09	$	-	$	1,009,211.09
TRECS (2)	$	-	$	-	$	-
TOTALS	$	35,311,876.13	$	(229,781.43)	$	35,082,094.70
INVESTMENTS MADE FROM DEPOSITORY BALANCES					$	-
ADD: Cash in Office					$	1,250.00
ADJUSTMENTS (explain fully)						
Deposit in transit (3) 15170					$	44.83
Deposit in transit (3) 15171					$	1,616.49
Deposit in transit (3) 15174					$	328.50
Deposit in transit (3) 15175					$	2,456.69
Deposit in transit (3) 15176					$	149.01
Deposit in transit (3) 15177					$	3,804.59
Deposit in transit (3) 15178					$	200.00
Deposit in transit (3) 15179					$	6,175.04
Deposit in transit (3) 15181					$	(82.07)
Outstanding Credit Card					$	(190.62)
Outstanding nsf					$	1,942.75
Moneys on Deposit (interest only EOM)					$	(247,269.07)
TOTAL CASH BALANCE, Plus Depository Balances Invested					$	34,852,520.84
Total of Investments - All funds (As shown in Col 7 opposite page)					$	3,201,222.10
TOTAL CASH BALANCE AND INVESTMENTS					$	38,053,742.94