

Sample Rollback Ballot for Taxing Units Other Than School Districts

Tax Rate Rollback Election

For _____ Date _____
(Name of Taxing Unit) *(Date of Election)*

OFFICIAL BALLOT

Place an "X" in the square beside the statement indicating the way you wish to vote.

FOR AGAINST

Reducing the tax rate in _____
(Name of Taxing Unit)

for the current year from _____ to _____
(The Rate Adopted) *(The Rollback Rate Calculated According to Tax Code §26.04)*