

Unit Information

Unit Type: Special District Year: 2020
Unit Name: Altamonte Springs Health Facilities Authority Unit Dependency: Dependent
Unit Status: Active

Location Information

Name:

Title:

Phone:

Address:

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Contact Information

Name:

Title:

Phone:

Email:

Address:

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AFR Details

Original AFR

AFR Status: Verified By DFS
AFR Received Date: 4/20/2021
Audit Received Date: 4/20/2021
Submission Type: Electronic

Long-Term Debt Information

Long-Term Debt:

Audit Information

Was an audit performed?

Audit Performed Date:

Auditor Name:

Address:

Certification

Chief Financial Officer

Name:

Title:

Chairman/Elected Official

Name:

Title:

Yes No

Have You Experienced a Financial Emergency in this year?

<input type="checkbox"/>	<input type="checkbox"/>
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If Yes, Have You Compiled With Section 218.503(2), Florida Statutes?

<input type="checkbox"/>	<input type="checkbox"/>
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Revenues Report for FYE 2020

Expenditures Report for FYE 2020

**Data Element Worksheet Report for FYE: 2020, Altamonte Springs
Health Facilities Authority**

Affiliates Report for FYE 2020