FY 2019
ANNUAL TAX INCREMENT FINANCE REPORT

STATE OF ILLINOIS
COMPTROLLER
SUSANA A. MENDOZA

Name of Municipality:	**Lombard**	Reporting Fiscal Year:	**2019**
County:	DuPage	Fiscal Year End:	**12/31/2019**
Unit Code:	**022/075/32**		

FY 2019 TIF Administrator Contact Information

First Name:	**William**	Last Name:	**Heniff**		
Address:	255 E. Wilson	Title:	Community Development Director		
Telephone:	630-620-5700	City:	Lombard	Zip:	60148
E-mail- required	**heniffw@villageoflombard.org**				

I attest to the best of my knowledge, that this FY 2019 report of the redevelopment project area(s) in the **City/Village** of: **Lombard** is complete and accurate pursuant to Tax Increment Allocation Redevelopment Act [65 ILCS 5/11-74.4-3 et. seq.] and or Industrial Jobs Recovery Law [65 ILCS 5/11-74.6-10 et. seq.].

Written signature of TIF Administrator — **Date** 6-24-2020

Section 1 (65 ILCS 5/11-74.4-5 (d) (1.5) and 65 ILCS 5/11-74.6-22 (d) (1.5)*)

FILL OUT ONE FOR EACH TIF DISTICT

Name of Redevelopment Project Area	Date Designated MM/DD/20YY	Date Terminated MM/DD/20YY
Downtown TIF No. 1	2/2/1989	NA

*All statutory citations refer to one of two sections of the Illinois Municipal Code: The Tax Increment Allocation Redevelopment Act [65 ILCS 5/11-74.4-3 et. seq.] or the Industrial Jobs Recovery Law [65 ILCS 5/11-74.6-10 et. seq.]