

Due to ROE on Tuesday, October 15th  
 Due to ISBE on Friday, November 15th  
 SD/JA19

ILLINOIS STATE BOARD OF EDUCATION  
 School Business Services Division  
 100 North First Street, Springfield, Illinois 62777-0001  
 217/785-8779

**Illinois School District/Joint Agreement  
 Annual Financial Report \***  
**June 30, 2019**

School District  
 Joint Agreement

<u>School District/Joint Agreement Information</u> <i>(See instructions on inside of this page.)</i>	<u>Accounting Basis:</u>	<u>Certified Public Accountant Information</u>
School District/Joint Agreement Number: <b>56-099-0840-002</b> County Name: <b>WILL</b> Name of School District/Joint Agreement: <b>ROCKDALE SCHOOL DISTRICT 84</b> Address: <b>715 MEADOW AVE</b> City: <b>ROCKDALE</b> Email Address:  Zip Code: <b>60436</b>	<input checked="" type="checkbox"/> CASH <input type="checkbox"/> ACCRUAL  <u>Filing Status:</u> <b>Submit electronic AFR directly to ISBE</b>  Click on the Link to Submit: <a href="#">Send ISBE a File</a>  <b>0</b>	Name of Auditing Firm: <b>GASSENSMITH &amp; MICHALESKO, LTD.</b> Name of Audit Manager: <b>JILL E GASSENSMITH</b> Address: <b>323 SPRINGFIELD</b> City: <b>JOLIET</b> State: <b>IL</b> Zip Code: <b>60435</b> Phone Number: <b>815-744-6200</b> Fax Number: <b>815-744-3822</b> IL License Number (9 digit): <b>066-004945</b> Expiration Date: <b>11/30/2021</b> Email Address:
<u>Annual Financial Report</u> Type of Auditor's Report Issued: <input type="checkbox"/> Qualified <input type="checkbox"/> Unqualified <input checked="" type="checkbox"/> Adverse <input type="checkbox"/> Disclaimer  <input type="checkbox"/> Reviewed by District Superintendent/Administrator	<u>Single Audit Status:</u> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Are Federal expenditures greater than \$750,000? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Is all Single Audit Information completed and attached? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Were any financial statement or federal award findings issued?  <input type="checkbox"/> Reviewed by Township Treasurer (Cook County only) Name of Township: _____	ISBE Use Only  <input type="checkbox"/> Reviewed by Regional Superintendent/Cook ISC
District Superintendent/Administrator Name (Type or Print): <b>DR. PAUL SCHRICK</b> Email Address: <a href="mailto:PSCHRICK@ROCKDALE84.ORG">PSCHRICK@ROCKDALE84.ORG</a> Telephone: <b>815-725-5321</b> Fax Number: <b>815-725-3631</b> Signature & Date:	Township Treasurer Name (type or print):  Email Address:  Telephone: Fax Number: Signature & Date:	Regional Superintendent/Cook ISC Name (Type or Print):  Email Address:  Telephone: Fax Number: Signature & Date:

\* This form is based on 23 Illinois Administrative Code 100, Subtitle A, Chapter I, Subchapter C (Part 100).  
**ISBE Form SD50-35/JA50-60 (05/19-version1)**

This form is based on 23 Illinois Administrative Code, Subtitle A, Chapter I, Subchapter C, Part 100.  
 In some instances, use of open account codes (cells) may not be authorized by statute or administrative rule.  
 Each school district or joint agreement is responsible for obtaining the concurring legal opinion and/or other supporting authorization/documentation, as necessary, to use the applicable account code (cell).