

**STATE OF CALIFORNIA  
MARKS-ROOS YEARLY FISCAL STATUS REPORT  
FOR LOCAL OBLIGORS**

California Debt and Investment Advisory Commission  
915 Capitol Mall, Room 400, Sacramento, CA 95814  
P.O. Box 942809, Sacramento, CA 94209-0001  
Tel: (916) 653-3269 FAX (916) 654-7440

Fiscal Year 2015

CDIAC # 1999-0003

California Government Code Section 6599.1 requires that all issuers selling Marks-Roos bonds, which is part of the Marks-Roos Local Bond Pooling Act of 1985, after January 1, 1996 are required to report specific information to the Commission by October 30<sup>th</sup> of the current year and each year thereafter, until maturity.

**Is this issue subject to both Marks-Roos and Mello-Roos Yearly Fiscal Status reporting requirements?** Yes  No

**I. GENERAL INFORMATION**

A. Local Obligor Issuer North Natomas Westlake CFD 2000-01

B. Name/Title/Series of Bond Issue 2013 Special Tax Revenue Bonds, Series A

C. Project Name North Natomas Westlake, Series A

D. Date of Bond Issue January 29, 2013

E. Original Principal Amount of Bonds \$8,455,000

F. Reserve Fund Minimum Balance Required Yes  Amount \$ 845,500.00 No

Part of Authority Reserve Fund Yes  Percent of Reserve Fund 35.94%

G. Name of Authority that purchased debt Sacramento City Financing Authority

H. Date of Authority Bond(s) Issuance January 29, 2013

**II. FUND BALANCE FISCAL STATUS**

Balances Reported as of: June 30, 2015 (Year)

A. Principal Amount of Bonds Outstanding \$ 7,340,000.00

B. Bond Reserve Fund \$ 854,378.22

C. Capitalized Interest Fund \$ \_\_\_\_\_

D. Administrative Fee Charged by Authority \$ 13,299.55

**III. DELINQUENT REPORTING INFORMATION**

Delinquent Parcel Information Reported as of Equalized Tax Roll of: 2015 (Date)

A. Delinquency Rate: 0.55% (Percent)

B. Are the Property Taxes Paid under the County's Teeter Plan:  Yes  No

C. Taxes Due: 739,392.06 (\$ Amount)

D. Taxes Unpaid: 4,063.24 (\$ Amount)

**IV. RETIRED ISSUES**

This issue is retired and not longer subject to the Yearly Fiscal Status report filing requirements. (Indicate reason for retirement)

A. Matured:  Yes  No If yes, indicate final maturity date: \_\_\_\_\_

B. Redeemed Entirely:  Yes  No If yes, state refunding bond title and CDIAC #: \_\_\_\_\_  
and redemption date: \_\_\_\_\_

C. Other: \_\_\_\_\_ and date \_\_\_\_\_

CDIAC Number 2012-1943

**V. NAME OF PARTY COMPLETING THIS FORM**

Name David Schroeder

Title Senior Consultant

Firm/Agency NBS

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**VI. COMMENTS:** \_\_\_\_\_

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