Submitted:

Tuesday, October 24, 2017

10:58:24AM

CDIAC #: 1999-0003

City/ State/ Zip

Temecula, CA 92592

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

For Office Use Only	
Fiscal Year	

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

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 30th of the currer

~	, after January 1, 1996 are required to report specific information to the Commission by October 30th of the	
rrent year and each yea  I. GENERAL INFOF	ar thereafter, until maturity.  RMATION	
A. Local Obligor	r Issuer Sacramento North Natomas CFD No 2	
B. Name/ Title/ S	Series of Bond Issue	
C. Project Name	e Series A	
D. Date of Bond	l Issue/Loan 12/17/1998	
E. Original Princ	cipal Amount of Bonds/Loan \$4,995,000.00	
F. Reserve Fund	d Minimum Balance Required Yes X Amount: \$606,875.00	No
Part of Autho	ority Reserve Fund Yes X Percent of Reserve fund: 100.0%	No
G. Name of Auth	hority that purchased debt	
H. Date of Author II. FUND BALANCE Balances Report		
A. Principal Amo	ount of Bonds/Loan Outstanding \$1,535,000.00 \$2,995,000.00	
B. Bond Reserve	re Fund \$612,067.33	
C. Capitalized In	nterest Fund \$0.00	
D. Administrative	re Fee Charged by Authority \$11,621.91	
-•-	REPORTING INFORMATION t Taxes been reported: Yes X No	
Delinquent Parce	cel Information Reported as of Equalized Tax Roll of: 6/30/2017	
A. Delinquency I	Rate 0.06% 0.04%	
B. Does this Age	ency participate in the County's Teeter Plan: Yes X No	
C. Taxes Due	\$424,379.72 \$581,128.40 [=338,167.04(att.D) + \$242,961.36 (att.F)]	
D. Taxes Unpaid	d \$252.84	
IV. ISSUE RETIRED This issue is reti Matured	D ired and no longer subject to the Yearly Fiscal Status report filing requirements. (Indicate reason for re Redeemed/Repaid Entirely ☐ Other ☐	tirement)
If Matured, indica	cate final maturity date:	
If Redeemed/Repa	paid Entirely, state refunding bond title/ Loan, and CDIAC#:	
and redemption/	/repayment date:	
If Other:		
and date:		
V. NAME OF PART Name	TY COMPLETING THIS FORM David Schroeder	
Title	Senior Consultant	
Firm/ Agency	NBS	
Address	32605 Temecula Parkway, Suite 100	

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Phone Number (800) 676-7516 Date of Report 10/24/2017

E-Mail CTO\_Debt@cityofsacramento.org

VI. COMMENTS: II.B. Based on market value basis.