Submitted:

II.

Name

Address City/ State/ Zip

E-Mail

Firm/ Agency

Phone Number

Title

Ted Ryan Debt Analyst

City of Sacramento

(916) 808-8296

Sacramento, CA 95814

cto_debt@cityofsacramento.org

915 I Street Historic City Hall, Third Floor

Friday, October 30, 2020

6:51:04PM

CDIAC #: 2016-1292

current year and each year thereafter, until maturity.

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

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

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2019-20 Fiscal Year

I. GENERAL INFORMATION	
A. Local Obligor Issuer	Sacramento County Redevelopment Agency
B. Name/ Title/ Series of Bond Issue	Loan Agreement
C. Project Name	Del Paso Heights
D. Date of Bond Issue/Loan E. Original Principal Amount of Bonds/Lo. F. Reserve Fund Minimum Balance Requestry Part of Authority Reserve Fund G. Name of Authority that purchased deb H. Date of Authority Bond(s) Issuance	ired Yes X Amount: \$1,020,000.00 Yes X Percent of Reserve fund: 31.02% No
. FUND BALANCE FISCAL STATUS	
Balances Reported as of : A. Principal Amount of Bonds/Loan Outst B. Bond Reserve Fund C. Capitalized Interest Fund D. Administrative Fee Charged by Author	\$2,347,519.88 \$0.00
III. DELINQUENT REPORTING INFORMATI	ON
Have delinquent Taxes been reported:	Yes 🖟 No 🗌
Delinquent Parcel Information Reported at A. Delinquency Rate B. Does this Agency participate in the Co C. Taxes Due D. Taxes Unpaid Sec. 300.61	unty's Teeter Plan: Yes X No X The agency does participate in the County's Teeter Plan.
IV. ISSUE RETIRED	
This issue is retired and no longer subjec Matured Redeemed/Repaid Er	t to the Yearly Fiscal Status report filing requirements. (Indicate reason for retirement)
If Matured, indicate final maturity date:	
If Redeemed/Repaid Entirely, state refunding	bond title/ Loan, and CDIAC#:
and redemption/repayment date:	
If Other: and date:	
V. NAME OF PARTY COMPLETING THIS F	ORM

10/30/2020

Date of Report

Submitted:

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Fiscal Year	_

VI. COMMENTS:

III.A-D. Information reported for FY 2018-19. FY 2019-20 information will be reported in a corrected filling, upon availability.

This filing updates and corrects information previously reported in section III. A-D. The previously reported information did not indicate that the reporting Agency participated in the County's Teeter Plan and reported FY 2018-19 information, as it was the most recent available at the time of filing. This corrected filing removes the FY 2018-19 data and replaces it with data from FY 2019-20.