

**STATE OF CALIFORNIA**  
**MARKS-ROOS YEARLY FISCAL STATUS REPORT**  
**FOR LOAN OBLIGATIONS**

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 <u>2014</u>
CDIAC # <u>2006-0179</u>

California Government Code Section 6599.1 requires that all issuers selling Mark-Roos bonds, which is part of the Mark-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.

**I. GENERAL INFORMATION**

A. Local Obligation Loan Recipient Redevelopment Agency of the City of Sacramento

B. Date of Loan 03/01/2006

C. Original Principal Amount of Loan \$ 3,735,000.00

D. Name of Authority Issuing Loan Sacramento City Financing Authority

E. Title of Authority Bond Issue 2006 Tax Allocation Revenue Bonds, Series B (Del Paso Heights Project)

F. Date of Authority Bond Issue 03/08/2006 CDIAC # 2006-0179

G. Reserve Fund Minimum Balance Required Yes  No  Amount \$ 793,276.84 (combined Series A&B, covered by surety)  
Part of Authority Reserve Fund Yes  Percent of Reserve Fund 44.89

**II. LOAN and FUND BALANCE FISCAL STATUS**

Balances Reported as of: June 30, 2014 (Year)

A. Principal Amount of Loan Outstanding \$ 2,190,000.00

B. Bond Reserve Fund \$ 793,276.84 (combined Series A&B, covered by surety)

C. Capitalized Interest Fund \$ n/a

**III. DELINQUENT REPORTING INFORMATION (Complete if Taxes are the Source of Repayment)**

Are Taxes the Source of Repayment for the Loan?  Yes  No

If "Yes" - Type of Tax: Tax Increment Revenues from the Del Paso Heights Project Area (post-dissolution, distributed via RPTTF)

Tax Collection Date: 12/10/2014 and 04/10/2014

A. Delinquency Rate n/a (Percent)

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

**IV. RETIRED ISSUES**

This loan has been repaid and is no longer subject to the Yearly Fiscal Status report filing requirements. (Indicate how repaid)  
n/a

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

Name Damien Charléty

Title Debt Analyst

Firm/Agency City of Sacramento Redevelopment Agency Successor Agency

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Preparer dc Reviewer CB