Submitted:

Tuesday, October 21, 2014 9:18:33AM

**NBS** 

32605 Temecula Parkway, Suite 100

Temecula, CA 92592

Firm/ Agency

City/ State/ Zip

Address

CDIAC #: 2005-1153

## 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 current year and each year thereafter, until maturity. No X Is this issue subject to both Marks-Roos and Mello-Roos Yearly Fiscal Status Reporting Requirements? I. GENERAL INFORMATION A. Local Obligor Issuer 2005 Ser Limited Oblig Imp Ref Bonds B. Name/ Title/ Series of Bond Issue C. Project Name Rose Ave/Hwy 101 Interchange AD No 96-1 7/29/2005 D. Date of Bond Issue \$5,855,000.00 E. Original Principal Amount of Bonds F. Reserve Fund Minimum Balance Required Amount: \$0.00 Part of Authority Reserve Fund Yes Percent of Reserve fund: 0.00% G. Name of Authority that purchased debt 7/29/2005 H. Date of Authority Bond(s) Issuance II. Fund Balance Fiscal Status Balances Reported as of: 6/30/2014 \$1,920,000.00 A. Principal Amount of Bonds Outstanding \$0.00 B. Bond Reserve Fund C. Capitalized Interest Fund \$0.00 D. Administrative Fee Charged by Authority \$0.00 III. DELINQUENT REPORTING INFORMATION 6/30/2014 Delinquent Parcel Information Reported as of Equalized Tax Roll of: 1.74% A. Delinquency Rate No X B. Are the Property Taxes Paid Under the County's Teeter Plan: \$736,517.48 C. Taxes Due \$12,780.88 D. Taxes Unpaid **IV. ISSUE RETIRED** This issue is retired and no longer subject to the Yearly Fiscal Status report filing requirements. (Indicate reason for retirement) Matured Redeemed Entirely Other If Matured, indicate final maturity date: If Redeemed Entirely, state refunding bond title and CDIAC#: and redemption date: If Other: and date: V. NAME OF PARTY COMPLETING THIS FORM Name Stephanie Parson Senior Consultant Title

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Phone Number (951) 296-1997 Date of Report 10/21/2014

E-Mail sparson@nbsgov.com

VI. COMMENTS: