Submitted:

II.

City/ State/ Zip

Newport Beach, CA 92660

Monday, October 30, 2017 4:55:49PM

4:55:49PM CDIAC #: 2012-1652

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

For Office Use Only	l
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.

	•	thereafter, until maturity.			
I. G	ENERAL INFORMA. Local Obligor Is	MATION			
	B. Name/ Title/ Series of Bond Issue 2012 Special Tax Ref Bonds				
	C. Project Name IA Nos 1, 3 & 5 Series A D. Date of Bond Issue/Loan 7/26/2012				
		pal Amount of Bonds/Loan \$3,265,000.00	No.		
		Minimum Balance Required Yes X Amount: \$227,747.50	No		
		ity Reserve Fund Yes X Percent of Reserve fund: 7.07%	No		
		ority that purchased debt Riverside Unified School District Financing Authority			
. FL	H. Date of Authori IND BALANCE F l Balances Reporte				
	A. Principal Amou	unt of Bonds/Loan Outstanding \$2,765,000.00			
	B. Bond Reserve	Fund \$0.00			
	C. Capitalized Inte	terest Fund \$0.00			
	D. Administrative	Fee Charged by Authority \$0.00			
		EPORTING INFORMATION Taxes been reported: Yes X No			
	Delinquent Parcel	el Information Reported as of Equalized Tax Roll of: 10/10/2017			
	A. Delinquency Rate 0.35%				
	B. Does this Agency participate in the County's Teeter Plan: Yes No X				
	C. Taxes Due	\$275,304.06			
	D. Taxes Unpaid	\$967.16			
	ISSUE RETIRED This issue is retire Matured	ed and no longer subject to the Yearly Fiscal Status report filing requirements. (Indicate reason for retire. Redeemed/Repaid Entirely Other	ment)		
	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:				
	NAME OF PARTY Name	Y COMPLETING THIS FORM Nehal Thumar			
	Title	Vice President			
	Firm/ Agency	David Taussig & Associates, Inc.			
	Address	5000 Birch Street, Suite 6000			

Submitted:

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Fiscal Year	_	

Phone Number (949) 955-1500 Date of Report 10/30/2017

E-Mail nthumar@taussig.com

VI. COMMENTS: