Submitted:

Monday, October 30, 2017 5:41:43PM

CDIAC #: 2012-1658

City/ State/ Zip

Newport Beach, CA 92660

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

For Office Use Only	1
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.

-	or 1985, after January 1, 1996 are required to report specific information to the Commission by October 30th of the	
	each year thereafter, until maturity. L INFORMATION	
A. Local	Obligor Issuer Riverside Unified School District CFD No 15	
B. Name	e/ Title/ Series of Bond Issue 2012 Special Tax Ref Bonds	
C. Proje	ct Name IA No 3 Series A	
D. Date	of Bond Issue/Loan 7/26/2012	
E. Origir	nal Principal Amount of Bonds/Loan \$4,440,000.00	
F. Resei	ve Fund Minimum Balance Required Yes X Amount: \$333,178.53	
Part o	of Authority Reserve Fund Yes X Percent of Reserve fund: 10.35% No	
G. Name	e of Authority that purchased debt Riverside Unified School District Financing Authority	
II. FUND BAI	of Authority Bond(s) Issuance 7/26/2012 LANCE FISCAL STATUS s Reported as of: 6/30/2017	
A. Princi	pal Amount of Bonds/Loan Outstanding \$4,045,000.00	
B. Bond	Reserve Fund \$0.00	
C. Capit	alized Interest Fund \$0.00	
D. Admi	nistrative Fee Charged by Authority \$0.00	
	UENT REPORTING INFORMATION linquent Taxes been reported: Yes No X	
Delinque	ent Parcel Information Reported as of Equalized Tax Roll of: 10/10/2017	
A. Deline	quency Rate 0.00%	
B. Does	this Agency participate in the County's Teeter Plan: Yes No X	
C. Taxes	s Due \$886,281.36	
D. Taxes	s Unpaid \$0.00	
IV. ISSUE F This issu Matured	ue is retired and no longer subject to the Yearly Fiscal Status report filing requirements. (Indicate reason for retirement))
If Mature	ed, indicate final maturity date:	
If Redeer	ned/Repaid Entirely, state refunding bond title/ Loan, and CDIAC#:	
and rede	emption/repayment date:	
If Other:		
and date		
V. NAME O Name	F PARTY COMPLETING THIS FORM Nehal Thumar	
Title	Vice President	
Firm/ Ag	ency David Taussig & Associates, Inc.	
Address	5000 Birch Street, Suite 6000	

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Fiscal Year

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

E-Mail nthumar@taussig.com

VI. COMMENTS: