

Municipal Secondary Market Disclosure Information Cover Sheet

This cover sheet should be sent with all submissions made to the Municipal Securities Rulemaking Board, Nationally Recognized Municipal Securities Information Repositories, and any applicable State Information Depository, whether the filing is voluntary or made pursuant to Securities and Exchange Commission rule 15c2-12 or any analogous state statute.

See www.sec.gov/info/municipal/nrmsir.htm for list of current NRMSIRs and SIDs

IF THIS FILING RELATES TO ALL SECURITIES ISSUED BY THE ISSUER OR ALL SECURITIES OF A SPECIFIC CREDIT or issued under a single indenture:

Issuer's Name (please include name of state where Issuer is located):

THE CITY OF SAN DIEGO, CALIFORNIA (OBLIGOR, PURSUANT TO CERTIFICATES OF PARTICIPATION);

Certificates of Participation (Balboa Park and Mission Bay Park Capital Improvements Program) Series 1996A

Refunding Certificates of Participation (Balboa Park and Mission Bay Park Capital Improvements Program, Series 1991) Series 1996B

2003 Certificates of Participation (1993 Balboa Park/Mission Bay Park Refunding) Evidencing Undivided Proportionate Interest in Lease Payments to be Made by the City of San Diego Pursuant to a Lease with the San Diego Facilities and Equipment Leasing Corporation

PUBLIC FACILITIES FINANCING AUTHORITY OF THE CITY OF SAN DIEGO (STATE: CALIFORNIA);

Taxable Lease Revenue Bonds, Series 1996A (San Diego Jack Murphy Stadium)

Lease Revenue Bonds, Series 2002B (Fire and Life Safety Facilities Project)

CONVENTION CENTER EXPANSION FINANCING AUTHORITY (STATE: CALIFORNIA)

Lease Revenue Bonds, Series 1998A (City of San Diego, California, as Lessee)

CITY OF SAN DIEGO/MTDB AUTHORITY (STATE: CALIFORNIA);

2003 Lease Revenue Refunding Bonds (San Diego Old Town Light Rail Transit Extension Refunding)

Other Obligated Person's Name (if any): _____
(Exactly as it appears on the Official Statement Cover)

Provide six-digit CUSIP* number(s), if available, of Issuer:

CITY OF SAN DIEGO, CALIFORNIA related CUSIP: 797260

PUBLIC FACILITIES FINANCING AUTHORITY OF THE CITY OF SAN DIEGO related CUSIP: 797299

CONVENTION CENTER EXPANSION FINANCING AUTHORITY related CUSIP: 79727L

CITY OF SAN DIEGO/MTDB AUTHORITY related CUSIP: 797448

*(Contact CUSIP's Municipal Disclosure Assistance Line at 212.438.6518 for assistance with obtaining the proper CUSIP numbers.)

TYPE OF FILING:

X Electronic 2 pages _____ Paper (no. of pages attached) _____

If information is also available on the Internet, give URL: **NOT AVAILABLE** _____

WHAT TYPE OF INFORMATION ARE YOU PROVIDING? (Check all that apply)

A. Annual Financial Information and Operating Data pursuant to Rule 15c2-12

B. Financial Statements or CAFR pursuant to Rule 15c2-12

C. Notice of a Material Event pursuant to Rule 15c2-12 (Check as appropriate)

- | | |
|---|---|
| 1. Principal and interest payment delinquencies | 6. Adverse tax opinions or events affecting the tax-exempt status of the security |
| 2. Non-payment related defaults | 7. Modifications to the rights of security holders |
| 3. Unscheduled draws on debt service reserves reflecting financial difficulties | 8. Bond calls |
| 4. Unscheduled draws on credit enhancements reflecting financial difficulties | 9. Defeasances |
| 5. Substitution of credit or liquidity providers, or their failure to perform | 10. Release, substitution, or sale of property securing repayment of the securities |
| | 11. Rating changes |

D. ☒ Notice of Failure to Provide the Annual Report for the fiscal year ended June 30, 2007.

E. Other Secondary Market Information (Specify): _____

I hereby represent that I am authorized by the issuer or obligor or its agent to distribute this information publicly:

Issuer Contact:

Name _____ **MARY LEWIS** _____ Title _____ **CHIEF FINANCIAL OFFICER** _____
Employer _____ **CITY OF SAN DIEGO** _____
Address _____ **202 C STREET, MAIL STATION 9A** _____ City _____ **SAN DIEGO** _____ State _____ **CA** _____ Zip Code _____ **92101**

Dissemination Agent Contact, if any:

Name: _____ **MARY LEWIS** _____ Title: _____ **CHIEF FINANCIAL OFFICER** _____
Employer: _____ **CITY OF SAN DIEGO** _____
Address: _____ **202 C STREET, MAIL STATION 9A** _____ City: _____ **SAN DIEGO** _____ State: _____ **CA** _____ Zip Code: _____ **92101**
Relationship to Issuer: _____ **DISCLOSURE REPRESENTATIVE** _____

Press Contact:

Name: _____ Title: _____
Telephone: _____ Fax: _____
