

STATE OF CALIFORNIA
MARKS-ROOS YEARLY FISCAL STATUS REPORT

FOR LOCAL OBLIGORS
California Debt and Investment Advisory Commission
915 Capitol Mall, Room 400, Sacramento, CA 95814
P.O. Box 942809, Sacramento, CA 94209-0001
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For Office Use Only
Fiscal Year FY 2013
CDIAC # 1999-0163

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.

Is this issue subject to both Marks-Roos and Mello-Roos Yearly Fiscal Status Reporting Requirements? Yes No

I. GENERAL INFORMATION

- A. Local Obligor Issuer City of San Diego
- B. Name/Title/Series of Bond Issue Reassessment District No. 1999-1 Limited Obligation Refunding Bonds
- C. Date of Bond Issue 02/23/1999
- D. Original Principal Amount of Bonds \$ 38,145,000.00
- E. Reserve Fund Minimum Balance Required Yes Amount \$ N/A No
Part of Authority Reserve Fund Yes Percent of Reserve Fund N/A
- F. Name of Authority that purchased debt City of San Diego Public Facilities Financing Authority
- G. Date of Authority Bond(s) Issuance 02/23/1999

II. FUND BALANCE FISCAL STATUS

- Balances Reported as of: June 30, 2013 (Year)
- A. Principal Amount of Bonds Outstanding \$ 6,979,923.00
- B. Bond Reserve Fund \$ N/A
- C. Capitalized Interest Fund \$ 0.00
- D. Administrative Fee Charged by Authority \$ 0.00

III. DELINQUENT REPORTING INFORMATION

- Delinquent Parcel Information Reported as of Equalized Tax Roll of: June 30, 2013 (Date)
- A. Delinquency Rate 1.96% (Percent)
- B. Are the Property Taxes Paid Under the County's Teeter Plan: Yes No
- C. Taxes Due: \$ 2,615,173.76 (\$ Amount)
- D. Taxes Unpaid: \$ 51,279.23 (\$ Amount)

IV. RETIRED ISSUES

This issue is retired and not longer subject to the Yearly Fiscal Status report filing requirements. (Indicate reason for retirement)

- A. Matured Yes No If yes, indicate final maturity date: _____
- B. Refunded Entirely Yes No If yes, state refunding bond title: _____
and issue date: _____
- C. Other: _____

V. NAME OF PARTY COMPLETING THIS FORM

NAME Robert Davis
TITLE Debt Coordinator
FIRM/AGENCY City of San Diego
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CITY/STATE/ZIP CODE San Diego, CA 92101
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