

Successor Agency Contact Information

Name of Successor Agency: Town of Danville
County: Contra Costa

Primary Contact Name: Elizabeth Hudson
Primary Contact Title: Finance Director
Address: 510 La Gonda Way, Danville, CA 94526
Contact Phone Number: (925) 314-3371
Contact E-Mail Address: ehudson@danville.ca.gov

Secondary Contact Name: Robert B. Ewing
Secondary Contact Title: City Attorney
Secondary Contact Phone Number: (925) 314-3383
Secondary Contact E-Mail Address: rewing@danville.ca.gov

SUMMARY OF RECOGNIZED OBLIGATION PAYMENT SCHEDULE

Filed for the January 1, 2013 to June 30, 2013 Period

Name of Successor Agency: Town of Danville

	Total Outstanding Debt or Obligation
Outstanding Debt or Obligation	\$ 20,056,540.55
Current Period Outstanding Debt or Obligation	Six-Month Total
A Available Revenues Other Than Anticipated RPTTF Funding	\$ 3,300.00
B Enforceable Obligations Funded with RPTTF	\$ 574,446.00
C Administrative Allowance Funded with RPTTF	\$ -
D Total RPTTF Funded (B + C = D)	\$ 574,446.00
Total Current Period Outstanding Debt or Obligation (A + B + C = E) <i>Should be same amount as ROPS form six-month total</i>	\$ 577,746.00
E Enter Total Six-Month Anticipated RPTTF Funding	\$ 574,446.00
F Variance (D - E = F) <i>Maximum RPTTF Allowable should not exceed Total Anticipated RPTTF Funding</i>	\$ -
Prior Period (January 1, 2012 through June 30, 2012) Estimated vs. Actual Payments (as required in HSC section 34186 (a))	
G Enter Estimated Obligations Funded by RPTTF <i>(Should be the same amount as RPTTF approved by Finance, including admin allowance)</i>	\$ 323,486.00
H Enter Actual Obligations Paid with RPTTF	\$ 324,486.00
I Enter Actual Administrative Expenses Paid with RPTTF	\$ -
J Adjustment to Redevelopment Obligation Retirement Fund (G - (H + I) = J)	\$ (1,000.00)
K Adjustment to RPTTF	\$ 575,446.00

Certification of Oversight Board Chairman:
Pursuant to Section 34177(m) of the Health and Safety code,
I hereby certify that the above is a true and accurate Recognized
Obligation Payment Schedule for the above named agency.

	Name
	Title
	Date
	Signature

