OHE	CTIONS DECAD	DINC E	CONOMIC CONDITIONS	DATE F	REPARED:	10/24/2018				
WOE.	STIONS REGAR	DING E	CONOMIC CONDITIONS							
	Yes	No	Since the last filing:							
1.		Х		Has any employer that accounts for 15 % or more of the employment in the area closed or significantly reduced operations since the previous report? If yes, please provide details on page 2.						
2.		Х	Has your entity experienced a coassessed valuation in the past to		ease of 10% or more in population or ovide details on page 2.					
3.		Х		s there been any significant event(s) in the region which could affect your entity positively? ves, please provide details on page 2.						
4.		Х	Has there been any significant event(s) in the region which could affect your entity negatively?  If yes, please provide details on page 2.							
5.		Х	Has anything significant occurred lf yes, please provide details on		xpected level of revenues?					
QUE	STIONS REGAR	DING O	PERATIONS							
6.	Has the ending fund balance in your general (principal operating) fund had an unexplained, unbudgeted, or unanticipated decline for the past two fiscal years? If yes, please provide details on page 2.									
7.		Х	Has the entity entered into any n		ee the previous report?					
8.		X	Has the entity borrowed money t		5?					
9.		Х	Has the entity made an interfund If yes, please provide details on		operations?					
10.		X			nmental agencies for the benefits of its employe If yes, please provide details on page 2.	es,				
11.		X	Has the entity failed to make time If yes, please provide details on		ce, to vendors or others?					
12.		X	Has the entity augmented the ap		y proprietary fund since the previous report?					
3.	Cash and cash (Enterprise Fur		ents (unaudited) as of quarter	ending	9/30/2018					
	(Enterprise Fur	iu(s) On	Prior Year	Current Year						
		-	18,660,699	20,707,084						
4.	General Fund f	Ending E	Balance as of quarter ending _ Prior Year	Current Year	9/30/2018					
		-	6,081,436	7,402,438	3					
5.			ents (unaudited) as of quarter	ending	9/30/2018					
	(General Fund	Offig)	Prior Year	Current Year						
		-	12,921,882	13,811,757						

QUARTER ENDING:

9/30/2018

**ENTITY**:

**Douglas County** 

1-6.					
•					
7.		Date	Туре	Amount \$	<u>-</u>
8.		Date	Lender	Amount	
9.	Date	From Fund	To Fund	Amount	
10-11.					
12.		Date	Fund	Amount	
13-15.					
PREP	ARED BY:	Kathy Kaiser, Senior B Name/	udget Analyst Title	Latu Le Signature	
PERS	ON SIGNING CERT	IFIES ALL INFORMATION	PROVIDED IS TRUE & CORRECT I	FOR THE PERIOD INDICATED.	
REVIE	WED BY:	Terri Willoughby, Chief	f Finanicial Officer	JAA Signature	

ENTI'	TY:	Douglas	County Redevelopment Agency	QUARTI	ER ENDING:	9/30/2018
QUES	STION	S REGAR	DING ECONOMIC CONDITIONS		PREPARED:	10/24/2018
	Yes					
1.		] <u></u>	-		e employment in the area closed or significantly lease provide details on page 2.	
2.		X	Has your entity experienced a cur assessed valuation in the past two		ecrease of 10% or more in population or e provide details on page 2.	
3.		<u> </u>	Has there been any significant events of the second of the		ich could affect your entity positively?	
4.		<u> </u>	Has there been any significant events of the second of the		ich could affect your entity negatively?	
5.		X	Has anything significant occurred If yes, please provide details on page 1	*	ir expected level of revenues?	}
QUE	OITS	IS REGAR	DING OPERATIONS			
6.		X			perating) fund had an unexplained, unbudgeted yes, please provide details on page 2.	,
7.		<u> </u>	Has the entity entered into any ne		since the previous report?	
		<u> </u>	Has the entity borrowed money to If yes, please provide details on page 1	· -	ions?	
9.		X	Has the entity made an interfund lift yes, please provide details on page 1		nt operations?	
10.		X		•	overnmental agencies for the benefits of its employer.)? If yes, please provide details on page 2.	oyees,
11.		X	Has the entity failed to make timel If yes, please provide details on pa		ervice, to vendors or others?	
12.		X	Has the entity augmented the app		any proprietary fund since the previous report?	
13.			equivalents (unaudited) as of qua	arter ending	:	
	(Ent	erprise Fui	nd(s) Only) <u>Prior Year</u>	Current Year		
			n/a	n/a		
14.	Gen	eral Fund I	Ending Balance (unaudited) as of <u>Prior Year</u>	quarter ending Current Year	9/30/2018	
			1,016,483	20,986		
		h and cash neral Fund	equivalents (unaudited) as of qua	arter ending	9/30/2018	
	•		Prior Year	Current Year		
			1,217,490	361,172		

1-6					_
					_
					_
7.		Date	Туре	Amount	<u> </u>
8.		Date	Lender	Amount	
9.	Date	From Fund	To Fund	Amount	_ _]
0-11					_ _ _
-					′  
12.		Date	Fund	Amount	
3-15					
					<u> </u>
PREPAR	ED BY:	Kathy Kaiser, Senior B Name	sudget Analyst Title	Kathuy Kignature	
PERSON	SIGNING (	CERTIFIES ALL INFORMA	ATION PROVIDED IS TRUE & CO	DRRECT FOR THE PERIOD INDICATED.	
REVIEWI	ED BY:	Terri Willoughby, Chie Name	f Finanicial Officer Title	Leud M Signature	

ENTI	TY:	Redevelopment Agency Area 2	QUARTER	ENDING:	9/30/2018			
QUES	STION	IS REGARDING ECONOMIC CONDITION	DATE PRI	EPARED:	10/24/2018			
	Yes	No Since the last filing:						
1.		X Has any employer that account reduced operations since the p		nployment in the area closed or significante provide details on page 2.	tty			
2.		X Has your entity experienced a assessed valuation in the past		ease of 10% or more in population or ovide details on page 2.				
3.			Has there been any significant event(s) in the region which could affect your entity positively?  If yes, please provide details on page 2.					
4.		X Has there been any significant If yes, please provide details o		could affect your entity negatively?				
5.		X Has anything significant occur If yes, please provide details o	•	spected level of revenues?				
QUE	STION	NS REGARDING OPERATIONS						
6.				rating) fund had an unexplained, unbudge s, please provide details on page 2.	ited,			
7.		X Has the entity entered into any If yes, please provide details o		e the previous report?				
		X Has the entity borrowed money If yes, please provide details o		i?				
9.		Has the entity made an interful If yes, please provide details o		perations?				
10.				nmental agencies for the benefits of its er If yes, please provide details on page 2.	mployees,			
11.		X Has the entity failed to make till If yes, please provide details of	• • •	e, to vendors or others?				
12.		X Has the entity augmented the a		y proprietary fund since the previous repo	ort?			
13.		h and cash equivalents (unaudited) as of	quarter ending					
	(Ent	erprise Fund(s) Only) <u>Prior Year</u>	Current Year					
		n/a	n/a					
14.	Gen	eral Fund Ending Balance (unaudited) as <u>Prior Year</u>	of quarter ending9	/30/2018				
		102,708	155,090					
		h and cash equivalents (unaudited) as of neral Fund Only)	quarter ending9	/30/2018				
	(00)	Prior Year	Current Year					
		227,000	324,894					

1-6.				
7.		Date	Туре	Amount
8.		Date	Lender	Amount
9.	Date	From Fund	To Fund	Amount
10-11.				
12.		Date	Fund	Amount
13-15.				
PREP	ARED BY:	Kathy Kaiser, Senior E Name	Budget Analyst /Title	Signature
PERS	ON SIGNING (	CERTIFIES ALL INFORM	ATION PROVIDED IS TRUE & C	ORRECT FOR THE PERIOD INDICATED.
REVIE	EWED BY:	Terri Willoughby, Chie Name	of Finanicial Officer	Signature Signature

ENTITY:	Town of M	linden	QUARTER ENDING:	9/30/2018
QUESTI	ONS REGARD	ING ECONOMIC COND	DATE PREPARED:	10/24/2018
Y	es No	Since the last filing:		
1.	X		counts for 15 % or more of the employment in the area closed or sign the previous report? If yes, please provide details on page 2.	ificantly
2.	X		ed a cumulative increase or decrease of 10% or more in population of past two years? If yes, please provide details on page 2.	r
3.	X	Has there been any signific If yes, please provide detail	cant event(s) in the region which could affect your entity positively? ils on page 2.	
4.	X	Has there been any signific If yes, please provide detail	cant event(s) in the region which could affect your entity negatively? ils on page 2.	
5.	х	Has anything significant oc If yes, please provide detai	ccurred which could affect your expected level of revenues?	
QUESTI	ONS REGARD	DING OPERATIONS		
6.	Х		ce in your general (principal operating) fund had an unexplained, unb r the past two fiscal years? If yes, please provide details on page 2.	oudgeted,
7.	Х	Has the entity entered into If yes, please provide detai	any new debt arrangements since the previous report?	
	х	Has the entity borrowed mo	oney to pay for current operations? ils on page 2.	
9.	X	Has the entity made an inte	erfund loan(s) to pay for current operations?	
10.	х		timely any contributions to governmental agencies for the benefits of men's Comp or Federal taxes)? If yes, please provide details on pag	
11.	X	Has the entity failed to mak If yes, please provide detail	te timely payments for debt service, to vendors or others? Is on page 2.	
12.	X	Has the entity augmented the last the entity augmented the last th	he appropriated expenses for any proprietary fund since the previous is on page 2.	s report?
	ash and cash e Enterprise Fund		s of quarter ending 9/30/2018	
		Prior Year	<u>Current Year</u>	
		6,628,786	8,763,825	
14. G	eneral Fund E	nding Balance (unaudited) <u>Prior Year</u>	) as of quarter ending9/30/2018 Current Year	
		362,878	444,752	
	ash and cash e Seneral Fund C		<u></u>	
		<u>Prior Year</u>	<u>Current Year</u>	
		1,335,667	1,000,742	

1-6.		
7.	Date Type	Amount
8.	Date Lender	Amount
6.	Date	
9. Date	From Fund To Fund	Amount
10-11. 		
12.	Date Fund # Fund	Amount
13-15.		
		,
PREPARED BY:	Kathy Kaiser, Senior Budget Analyst Name/Title	Signature
PERSON SIGNIN	G CERTIFIES ALL INFORMATION PROVIDED IS TRUE &	CORRECT FOR THE PERIOD INDICATED.
REVIEWED BY:	Terri Willoughby, Chief Finanicial Officer Name/Title	Signature

ENTITY:	Town of Genoa	QUARTER ENDING:	9/30/2018
QUESTIO	NS REGARDING ECONOMIC (	DATE PREPARED:	10/24/2018
Ye			
1.		that accounts for 15 % or more of the employment in the area closed or significations in the previous report? If yes, please provide details on page 2.	ificantly
2.		erienced a cumulative increase or decrease of 10% or more in population or in the past two years? If yes, please provide details on page 2.	
3.		significant event(s) in the region which could affect your entity positively? de details on page 2.	
4.		significant event(s) in the region which could affect your entity negatively? de details on page 2.	
5.	<del></del>	cant occurred which could affect your expected level of revenues? de details on page 2.	
QUESTIC	ONS REGARDING OPERATIONS	<b>S</b>	
6.		d balance in your general (principal operating) fund had an unexplained, unb cline for the past two fiscal years? If yes, please provide details on page 2.	udgeted,
7.	X Has the entity entere	ed into any new debt arrangements since the previous report? le details on page 2.	
	X Has the entity borrow	wed money to pay for current operations? le details on page 2.	
9.	X Has the entity made	e an interfund loan(s) to pay for current operations? le details on page 2.	
10.		to pay timely any contributions to governmental agencies for the benefits of , Workmen's Comp or Federal taxes)? If yes, please provide details on page	
11.	X Has the entity failed If yes, please provid	to make timely payments for debt service, to vendors or others? le details on page 2.	
12.	X Has the entity augm	ented the appropriated expenses for any proprietary fund since the previous le details on page 2.	report?
	sh and cash equivalents (unaudit nterprise Fund(s) Only)	ted) as of quarter ending:	
	<u>Prior Year</u>	Current Year	
	n/a	n/a	
l4. Ge	neral Fund Ending Balance (una <u>Prior Year</u>	udited) as of quarter ending9/30/2018 Current Year	
_	114,715	241,649	
	sh and cash equivalents (unaudit eneral Fund Only)		
	<u>Prior Year</u>	Current Year	
	463,369	347,711	

## DETAILS OF POSITIVE RESPONSES TO QUESTIONS ON PAGE 1 1-6. Туре **Amount** Date 7. Amount Lender Date 8. To Fund Amount 9. Date From Fund 10-11. Fund Amount 12. Date 13-15.

PREPARED BY:

Kathy Kaiser, Senior Budget Analyst

PERSON SIGNING CERTIFIES ALL INFORMATION PROVIDED IS TRUE & CORRECT FOR THE PERIOD INDICATED.

**REVIEWED BY:** 

Terri Willoughby, Chief Finanicial Officer

Name/Title

ENTITY:		Town of Gai	rdnerville	QUARTER ENDING:	9/30/2018		
QUE	STIONS	S REGARDIN	NG ECONOMIC CONI	DATE PREPARED:	10/24/2018		
,	Yes	No	Since the last filing:				
1.				ccounts for 15 % or more of the employment in the area closed on the previous report? If yes, please provide details on page 2.	or significantly		
2.				ced a cumulative increase or decrease of 10% or more in popula past two years? If yes, please provide details on page 2.	ition or		
3.		Has there been any significant event(s) in the region which could affect your entity positively?  If yes, please provide details on page 2.					
4.			Has there been any signi If yes, please provide det	ficant event(s) in the region which could affect your entity negati	vely?		
5.			Has anything significant of the second of th	occurred which could affect your expected level of revenues?			
QUE	STION	S REGARDII	NG OPERATIONS				
6.				nce in your general (principal operating) fund had an unexplaine for the past two fiscal years? If yes, please provide details on pa			
7.			Has the entity entered into	o any new debt arrangements since the previous report? ails on page 2.			
			Has the entity borrowed n	noney to pay for current operations? ails on page 2.			
9.			Has the entity made an in	nterfund loan(s) to pay for current operations? ails on page 2.			
10.				y timely any contributions to governmental agencies for the bene kmen's Comp or Federal taxes)? If yes, please provide details o			
11.			Has the entity failed to ma	ake timely payments for debt service, to vendors or others?			
12.			Has the entity augmented fyes, please provide deta	the appropriated expenses for any proprietary fund since the prails on page 2.	evious report?		
13.		and cash eq erprise Fund(s		es of quarter ending9/30/2018  Current Year			
			913,508	482,203			
14.	Gene	eral Fund End	ling Balance (unaudited Prior Year	d) as of quarter ending 9/30/2018 Current Year			
		_	435,149	684,796			
		and cash eq eral Fund On	uivalents (unaudited) a	as of quarter ending9/30/2018			
			Prior Year	Current Year			
			914.543	597.923	<u>:</u>		

# DETAILS OF POSITIVE RESPONSES TO QUESTIONS ON PAGE 1 1-6. Amount 7. Date Туре Amount Lender 8. Date Amount To Fund 9. Date From Fund 10-11. Amount 12. Date Fund# Fund 13-15. Kathy Kaiser, Senior Budget Analyst PREPARED BY: Name/Title PERSON SIGNING CERTIFIES ALL INFORMATION PROVIDED IS TRUE & CORRECT FOR THE PERIOD INDICATED. Signature

**REVIEWED BY:** 

Terri Willoughby, Chief Finanicial Officer Name/Title

ENTIT	ΓY:	East Fork Fire Protection District QUARTER ENDING: 9	/30/2018
QUES	NOITE	DATE PREPARED: 10, S REGARDING ECONOMIC CONDITIONS	/24/2018
4020			
	Yes	No Since the last filing:	
1.		X Has any employer that accounts for 15 % or more of the employment in the area closed or significantly reduced operations since the previous report? If yes, please provide details on page 2.	
2.		X Has your entity experienced a cumulative increase or decrease of 10% or more in population or assessed valuation in the past two years? If yes, please provide details on page 2.	
3.		X Has there been any significant event(s) in the region which could affect your entity positively? If yes, please provide details on page 2.	
4.		X Has there been any significant event(s) in the region which could affect your entity negatively? If yes, please provide details on page 2.	
5.		X Has anything significant occurred which could affect your expected level of revenues?  If yes, please provide details on page 2.	
QUE	STIOI	NS REGARDING OPERATIONS	
6.		X Has the ending fund balance in your general (principal operating) fund had an unexplained, unbudgeted, or unanticipated decline for the past two fiscal years? If yes, please provide details on page 2.	
7.		Has the entity entered into any new debt arrangements since the previous report?  If yes, please provide details on page 2.	
8.		Has the entity borrowed money to pay for current operations?  If yes, please provide details on page 2.	
9.		Has the entity made an interfund loan(s) to pay for current operations?  If yes, please provide details on page 2.	
10.		Has the entity failed to pay timely any contributions to governmental agencies for the benefits of its employed (for example, PERS, Workmen's Comp or Federal taxes)? If yes, please provide details on page 2.	es,
11.		Has the entity failed to make timely payments for debt service, to vendors or others?  If yes, please provide details on page 2.	
12.		Has the entity augmented the appropriated expenses for any proprietary fund since the previous report?  If yes, please provide details on page 2.	
13.	Cas	sh and cash equivalents (unaudited) as of quarter ending:	
	(En	terprise Fund(s) Only) Prior Year Current Year	
		n/a n/a	
14.	Ger	neral Fund Ending Balance (unaudited) as of quarter ending 9/30/2018  Prior Year Current Year	
		1,644,326 1,862,006	
15.		th and cash equivalents (unaudited) as of quarter ending 9/30/2018	
	(Ge	neral Fund Only) Prior Year Current Year	

2,641,798

1,919,203

1-6.					
					—
					_
7.		Date	Туре	Amount	
					—
8.		Date	Lender	Amount	
					—
9.	Date	From Fund	To Fund	Amount	
				-	—
10-11.					
					_
	-				—
	-				_
12.		Date	Fund	Amount	
			<del></del>		—
					_
13-15.					
					—
					_
PREP	ARED BY:	Kathy Kaiser, Budget	Analyst		
		Name	/Title	Signature	
DEDG	ON SIGNING	PEDTIFIES ALL INFORM	ATION PROVIDED IS TRUE 9 OF	DRRECT FOR THE PERIOD INDICATED.	
- ⊏ へる	ON SIGNING (	JENTIFIES ALL INFURIM	ATION PROVIDED IS TRUE & CO	JANEOT FOR THE FERIOD INDICATED.	
REVIE	WED BY:	Christine Vuletich, Ass	sistant County Manager/ CFO		
		Name	/Title	Signature	