

SUCCESSOR AGENCY CONTACT INFORMATION

Successor Agency

ID: **365**
County: **Stanislaus**
Successor Agency: **Newman**

Primary Contact

Honorific (Ms, Mr, Mrs)	
First Name	Lewis
Last Name	Humphries
Title	Finance Director
Address	938 Fresno Street
City	Newman
State	CA
Zip	95360
Phone Number	209-862-3725
Email Address	lhumphries@cityofnewman.com

Secondary Contact

Honorific (Ms, Mr, Mrs)	
First Name	Michael
Last Name	Holland
Title	City Manager
Phone Number	209-862-3725
Email Address	mholland@cityofnewman.com

SUMMARY OF RECOGNIZED OBLIGATION PAYMENT SCHEDULE

Filed for the July 1, 2013 to December 31, 2013 Period

Name of Successor Agency: **NEWMAN (STANISLAUS)**

Outstanding Debt or Obligation	Total
Total Outstanding Debt or Obligation	\$7,988,484

Current Period Outstanding Debt or Obligation	Six-Month Total
A Available Revenues Other Than Anticipated RPTTF Funding	\$0
B Enforceable Obligations Funded with RPTTF	\$316,008
C Administrative Allowance Funded with RPTTF	\$82,556
D Total RPTTF Funded (B + C = D)	\$398,564
E Total Current Period Outstanding Debt or Obligation (A + B + C = E) <i>Should be same amount as ROPS form six-month total</i>	\$398,564
F Enter Total Six-Month Anticipated RPTTF Funding	\$0
G Variance (F - D = G) <i>Maximum RPTTF Allowable should not exceed Total Anticipated RPTTF Funding</i>	(\$398,564)

Prior Period (July 1, 2012 through December 31, 2012) Estimated vs. Actual Payments (as required in HSC section 34186 (a))

H Enter Estimated Obligations Funded by RPTTF <i>(lesser of Finance's approved RPTTF amount including admin allowance or the actual amount distributed)</i>	\$225,242
I Enter Actual Obligations Paid with RPTTF	\$189,289
J Enter Actual Administrative Expenses Paid with RPTTF	\$80,005
K Adjustment to Redevelopment Obligation Retirement Fund (H - (I + J) = K)	\$0
L Adjustment to RPTTF (D - K = L)	\$398,564

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.

Don Hutchins	Chairman
Name	Title
/s/ 	2/14/2013
Signature	Date

