# REPORT OF INDEBTEDNESS MADE TO THE ARIZONA DEPARTMENT OF REVENUE

Office of Economic Research and Analysis / 9th Floor

(ARS 35-501, 35-502)

| | | | | Type M/DD/YY | | Principal Only | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| | Name of County or District Bonded | Bond Type | Purpose of Issue | Date of Issue | Date of Maturity | Original Principal Amount | Principal Amount Retired | Amount Refunded | Outstanding Principal | 7/1/14 Payment | 7/1/13 Payment | GO Debt LIMIT | Interest Paid in FY14 | Interest Paid to Date |
| 1 | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | | | |

I, _____, Chief Financial Officer of _____, in the County of
(Name) (Policital Subdivision)

_____, do hereby certify that the foregoing statement is a full, true, and correct abstract of the bonded indebtedness as of June 30, 2014.
(County)

SIGNATURE _____ DATE _____

| ADDRESS | | PHONE NUMBER | FAX NUMBER |
|---|---|---|---|
| CONTACT NAME (for questions) | PHONE NUMBER | E-MAIL ADDRESS | |

ADOR 10964 (6/14)

Print Page

# REPORT OF INDEBTEDNESS MADE TO THE ARIZONA DEPARTMENT OF REVENUE

| | | | | Type M/DD/YY | | Principal Only | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| | Name of County or District Bonded | Bond Type | Purpose of Issue | Date of Issue | Date of Maturity | Original Principal Amount | Principal Amount Retired | Amount Refunded | Outstanding Principal | 7/1/14 Payment | 7/1/13 Payment | GO Debt LIMIT | Interest Paid in FY14 | Interest Paid to Date |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |



Print Page

Clear Page