ENTIT	Y: .	Douglas County		QUARTE	R ENDING:	12/31/2019	
OHEST	LIONS	PECADDING E	CONOMIC CONDITIONS	DATE P	REPARED:	5/13/2020	
QUEST	Yes		Since the last filing:				
1.			·		ployment in the area closed or significantle provide details on page 2.	у	
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.		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.		Х	Has there been any significant ev If yes, please provide details on p		could affect your entity negatively?		
5.		Х	Has anything significant occurred If yes, please provide details on p	•	pected level of revenues?		
QUES	TIONS	S REGARDING OI	PERATIONS				
6.		Х	•		ating) fund had an unexplained, unbudgete , please provide details on page 2.	ed,	
7.		Х	Has the entity entered into any ne If yes, please provide details on p	-	e the previous report?		
8.		Х	Has the entity borrowed money to If yes, please provide details on p		?		
9.		Х	Has the entity made an interfund If yes, please provide details on p		perations?		
10.		Х		-	nmental agencies for the benefits of its en f yes, please provide details on page 2.	nployees,	
11.		Х	Has the entity failed to make time If yes, please provide details on p		ee, to vendors or others?		
12.		Х	Has the entity augmented the app		y proprietary fund since the previous repo	rt?	
13.			ents (unaudited) as of quarter e ly) - Amounts represent a comb <u>Prior Year</u>		12/31/2019		
		-	19,103,069	22,292,666			
14.	Gene	eral Fund Ending B	salance as of quarter ending Prior Year	: <u>Current Year</u>	12/31/2019		
		-	7,832,057	12,168,855			
15.		and cash equivale eral Fund Only)	ents (unaudited) as of quarter e	ending	12/31/2019		
	(301)	orar r und Only)	Prior Year	Current Year			

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14,463,627

17,067,591

-6.			
	Date	Туре	\$ -
	Date	Lender	Amount
Date	From Fund	To Fund	Amount
1			
	Date	Fund	Amount
5			
PARED BY:	Jenni Cartwright, Finan Name/	ce Manager Title	Jenni Cartwright Signature
SON SIGNING CE	RTIFIES ALL INFORMATION	PROVIDED IS TRUE & CORRECT FO	OR THE PERIOD INDICATED.
VIEWED BY:	Terri Willoughby, Chief Name/	Finanicial Officer Title	Signature

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ENTIT	Y :	Town of Ga	ardnerville	QUARTI	ER ENDING:	12/31/2019
OUES:	TIONS	N DECARD	INC ECONOMIC CONF		PREPARED:	5/13/2020
QUES			Since the last filing:	ITIONS		
_	Yes	No 	Since the last filing:			
1.		Х			ne employment in the area closed or significate please provide details on page 2.	intly
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.	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.		Х	Has there been any signif	` '	which could affect your entity negatively?	
5.		Χ	Has anything significant o	•	our expected level of revenues?	
QUES	TION	S REGARD	ING OPERATIONS			
6.		X		· · · · · · · · · · · · · · · · ·	l operating) fund had an unexplained, unbudg If yes, please provide details on page 2.	geted,
7.	Has the entity entered into any new debt arrangements since the previous report? If yes, please provide details on page 2.					
8.		X	Has the entity borrowed n	noney to pay for current oper ails on page 2.	rations?	
9.		X	Has the entity made an in	iterfund loan(s) to pay for cur ails on page 2.	rent operations?	
10.		X			governmental agencies for the benefits of its es)? If yes, please provide details on page 2	
11.		Χ	Has the entity failed to ma		service, to vendors or others?	
12.		Х	Has the entity augmented If yes, please provide details		for any proprietary fund since the previous re	port?
13.			equivalents (unaudited) a d(s) Only) - Amounts rep <u>Prior Year</u>		12/31/2019	
			508,834	632,257		
14.	Gene	eral Fund E	nding Balance (unaudite <u>Prior Year</u>	d) as of quarter ending Current Year	12/31/2019	
			1,105,876	743,314		
15.			equivalents (unaudited) a	as of quarter ending	12/31/2019	
	(Gen	eral Fund (Only) <u>Prior Year</u>	<u>Current Year</u>		
			716,172	832,171		

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7.	Date Type	Amount
	Date	Amount
3.	Date Lender	Amount
Date	From Fund To Fund	Amount
-11		
2.	Date Fund # Fund	Amount
	<u> </u>	
15		
		Janui Carturialit
EPARED BY:	Jenni Cartwright, Finance Manager Name/Title	Jenni Cartwright Signature
RSON SIGNING	CERTIFIES ALL INFORMATION PROVIDED IS T	RUE & CORRECT FOR THE PERIOD INDICATED.
VIEWED BY:	Terri Willoughby, Chief Finanicial Officer Name/Title	Signature

TY:	Town of Genoa	QUARTER ENDING:	12/31/2019
STION	IS REGARDING ECONOMIC	DATE PREPARED:	5/13/2020
		-	nificantly
			or
			•
		·	
STION	NS REGARDING OPERATION	IS	
			=
	<u> </u>		
			us report?
	•	dited) as of quarter ending: <u>Current Year</u>	
	n/a	n/a	
Ger	neral Fund Ending Balance (un <u>Prior Year</u>	audited) as of quarter ending <u>12/31/2019</u> Current Year	
	174,718	212,138	
	neral Fund Only)		
	<u>Prior Year</u>	<u>Current Year</u>	
	Yes Cas (En	STIONS REGARDING ECONOMIC Yes No Since the last fili X Has any employer reduced operation X Has your entity exassessed valuation X Has there been and if yes, please proving the yes, please provi	STIONS REGARDING ECONOMIC CONDITIONS Yes No Since the last filing: X Has any employer that accounts for 15 % or more of the employment in the area closed or signeduced operations since the previous report? If yes, please provide details on page 2. X Has your entity experienced a cumulative increase or decrease of 10% or more in population assessed valuation in the past two years? If yes, please provide details on page 2. 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. 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. X Has anything significant occurred which could affect your expected level of revenues? If yes, please provide details on page 2. STIONS REGARDING OPERATIONS X Has the ending fund balance in your general (principal operating) fund had an unexplained, ure or unanticipated decline for the past two fiscal years? If yes, please provide details on page 2. X Has the entity entered into any new debt arrangements since the previous report? If yes, please provide details on page 2. X Has the entity borrowed money to pay for current operations? If yes, please provide details on page 2. X Has the entity made an interfund loan(s) to pay for current operations? If yes, please provide details on page 2. X Has the entity failed to pay timely any contributions to governmental agencies for the benefits (for example, PERS, Workmen's Comp or Federal taxes)? If yes, please provide details on page 2. X Has the entity failed to make timely payments for debt service, to vendors or others? If yes, please provide details on page 2. Cash and cash equivalents (unaudited) as of quarter ending

1-6.			
7.	Date	Туре	Amount
8.	Date	Lender	Amount
9. Date	From Fund	To Fund	Amount
0-11			
12.	Date	Fund	Amount
3-15			
PREPARED BY:	Jenni Cartwright, Fina	nce Manager	Jenni Cartwright
TILLE DI.	Name	/Title	Jenni Cartwright Signature
ERSON SIGNING	CERTIFIES ALL INFORM	ATION PROVIDED IS TRUE & C	ORRECT FOR THE PERIOD INDICATED.
REVIEWED BY:	Terri Willoughby, Chie Name	f Finanicial Officer	
	Name	/Title	Signature

QUESTIONS REGARDING ECONOMIC CONDITIONS DATE PREPARED:	5/13/2020					
Yes No Since the last filing:						
1. Has any employer that accounts for 15 % or more of the employment in the area reduced operations since the previous report? If yes, please provide details on p						
2. Has your entity experienced a cumulative increase or decrease of 10% or more in assessed valuation in the past two years? If yes, please provide details on page						
3. Has there been any significant event(s) in the region which could affect your entit lf yes, please provide details on page 2.	ty positively?					
4. Has there been any significant event(s) in the region which could affect your entit lf yes, please provide details on page 2.	ty negatively?					
5. Has anything significant occurred which could affect your expected level of reven lf yes, please provide details on page 2.	nues?					
QUESTIONS REGARDING OPERATIONS						
6. Has the ending fund balance in your general (principal operating) fund had an un or unanticipated decline for the past two fiscal years? If yes, please provide deta						
7. Has the entity entered into any new debt arrangements since the previous report lf 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. X Has the entity failed to pay timely any contributions to governmental agencies for (for example, PERS, Workmen's Comp or Federal taxes)? If yes, please provide	• •					
11. Has the entity failed to make timely payments for debt service, to vendors or other lf yes, please provide details on page 2.	ers?					
12. X Has the entity augmented the appropriated expenses for any proprietary fund sin If yes, please provide details on page 2.	ice the previous report?					
13. Cash and cash equivalents (unaudited) as of quarter ending12/31/2019 (Enterprise Fund(s) Only) - Amounts represent a single fund Prior Year Current Year						
9,370,568 11,176,116						
14. General Fund Ending Balance (unaudited) as of quarter ending 12/31/2019 Prior Year Current Year						
550,944 582,263						
15. Cash and cash equivalents (unaudited) as of quarter ending 12/31/2019 (General Fund Only)						
<u>Prior Year</u> <u>Current Year</u> 1,051,112 1,196,218						

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7.	Date Type	Amount
	Date	Amount
3.	Date Lender	Amount
Date	From Fund To Fund	Amount
-11		
2.	Date Fund # Fund	Amount
	<u> </u>	
15		
		Janui Carturialit
EPARED BY:	Jenni Cartwright, Finance Manager Name/Title	Jenni Cartwright Signature
RSON SIGNING	CERTIFIES ALL INFORMATION PROVIDED IS T	RUE & CORRECT FOR THE PERIOD INDICATED.
VIEWED BY:	Terri Willoughby, Chief Finanicial Officer Name/Title	Signature

ENTI	TY:	Redevelop	ment Agency Area 2	QUARTE	ER ENDING:	12/31/2019
					PREPARED:	5/13/2020
QUE	STION	IS REGARD	ING ECONOMIC CONDITION	NS		
	Yes	s No	Since the last filing:			
1.		Х	4 ' ' '		ne employment in the area closed or significantly blease provide details on page 2.	
2.		Х	Has your entity experienced a cassessed valuation in the past t		decrease of 10% or more in population or se provide details on page 2.	
3.		Х	Has there been any significant of liftyes, please provide details on		hich could affect your entity positively?	
4.		Х	Has there been any significant of lif yes, please provide details on	` '	hich could affect your entity negatively?	
5.		X	Has anything significant occurre		our expected level of revenues?	
QUE	STIO	NS REGARE	DING OPERATIONS			
6.		Х			operating) fund had an unexplained, unbudgeted 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.		Х	Has the entity borrowed money If yes, please provide details on		ations?	
9.		Х	Has the entity made an interfun If yes, please provide details on	. ,	rent operations?	
10.		Х			governmental agencies for the benefits of its empes)? If yes, please provide details on page 2.	loyees,
11.		Х	Has the entity failed to make tim		service, to vendors or others?	
12.		Х	Has the entity augmented the a lf yes, please provide details on		or any proprietary fund since the previous report?)
13.			equivalents (unaudited) as of o d(s) Only) - Amounts represen <u>Prior Year</u>		÷	
			N/A	N/A		
14.	Ger	neral Fund E	nding Balance (unaudited) as <u>Prior Year</u>	of quarter ending Current Year	12/31/2019	
			267,200	155,835		
15.		sh and cash eneral Fund (12/31/2019	
			<u>Prior Year</u>	Current Year		
			437,745	765,389		

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7.		Date	Туре	Amount
8.		Date	Lender	Amount
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9.	Date	From Fund	To Fund	Amount
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12.		Date	Fund	Amount
3-15.				
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				James Carty winder
REPARED BY:		Jenni Cartwright, Fina	nce Manager	Jenni Cartwright ————————————————————————————————————
		Name	/Title	Signature
PERSON	SIGNING (CERTIFIES ALL INFORM	IATION PROVIDED IS TRUE & C.C	DRRECT FOR THE PERIOD INDICATED.
\ <i>(!</i> \ **	(ED D) (T VARII	f Figure 1 de l'Office	
KEVIEW	ED BY:	Terri Willoughby, Chie Name	er Finaniciai Oπicer √Title	Signature

QUARTER ENDING:	12/31/2019

	DATE PREPARED:	5/13/2020
QUESTIONS REGARDING ECONOMIC CONDITIONS		_

	Yes	No	Since the last filing:							
1.		X	Has any employer that account reduced operations since the process of the process			ployment in the area closed or significantly e provide details on page 2.				
2.		Х	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.		Χ	Has there been any significant If yes, please provide details or		which	could affect your entity positively?				
4.		Χ	Has there been any significant If yes, please provide details or		which	could affect your entity negatively?				
5.		Х	Has anything significant occurred If yes, please provide details or		your ex	spected level of revenues?				
QUESTIONS REGARDING OPERATIONS										
6.		Χ				ating) fund had an unexplained, unbudgeted, , please provide details on page 2.				
7.		Χ	Has the entity entered into any If yes, please provide details or		nts sinc	e the previous report?				
8.		Х	Has the entity borrowed money If yes, please provide details or		erations	3?				
9.		Χ	Has the entity made an interfun If yes, please provide details or		urrent c	perations?				
10.		Has the entity failed to pay timely any contributions to governmental agencies for the benefits of its employees, (for example, PERS, Workmen's Comp or Federal taxes)? If yes, please provide details on page 2.								
11.		Χ	Has the entity failed to make tin If yes, please provide details or	• • •	ot servi	ce, to vendors or others?				
12.		Χ	Has the entity augmented the a lf yes, please provide details or		s for an	y proprietary fund since the previous report?				
13.			n equivalents (unaudited) as of quarter ending:							
	(Enterpris	se Fund	(s) Only) <u>Prior Year</u>	Current Year						
			N/A	N/A	_					
14.	General F	Fund Er	nding Balance (unaudited) as <u>Prior Year</u>	of quarter ending <u>Current Year</u>	12/3	31/2019				
			24,493		0					
15.	Cash and (General		• /		12/3	31/2019				
			Prior Year	Current Year						
			364,648		0					

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7.	Date	Туре	Amount
8.	Date	Lender	Amount
0.	Bate	London	Autount
9. Date	From Fund	To Fund	Amount
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)-11			
12.	Date	Fund	Amount
3-15			
REPARED BY:	Jenni Cartwright, Fina	nce Manager	Jenni Cartwright Signature
	Name	/Title	Signature
ERSON SIGNING	CERTIFIES ALL INFORM	ATION PROVIDED IS TRUE & C	ORRECT FOR THE PERIOD INDICATED.
EVIEWED BY:	Terri Willoughby, Chie Name	f Finanicial Officer	
	Name	/Title	Signature