



**BOND ISSUE INFORMATION**

**SCHEDULE A**

Type of Bond Issue: General Obligation Revenue Certificate of Participation (COP)

Name and Full Title of Bond Issue: \_\_\_\_\_

Purpose of Bond Issue: \_\_\_\_\_ Date Bond Issue Settled: \_\_\_\_\_

- |   |          |
|---|----------|
| 1. Original proceeds of the bonds: <i>(par, less any original issue and underwriting discount, plus any premium and accrued interest)</i> | \$ _____ |
| 2. Total amount of bond proceeds available for deposit:   | \$ _____ |
| 3. Difference between lines 1 and 2, if any:  | \$ _____ |

Difference results from: Reimbursement on closing date for prior advances  
Payment on closing date of accumulated invoices then due and payable, including issuance costs  
Other \_\_\_\_\_

Names and amounts of other related bond funds (i.e., debt service fund, sinking fund, debt service reserve fund, revenue fund or other funds that are or may be deemed to be proceeds of the bond issue), if any:  
 \_\_\_\_\_

Final Maturity Date of Bonds: \_\_\_\_\_ Bond Year Election (if applicable): \_\_\_\_\_

Bond yield calculated pursuant to the Rebate Regulations (%): \_\_\_\_\_

Is the 6-month exception applicable to this issue? .....	<b>Yes</b>	<b>No</b>
Is the 18-month exception applicable to this issue? .....	<b>Yes</b>	<b>No</b>
If yes, what are the estimated earnings? \$ _____		
Is the construction exception (24-month spenddown) applicable to this issue? .....	<b>Yes</b>	<b>No</b>
If yes, what are the estimated earnings? \$ _____		
If the 24-month spenddown is applicable, has the issuer elected to pay a penalty in lieu of rebate? ....	<b>Yes</b>	<b>No</b>
Is the small issuer exception (\$5,000,000/\$15,000,000) applicable to this issue? .....	<b>Yes</b>	<b>No</b>
If deposit is not made on the date of issuance of the bonds, has any portion of the issue been refunded?	<b>Yes</b>	<b>No</b>

Please provide copies of the following bond documents:

- Appropriate IRS Form 8038-G or similar document
- Official Statement
- Draw Schedule
- Non-Arbitrage or Tax Certificate
- Trust Indenture, if applicable

Name of Bond Counsel: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**Any document received by email will not be accepted. Please send by fax or mail.**

**FAX TO:** CAMP Investor Support Services  
 1-888-535-0120

**MAIL TO:** CAMP Investor Support Services  
 P.O. Box 11760  
 Harrisburg, PA 17108-1760