

DUE OCTOBER 1

Pursuant to Public
Resources Code § 6306

Granted Public Trust Lands Standardized Reporting Form



Fiscal/Calendar Year: FY-13

Grantee Name: CITY OF TRINIDAD
Contact Person: KAREN SUIKER, CITY MANAGER
Contact Phone: (707) 677-3876
Mailing Address: POST OFFICE BOX 390
TRINIDAD, CALIFORNIA 95570-0360

1. Funds

- a. Is a separate fund maintained for trust assets, liabilities, revenues and expenditures?
YES NO
If "No", under what fund are they accounted for? If "Yes," please list the name(s) of the fund(s)
GENERAL FUND - #201
- b. Are separate financial statements prepared for the trust?
YES NO
If "No," in which financial statements are they included? (Name of the document(s) and the applicable page number(s)) If "Yes," describe the organization of the separate financial statement.
CITY OF TRINIDAD AUDITED FINANCIAL STATEMENTS

2. Revenue

- a. What was the gross revenue received or generated from trust land or trust assets during the past fiscal year? \$5,000.00
- b. Please list all sources of revenue and the amount of revenue generated from each source (e.g. permits, rentals, percentage of lease) TIDELANDS LEASE AGREEMENT

3. Expenses

- a. What was the total expenditure of funds received or generated from trust land or assets during the past fiscal year? \$5,000.00
- b. What expenses were allocated or charged directly to the trust? Please list the source of the expenditure and the amount expended. THE TIDELANDS LEASE REVENUE IS USED BY THE CITY OF TRINIDAD TO OFFSET LAW ENFORCE EXPENDITURES.
- c. Have there been any capital improvements over \$250,000 within the current fiscal year? Are any capital improvements over \$250,000 expected in the next fiscal year?
NONE.
- d. Describe any other disposition of trust funds or assets or any other disposition of the trust lands or trust assets themselves. Include any internal funds that were transferred to other grantees, to the management of another entity or under the management of another political subdivision of the grantee per an agreement, settlement, or Memorandum of Understanding.
NONE.

4. Beginning and Ending Balance

Please list the beginning and ending balances for the tidelands trust fund(s) for this past fiscal year.
\$0.00

For all questions, please give the page number where the information can be found in your accompanying financial document. Please use additional pages as necessary.