PACE Loss Reserve Program
California Alternative Energy and Advanced Transportation Financing Authority

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PACE Loss Reserve
Semi-Annual Report – Part A

Name of PACE Program:_____ Date:_____

Contact person name:_____ Title:_____

Phone:_____ E-mail address:_____

Reporting period *(check one)*:

☐ January 1 – June 30 of the current year. *Please fill out sections 1 and 2 below and attach Part B.*

☐ July 1 – December 31 of the previous year. *Please fill out section 1 below and attach Part B.*

SECTION 1 – REPORTING PERIOD ACTIVITY

All information in this section should be for the reporting period indicated above. Figures should correspond to those listed in Part B of the semi-annual report.

Total number of new Financings issued:_____

Total principal amount of Financings: $_____

SECTION 2 – CUMULATIVE PORTFOLIO INFORMATION

Information as of June 30th of the current year.

Total number of outstanding Financings:_____

Total value of the outstanding Financing portfolio: $_____

Please attach a short description of projected energy and/or water savings resulting from the Financings that have received assistance through the PACE Loss Reserve. Include the methodology for calculating these figures. Projected savings should be reported on a per year basis for the covered portfolio *(e.g. kWh/year, Gallons/year).*

Certification:

In accordance with Section 10087 of the PACE Loss Reserve regulations, I, the undersigned, certify that all information included in this report (including Parts A and B), any attachments, and any electronic copies submitted is accurate and true.

Authorized Signature | Printed Name | Title | Date

California Alternative Energy and Advanced Transportation Financing Authority Use Only		
PACE Program ID#	**Date Received:**	**Date Completed:**