

**SPECIAL DISTRICTS FINANCIAL TRANSACTIONS
AND COMPENSATION REPORT**

COVER PAGE

California Enterprise Development Authority - CEDA

SCO Reporting Year: **2015**


ID Number: **12503403500**

Fiscal Year Ended: 06/30/2015

Certification:

I hereby certify that, to the best of my knowledge and belief, the report forms fairly reflect the financial transactions of the district in accordance with the requirements as prescribed by the California State Controller.

District Fiscal Officer


Signature

Helen Schaubmayer

Name (Please Print)

Assistant Secretary

Title

9/19/15

Date

Per Government Code section 53891, this report is due within 90 days after the end of the fiscal year. If filed in electronic format, the report is due within 110 days after the end of the fiscal year. However, in the case of hospital districts, the report is due within 120 days after the end of the fiscal year.

Per Government Code section 26909, a copy of the independent audit is to be filed with the Controller within 12 months after the close of the fiscal year.

Please complete, sign, and mail this cover page to either address below.

Mailing Address:

State Controller's Office
Division of Accounting and Reporting
Local Government Reporting Section
P. O. Box 942850
Sacramento, CA 94250

Express Mailing Address:

State Controller's Office
Division of Accounting and Reporting
Local Government Reporting Section
3301 C Street, Suite 700
Sacramento, CA 95816

Supplement to the Annual Report of Special Districts

Special District ID Number:	12503403500
Name of District:	California Enterprise Development Authority - CEDA

Mark the appropriate box below to indicate the ending date of your agency's fiscal year. Report data for that period only.

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> July 2014 | <input type="checkbox"/> October 2014 | <input type="checkbox"/> January 2015 | <input type="checkbox"/> April 2015 |
| <input type="checkbox"/> August 2014 | <input type="checkbox"/> November 2014 | <input type="checkbox"/> February 2015 | <input type="checkbox"/> May 2015 |
| <input type="checkbox"/> September 2014 | <input type="checkbox"/> December 2014 | <input type="checkbox"/> March 2015 | <input checked="" type="checkbox"/> June 2015 |

Return this form to the **California State Controller's Office**. If you have any questions regarding this form please contact:

U.S. Bureau of the Census, Robyn Harris, 1-800-242-4523

A. Personnel Expenditures

Please report your government's total expenditures for salaries and wages during the year, including amounts paid on force account construction projects.

Z00:	\$ 0
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B. Capital Outlay Expenditures for Enterprise Activities

Please report your government's capital outlay expenditures for the following enterprise activities, if applicable:

Airport Enterprise	Amount
Land and Equipment (Census Code G01)	\$ N/A
Construction (Census Code F01)	\$ N/A

Electric Enterprise	Amount
Land and Equipment (Census Code G92)	\$ N/A
Construction (Census Code F92)	\$ N/A

Harbor and Port Enterprise	Amount
Land and Equipment (Census Code G87)	\$ N/A
Construction (Census Code F87)	\$ N/A

Hospital Enterprise	Amount
Land and Equipment (Census Code G36)	\$ N/A
Construction (Census Code F36)	\$ N/A

Waste Disposal Enterprise	Amount
Land and Equipment (Census Code G80)	\$ N/A
Construction (Census Code F80)	\$ N/A

Water Enterprise	Amount
Land and Equipment (Census Code G91)	\$ N/A
Construction (Census Code F91)	\$ N/A

U.S. Bureau of the Census – Revised 7/20/2015

