

TOBIAS READ
STATE TREASURER

JACQUELINE KNIGHTS
TREASURER'S DESIGNEE

CHRISTINE REYNOLDS
CHAIR

**MUNICIPAL DEBT
ADVISORY COMMISSION**
867 HAWTHORNE AVE SE
SALEM, OREGON 97301-5241
(503) 378-4930
DMD@OST.STATE.OR.US

MDAC FORM PB1: TO BE FILED 30 DAYS PRIOR TO BOND ISSUANCE DATE

References: [ORS 238.697](#)
[OAR 170-061-0000 \(2021\)](#)

Issuer: _____

Authorized Representative & Title: _____

Email: _____ Phone #: _____

Series: _____

Expected Bond Issuance Date: _____

| | |
|--|--|
| | Pension Bond Assessment required by ORS 238.697(2) (attached) |
| | Issuer confirmation of compliance with ORS 238.697(1)(b)(A) and (B). |

