

**TOBIAS READ**  
STATE TREASURER

**JACQUELINE KNIGHTS**  
TREASURER'S DESIGNEE

**CHRISTINE REYNOLDS**  
CHAIR



**MUNICIPAL DEBT ADVISORY COMMISSION**  
DEBT MANAGEMENT DIVISION  
867 HAWTHORNE AVE SE  
SALEM, OR 97301-5241  
(503) 378-4930  
[DMD@OST.state.or.us](mailto:DMD@OST.state.or.us)

## FORM 2L – REPORTING OF LOCAL GOVERNMENT LOAN/LEASE

District/Issuer Name:

Bond Type:

Pledged Source of Repayment (i.e., enterprise revenues, taxes or both, etc.):

Project Description:

Loan Number:

Initial Loan Amount:

Principal Outstanding as of FYE:

Execution Date of Loan:

Final Maturity Date of Loan:

Purpose of Loan:

Lender:

Municipal Advisor (if applicable):

Bond Counsel (if applicable):

Documentation:

Please attach financing terms/agreement.

Please attach amortization/debt service schedule.