

# City of San Mateo Child Care Loan Annual Report

January 20\_\_ through December 20\_\_

This form is due not later than March 1 of each calendar year for the term of the loan.



**Borrower Name:**

**Date of Report**

This is the number of spaces required as part of the project's loan agreement.	<p><b>Number of Spaces:</b> __</p> <p><b>Number of Affordable to households not exceeding 80% AMI:</b> __</p>					
Report the total number spaces available each month, both the total number available and the number of affordable spaces provided.	Month	# Total	# Afford.	Month	# Total	# Afford.
	January			July		
	February			August		
	March			September		
	April			October		
	May			November		
	June			December		
Please describe any circumstances that prevented the ability to meet the number of spaces required.						
Please list data for households receiving tuition assistance. Use confidential coding, not household names.	Household (HH) Identifier	Annual HH Income	Tuition Charged	Market Rate		

## Contact Information

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If you need to provide any changes for the contacts that follow, do that here. If not, you can select this placeholder (arrow to the left of the section title) and press Delete to remove it.

### **Borrower Primary Contact**

Office: Office Phone  
Mobile: Cell Phone  
Email: Email

### **Child Care Facility Operator Contact**

Office: Office Phone  
Mobile: Cell Phone  
Email: Email

## Required Documentation

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Please attach the following documents:

1. Third-party confirmation of current facility licensing.
2. Annual financial documents for the facility operation, either organizational audits or tax records.

## Program Narrative

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Please provide a brief narrative summarizing the annual efforts, highlights, and challenges in achievement of goals that assure a high-quality program and includes a description of professional development and/or continuing education for staff that support quality and continuous improvement.