

NEBRASKA AUDITOR OF PUBLIC ACCOUNTS

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STATE OF NEBRASKA
OFFICE OF THE AUDITOR OF PUBLIC ACCOUNTS

December 26, 2012

The office of the Auditor of Public Accounts of the State of Nebraska is in receipt of the bond issuance documents for Hospital Authority No. 1 of Jefferson County, Nebraska, Hospital Authority No. 1 of Jefferson County, Nebraska Revenue Bond (Jefferson Community Health Center) Series 2012. These documents have been filed pursuant to the requirements of Neb. Rev. Stat. § 10-140 (Reissue 2007).

(SEAL)

Alicia Feist, Bond Registrar

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To:

Auditor of Public Accounts State Capitol Building, Suite 2303 P.O. Box 98917 Lincoln, NE 68509

From:

Gilmore & Bell, P.C. 450 Regency Parkway Suite 320 Omaha, Nebraska 68114



FILING INFORMATION

Name of Placement Agent:

Lancaster Pollard

Name of Issuer:

Hospital Authority No. 1 of Jefferson County, Nebraska

Title or Designation of Bond:

\$5,800,000

Hospital Authority No. 1 of Jefferson County, Nebraska Revenue Bond (Jefferson Community Health Center) Series 2012 (the "Bond")

Date of Bond: December 18, 2012

Principal Amount of Bond Initially Issued:

 Maturity
 Principal
 Interest

 (December 18)
 Amount
 Rate

 2032
 \$5,800,000
 2.75%

Paying Agent and Registrar where principal and interest are payable: American National Bank

Principal purpose for which Bond was issued:

The Bond has been issued for the purposes of providing funds which, together with funds contributed by Jefferson Community Health Center, Inc., will be sufficient to (1) finance, refinance and reimburse the costs of acquiring, constructing, furnishing and equipping improvements to the hospital facilities of Jefferson Community Health Center, Inc., including, without limitation, (a) 17 new private patient rooms, (b) relocation of administrative offices, (c) renovation of nursing stations and (d) relocation and renovation of ancillary services including pharmacy, lab and radiology and (2) pay certain other costs related to the issuance of the Bond

Attachments:

Costs of Issuance Form 8038

ATTACHMENT 1 Costs of Issuance

	Cost Item	Paid From Bond Proceeds	Paid from Other Issuer Funds
1.	Placement Agent Fee (including expenses, management fee and underwriter's discount) Name: Lancaster Pollard	\$50,001.00	\$8,891.98
2.	Bond Counsel Name: Gilmore & Bell, P.C.		\$25,000.00
3.	Other Counsel (e.g., underwriter's counsel, special counsel, etc.; please specify type, if any) Lender's Counsel, Koley Jessen, P.C. Borrower's Counsel, Schwab & Bauer, P.C.		\$18,000.00 \$850.00
4.	Financial Advisor Fee Name:		ψ030.00
5.	Rating Agency Fees Name n/a		
6.	Bond Insurance/Credit Enhancement Fee Name:		
7.	Registration Fees (e.g., MSRB, CUSIP, Blue Sky, etc.)		
8.	Trustee Fees (e.g., opening trustee fee, escrow agent fee, paying agent fee) n/a		
9.	Other costs (e.g., printing, publication, cash flow fees, travel expenses, other professional fees, if any, etc.)		
	Title Insurance Premium: First American Title Lender's Origination Fee: American National Bank		\$20,793.25 \$14,500.00
	Total	\$50,001.00	\$88,035.23

(Rev. April 2011) Department of the Treasury Internal Revenue Service

Information Return for Tax-Exempt

Private Activity Bond Issues
(Under Internal Revenue Code section 149(e))

> See separate instructions.

OMB No. 1545-0720

Pa	Reporting Authority	Check	if Ame	nded Return ▶ □
1	Issuer's name			ntification number
Hos	oital Authority No. 1 of Jefferson County, Nebraska	***	61-168	3496
3a		3b Telephone numb	per of ot	her person shown on 3a
Mich	ael Rogers, Gilmore & Bell, P.C., Bond Counsel		02-991	
4	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	5 Report number		
450	Regency Parkway 320		.]	6
6	City, town, or post office, state, and ZIP code	7 Date of issue (N	MM/DD/	YYYY
	ha, NE 68114	,	12/18/2	
B	Name of issue enue Bond (Jefferson Community Health Center Project) Series 2012	9 CUSIP number		.012
			Non	IA.
10a	Name and title of officer or other employee of the issuer whom the IRS may call for more information	10b Telephone number		or other employee shown on 10a
Brian	Blobaum, Chair		02-729	
Par	Type of Issue (Enter the issue price.)		02-129	
11	Exempt facility bond:			Issue Price
а	Airport (sections 142(a)(1) and 142(c))		اندا	
b	Docks and wharves (sections 142(a)(2) and 142(c))		118	
С	Water furnishing facilities (sections 142(a)(4) and 142(e))		11b	
d	Sewage facilities (section 142(a)(5))		110	
е	Sewage facilities (section 142(a)(5)) Solid waste disposal facilities (section 142(a)(5))		110	
f	Solid waste disposal facilities (section 142(a)(6))		11e	
	Qualified residential rental projects (sections 142(a)(7) and 142(d)) (see instructions) Meeting 20–50 test (section 142(d)(1)(A))		11f	
	Meeting 40–60 test (section 142(d)(1)(B))	*	ia -	
	Meeting 25–60 test (NYC only) (section 142(d)(6)) .			
a	Has an election been made for deep rent skewing (section 142(d)(4)(B))?	res □ No		
b	Facilities for the local furnishing of electric energy or gas (sections 142(a)(8) and 142(f	0)	11g	
•••	Facilities allowed under a transitional rule of the Tax Reform Act of 1986 (see instruct Facility type		11h	
	1096 Act coefficient			
	1000 Not section			
÷	dealined enterprise zone racility bonds (section 1394) (see instructions)		111	
k	Qualified empowerment zone facility bonds (section 1394(f)) (see instructions)		11j	
1	District of Columbia Enterprise Zone facility bonds (section 1400A)		11k	
m	dealined public educational facility bonds (sections 142(a)(13) and 142(k))		111	
n	Qualified green building and sustainable design projects (sections 142(a)(14) and 142((1))	11m	
0	Qualified highway or surface freight transfer facilities (sections 142(a)(15) and 142(m)) Other (see instructions)		11n	
р	Outlified New York Liberty 7		200	
7	Qualified New York Liberty Zone bonds (section 1400L(d)) Other (see instructions)		11p	
•	- min (000 min addions)		11q	
b	Guained mortgage bond (section 143(a))		12a	
3	Other (see instructions) Qualified veterans' mortgage bond (section 143(b)) (see instructions) Check the box if you elect to rebate arbitrage profits to the United States.	E.	12b	
	Charlet be best from the bound (section 143(b)) (see instructions)		13	
7	dualined small issue bond (section 144(a)) (see instructions)		14	
	offect the box for \$10 million small issue exemption		21 5 (5)	
•	addiffed student loan bond (section 144(b))		15	
_	stained redevelopment bond (section 144(c))		16	_
•	damed hospital bond (section 145(c)) (attach schedule—see instructions)		17	5,800,000
_	addition 30 (C)(3) HOTHOSPITAL DONG (Section 145(b)) (attach schedule—see instruction	-/	18	310001000
	shock box it 95% of filore of het proceeds will be used only for capital expanditures			100 B
•	volgovernmental output property bond (treated as private activity bond) (section 1416	d))	19	
· ·	Striet (See instructions)		SALES!	
b (The state of the s		20b	
<u> </u>	Attion Describe (see instructions)		20c	
rape	rwork Reduction Act Notice see separate instruction			

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Pε	O	le	1

Part	rt III Description of Bonds (Complete for the entire issue for which this form is being filed.)										
	(a) Final maturity date		ssue price) Stated redemption price at maturity	(d) Weighted rage maturi			(e) Yield	
21	12/18/2032	\$	5,800,000	\$	5,800,00	00 10.	896	years		2.	3063 %
Part	V Uses of Proc	eeds of Issue	(including und	derwr	iters' discount)					Amou	nt _
22	Proceeds used for a	ccrued interest							22	<u> </u>	0
23	Issue price of entire	issue (enter amo	ount from line 21	, colu	ımn (b))	1 2 7 2			23	5,	300,000
24	Proceeds used for b	ond issuance c	osts (including	under	writers' discount)	24		50,001			
25	Proceeds used for c					25		. 0			
26	Proceeds allocated	to reasonably re-	quired reserve o	or repl	acement fund .	26		0			
27	Proceeds used to cu	urrently refund pi	rior issue (comp	lete F	Part VI)。	27		0			
28	Proceeds used to ac	dvance refund pr	ior issue (comp	lete P	Part VI)	28		.0	DESIGNATION OF		50.004
29	Add lines 24 through	n 28							29		50,001
30	Nonrefunding proce						re)	•	30	5,	749,999
Part	V Description	of Property Fir	nanced by No	nrefi	unding Proceed	ds Nahawa Da	not con	nnlata t	for all	alified stude	nt loan
	Caution: The	total of lines 318	a through e bei	ow m	nust equal line 30 ns' mortgage bor	above. Do	HOL COIL	ipiete i	or que	anneu stude	in loan
										Amou	nt.
31	Type of Property Fi	nanced by Non							31a	Anou	0
a	Land	uron	180 050 05 005 15				• • •	•	31b	5.	749,999
b	Equipment with reco								31c		0
d	Equipment with reco								31d		0
e	Other. Describe (see		y care or 1000						31e		0
32	North American Indu	ustry Classification	on System (NAI	CS) o	f the projects fina	nced by no	nrefundir	g proce	eds.	,	
	NAICS Code		nrefunding proce			S Code				nding procee	ds
а	622110	\$.	5,	749,99	9 C		\$				
b		\$			d		\$				
Part					is part only for r						
33	Enter the remaining								<u> </u>		years
34	Enter the remaining		1 50 to 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			refunded .			—		years
35	Enter the last date o			be c	alled			1			
36	Enter the date(s) the		were issued ▶								
-	VII Miscellaneou		, , , , , , , , , , , , , , , , , , , 		\ \						
37	Name of governmen	ital unit(s) approv	ring issue (see t	ne ins	structions)	ad of Count	Commi	cionbro	of loff	forces Cour	+++ NE\
00	Public Hearing: Nove									ierson coun	(y, NE) ▶ [✓]
38	Check the box if you Check the box if you		•								▶ □
39 40a	Check the box if you										▶ □
b	Name of hedge prov	با ما میں							2 2	N 186 121 S	
c	Torre of books he										
ď	,, , , , , , , , , , , , , , , , , , , ,										
41	Check the box if the	hedge is superi	ntegrated	·							$\triangleright \Box$
42a	Enter the amount of	gross proceeds	invested or to b	e inv	ested in a guarant	teed investr					
b	Enter the final matur								. ▶	/ /	
C	Enter the name of th	e GIC provider I	>						_		
43	Check the box if th										
	remediated in accord										
44	Check the box if the	issuer has estab	olished written p	roce	dures to monitor t	he requiren	nents of s	section	148		▶ ✓
45a	Enter the amount of			0.7							
b	Enter the date the of									1 1	
46	Check the box if the										
	provide name and E	IN of the primary	private user								
	Name ►							EI	101.00	- 8038 /Da	4.0040

Form 80	038 (Re	ev. 4-2011)								Page 3
Part	VIII	Volume	Caps							Amount
47	Amo	ount of state	volume cap allocated	d to the issuer. At	tach copy of state	certification	on		47	
48	Amo	ount of Issue	subject to the unified	d state volume ca	p				48	
49	Amo	ount of issue	not subject to the ur	nified state volume	cap or other volum	e limitation	ns:		49	
а	Of b	onds for gove	ernmentally owned s hydroelectric gener	solid waste facilitie	es, airports, docks, v	vharves, er	nvironme		49a	
b	Und	er a carryforv	vard election. Attach	a copy of Form 8	3328 to this return .				49b	
С	Und	er transitiona	I rules of the Tax Re	form Act of 1986.	Enter Act section ▶				49c	
d	Und	er the exception	on for current refunding	g (section 146(i) and	d section 1313(a) of th	e Tax Refor	m Act of	1986)	49d	
50a			of qualified veterans						50a	
b	Ente	r the state lim	nit on qualified veter	ans' mortgage bo	nds				50b	
51a	Amo	unt of section	1394(f) volume cap al	located to issuer.	Attach copy of local o	overnmen	t certific	ation	51a	
b			erment zone			,-,-,	.,		Allen	Marie Constitution (A
52	Amo	unt of section	n 142(k)(5) volume	cap allocated to	issuer. Attach conv	of state	certifics	tion	52	BEAR STATE OF THE
Signat and Conse	ture	Under penalties belief, they are to this return, to the	of perjury, I declare that rue, correct, and complet e person(s) that I have aut	I have examined this re	eturn, and accompanying to consent to the IRS's dis	schedules ar closure of the	nd stateme e issuer's r	ents, and the eturn information	o the be	
		Signature o	of issuer's authorized repre	sentative	Date		·	print nam		
Paid Prepa	arer	Print/Type prep		Preparer's sign	ature A	Date 12	117/1	Chec	k [] if	Preparer's PTIN

Firm's name ► Gilmore & Bell, P.C.

Firm's address ► 2405 Grand Boulevard, Suite 1100, Kansas City, MO 64108

Preparer Use Only Fim's name

816-221-1000 Form 8038 (Rev. 4-2011)

43-1611738

Firm's EIN ▶

Phone no.

ATTACHMENT TO IRS FORM 8038

HOSPITAL AUTHORITY NO. 1 OF JEFFERSON COUNTY, NEBRASKA

\$5,800,000 REVENUE BOND (JEFFERSON COMMUNITY HEALTH CENTER PROJECT) SERIES 2012

PART II: Type of Issue

Line 17: Qualified 501(c)(3) Hospital Bond

Organizations Benefiting from 501(c)(3) Qualified Hospital Bonds	Employer Identification Number	Amount of These Bonds Benefiting This
		Organization
Jefferson Community Health Center, Inc.	47-0468078	\$5,800,000