OMB Approval No: 2577-0226
exp. (02/28/2006)

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Small PHA Plan Update
Annual Plan for Fiscal Year: 2004

Hillsdale Housing Authority

NOTE: THIS PHA PLANS TEMPLATE (HUD-50075 Small PHA) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan
Agency Identification

PHA Name: Hillsdale Housing Authority

PHA Number: MO220

PHA Fiscal Year Beginning: 1/1/2004

PHA Plan Contact Information:

Name: Mark Stroker
Phone: (314) 428-3200
TDD: (314) 428-4714
Email (if available): mstroker@haslc.com

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

☒ Main administrative office of the PHA
☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

☒ Main administrative office of the PHA
☐ PHA development management offices
☐ Main administrative office of the local, county or State government
☐ Public library
☐ PHA website
☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

☒ Main business office of the PHA
☐ PHA development management offices
☐ Other (list below)

PHA Programs Administered:

☐ Public Housing and Section 8 ☐ Section 8 Only ☒ Public Housing Only

Annual PHA Plan
Fiscal Year 2004
[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The Authority converted to the streamlined, small PHA agency plan template. The Authority proposes to add Elderly/Disabled Service Coordinator program per PIH Notice 2003-22 (HA).

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? $ 40,785 (estimated) **subject to federal appropriations**

C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component ; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name: 1b. Development (project) number:

2. Activity type: Demolition ☐ Disposition ☐
3. Application status (select one) Approved ☐ Submitted, pending approval ☐ Planned application ☐
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected: 6. Coverage of action (select one) ☐ Part of the development ☐ Total development
7. Relocation resources (select all that apply) ☐ Section 8 for units ☐ Public housing for units ☐ Preference for admission to other public housing or section 8 ☐ Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

☐ Establishing a minimum homeowner down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment comes from the family's resources

☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards

☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? $ _____

C. ☐ Yes ☒ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D. ☐ Yes ☐ No: The PHDEP Plan is attached at Attachment

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are Attached at "Attachment F"

3. In what manner did the PHA address those comments? (select all that apply)

☐ The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
☐ Yes ☐ No: below or
☐ Yes ☐ No: at the end of the RAB Comments in Attachment ____.

☒ Considered comments, but determined that no changes to the PHA Plan were necessary but did take actions to respond to resident comments. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment F.

☐ Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here) St. Louis County

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.

☒ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

☒ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)

☐ Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan: Substantial Deviation – A fundamental change in the operation of the Authority that is not presently consistent with its mission statement and has required - or will require – alteration of the mission statement.

B. Significant Amendment or Modification to the Annual Plan: Significant Amendment of Modification – A change in the operation of the Authority that will materially affect at least 10% of the Authority's clients.

Attachment_A_

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Related Plan Component**
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers in Public Housing ☒ check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
	Public housing rent determination policies, including the method for setting public housing flat rents ☒ check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
	Schedule of flat rents offered at each public housing development ☒ check here if included in the public housing A & O Policy	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Related Plan Component**
	Section 8 rent determination (payment standard) policies ☐ check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types ☐ check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
	Public housing grievance procedures ☒ check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures ☐ check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Related Plan Component**
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____of the Section 8 Administrative Plan)	Annual Plan: Homeownership
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.	Annual Plan: Safety and Crime Prevention
	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) ☒ check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: Hillsdale Housing Authority	Grant Type and Number Capital Fund Program: MO36P22050104 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2004

☒ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	40,785			
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	40,785			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Table Library

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: Hillsdale Housing Authority	Grant Type and Number Capital Fund Program: MO36P22050104 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2004

☒ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Hillsdale Housing Authority		**Grant Type and Number** Capital Fund Program #: MO36P22050104 Capital Fund Program Replacement Housing Factor #:				**Federal FY of Grant: 2004**		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
MO220	Operations	1406	NA	40,785				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: Hillsdale Housing Authority	**Grant Type and Number** Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:	**Federal FY of Grant:**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MO220	12/31/05			6/30/07			

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan ☒ Original statement ☐ Revised statement			
Development Number	**Development Name (or indicate PHA wide)**		
MO220	**Hillsdale Homes**		
Description of Needed Physical Improvements or Management Improvements		**Estimated Cost**	**Planned Start Date (HA Fiscal Year)**
Roofs		**16.000**	**2005**
HVAC		**55,000**	**2006-07**
Interior Doors		**48,000**	**2008-09**
Windows		**30,000**	**2009**
Total estimated cost over next 5 years		**149,000**	

-

Required Attachment D : Resident Member on the PHA Governing Board

1. ☐ Yes ☒ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

B. How was the resident board member selected: (select one)?

☐ Elected
☐ Appointed

C. The term of appointment is (include the date term expires):

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
☒ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
☐ Other (explain):

B. Date of next term expiration of a governing board member:

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Mayor Dorothy Moore

Required Attachment E : Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description

RESIDENT ADVISORY BOARD

1.	Deborah Harris 168 Plum 63043 298-0925	Arbor Hill/CWEB
2.	Fran Yashuk 190 Fee Fee Apt. C 63043 298-3775	Fee Fee Manor
3.	Carol Bonetti 162 Fee Fee Apt E 63043 738-0896	Fee Fee Manor
4.	Wanda Cohen 406 Meacham 63122 822-3007	Meacham Park
5.	Claudette Kelley 2803 W. Pasture 63114 890-9722	Highview
6.	Willie Lewis 2815 W. Pasture 634114 890-8719	Highview
7.	Gloria Williams 7205 Salerno Ct. 63133 725-5908	Pagedale/CWEB
8.	Lillie O'Neal 6923 Ardee Way 63130 726-1787	Pagedale
9.	Shirley Smith 6905 Ardee Way 63130 727-1670	Pagedale
10.	Lynette Williams 10324 Lord 63136 388-2164	Scattered Site
11.	Maggie Buchanan 2616 Tyrell Apt D 63136 867-5182	Tiffany
12.	Linda Roach'e 2613 Lordan Apt. B 63136 869-1562	Springwood

Table Library

13.	Deborah Smith 9348 Rothwell Heights 63132 994-9118	Olivette
14.	Olivia Walls 9356 Rothwell Heights 63132 997-6926	Olivette
15.	Rosalind Billingsley 9342 Rothwell Heights 63132 692-7187	Olivette
16.	Delores McClendon 9379 Rothwell Heights 63132 995-9957	Olivette
17.	Jacqueline Tate 9345 Rothwell Heights 63132 432-2564	Olivette
18.	Vandessa Lee 8901 Weldon Apt. 319 St. Louis, MO 63121 524-1032	Section Eight

Attachment F : Resident Advisory Board Comments and Responses

Members asked that gutters be covered.

The Authority stated that gutters are cleaned by maintenance and stated that they will evaluate the use of covered gutters when future purchases are made.

Members asked that the Authority review the specifications of its floor tile.

The Authority stated that it would review the specifications.

Members asked that a resident's committee be formed the review product and material specifics and finishes. Ms. Wanda Cohen further stated, "This inquiry is in regards to the status of a committee that was to be organized in regards to resident input concerning the purchase of major appliances, and the process of securing contractors. I offered this suggestion during our PHA Annual Plan Meeting two years ago. In that meeting Mr. Molloy agreed that this type of committee could be formed and put into operation. As of today this committee has not come into existence. Please research the issue of concern and contact me in regards to the steps needed to secure the formation of this committee."

The Authority stated that it will establish such a committee and will seek its input. The Authority noted that it had not made any significant changes in the procurement of the material, appliances or fixtures in the past several years, but would form such a committee and consider the collective input of tenants when making certain improvements but that implementing suggestions may be limited by procurement requirements, budget and maintenance practices.

Members stated that previous contractor had done a very good job and that they were pleased with the work.

The Authority thanked the members for their kind words.

Members asked that erosion and washout be controlled to greatest extent possible.

The Authority noted erosion control and landscaping were, and regularly are, included in the Capital Plan.

Members stated that maintenance personnel were nice, polite and courteous.

The Authority thanked the members for their kind words

Members asked that maintenance not smoke when entering their homes.

The Authority noted that smoking was bad for your health and suggested that its employees not smoke.

Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part I: Summary

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name	Comprehensive Grant Number	FFY of Grant Approval
HILLSDALE HOUSING AUTHORITY	MO36P22050102	2002

☐ Original Annual Statement ☐ Reserve for Disaster/Emergencies ☐ Revised Annual Statement/Revision Number ____ ☐ Performance & Evaluation Report for Program Year Ending 6/30/03
☐ Final Performance & Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds	$0	$0	$0	$0
2	1406 Operations	$30,485	$32,641	$32,641	$30,485
3	1408 Management Improvements	$0	$0	$0	$0
4	1410 Administration	$4,000	$3,144	$3,144	$3,144
5	1411 Audit	$0	$0	$0	$0
6	1415 Liquidated Damages	$0	$0	$0	$0
7	1430 Fees and Costs	$0	$0	$0	$0
8	1440 Site Acquisition	$0	$0	$0	$0
9	1450 Site Improvement	$6,300	$5,000	$5,000	$5,000
10	1460 Dwelling Structures	$0	$0	$0	$0
11	1465.1 Dwelling Equipment - Nonexpendable	$0	$0	$0	$0
12	1470 Nondwelling Structures	$0	$0	$0	$0
13	1475 Nondwelling Equipment	$0	$0	$0	$0
14	1485 Demolition	$0	$0	$0	$0
15	1490 Replacement Reserve	$0	$0	$0	$0
16	1495.1 Relocation Costs	$0	$0	$0	$0
17	1499 Development Activity	$0	$0	$0	$0
18	1502 Contingency (May not exceed 8% of line 19)	$0	$0	$0	$0
19	Amount of Annual Grant (Sum of lines 2-18)	$40,785	$40,785	$40,785	$38,629
20	Amount of line 19 Related LBP Activities	$0	$0	$0	$0
21	Amount of line 19 Related to Section 504 Compliance	$0	$0	$0	$0
22	Amount of line 19 Related to Security	$0	$0	$0	$0
23	Amount of line 19 Related to Energy Conservation Measures	$0	$0	$0	$0

Signature of Executive Director and Date	Signature of Public Housing Director/Office of Native American Programs Administrator and Date
X	X

1- To be completed for the Performance and evaluation report or a Revised Annual Statement
2- To be completed for the Performance and Evaluation Report.

Facsimile form HUD-52837 (10/96) Handbook 7485.3

Annual Statement/Performance and Evaluation

U.S. Department of Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Comprehensive Grant Program (CGP) Part II: Supporting Pages

and Urban Development
Office of Public and Indian Housing

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
PHA-WIDE	Operations	1406	N/A	$30,485	$32,641	$32,641	$30,485	In Process
PHA-WIDE	Administration	1410	N/A	$4,000	$3,144	$3,144	$3,144	Completed
MO220-03	Replace concrete/flatwork	1450	830sq.ft.	$5,000	$5,000	$5,000	$5,000	Completed
MO220-03	Deliver/spread topsoil	1450	35 cuyds	$1,300	$0	$0	$0	Deleted

Annual Statement/Performance and Evaluation
Comprehensive Grant Program (CGP) Part III: Implementation Schedule

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
MO220-03	12/31/02	9/30/02	9/30/02	3/31/04			

Signature of Executive Director and Date	Signature of Public Housing Director/Office of Native American Programs Administrator and Date
X	X

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
(2) To be completed for the Performance and Evaluation Report.

Facsimile of form HUD-52837 (10/96) ref Handbook 7485.3