

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Campbell Housing Authority</u> PHA Code: <u>MO 026</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2010</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>56</u> Number of HCV units: <u> </u>				
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
	PHA 1:				PH HCV
	PHA 2:				
	PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.				
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The mission of the CHA is the same as that of the Department of Housing and Urban Development: <u>To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</u>				
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. CHA Goal: Expand the supply of assisted housing Objectives: <ul style="list-style-type: none"> • Reduce public housing vacancies: CHA Goal: Improve the quality of assisted housing Objectives: <ul style="list-style-type: none"> • Improve public housing management and increase customer satisfaction CHA Goal: Provide an improved living environment Objectives: <ul style="list-style-type: none"> • Implement public housing security improvements: CHA Goal: Promote self-sufficiency and asset development of assisted households Objectives: <ul style="list-style-type: none"> • Provide or attract supportive services to improve assistance recipients' employability and to increase independence for the elderly or families with disabilities. 				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <u>Due to ARRA grant</u> (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. <i>Available at 930 Poplar St., Campbell, MO</i>				
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i>				
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.				
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFP financing. <i>See attached 2010 Annual Statement; 2009 Performance and Evaluation Report; 2009 Stimulus Performance and Evaluation Report; 2008 Performance and Evaluation Report; and 2007 Performance and Evaluation Report</i>				

8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. <i>See attached Capital Fund Program Five-Year Action Plan</i>
8.3	Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. <i>See attached</i>

9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. <i>See attached</i>
10.0	Additional Information. Describe the following, as well as any additional information HUD has requested. (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan. The PHA has been able to maintain its mission to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination through the utilization of previous Capital funds and the proper application of our public housing policies. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification” a. Substantial Deviation from the 5-Year Plan The Campbell Housing Authority’s Definition of Substantial Deviation and Significant Amendment or Modification is as follows: <ul style="list-style-type: none"> • changes to rent or admissions policies or organization of the waiting list; • additions of non-emergency work items (items not intended in the current 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and • Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. b. Significant Amendment or Modification to the Annual Plan The Campbell Housing Authority’s Definition of Substantial Deviation and Significant Amendment or Modification is as follows: <ul style="list-style-type: none"> • changes to rent or admissions policies or organization of the waiting list; • additions of non-emergency work items (items not intended in the current Annual Statement) or change in use of replacement reserve funds under the Capital Fund; and • Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

11.0	Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office. (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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- 11.0
- f. No RAB comments
 - g. No one challenged any element of the Agency Plan

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Campbell Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>MO36P026501-10</u>		FFY of Grant: <u>2010</u> FFY of Grant Approval:	
Replacement Housing Factor Grant No:					
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	13,678.00			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,400.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	40,800.00			
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable	4,800.00			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2-19)	69,678.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

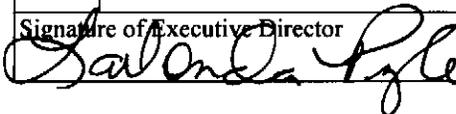
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

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Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 01/13/2010		Signature of Public Housing Director Date	

Part II: Supporting Pages								
PHA Name: Campbell Housing Authority		Grant Type and Number Capital Fund Program Grant No: MO36P026501-10 Replacement Housing Factor Grant No:			CFFP (Yes/No): No		Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA Wide Operations	Housing Operations Sub total	1406	20%	13,678.00				
				13,678.00				
HA Wide Fees and Cost	A/E Services Sub total	1430	100%	10,400.00				
				10,400.00				
AMP 1 MO 26-1	A. Landscaping	1450	20%	5,000.00				
	B. Replace sidewalks	1450	1000 SF	15,400.00				
	C. Replace ranges	1465.1	6 EA	2,400.00				
	Sub total			22,800.00				
AMP 1 MO 26-2	A. Landscaping	1450	20%	5,000.00				
	B. Replace sidewalks	1450	1000 SF	15,400.00				
	C. Replace ranges	1465.1	6 EA	2,400.00				
	Sub total			22,800.00				
	Grand Total			69,678.00				

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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Campbell Housing Authority			MO36P026501-10		Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
MO 26-1 (AMP 1)	3/31/2012		3/31/2014		
MO 26-2 (AMP 1)	3/31/2012		3/31/2014		
HA Wide	3/31/2012		3/31/2014		

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U. S. Housing Act of 1937, as amended.

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Part I: Summary						
PHA Name/Number Campbell Housing Authority/MO 026		Locality (City/County & State) Campbell/Dunklin County/Missouri			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	59,378.00	59,378.00	59,378.00	59,378.00
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other		10,300.00	10,300.00	10,300.00	10,300.00
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		69,678.00	69,678.00	69,678.00	69,678.00
L.	Total Non-CFP Funds					
M.	Grand Total		69,678.00	69,678.00	69,678.00	69,678.00

Part I: Summary (Continuation)						
PHA Name/Number Campbell Housing Authority/MO 026		Locality (City/County & State) Campbell/Dunklin County/Missouri			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
	MO 26-1 (AMP 1)	Annual Statement	59,378.00	59,378.00	54,000.00	
	MO 26-2 (AMP 1)				5,378.00	59,378.00

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011		Work Statement for Year: 3 FFY 2012	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	HA Wide Fees & Costs		HA Wide Fees & Costs	
Annual Statement	A/E Services	\$10,300.00	A/E Services	\$10,300.00
	Subtotal of Estimated Cost	\$10,300.00	Subtotal of Estimated Cost	\$10,300.00

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013		Work Statement for Year: 5 FFY 2014	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	HA Wide Fees & Costs		HA Wide Fees & Costs	
Annual	A/E Services	\$10,300.00	A/E Services	\$10,300.00
Statement				
	Subtotal of Estimated Cost	\$10,300.00	Subtotal of Estimated Cost	\$10,300.00

Annual Statement/Performance and Evaluation Report
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 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Campbell Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>MO36S026501-09</u>		FFY of Grant: <u>2009</u> FFY of Grant Approval: <u>2009</u>	
Replacement Housing Factor Grant No:					
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
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	88,484.00		88,484.00	0.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2-19)	88,484.00		88,484.00	0.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: Campbell Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>MO36S026501-09</u>		Replacement Housing Factor Grant No: FFY of Grant: <u>2009</u> FFY of Grant Approval: <u>2009</u>	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director <i>Savonda Fgh</i>		Date <i>01/13/2010</i>		Signature of Public Housing Director Date	

Part II: Supporting Pages								
PHA Name: Campbell Housing Authority		Grant Type and Number Capital Fund Program Grant No: MO36S026501-09 Replacement Housing Factor Grant No:			CFFP (Yes/No): No		Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ₂	
MO 26-02	Replace roofs and install air vents	1460	20	88,484.00		88,484.00	0.00	0% Complete
Grand Total						88,484.00	88,484.00	0.00

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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Campbell Housing Authority			MO36S026501-09		Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
MO 26-2 (AMP 1)	3/17/2010	09/04/2009	03/17/2012		

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U. S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
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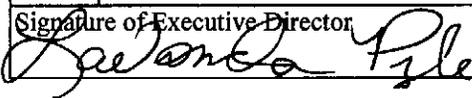
Part I: Summary					
PHA Name: Campbell Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>MO36P026501-09</u>		FFY of Grant: <u>2009</u> FFY of Grant Approval: <u>2009</u>	
Replacement Housing Factor Grant No:					
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	69,678.00		69,678.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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20	Amount of Annual Grant: (sum of lines 2-19)	69,678.00		69,678.00	0.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary					
PHA Name: Campbell Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>MO36P026501-09</u>		Replacement Housing Factor Grant No: FFY of Grant: <u>2009</u> FFY of Grant Approval: <u>2009</u>	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/09/2010		Signature of Public Housing Director Date	

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
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Expires 4/30/2011

Part I: Summary					
PHA Name: Campbell Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: MO36P026501-08		FFY of Grant: <u>2008</u> FFY of Grant Approval: <u>2008</u>	
Replacement Housing Factor Grant No:					
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements	700.00	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000.00	4,500.00	4,500.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	59,204.00	65,404.00	65,404.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
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18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
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20	Amount of Annual Grant: (sum of lines 2-19)	69,904.00	69,904.00	69,904.00	0.00
21	Amount of line 20 Related to LBP Activities				
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23	Amount of line 20 Related to Security - Soft Costs				
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 Expires 4/30/2011

Part I: Summary					
PHA Name: Campbell Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>MO36P026501-08</u>		Replacement Housing Factor Grant No: FFY of Grant: <u>2008</u> FFY of Grant Approval: <u>2008</u>	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director <i>Laronda Pyle</i>		Date <i>01-13-2010</i>		Signature of Public Housing Director Date	

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Campbell Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>MO36P026501-07</u>		FFY of Grant: <u>2007</u> FFY of Grant Approval: <u>2007</u>	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	650.00	248.00	248.00	248.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000.00	10,000.00	10,000.00	7,802.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	55,580.00	55,982.00	55,982.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2-19)	66,230.00	66,230.00	66,230.00	8,050.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

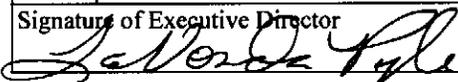
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
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Part I: Summary					
PHA Name: Campbell Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>MO36P026501-07</u>		Replacement Housing Factor Grant No: FFY of Grant: <u>2007</u> FFY of Grant Approval: <u>2007</u>	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <u>9/30/09</u> <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date <u>01/13/2010</u>		Signature of Public Housing Director Date	

9.0 Statement of Housing Needs

Housing Needs of Families on the Public Housing Waiting Lists

	Number of families	Percentage of total families	Annual Turnover
Waiting list total	2		25
Extremely low income <=30% AMI	1	50	
Very low income (>30% but <=50% AMI)	1	50	
Low income (>50% but <80% AMI)	0		
Families with children	1	50	
Elderly families	0		
Families with Disabilities	1	50	
Race/ethnicity White	2	100	
Characteristics by Bedroom Size			
1 Bedroom	1	50	8
2 Bedroom	1	50	12
3 Bedroom	0		5
The waiting list is open			

9.1 Strategy for Addressing Housing Needs

Strategies

Maximize the number of affordable units available to the CHA within its current resources by:

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units

Target available assistance to families at or below 50% of AMI

- Adopt rent policies to support and encourage work

The factors listed below, influenced the CHA's selection of the strategies it will pursue:

- Funding and staffing constraints
- Limited availability of sites for assisted housing
- Influence of the housing market on CHA programs

**Campbell Housing Authority
Violence Against Women Act Policy**

In compliance with the Violence Against Women Act of 2005, it is the policy of the Campbell Housing Authority that:

1. No person shall be denied housing or have his or her housing assistance terminated because that person has been a victim of domestic violence or stalking.
2. In the event that one member of a household engages in domestic violence or stalking, only that person shall be denied housing or have his or her assistance terminated; the remainder of the household shall not otherwise be excluded from assistance or terminated from assistance.
3. If a person vacates a unit in order to protect the safety of a victim of domestic violence, that act shall not constitute "abandonment" under the terms of the lease.
4. The Housing Authority reserves the right to require proof that an individual is a victim of domestic violence or stalking. The tenant shall be afforded 14 business days to provide documentation, including one or more of the following: certification from an attorney, domestic violence service provider or medical professional, or a police or court record