

1.0	PHA Information PHA Name: <u>Houston Housing Authority</u> PHA Code: <u>MO040</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/01/2010</u>																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>68</u> Number of HCV units: <u>83</u>																										
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input checked="" 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.)																										
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width:35%;">Participating PHAs</th> <th rowspan="2" style="width:8%;">PHA Code</th> <th rowspan="2" style="width:20%;">Program(s) Included in the Consortia</th> <th rowspan="2" style="width:15%;">Programs Not in the Consortia</th> <th colspan="2" style="width:24%;">No. of Units in Each Program</th> </tr> <tr> <th style="width:12%;">PH</th> <th style="width:12%;">HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:					
Participating PHAs	PHA Code					Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program																			
		PH	HCV																								
PHA 1:																											
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: Houston Housing Authority is committed to excellence in providing quality housing and an environment which will ensure all residents opportunity, access to resources, and the expectation that our communities will be safe and secure places to live and realize their potential																										
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. Reduce Public Housing Vacancies Improve voucher management Renovate or modernize public housing units																										
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (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. The PHA Plan, revised policies or program changes are available for public review and inspection at the main administrative office of Houston Housing Authority																										
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 CFFP financing.																										
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.																										
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	<p>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.</p>
9.1	<p>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.</p> <p>Houston Housing Authority markets it's public housing and rental assistance program through media, radio and public meetings with Senior Citizens Organizations, local Food Pantry and Division of Aging.</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(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.</p> <p>Houston Housing Authority is meeting the needs of Texas County residents. We maintain well kept marketable public housing apartments. We strive to keep our properties in good repair and appealing to the public. We continue to maintain a waiting list for most apartments. Our only except would be Efficiency or Zero Bedroom apartments. We work hard to keep those marketable.</p> <p>Houston Housing Authority works hard to work with our current landlords and to recruit new landlords to the Section 8 Rental Assistance Program. We have made presentation to City Council along with Chamber of Commerce regarding our programs and feel that it has helped us market our programs.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p>
11.0	<p>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.</p> <p>(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)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(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.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

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: Houston Housing Authority		Grant Type and Number Capital Fund Program Grant No: MO36P04050107 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2007 FFY of Grant Approval:	
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: 06/30/2009 <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)	7,970	7,849	7,970	7,849	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	5,000	5,000	5,000	5,000	
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	59,433	59,838	0	0	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures	0	0			
13	1475 Non-dwelling Equipment	7,300	7,016	7,016	7,016	
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities ⁴					

¹ To be completed for the Performance and Evaluation Report.

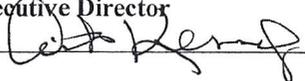
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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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Part I: Summary						
PHA Name: Houston Houston Housing Authority		Grant Type and Number Capital Fund Program Grant No: MO36P04050107 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2007 FFY of Grant Approval:	
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: 06/30/2009				<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	
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)	79,703	79,703	19,986	19,865	
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					
Signature of Executive Director 		Date 10/16/2009		Signature of Public Housing Director		
				Date		

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 II: Supporting Pages								
PHA Name: Houston Housing Authority			Grant Type and Number Capital Fund Program Grant No: MO36P04050107 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
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	Administration	1410	10%	7,970	7,849	7,970	7,849	complete
	Fees and Costs	1430						
	A. A/E Design		LS	3,000	3,812	3,812	3,812	complete
	B. Inspection		LS	2,000	1,188	1,188	1,188	complete
	Nondwelling Structures	1470						
	A. Upgrade shingled roof on Admin Bldg.		26 sqs	0	0			moved to 50108
	Sub total HA wide			12,970	12,849			
MO 040-1	Dwelling Structures	1460	LS	59,433	59,838			
	Nondwelling equipment	1475						
	A. Purchase 2 ranges and 3 refrigerators		LS	3,400	3,136	3,136	3,136	complete
	B. Purchase Dump Trailer		LS	3,900	3,880	3,880	3,880	complete
	Subtotal of MO 040-1			66,733	66,854			
	Grand Total all CFP			79,703	79,703	19,986	19,865	

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² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Houston Housing Authority				Federal FFY of Grant: 2007	
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	
HA Wide	09/30/2009	06/03/2009	09/30/2011	06/30/2009	
MO040-1	09/30/2009	07/29/2009	09/30/2011		

¹ 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.

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

Part I: Summary

PHA Name: Houston Housing Authority	Grant Type and Number Capital Fund Program Grant No: MO36P04050108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval:
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Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 06/30/2009 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)	8,400	8,400	8,400	8,316
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	5,000	5,000	5,000	4,018
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	70,724	63,200		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	0	7,524		
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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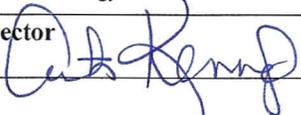
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Part I: Summary					
PHA Name: Houston Housing Authority	Grant Type and Number Capital Fund Program Grant No: MO36P04050108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2008 FFY of Grant Approval:			
Type of Grant					
<input type="checkbox"/> 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: 06/30/2009		<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
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)	84,124		13,400	12,334
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				
Signature of Executive Director		Date		Signature of Public Housing Director	
		10/16/2009			

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Part II: Supporting Pages								
PHA Name: Houston Housing Authority			Grant Type and Number Capital Fund Program Grant No: MO36P04050108 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
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	Administration	1410	10%	8,200	8,400	8,400	8,316	
	Fees & Costs Inspection	1430		5,000	5,000	5,000	4,018	under contract
	A. A/E Design		LS	(3,000)	(3,000)	(3,000)	(3,000)	complete
	B. Inspection		LS	(2,000)	(2,000)	(2,000)	(1,018)	under contract
	Subtotal HA Wide			13,200	13,400	13,400	12,334	
MO 040-01	Dwelling Structures	1460		65,400	67,324			
	A. Upgrade shingled roof 6 plex apt. 221- 226		41 sqs	(8,999)	(8,900)			
	B. Upgrade 18 Kitchens		18	(49,600)	(51,524)			
	C. TPO roof warranty (2 years)		LS	(6,900)	(6,900)			
	Nondwelling Equipment	1475		3,400	3,400			
	A. Purchase 2 ranges 2 refrigerators		LS	(3,400)	(3,400)			
	Subtotal MO-040-01			68,800	70,724			
	Grand Total all CFP			82,000	84,124	13,400	12,334	

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² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Houston Housing Authority				Federal FFY of Grant: 2008	
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	
HA Wide	06/12/2010	06/30/2009	06/12/2012		
MO-040-01	06/12/2010		06/12/2010		

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Part I: Summary		
PHA Name: Houston Housing Authority	Grant Type and Number Capital Fund Program Grant No: MO36S040501-09 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval:

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 06/30/2009 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)	10,484.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	5,000.00		4,188.00	
8	1440 Site Acquisition				
9	1450 Site Improvement	7,000.00			
10	1460 Dwelling Structures	72,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	12,000.00			
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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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	
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)	106,484.00				
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					
Signature of Executive Director 		Date 10/16/2009		Signature of Public Housing Director		
				Date		

¹ To be completed for the Performance and Evaluation Report.

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Part II: Supporting Pages								
PHA Name: Houston Housing Authority		Grant Type and Number Capital Fund Program Grant No: MO365S040501-09 CFFP (Yes/ No): Replacement Housing Factor Grant 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	
HA Wide	Administration	1410	9.85%	10,484				
	Fees and Costs	1430	LS	5,000				
	A. A/E design			(3,000)		3,000		
	B. Inspection			(2,000)		1,188		
	Nondwelling Structures	1470		12,000				
	A. Upgrade Main bldg EPDM roof		6.5 sqs	(12,000)				
	Subtotal HA - Wide			27,282		4,188		
MO 040-1	Site Improvement	1450		7,000				
	A. Construction privacy fence /Chestnut Terrace		96 LF	(7,000)				
	Dwelling Structures	1460		72,000				
	A. Upgrade kitchens		24	(72,000)				
	Subtotal MO 040-1			79,000				
	Grand Total all CFP			106,484		4,188		

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PHA Name: Houston Housing Authority				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	
HA Wide	03/18/2010		03/18/2011 (60%)		
			03/18/2012 (100%)		
MO 040-1	03/18/2010		03/18/2011 (60%)		
			03/18/2012 (100%)		

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		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)	8350.00	0	0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	5000.00	0	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	30504.00			
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	40000.00			
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

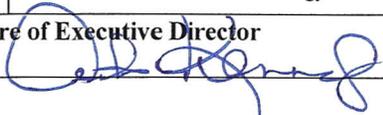
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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:		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: FFY of Grant Approval:	
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 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	
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)	83854.00				
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					
Signature of Executive Director		Date		Signature of Public Housing Director		
		10/16/2009				

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 II: Supporting Pages								
PHA Name: Houston Housing Authority			Grant Type and Number Capital Fund Program Grant No: MO36P04050109 CFFP (Yes/ No): Replacement Housing Factor Grant 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	
HA Wide	Administration	1410	10%	8350.00	0	0	0	
	Fees and Costss	1430						
	A. A/E Design		LS	3000.00				
	B. Inspections		LS	2000.00				
	Site Improvement	1450		30504.00				
	A Construct New Parking Ozark/Chestnut Property.		18	(24000.00)	0	0	0	
	B. Pave Admin Parking Lot			(6504.00)	0	0	0	
	Sub total HA Wide			43854.00.				
MO040-1	Non Dwelling structures	1470		43854.00				
	A. Upgrade windows & exterior doors in Admin/Community Center			(43854.00)				
	Subtotal MO040-1			43854.00				
	Grand Total			83,854.00				

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.

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: Houston Housing Authority		Grant Type and Number Capital Fund Program Grant No: MO36P04050110 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval:	
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: 06/30/2009 <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)	8,400.00	0	0	0	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	5,000.00	0	0	0	
8	1440 Site Acquisition					
9	1450 Site Improvement	30,400.00				
10	1460 Dwelling Structures	40,600.00	0	0	0	
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					

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: Houston Housing Authority		Grant Type and Number Capital Fund Program Grant No: MO36P04050110 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2010 FFY of Grant Approval:	
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: 06/30/2009 <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	
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)					
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					
Signature of Executive Director 			Date 10-2-2009		Signature of Public Housing Director 	
					Date	

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 II: Supporting Pages								
PHA Name: Houston Housing Authority			Grant Type and Number Capital Fund Program Grant No: MO36P04050110 CFFP (Yes/ No): Replacement Housing Factor Grant 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	Administration	1410	10%	8,400.00	0	0	0	
	Fees & Costs	1430						
	A. A/E Design		LS	3,000.00	0	0	0	
	B. Inspections		LS	2,000.00	0	0	0	
	Non dwelling Structures	1470						
	A. Upgrade Exterior doors Chestnut /Ozark Apts		96	40,600.00	0	0	0	
	B. Upgrade parking pads Chestnut Street PHase I of III		11	30,000.00	0	0	0	
	Sub total HA Wide			84,000.00	0	0	0	
	Grand Total of MO 040-1			84,000.00				

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.

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

Part I: Summary

PHA Name/Number Houston Housing Authority\		Locality (City/County & State)Houston, MO		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:		
A.	Development Number and Name	Work Statement for Year 1 FFY_2011____	Work Statement for Year 2 FFY ____2012____	Work Statement for Year 3 FFY ____2013____	Work Statement for Year 4 FFY ____2014____	Work Statement for Year 5 FFY ____2015____
	MO 040	-				
B.	Physical Improvements Subtotal		42600.00	53,000.00	70,600.00	35,000.00
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment		28,000.00	16,000.00		35,600.00
E.	Administration		8,400.00	8,400	8,400	8,400
F.	Other		5,000.00	5,000	5,000	5,000
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		84,000	84,000	84,000	84,000
L.	Total Non-CFP Funds					
M.	Grand Total					

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>2014</u> FFY			Work Statement for Year: <u>2015</u> FFY		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	Upgrade Bathrooms Phase II of III	20	76,500.00	Upgrade Bathrooms Phase III of III	17	65,025.00
		Subtotal of Estimated Cost		\$ 76,500	Subtotal of Estimated Cost	

Resolution # 280
Adopted 04-09-2007
Amendment to ACOP & Admin Plan

VIOLENCE AGAINST WOMEN ACT POLICY HOUSTON HOUSING AUTHORITY

1.0 PURPOSE

The purpose of this Policy is to reduce domestic violence, dating violence, and stalking and to prevent homelessness by:

- a) protecting the safety of victims;
- b) creating long term housing solutions for victims;
- c) building collaborations among victim service providers; and
- d) assisting Housing Authority to respond appropriately to the violence while maintaining a safe environment for Housing Authority, employees, tenants, applicants, Section 8 participants, program participants and others.

The Policy will assist the Houston Housing Authority (HHA) in providing rights under the Violence Against Women Act to its applicants, public housing residents, Section 8 participants and other program participants.

2.0 MISSION STATEMENT

HHA's policy is to comply with the 2005 VAWA Pub. L. 109-162; Stat 2960 signed into law on January 5, 2006 and codified at 42 U.S.C. - 1437d (1) and 437f (d), (o) & 1 and (u).

HHA shall not discriminate against an applicant, public housing resident, Section 8 program participant or other program participant on the basis of the rights or privileges provided under the VAWA.

This Policy is incorporated into HHA's "Admission & Continuing Occupancy of Low Rent Housing" and "Section 8 Program" Administrative Plan" and applies to all HHA housing programs.

3.0 DEFINITIONS

The definitions in this Section apply only to this Policy

3.1 CONFIDENTIALITY:

Means that HHA will not enter information provided to HHA under 4.0 and 4.1 into a shared database or provide this information to any related entity except as stated in 4.2

3.2 DATING VIOLENCE:

Violence committed by a person

- a) who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- b) where the existence of such a relationship shall be determined based on a consideration of the following factors:
 - i) the length of the relationship
 - ii) the type of relationship
 - iii) the frequency of interaction between the persons involved in the relationship 42USC - 1437d(u)(3)(A).

3.3 DOMESTIC VIOLENCE:

Felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, committed by a person with whom the victim shares a child in common, committed by a person who is cohabitating with or has cohabitated with the victim as a spouse, committed by a person similarly situated to a spouse of the victim under the domestic or family violence laws of Missouri, or committed by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the State of Missouri 42 USC - 1437d(u)(3)(B)

3.4 IMMEDIATE FAMILY MEMBER:

A spouse, parent, brother or sister, or child of a victim or an individual to whom the victim stands in loco parent; or any other person living in the household of the victim and related to the victim by blood and marriage. 42USC - 1437 d(u)(3)(D)

3.5 LONG TERM HOUSING:

Is housing that is sustainable, accessible, affordable and safer for the foreseeable future which:

- a) the person rents or owns
- b) is subsidized by a voucher or other program as long as the person meets the eligibility requirements of the program:
- c) directly provided by HHA, is not time limited and the person meets the eligibility requirements of the program.

3.6 PERPETRATOR:

A person who commits an act of domestic violence, dating domestic violence or stalking against a victim.

3.7 STALKING:

- a) to follow, pursue or repeatedly commit acts with the intent to kill, injure, harass or intimidate the victim
- b) to place under surveillance with the intent to kill, injure, harass or intimidate the victim
- c) in the course of, or as a result of such following, pursuit, surveillance, or repeatedly committed acts, to place the victim in reasonable fear of the death of, or serious bodily injury to the victim; or
- d) to cause substantial emotional harm to the victim, a member of the immediate family of the victim or the spouse or intimate partner of the victim 42 USC - 1437d(u)(3)(C)

3.8 VICTIM

Is a person who is the victim of domestic violence, dating violence, or stalking under this Policy and who has timely and completely completed the certification under 4.0 and 4.1 or as requested by HHA.

3.9 FAILURE TO PROVIDE CERTIFICATION UNDER 4.0 AND 4.1

The person shall provide completed and accurate certifications to HHA, owner or manager within 14 days after the party requested in writing that the person completes the certifications. If the person does not provide a completed and accurate certification within the 14 business days, HHA, the owner or manager may take action to deny or terminate participation or tenancy under 42 USC - 1437I(5) &(6); 42 USC -1437 (d) (c) (3); 42 USC - 1437f (c) (9); 42 USC - 1437f(d) (1)(B) (ii) & (III); 42 USC - 1437f (o)(7)(C) & (D); or 42 USC - 1437f(o)(20) or for other good cause.

4.0 HUD APPROVED CERTIFICATION

For each incident that a person is claiming is abuse, the person shall certify to HHA, owner or manager their victim Status by completely a HUD approved certification form. The person shall certify the date, time and description of the incidents, that the incidents are bona fide incidents of actual or threatened abuses and meet the requirements of VAWA and this Policy. The person shall provide information to identify the perpetrator including but not limited to the name and, if known, all alias names, date of

birth, address, contact information such as postal, email or internet address, telephone or facsimile number or other information.

4.1 OTHER CERTIFICATION

A person who is claiming victim status shall provide to HHA, an owner or manager:

- a) documentation signed by the victim and an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional from whom the stalking or the effects of the abuse, in which the professional attests under penalty of perjury (28 USC - 1746) to the professional's belief that the incident(s) in questions are bona fide incidents of abuse; or
- b) a federal, state, tribal, territorial, local police or court record

4.2 CONFIDENTIALITY

HHA, the owner and manager shall keep all information provided to HHA under this Section confidential. HHA, owner and manager shall not enter the information into a shared database or provide to any related entity except to the extent that:

- a) the victim requests or consents to the disclosure in writing
- b) the disclosure is required for
 - (i) eviction from public housing under 42 USC - 1437 1 (5) & (6) (See Section 5 in this Policy)
 - (ii) termination of Section 8 assistance under 42 USC - 1437f (c) (9); 42 USAC - 1437(d) (1) (B) (ii) & (iii); 42 USC - 1437f (o)(7)(C) & (D); or 42 USC - 1437f (o)(20) (See Section 5 in this Policy); or
- c) the disclosure is required by applicable law.

4.3 COMPLIANCE NOT SUFFICIENT TO CONSTITUTE EVIDENCE OF UNREASONABLE ACT

The HHA, owner or manager compliance with Sections 4.0, 4.1 and 4.2 shall along not be sufficient to show evidence of an unreasonable act or omission by them.

4.4 APPROPRIATE BASIS FOR DENIAL OF ADMISSION, ASSISTANCE OR TENANCY

4.5

HHA shall not deny participation or admission to a program on the basis of a person's victim status, if the person otherwise qualifies for admission of assistance.

4.6

An incident or incident of actual or threatened domestic violence, dating violence, or stalking will not be a serious or repeated violation of the lease by victim and shall not be good cause for denying to a victim admission to a program, terminating Section 8 assistance or occupancy rights, or evicting a tenant.

4.7

Criminal activity directly related to domestic violence, dating violence, or stalking engaged in by a member of a tenant's household or any guest or other person under the tenant's control shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim of that domestic violence, dating violence or stalking.

4.8

Notwithstanding Sections 4.5, 4.6 and 4.7 HHA, an owner or manage may bifurcate a lease or evict, remove or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others without evicting, removing, terminating assistance to or otherwise penalizing the victim of the violence who is also a tenant or lawful occupant. 42 USC - 1437d (1)(6)(B)

4.9

Nothing in Sections 4.5, 4.6 and 4.7 shall limit the authority of HHA, an owner or manage, when notified, to honor court orders addressing right of access to or control of the property, including civil protection orders issued to protect the victim and issued to address the distribution or possession of property among the household members when the family breaks up.

5.0

Nothing in Sections 4.5, 4.6 and 4.7 limits HHA, an owner or manager's authority to evict or terminate assistance to any tenant for any violation of lease not premised on the act or acts of violence against the tenant or a member of the tenant's household. However, HHA, owner or manager may not hold a victim to a more demanding standard.

5.1

Nothing in Sections 4.5, 4.6 and 4.7 limits HHA, an owner or manager's authority to evict or terminate assistance, or deny admission to a program if the HHA, owner or manager can show an actual and imminent threat to other tenants, neighbors, guests, their employees, persons providing service to the property or others if the tenant family is not evicted or terminated from assistance or denied admission.

5.2

Nothing in Sections 4.5, 4.6 and 4.7 limits HHA, an owner or manager's authority to deny admission, terminate assistance or evict a person who engages in criminal acts including but not limited to acts of physical violence or stalking against family members or others.

5.3

A Section 8 recipient who moves out of an assisted dwelling unit to protect their health or safety and who:

- a) is a victim under this Policy
- b) reasonably believes he or she is imminently threatened by harm from further violence if he or she remains in the unit; and
- c) has complied with all other obligations of the Section 8 program may receive a voucher and move to another Section 8 jurisdiction.

5.4

A public housing tenant who wants a transfer to protect their health or safety and who:

- a) is victim under this Policy
- b) reasonably believes he or she was imminently threatened by harm from further violence if he or she remains in the unit; and
- c) has complied with all other obligations of the public housing income program may transfer to another PHA unit, receive a Section 8 voucher and stay in jurisdiction or move to another Section 8 jurisdiction.

5.5 ACTIONS AGAINST A PERPETRATOR

HHA may evict, terminate assistance, deny admission to a program or trespass a perpetrator from its property under this Policy. The victim shall take action to control or prevent the domestic violence, dating violence, or stalking. The action may include but is not limited to:

- a) obtaining an enforcing a restraining or no contact order or order for protection against the perpetrator
- b) obtaining and enforcing a trespass against the perpetrator
- c) enforcing HHA or law enforcement's trespass against the perpetrator
- d) preventing the delivery of the perpetrator's mail to the victim's unit
- e) providing identifying information listed in 4.0 and f) other reasonable measures.

6.0 NOTICE TO APPLICANTS, PARTICIPANTS, TENANTS AND SECTION 8 MANAGERS AND OWNERS

HHA shall provide notice to applicants, participants, tenants, managers and owners of their rights and obligations pertaining to confidentiality and Appropriate Basis for Denial of Admission, Assistance or Tenancy.

7.0 REPORTING REQUIREMENTS

HHA shall include in its 5 year plan a statement of goals, objectives, policies or programs that will serve the needs of victims. HHA shall also include a description of activities, services or programs provided or offered either directly or in partnership with other services providers to victims, to help victims, obtain or maintain housing or to prevent the abuse or to enhance the safety of victims.

8.0 CONFLICT AND SCOPE

This Policy does not enlarge HHA's duty under any law, regulation or ordinance. If this Policy conflicts with the applicable law, regulation or ordinance, the law, regulation or ordinance shall control. If this Policy conflicts with another HHA policy, such as its Statement of Policies or Section 8 Administration Plan, this Policy will control.

9.0 AMENDMENT

The Executive Director may amend this policy when it is reasonably necessary to effectuate the Policy's intent, purpose or interpretation. The proposed amendment along with the rationale for the amendment shall be submitted to the Executive Director for consideration where reasonably necessary, the Executive Director may approve the amendment. The amendment shall be effective and incorporated on the date that the Executive Director signs the amendment.

Attachment to Five Year Plan:

We currently do not have an active Resident Advisory Board. At our monthly dinner with residents I asked for any comments to our annual plan that was our for public review. We discussed what was on our five year plan. There were no comments made.

Anita Kennedy
Executive Director
11-02-2009