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

1.0 PHA Information

PHA Name: Friend Housing Authority PHA Code: NE 063

PHA Type: ☒ Small ☐ High Performing ☐ Standard ☐ HCV (Section 8)

PHA Fiscal Year Beginning: (MM/YYYY): 10/01/2010

2.0 Inventory (based on ACC units at time of FY beginning in 1.0 above)

Number of PH units:30 Number of HCV units: _____

3.0 Submission Type

☐ 5-Year and Annual Plan ☐ Annual Plan Only ☒ 5-Year Plan Only

4.0 PHA Consortia ☐ 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	
				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:

****Our mission is to continue serving the needs of low income, extremely low income families, and disabled people in our jurisdiction for the next five years.

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.

****We maintain our goal of keeping all units in good repair, occupied, updated and attractive for all current and new residents.

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.

****VAWA dated and signed policy is on file at Friendship Terrace office located at 1027 2nd Street in Friend, Nebraska 68359.

****Friendship Terrace office located at 1027 2nd Street in Friend, Nebraska 68359.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. *Include statements related to these programs as applicable.*

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 *Capital Fund Program Annual Statement/Performance and Evaluation Report,* 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 *Capital Fund Program Five-Year Action Plan,* 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).

☐ 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.

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.**
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. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

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, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only) (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only) (d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only) (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (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, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only) (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

(F) RESIDENT ADVISORY BOARD: WE HAVE NONE BUT WE DO HAVE TWO RESIDENTS ON OUR BOARD OF COMMISSIONERS.

(G) THERE WERE NO CHALLENGED ELEMENTS

MINUTE RECORD

No. 729 – Redfield & Company, Inc., Omaha

REGULAR MEETING OF THE BOARD OF
COMMISSIONERS WAS HELD AUG. 28
2008 @ 9:30 A.M. IN THE MULTI-
PURPOSE ROOM @ FRIENDSHIP TERRACE

Chairman E.R. Martin called the meeting to order with the following Board members present: Marvin Kraus, DeLores Becwar amd Lois Schweitzer. Absent Sheryl McKeeman.

The minutes of the prior meeting were reviewed. There being no additions or corrections motion was made by Schwietzer seconded by Becwar to accept the minutes as read roll Call: ayes Kraus, Schweitzer Becwas and Martin. Nays None Absent McKeeman

Monthly financial reports for the month of August was reviewed No additions or corrections were made. Motion was made by Becwar seconded by Kraus they be placed on file. Roll Call Ayes: Martin Becwar Schweitzer and Kraus Nays: None Absent: McKeeman

Res. 152

A copy of the Policy "Violance Against Women" was goven to each Board Member before the meeting for them to review. Chairman asked if there were any changes should be made.
Motion was made by Becwar seconded by Schweitzer Board accept the Policy. Roll call: Ayes Kraus Schweitzer Becwar and Martin Nays: None Absent: McKeeman

There being no further business to come befor the Board Chairman declared meeting adjourned.

Marion Groff
Secretary

E.R. Martin
Chairman

Housing Authority of the City of

FRIEND

Violence Against Women Act Policy

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 the Housing Authority (HA) to respond appropriately to the violence while maintaining a safe environment for
HA, employees, tenants, applicants and others.
The Policy will assist the HA in providing rights under the Violence Against Women Act to its applicants and public housing residents.

2.0 Mission Statement

The HA'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 (l) and 1437f (d), (o) & l and (u). The HA shall not discriminate against an applicant, public housing resident or program participant, on the basis of the rights or privileges provided under the VAWA.

3.0 Definitions

The definitions in this Section apply only to this Policy.
3.1 Confidentiality: Means that the HA will not enter information provided to the HA under 4.2 and 4.3 into a shared database or provide
this information to any related entity except as stated in 4.4.
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.
42 U.S.C. § 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
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.
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. 42 U.S.C. §
1437d (u) (3) (D)
3.5 Long-term Housing: Is housing that is sustainable, accessible, affordable and safefor 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 the HA, 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 U.S.C. § 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 4.2 and 4.3 or as requested by the HA.

4.0 Certification and Confidentiality

4.1 Failure to Provide Certification Under 4.2 and 4.3
The person shall provide complete and accurate certifications to the HA within 14 business days after the party requests in writing that
the person completes the certifications. If the person does not provide a complete and accurate certification within the 14 business
days, the HA, the owner or manager may take action to deny or terminate participation or tenancy under: 42 U. S. C. § 1437 l (5) & (6);
42 U. S. C. §1437 (d) (c) (3); 42 U. S. C. § 1437f (c)(9); 42 U. S. C. § 1437f (d)(1)(B)(ii) & (iii); 42 U. S. C. § 1437f (o)(7)(C) &(D);
or 42 U. S. C. § 1437f (o)(20) or for other good cause.
4.2 HUD Approved Certification

For each incident that a person is claiming is abuse, the person shall certify to the HA, the victim status by completing 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, e-mail or internet address, telephone or facsimile number or other information.

4.3 Other Certification

A person who is claiming victim status shall provide to the HA:

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 victim has sought assistance in addressing domestic violence, dating violence or stalking or the effects of the abuse, in which the professional attests under penalty of perjury (28 U.S.C. § 1746) to the professional's belief that the incident(s) in question are bona fide incidents of abuse; or

b) a federal, state, tribal, territorial, local police or court record.

4.4 Confidentiality

The HA shall keep all information provided to THE HA under this Section confidential. The THE HA 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 U. S. C. § 1437 I (5) & (6) (See Section 5 in this Policy);

(ii) the disclosure is required by applicable law.

4.5 Compliance Not Sufficient to Constitute Evidence of Unreasonable Act

The HA compliance with Sections 4.1, 4.2 and 4.3 shall alone not be sufficient to show evidence of an unreasonable act or omission by them.

5.0 <u>Appropriate Basis for Denial of Admission, Assistance or Tenancy</u>

5. 1 The HA shall not deny participation or admission to the public housing program on the basis of a person's victim status, if the person otherwise qualifies for admission of assistance.

5. 2 An incident or incidents 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, or occupancy rights, or evicting a tenant.

5.3 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.

5.4 Notwithstanding Sections 5.1, 5.2 and 5.3 the HA, may bifurcate a lease to 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 U.S.C. §1437d(l)(6)(B).

5.5 Nothing in Sections 5.1, 5.2 and 5.3 shall limit the authority of the HA, when notified, to honor court orders addressing rights 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.

5.6 Nothing in Sections 5.1, 5.2 and 5.3 limits the HA 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 the HA may not hold a victim to a more demanding standard.

5.7 Nothing in Sections 5.1, 5.2 and 5.3 limits the HA's authority to evict or terminate assistance, or deny admission to a program if the the HA can show an actual and imminent threat to other tenants, neighbors, guests, employees, persons providing service to the property or others if the tenant family is not evicted or terminated from assistance or denied admission.

5.8 Nothing in Sections 5.1, 5.2 or 5.3 limits the HA'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.

5.9 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 HA unit.

6.0 Actions Against a Perpetrator

The HA may evict or 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 and 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 the HA or law enforcement's trespass of the perpetrator;
d) preventing the delivery of the perpetrator's mail to the victim's unit;
e) providing identifying information listed in 4.2; and
f) other reasonable measures.

7.0 Notice to Applicants and Tenants.
The HA shall provide notice to applicants and tenants of their rights and obligations under Section 4.4 Confidentiality and Section 5.0 Appropriate Basis for Denial of Admission, Assistance or Tenancy.

8.0 Reporting Requirements

The HA shall include in its Agency Plan, a statement of goals, objectives, policies or programs that will serve the needs of victims when required. THE HA may also include a description of activities, services or programs provided or offered either directly or in partnership with other service providers to victims, to help victims obtain or maintain housing or to prevent the abuse or to enhance the safety of victims.

9.0 Conflict and Scope

This Policy does not enlarge the HA'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 HA policy, this Policy will control.

10.0 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.

GOALS:
The Housing Authority has teamed with the local community to help support children and adults from violence. If a child is

involved, the local office of child protective services will help assist and place the child in a safe environment. If an adult is involved, the
City Police Department or County Sheriff's department will assist the adult in getting to the safe harbor. The local Health department also will assist in placing families out of harms way with a contact person who will assist families with counseling services. All referrals will be made on a case-by-case basis.

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: Friend Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: NE26S06350109 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2009** **FFY of Grant Approval: 2009**

Type of Grant
☒ **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	**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)	$452	$452	$452	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	$11,196	$16,158	$16,158	$5,451
10	1460 Dwelling Structures	$17,400	$18,167	$18,167	$1,800
11	1465.1 Dwelling Equipment—Nonexpendable	$1,275	$1,475	$1,475	$1,075
12	1470 Non-dwelling Structures	$2,325	$2,325	$2,325	$1,092
13	1475 Non-dwelling Equipment	$12,520	$6,591	$6,591	$6,590
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.

form **HUD-50075.1** (4/2008)

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☐ **Performance and Evaluation Report for Period Ending:** ☐ **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)	$45,168	$45,168	$45,168	$16,008
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**	**Date**
Marion Gropp	July 20- 2010		

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form **HUD-50075.1** (4/2008)

Part II: Supporting Pages

PHA Name: Friend Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: NE26S06350109 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]	
PHA-Wide	Administration	1410		452.00	452.00	452.00	0.00	Partial
PHA-Wide	New Sidewalks	1450		8,070.00	12,845.00	12,845.00	4,087.99	Partial
PHA-Wide	Sodding	1450		1,200.00	1,036.00	1,364.68	1,364.68	Completed
PHA-Wide	Landscape around new addition	1450		1,926.00	2,277.00	2,277.00	0.00	Partial
PHA-Wide	Update boilers	1460		17,400.00	18,167.00	18.167.00	1,800.00	Partial
PHA-Wide	Refrigerator & Microwave for addition	1465		1,275.00	1,475.00	1,475.00	1,075.00	Partial
PHA-Wide	Laundry room repair & vinyl rug	1470		2,325.00	2,325.00	2,325.00	1,092.00	Partial
PHA-Wide	Blinds for new addition	1475		4,300.00	4,371.00	4,371.00	4,371.00	Completed
PHA-Wide	Conference table & chairs	1475		2,220.00	2,220.00	2,220.00	1,839.60	Completed

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[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
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Type of Grant
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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]	$35,728		$35,728	
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				
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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Type of Grant

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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)	$35,728		35,728	
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**	**Date**
Marion Kropp	July 20-2010		

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form **HUD-50075.1** (4/2008)

Part II: Supporting Pages

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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	1406		35,728		35,728		

[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
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Expires 4/30/2011

Part I: Summary

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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:** ☐ **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]	$34,961			
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				
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: Friend Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: NE26P06350110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2010** **FFY of Grant Approval: 2010**

Type of Grant

☒ **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	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)	$34,961			
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**	**Date**
Marion Gropp	July 20 - 2010		

[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: Friend Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: NE26P06350110 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]	
	Operations	1406	1	$34,961				

[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 I: Summary

Friend Housing Authority NE 063			Friend/Saline/Nebraska		☒Original 5-Year Plan ☐Revision No:	
A.	Development Number and Name HA-wide	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY2014
B.	Physical Improvements Subtotal	Annual Statement				
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations		$34,961	$34,961	$34,961	$34,961
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		$34,961	$34,961	$34,961	$34,961

Part I: Summary (Continuation)

Friend Housing Authority NE063			Friend/Saline/Nebraska		**Original 5-Year Plan** ☒**Revision No:**	
A.	Development Number and Name HA-wide	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
		Annual Statement				

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2011 FFY 2011			Work Statement for Year: 2012 FFY 2012		
	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						
	Subtotal of Estimated Cost		$34,961	Subtotal of Estimated Cost		$34,961

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2013 FFY 2013			Work Statement for Year: 2014 FFY 2014		
	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	HA-wide/Operations		$34,961	HA-wide/Operations		$34,961
	Subtotal of Estimated Cost		$34,961	Subtotal of Estimated Cost		$34,961

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2011 FFY 2011		Work Statement for Year: 2012 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/Operations	$34,961	HA-wide/Operations	$34,961
Annual				
Statement				
	Subtotal of Estimated Cost	$34,961	Subtotal of Estimated Cost	$34,961

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2013 FFY 2013		Work Statement for Year: 2014 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/Operations	$34,961	HA-wide/Operations	$34,961
Annual				
Statement				
	Subtotal of Estimated Cost	$34,961	Subtotal of Estimated Cost	$34,961