

<b>PHA 5-Year and Annual Plan v01</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: Housing Authority of Sayre PHA Code: OK040 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: 06//2010				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 39 Number of HCV units: _____				
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
<b>4.0</b>	<b>PHA Consortia</b> <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 PH HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.				
<b>5.1</b>	<b>Mission.</b> 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 PHA is the same as that of the Department of Housing and Urban Development: <b>To promote adequate, safe, and affordable housing, economic opportunity, and a suitable living and drug-free environment free from discrimination. We provide and maintain safe, quality housing in a cost-effective manner.</b>				
<b>5.2</b>	<b>Goals and Objectives.</b> 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. <b>The Sayre HA has continued to utilize modernization of the units to reach the goals set forth in the 2010 5-Year and Annual Plan by maintaining decent, safe, and affordable housing. Units continued to be renovated utilizing the Capital Fund Program. Occupancy remains steady at 95-100%. In 2007 the PHA implemented the Violence Against Women Policy.</b>				
<b>6.0</b>	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <b>None</b> (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. <b>All of the elements of the PHA Plan are readily available for review at the main administrative office of the PHA located 1310 N. 2<sup>nd</sup>, Sayre. OK 73662.</b>				
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i>				
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.				

8.1	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> 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	<b>Capital Fund Program Five-Year Action Plan.</b> 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	<b>Capital Fund Financing Program (CFFP).</b> <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	<b>Housing Needs.</b> 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. <b>The Sayre Housing Authority continues to provide information to elderly and disabled tenants regarding services in the community for meals delivered to their home. The HA cooperates with DHS in distributing times/dates and available financial resources to the residents of the HA.</b>
9.1	<b>Strategy for Addressing Housing Needs.</b> 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. <b>The HA continues to follow the priorities set forth in the application process for individuals with special needs or circumstances. The HA monitors the waiting lists for 1, 2, and 3 bedroom apartments to assure no preference is given based on various races and ethnic groups. The HA monitors effective maintenance and management policies to reduce turnover time and to reduce time to renovate PH units.</b>
10.0	<b>Additional Information.</b> 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>The Sayre HA has continued to utilize modernization of the units to reach the goals set forth in the 2010 5-Year and Annual Plan by maintaining decent, safe, and affordable housing. Occupancy remains steady at 95-100%.</b> (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification": <b>The Sayre Housing Authority's Substantial Deviation from the 5-Year Plan- Any change to Mission Statement such as: 50% deletion from or addition to the goals and objectives as a whole, 50% or more decrease in the quantifiable measurement of any individual goal or objective.</b>  "Significant Amendment/Modification" to the 5-Year Capital Fund Plan- 50% variance in the funds projected in the Capital Fund Program Annual Statement, Capital Fund Program and Capital Fund Program Replacement Housing Factor Annual Statement/Performance and Evaluation Report: Page 32 of 52 form HUD-50075-SF (04/30/2003), any increase or decrease over 50% in the funds projected in the Financial Resource Statement and/or the Capital Fund Program Annual Statement, any change in a policy or procedure that requires a regulatory 30-day posting, any submission to HUD that requires a separate notification to residents, such as HOPE VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership Programs, any change inconsistent with the local, approved Consolidated Plan.

11.0	<p><b>Required Submission for HUD Field Office Review.</b> 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. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> <li>(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)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(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.</li> <li>(g) Challenged Elements</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ul>
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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

<b>Part I: Summary</b>					
<b>PHA Name: Housing Authority of Sayre</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: OK56P04050110 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2010</b> <b>FFY of Grant Approval: 2010</b>
<b>Type of Grant</b> <input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:      )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0			
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	1,000.00			
3	1408 Management Improvements	0			
4	1410 Administration (may not exceed 10% of line 21)	0			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	0			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	0			
10	1460 Dwelling Structures	48,867.00			
11	1465.1 Dwelling Equipment—Nonexpendable	0			
12	1470 Non-dwelling Structures	0			
13	1475 Non-dwelling Equipment	0			
14	1485 Demolition	0			
15	1492 Moving to Work Demonstration	0			
16	1495.1 Relocation Costs	0			
17	1499 Development Activities <sup>4</sup>	0			

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

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

<sup>4</sup> 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. 2577-0326  
 Expires 4/30/2011

**Part I: Summary**  
**PIA Name:** \_\_\_\_\_ **FY of Grant:** 2010  
**Housing Authority of State:** \_\_\_\_\_ **FY of Grant Approval:** 2010  
**Grant Type and Number:** \_\_\_\_\_  
 Capital Fund Program Grant No.: DC 56P040511-10  
 Replacement Housing Program No. \_\_\_\_\_  
 Date of CHUP: \_\_\_\_\_

**Type of Grant:**  
 Original Annual Statement  Reserve for Disasters/Emergencies  Revised Annual Statement (previously) \_\_\_\_\_  
 Performance and Evaluation Report for Period Ending: \_\_\_\_\_  Final Performance and Evaluation Report \_\_\_\_\_

Line	Summary by Development Account	Total Estimated Cost		Obligated	Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>		Expended	
18a	FC: Collateralization of Debt, Service paid by JG PPA					
18b	FC: Collateralization of Debt, Service paid Via System of Direct Payment					
19	FC Contingency (may not exceed 3% of Line 20)					
20	Amount of Annual Payment (sum of lines 2-19)	49,867.00				
21	Amount of line 20 Related to Section 502 Activities					
22	Amount of line 20 Related to Section 502 Activities					
23	Amount of line 20 Related to Security - Section 502.3					
24	Amount of line 20 Related to Security - Third Costs					
25	Amount of line 20 Related to Energy Conservation Measures					

Signature of Executive Director: \_\_\_\_\_ Date: 4/15/2010  
 Signature of Public Housing Director: \_\_\_\_\_ Date: \_\_\_\_\_





Capital Fund Program—Five Year Action Plan

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2010

**Part I: Summary**

PHA Name/Number Housing Authority/OK56P0405010		Locality (City/County & State) Sayre, Beckham, Oklahoma		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:		
A.	Development Number and Name: OK56P040001 Housing Authority of Sayre	Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year 2 FFY <u>2011</u>	Work Statement for Year 3 FFY <u>2012</u>	Work Statement for Year 4 FFY <u>2013</u>	Work Statement for Year 5 FFY <u>2014</u>
B.	Physical Improvements Subtotal	Annual Statement	48,867.00	48,867.00	48,867.00	21,600.00
C.	Management Improvements		0	0	0	0
D.	PHA-Wide Non-dwelling Structures and Equipment		0	0	0	27,350.00
E.	Administration		0	0	0	0
F.	Other		0	0	0	0
G.	Operations		1,000.00	1,000.00	1,000.00	917.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		49,867.00	49,867.00	49,867.00	49,867.00
L.	Total Non-CFP Funds		0	0	0	0
M.	Grand Total		49,867.00	49,867.00	49,867.00	49,867.00

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year <u>2011</u> FFY <u>2010</u>			Work Statement for Year: <u>2012</u> FFY <u>2010</u>		
	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	Heat & Air Units inside and outside complete with new duct work and copper B-3	8	48,867.00	Heat & Air Units inside and outside complete with new duct work and copper B-3	8	48,867.00
Annual						
Statement						
	Subtotal of Estimated Cost		\$48,867.00	Subtotal of Estimated Cost		\$48,867.00







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

<b>Part I: Summary</b>					
PHA Name: Housing Authority of Sayre		Grant Type and Number Capital Fund Program Grant No: OK56P04050109 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009
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: 12/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0			
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	0			
3	1408 Management Improvements	0			
4	1410 Administration (may not exceed 10% of line 21)	0			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	0			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	0			
10	1460 Dwelling Structures	49,867.00			
11	1465.1 Dwelling Equipment—Nonexpendable	0			
12	1470 Non-dwelling Structures	0			
13	1475 Non-dwelling Equipment	0			
14	1485 Demolition	0			
15	1492 Moving to Work Demonstration	0			
16	1495.1 Relocation Costs	0			
17	1499 Development Activities <sup>4</sup>	0			

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

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

<sup>4</sup> 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**

<b>Part I: Summary</b>						
<b>PHA Name:</b> Housing Authority of Sayre		<b>Grant Type and Number</b> Capital Fund Program Grant No: OK56P04050109 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2009</b> <b>FFY of Grant Approval: 2009</b>	
<b>Type of Grant</b>						
<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: 12/30/2009				<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	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)	49,867.00				
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					
<b>Signature of Executive Director</b>		<b>Date 5/15/2010</b>		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

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

<sup>4</sup> 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 B: Summary**

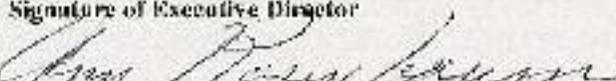
<b>PHA Name:</b> HOUSING	<b>General Type and Number:</b> Capital Fund Program Grant No: CCF504-0050-0-0 Replacement Housing Factor Grant No: Date of CFFP:	<b>FY of Grant:</b> 2009 <b>FY of Grant Approval:</b> 2009
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**Type of Grant**

Original Annual Statement       Reserve for Disaster Emergencies       Revised Annual Statement (revision no: )

Performance and Evaluation Report for Period Ending: 12/31/2009       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	501 Collateralization or Debt Service paid by the PHA				
18b	9001 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 3% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	49,867.00			
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				

<b>Signature of Executive Director</b> 	<b>Date</b> 04/15/2010	<b>Signature of Public Housing Director</b>	<b>Date</b>
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<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFF Grants for operations.  
<sup>4</sup> RHF funds shall be included here.





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

PHA Name: PHA Name: Housing Authority of Sayre	Grant Type and Number Capital Fund Program Grant No: OK56P04050108 Replacement Housing Factor Grant No:	Federal FY of Grant: 2008
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Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending:  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	3,613.00	0	0	0
3	1408 Management Improvements	1,000.00	0	0	0
4	1410 Administration	1,000.00	0	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	0	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	5,640.00	0	0	0
10	1460 Dwelling Structures	43,350.00	54,653.00	54,653.00	54,653.00
11	1465.1 Dwelling Equipment—Nonexpendable	0	0	0	0
12	1470 Nondwelling Structures	50.00	0	0	0
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	54,653.00	54,653.00	54,653.00	54,653.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Comp ce				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security–Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				



