

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: Housing Authority of the City of Shamokin	Grant Type and Number Capital Fund Program Grant No: PA26P05550110 Replacement Housing Factor Grant No: Date of CFFP: 07/15/2010	FFY of Grant: 2010 FFY of Grant Approval: 2010
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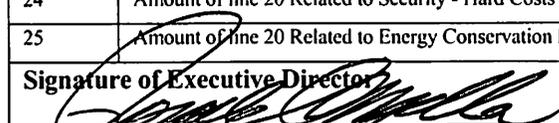
Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:2)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

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	27,775.42			
3	1408 Management Improvements	24,000			
4	1410 Administration (may not exceed 10% of line 21)	13,500			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	7,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	114,250			
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.

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Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2)	
<input 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	96,821.58			
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	283,347			
21	Amount of line 20 Related to LBP Activities	0			
22	Amount of line 20 Related to Section 504 Activities	0			
23	Amount of line 20 Related to Security - Soft Costs	0			
24	Amount of line 20 Related to Security - Hard Costs	24,000			
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director 		Date 10/05/2010		Signature of Public Housing Director Date	

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Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program Grant No: PA26P05550110 CFFP (Yes/ No): Yes 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	
PHA Wide								
2010-01	Operations	1406	202	27,775.42				In application
2010-02	Management Improvements Security Contracts	1408	202	24,000				In application
2010-03	Administration Wages, Benefits for Executive Director and Admin. Assistant	1410	202	13,500				In application
2010-04	Eng. & Design Fees Costs & Related Costs to Bid Construction Projects	1430	202	7,000				In application
AMP I								
2010-05	Dwelling Structures Replace Windows in High Rise, New Energy Efficient Units	1460	100	114,250				In application
2010-06	Collateralization Debt Service Direct Payment	9000	100	96,821.58				In application

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