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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.

Report on PHA Progress in meeting previous 5-Year Plan goals and objectives:

- (1) Goal: Increase the availability of decent, safe, and affordable housing - expand the supply of assisted housing.
Objective: To reduce vacancies by maintaining an annual occupancy rate of at least 97% thru 12-31-2009.
Objective Met: During past 4.5 calendar years, this PHA maintained an average occupancy rate of 98.1%.
- (2) Goal: Improve quality of assisted housing – increase customer satisfaction,
Objective: Achieve highest score possible in customer satisfaction on the PHAS (Public Housing Assessment System).
Objective Met: With HUD deregulation of small, high performing PHAs, this PHA was exempt in years 2005, 2007, 2009 with the previous score carried forward from year 2004, which was 10 points out of possible 10 and maintained in Year 2006 the last year scored by HUD.
- (3) Goal: Improve community quality of life and economic vitality – provide an improved living environment.
Objective: Implement public housing security improvements: Every 2 years, review and/or redefine the memorandum of understanding with the local police dept. The purpose is to develop strategies for identifying and minimizing crime in and around our developments.
Objective Met: The MOU with local police dept was reviewed and re-attested by the mutual parties every two years; residents are periodically provided written reminders on how they can help create a safe living environment.
- (4) Goal: Promote self-sufficiency and asset development of families and individuals.
Objective (A): Increase the number and percentage of employed persons in assisted families—Give priority placement to applicants where at least one family member has a regular income, after consideration of the annual 40% rule for placement of extremely low income families and of urgency to keep units occupied.
Objective (B): Provide or attract supportive services to improve assistance recipients' employability by annually reviewing individual resident's progress during any recertification.
Objective (A): Unmet: Near impossible to increase number and percentage of employed persons when the latter two exceptions of 40% and urgency to keep units occupied seemingly ranks as highest priority.
Objective (B) Met: The State of Wisconsin HHSD requires that at least one head of household be actively employed at least 30 hrs/week in order to receive State provided assistance such as health, food share and child care benefits. Our PHA practices providing resident encouragement with periodic discussions, via oral or written reminders, as to benefits of more education vs economic viability for them personally.
- (5) Goal: Ensure equal opportunity in housing for all Americans – ensure equal opportunity and affirmatively further fair housing.
Objective: Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required: Review reasonable accommodations for persons with disabilities with every participant applicant.
Objective Met: The matter of reasonable accommodations are addressed beginning at time of application for tenancy, and enacted as needed during tenancy.

Identify quantifiable goals and objectives for next five years:

- (1) Goal: Increase the availability of decent, safe, and affordable housing – expand the supply of assisted housing.
Objective: To reduce vacancies by maintaining an annual occupancy rate of at least 98% thru 07/01/2013.
- (2) Goal: Improve the quality of assisted housing.
Objective: Improve public housing management: (PHAS score) – Equal or exceed the past 4-year 98.5 annual average.
- (3) Goal: Improve community quality of life and economic vitality.
Objective: Continue and/or improve public housing security improvements – Every 2 years, review and/or redefine the memorandum of understanding with the local police department.; develop strategies for identifying and minimizing crime in and around our developments.
- (4) Goal: Promote self-sufficiency and asset development of families and individuals.
Objective (A): Increase the number and percentage of employed persons in assisted families giving priority to applicants where at least one family member has a regular income, after consideration of the annual 40% rule for placement of extremely low income families and of urgency to keep units occupied.
Objective (B): Provide or attract supportive services to improve assistance recipients' employability: Annually, review individual residents' progress during recertification.
- (5) Goal: Ensure Equal Opportunity in Housing for all Americans.
Objective: Undertake affirmative measures to ensure accessible housing to personal with all varieties of disabilities regardless of unit size required - Review Reasonable Accommodations for Persons with Disabilities with every participant-applicant.

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <p>(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.</p>
7.0	<p>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></p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>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 – See attached forms HUD-50075.1, as identified accordingly .</p>
8.2	<p>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.</p>
8.3	<p>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.</p>
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>

Additional Information. Describe the following, as well as any additional information HUD has requested.

- (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan:

The De Pere Housing Authority has been relatively successful in meeting its mission and goals stated in the previous 5-Year Plan. Refer to Items 5.1 and 5.2 of this Plan for explicit detail.

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

"Substantial deviation" or "significant amendment or modification" is defined as discretionary changes in the plans or policies of the Housing Authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners. Such examples are as follows:

- Change to rent or admission policy, or change to organization of the waiting list;
- Addition of non-emergency work item (item not included in the current Annual Statement of 5-Year Plan) having a work item value of \$25,000 or more;
- Any change with regard to demolition or disposition, designation, homeownership program of conversion activity.

- (c) Any additional information HUD has requested:

VAWA Statement -The primary objectives of Violence Against Women Reauthorization Act of 2005 are to reduce violence against child and adult victims, and to protect or increase the protection of safety and confidentiality of individuals who are victims of abuse: *(Note: In 2008, no individual elected to invoke this policy while applying for housing, nor while under a lease with De Pere Housing Authority.)*

The De Pere Housing Authority is a small public housing agency that takes this matter seriously. On 10-12-2006, our agency's Board of Commissioners adopted Resolution No. 372 to incorporate into the Dwelling Lease, the optional protection a resident victim may elect under the circumstances outlined in VAWA, as per requirements and guidance provided via HUD Notice PIH 2006-42.

Both during initial leasing up, and again, during the annual recertification, all family tenants are reminded of VAWA protection from eviction of their public housing rental unit. At that time, applicable adult resident(s) shall be requested to acknowledge receipt of this printed information with a dated signature. The printed information includes substantive verbiage from PIH 2006-42, and form HUD-50066, Certification of Domestic Violence, Dating Violence, or Stalking.

Additionally, the printed informational handout contains suggested emergency telephone contact numbers such as: local police, crises center, the community clinic, and family services.

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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. *(De Pere Housing Authority elects to submit the below information with signature by mail.)*

- (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: NONE to report.
- (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)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for the submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central off ice of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs

are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.
2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming

fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.

7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (**Note: applies to only public housing**).
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: **(i)** A description of the need for measures to ensure the safety of public housing residents; **(ii)** A description of any crime prevention activities conducted or to be conducted by the PHA; and **(iii)** A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.
9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: **1)** Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service

providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; **2)** Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and **3)** Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

- (a) Hope VI or Mixed Finance Modernization or Development.** **1)** A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and **2)** A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: **(1)** A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and **(2)** A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm
Note: This statement must be submitted to the extent **that approved and/or pending** demolition and/or disposition has changed.
- (c) Conversion of Public Housing.** With respect to public housing owned by a PHA: **1)** A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; **2)** An analysis of the projects or buildings required to be converted; and **3)** A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>
- (d) Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.

- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (**Note:** Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).

9.1 Strategy for Addressing Housing Needs. Provide a 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:** Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).

10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (**Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.**)
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (**Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.**)
- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (**Note: Standard and Troubled PHAs complete annually.**)

11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (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.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (**Must be attached electronically for PHAs receiving CFP grants only**). See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (**Must be attached electronically for PHAs receiving CFP grants only**). See instructions in 8.2.

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: De Pere Housing Authority	Grant Type and Number Capital Fund Program Grant No: WI39P10250107 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval: 2007
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Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 03-Final)
 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 - 2003 CFP Replacement Reserves	54,758.00	46,896.81	46,896.81	46,896.81
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	-0-	6,527.19	6,527.19	6,527.19
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	65,242.00	74,529.81	74,529.81	74,529.81
11	1465.1 Dwelling Equipment—Nonexpendable	25,000.00	19,710.00	19,710.00	19,710.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	53,500.00	17,975.00	17,975.00	17,975.00
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: De Pere Housing Authority	Grant Type and Number Capital Fund Program Grant No: WI39P10250107 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval: 2007			
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: 03 - Final)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input checked="" 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)	118,742.00	118,742.00	118,742.00	118,742.00
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	118,742.00	19,710.00	19,710.00	19,710.00
Signature of Executive Director			Signature of Public Housing Director		
Date			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: De Pere Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39P10250107 CFFP (Yes/ No): 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	
WI102-Nicolet Terrace, West	Replace refrigerator w/frostfree energy star model not to exceed 16 cu. ft. in size	1465.1	54	25,000.00	19,710.00	19,710.00	19,710.00	CLOSED
WI102-Nicolet Terrace, East	Replace unit windows, plus gallery windows, and make (2) gallery doors wheelchair accessible	1460	75	110,000.00	114,870.00	74,529.81	74,529.81	CLOSED
	A/E Fees re: windows	1430	1	10,000.00	6,527.19	6,527.19	6,527.19	CLOSED
	Replace out-of-doors gas- powered emergency generator	1475	1	20,000.00	17,975.00	17,975.00	17,975.00	CLOSED
	Total Project Costs:				165,638.81			
	2007 CFP Grant:				(118,742.00)			
	2003 CFP Replacement Reserves				(46,896.81)			

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: De Pere Housing Authority	Grant Type and Number Capital Fund Program Grant No: WI39P10250108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval: 2008
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Type of Grant

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:03 dtd 06-30-2009)
 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	35,328.00	-0-	-0-	-0-
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	---	9,450.00	9,450.00	9,450.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	90,000.00	101,163.24	64,442.14	64,442.14
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	---			
13	1475 Non-dwelling Equipment	---	14,714.76	14,714.76	14,714.76
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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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: De Pere Housing Authority	Grant Type and Number Capital Fund Program Grant No: WI39P10250108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval: 2008
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Type of Grant

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 03 dtd 06-30-2009)

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
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)	125,328.00	125,328.00	88,606.90	88,606.90
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
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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: De Pere Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39P10250108 CFFP (Yes/ No): 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	
WI102-PHA Wide	Replace riding lawn mower	1475.2	1	---	10,492.50	10,492.50	10,492.50	CLOSED
	5-Yr Energy Audit-Physical Needs Assessment	1410.2	1	---	9,450.00	9,450.00	9,450.00	CLOSED
	Place unused funds into Cert. of Deposit	1406	1	35,328.00	-0-			OPEN
WI102-Nicolet Terrace, West	Replace upper lounge TV	1475.3	1	---	748.00	748.00	748.00	CLOSED
	Replace lobby water cooler	1475.3	1	---	549.95	549.95	549.95	CLOSED
	Replace unit carpet/vinyl flooring	1460	52	90,000.00	62,716.32	62,716.32	62,716.32	CLOSED
	Force account labor (flooring project)	1460	52	---	1,725.82	1,725.82	1,725.82	CLOSED
	Replace transfer switch on back-up gas-powered generator	1475.2	1	---	2,924.31	2,924.31	2,924.31	CLOSED
WI102-Nicolet Terrace, West&East	Replace automatic door operator	1460	2	---	4,000.00			OPEN
WI102-Scattered Sites	Replace water heater w/power vented 40 gal. model	1460	5	---	4,000.00			OPEN
	Replace roof & siding-Sunnyview or Sunrise	1460	2	-0-	28,721.10			OPEN

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: De Pere 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	
WI102-PHA Wide	06/12/2010		06/12/2012		
WI102-Nicolet Terrace, West	06/12/2010		06/12/2012		

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.

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: De Pere Housing Authority	Grant Type and Number Capital Fund Program Grant No: WI39S10250109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009
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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: Operating Reserves, as needed	156,460			
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	16,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	135,640			
11	1465.1 Dwelling Equipment—Nonexpendable	7,000			
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: De Pere Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39S10250109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2009 FFY of Grant Approval: 2009	
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)	158,640			
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	158,640			
Signature of Executive Director			Signature of Public Housing Director		
Date			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.

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⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: De Pere Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39S10250109 CFFP (Yes/ No): 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	
WI102-002, Nicolet Terrace, East bldg	Replace all unit and common area zone valves and thermostats	1460	75	30,000				
WI102-001, Scattered Sites	Replace unit furnace: 45,000 Btu for 3&4 BR units; 60,000 Btu 5BR unit-all w/high-efficiency, sealed combustion model; replace thermostat to include blower only option: Est. total: \$52,000, less 2003 CFP replacement reserves	1460	15	12,960				
WI102-001, Scattered Sites	Replace unit refrigerator w/energy star model	1465	15	7,000				
WI102-Scattered Sites, 6 Units [Sunnyview, Sunrise]	A/E Fees & Costs: Est. total=\$24,600 for total of 15 units	1430	6	16,000				
	Strip off (2) layers roof shingles, eliminate chimney, create an overhang, replace plywood as needed; apply Lifetime architectural laminated shingle roofing w/new peak roof vent and soffit venting, replace gutters, downspouts, cover soffit w/vinyl	1460	6	92,680				
	Replace siding w/T111 board, add insulation board	1460	6	-0-				

	& housewrap/ insulate basement interior walls/sill box: Est. total=\$60,000							
	Prime/paint new exterior siding: Est. total=\$13,200	1460	6	-0-				
	Replace overhead garage door & track	1460	6	5,800				

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: De Pere 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	
WI102 Scattered Sites, 6 Units	03/08/2010		03/08/2012		
WI102 Nicolet Terrace, East Bldg	03/08/2010		03/08/2012		

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.

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: De Pere Housing Authority	Grant Type and Number Capital Fund Program Grant No: WI39P10250109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009
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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: Operating Reserves (O.R.), as needed	148,950			
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	8,000			
8	1440 Site Acquisition				
9	1450 Site Improvement \$30,000 = O.R.				
10	1460 Dwelling Structures + \$91,700 = O.R.	116,925			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures \$17,400 = O.R.				
13	1475 Non-dwelling Equipment \$ 9,850 = O.R.				
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: De Pere Housing Authority	Grant Type and Number Capital Fund Program Grant No: WI39P10250109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval: 2009			
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)	124,925			
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	116,925			
Signature of Executive Director		Date		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.

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Part II: Supporting Pages								
PHA Name: De Pere Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39P10250109 CFFP (Yes/ No): 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	
WI102-Scattered Sites, 5 Units [So. Seventh and Amhart]	A/E Fees & Costs	1430	1	8,000				
	Air tightness testing & heat loss abatement	1460	5	6,250				
	Strip off (2) layers roof shingles, eliminate chimney, create an overhang, replace plywood as needed; apply Lifetime architectural laminated shingle roofing w/new peak roof venting, gutters, downspouts	1460	5	68,625				
	Replace siding w/T111 board, add insulation board, house wrap / insulate basement interior walls/sill box O.R. = \$81,700	1460	5	42,050				
	Prime/paint new exterior siding O.R. = \$ 6,000		5					
	Replace overhead garage door & track O.R. = \$4,000		5					
WI102, Scattered Sites, 6 Units [on units that were re-sided last year: Sunnyview and Sunrise]	Improve foundation grade, shrubs replacements, rolled sod and window wells, as needed O.R. = \$30,000		6					

Part II: Supporting Pages Continuation

Capital Fund Program Grant No: WI39P10250109

WI102 PHA Wide	Replace hardware for (2) office computers w/Windows 7 (?), plus (1) printer (energy star-qualified; incorporate existing copier to also use as a document scanner from computers; update data back-up system to include double back-up off-site storage O.R. = \$6,500		2					
	Replace sewer cleaner w/self-feeding 100ft cable model O.R. = \$1,500		1					
	Relocate tenant postal boxes; create storage area for archived admin files O.R. = \$8,000		2					
WI102 Nicolet Terrace, West bldg	Replace blower in cabinet heater O.R. = \$1,400		7					
WI102 Nicolet Terrace, West & East bldgs	Replace expiring fire extinguisher O.R. = \$1,850		7					
	Replace automatic door operator on N.T. interior door of glass vestibule off wing ends & main entrance O.R. = \$8,000		4					
	Replace bench swing O.R. = \$1,440		4					

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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: De Pere 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	
WI102 PHA Wide	09/15/2011		09/15/2013		
WI102 Scattered Sites, 5 Units	09/15/2011		09/15/2013		
WI102 Nicolet Terrace, West & East Bldgs	09/15/2011		09/15/2013		

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.

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: De Pere Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39P10250110 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval: 2010	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds: Operating Reserves, as needed	60,000				
2	1406 Operations (may not exceed 20% of line 21) ³					
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	8,000				
8	1440 Site Acquisition					
9	1450 Site Improvement	45,000				
10	1460 Dwelling Structures	166,700				
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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 Capital Fund Financing Program

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Part I: Summary					
PHA Name: De Pere Housing Authority	Grant Type and Number Capital Fund Program Grant No: WI39P10250110 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2010 FFY of Grant Approval: 2010			
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)	219,700			
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	112,200			
Signature of Executive Director			Signature of Public Housing Director		
Date			Date		

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² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
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⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: De Pere Housing Authority			Grant Type and Number Capital Fund Program Grant No: WI39P10250110 CFFP (Yes/ No): 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	
WI102-Scattered Sites, 4 Units [Hockers and Erie]	A/E Fees & Costs	1430	1	8,000				
	Air tightness-heat loss testing	1460	4	5,000				
	Strip (2) layers roof shingles, eliminate chimney, create an overhang, replace plywood as needed; apply Lifetime architectural laminated shingle roofing & ridge venting, gutters, downspouts	1460	4	54,900				
	Replace siding w/T111 board, add insulation board, house wrap / insulate basement interior walls, sillbox	1460	4	99,000				
	Prime/paint new exterior siding	1460	4	4,800				
	Replace overhead garage door & track	1460	4	3,000				
WI102, Scattered Sites, 9 Units [So. Seventh, Amhart, Erie & Hockers]	Improve foundation grade, shrubs replacements, rolled sod as needed	1450	9	45,000				

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

PART I: SUMMARY

PHA Name/Number: De Pere Housing Authority/ WI102			Locality (De Pere/ Brown, Wisconsin)			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: Rolling Basis	
A.	Development Number and Name	Work Statement for Year 1 FFY Grant 2010 PHA FY 2011	Work Statement for Year 2 FFY Grant: 2011 PHA FY 2012	Work Statement for Year 3 FFY Grant:: 2012 PHA FY 2013	Work Statement for Year 4 FFY Grant: 2013 PHA FY 2014	Work Statement for Year 5 FFY Grant: 2014 PHA FY 2015	
B.	Physical Improvements Subtotal	Annual Statement	70,000	106,000	89,200	---	
C.	Management Improvements						
D.	PHA-Wide Non-dwelling Structures and Equipment		60,000			30,000	
	ADMINISTRATION: PNA/EA			12,000			
F.	Other: A/E Fees & Costs		26,000	12,000			
G.	Operations						
H.	Demolition						
I.	Development						
J.	Capital Fund Financing – Debt Service						
K.	Total CFP Funds		156,000	130,500	89,200	30,000	
L.	Total Non-CFP Funds	As needed from Operating Reserves	As needed from Operating Reserves	As needed from Operating Reserves	As needed from Operating Reserves	As needed from Operating Reserves	
M.	Grand Total		156,000	130,500	89,200	30,000	

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

Work Statement for Year 1 FFY 2010	Work Statement for Year 2012 FFY Grant: 2011			Work Statement for Year: 2013 FFY Grant: 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	<i>WI102-Nicolet Terrace, East & West: Update fire alarm system w/an addressable system</i>	1	25,000	<i>WI102-Nicolet Terrace, West: Add extended canopy structure outside main entrance to sidewalk (?rebuild main entrance outer glass wall?); include new automatic entry doors or just operators</i>		60,000
Statement						
	<i>WI102-Nicolet Terrace: Replace 100 gal. nat'l gas cyclone water heater: West bldg=Bth250 East bldg=Bth199</i>	2	15,000	<i>WI102 PHA Wide: A/E fee/costs-Nicolet Terrace-front entrance work; scattered sites bath/ramp</i>	1	12,000
	<i>WI102-Nicolet Terrace, West: Replace AC indoor generator</i>	1	20,000	<i>WI102-Nicolet Terrace, East: replace refrigerator w/15 cu ft energy star model, to include (3) ADA models</i>	32	11,500
	<i>WI102-Scattered Site: Replace bathtub&surround</i>	15	30,000	<i>WI102-PHA Wide: Physical Needs Assessment/Energy Audit</i>	1	12,000
	<i>Modify side entrance (install ramp/deck-change bathroom door for "visitability" compliance: remove inner bath door & wall/install outer pocket door, replace bath vinyl floor covering</i>	8	40,000	<i>Modify side entrance (install ramp/deck- change bathroom door for "visitability" compliance: remove inner bath door & wall/install outer pocket door; replace bath vinyl floor covering</i>	7	35,000
	<i>WI102-PHA Wide: A/E fee/costs - fire alarm update [scattered site bathtub replacement & visitability 2-yr project]</i>	15	26,000			

