

<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Housing Authority of the City of Eau Claire</u> PHA Code: <u>WI207</u> PHA Type: <input checked="" type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input checked="" type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/01/2009</u>
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<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>109</u> Number of HCV units: <u>405</u>
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<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input checked="" type="checkbox"/> 5-Year Plan Only
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<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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th style="width:50%;">PH</th> <th style="width:50%;">HCV</th> </tr> <tr> <td style="height: 15px;"> </td> <td> </td> </tr> <tr> <td style="height: 15px;"> </td> <td> </td> </tr> <tr> <td style="height: 15px;"> </td> <td> </td> </tr> </table>	No. of Units in Each Program		PH	HCV						
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.
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<b>5.1</b>	<p><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: <b>Because we believe that the goal of any enlightened community should be that all its families should have a suitable living environment and home and because we further believe that the elimination of slums and blight and the preservation of families and neighborhoods enhance the general welfare and security of all, we, the undersigned commissioners of the Housing Authority of the City of Eau Claire, declare the mission of the Housing Authority of the City of Eau Claire to be as follows:</b></p> <p><b>Consistent with the charge of the Eau Claire City Council, the mission of the Housing Authority of the City of Eau Claire (a public corporation) shall be to assist in providing suitable housing and an acceptable environment for the elderly, the handicapped, and the disadvantaged; to assist low-income homeowners with the rehabilitation of their own property; to encourage private investment in housing to help meet the housing needs of all citizens; and to minimize the burden on the city property taxpayer.</b></p> <p><b>In so doing, the Housing Authority shall act in an entrepreneurial manner, leveraging federal, state, and private funds as it assumes an active role in the renewal and growth necessary to assure that Eau Claire will be a prosperous and vital city for future generations.</b></p>
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5.2	<p><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.</p> <p>Increase the availability of decent, safe and affordable housing by applying for additional Voucher funding if available and continue to have applicants ready to occupy Public Housing units as soon as they are ready. Improve the quality and management of assisted housing by striving to maintain a "High Performer" status in PHAS and SEMAP. Increase customer satisfaction by sending survey cards after each tenant generated work order. Modernize Public Housing units by continually making improvements to Housing owned units. Improve community quality of life and economic vitality by providing an improved living environment by subsidizing units in nearly all census tracts in the City of Eau Claire. Promote self-sufficiency and asset development of families and individuals by increasing the number of FSS households. Ensure equal opportunity in housing for all residents by undertaking affirmative measures to ensure access to assisted housing and provide suitable living environment for families living in assisted housing regardless of race, color, religion, national origin, sex, familial status and disability and undertake affirmative measures to ensure accessible housing to person with all varieties of disabilities regardless of unit size required.</p> <p>The Housing Authority has maintained "High Performer" status for the last 5 years. We continue to keep our Public Housing turnover days to a minimum. Over the last five years the Housing Authority has installed water saving toilets, high efficiency furnaces, "Energy Star" refrigerators, and energy efficient water heaters. Roofs and windows have been replaced. Bathroom and kitchen cabinets and countertops have been replaced, including microwaves in some units. Many units have been painted throughout and flooring has been replaced as needed. Several bathrooms have been remodeled. In the last five years five families have completed the FSS program, claiming a total of \$29,500. We currently have 2 additional families participating in the FSS program.</p>
6.0	<p><b>PHA Plan Update</b></p> <p>(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.</p>
7.0	<p><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></p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><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.</p>
8.2	<p><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.</p>
8.3	<p><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.</p>
9.0	<p><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.</p>
9.1	<p><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. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.  (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p>

- 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)

WI207  
Housing Authority of the City of Eau Claire  
5-Year Plan

The Housing Authority of the City of Eau Claire (HACEC) provides each tenant with a copy of our VAWA Policy (copy enclosed).

No one has invoked his or her rights under our VAWA policy. The HACEC will continue to keep our tenants aware of the VAWA Policy and take any action as needed.

WI207

Housing Authority of the City of Eau Claire  
Resident Advisory Board Meeting  
August 14, 2009

The Resident Advisory Board (RAB) meeting was held today at 9:00 am. Housing Authority staff, Keith Johnathan and Paula Bussman attended the meeting along with four members of the RAB. The RAB members present were Melissa Gargulak, Nancy Watkins, Linda Lee and Ginger Burdick.

Paula Bussman went over the plan and explained the Five-Year Action plan and the process for expending the Capital Funds including the 2009 ARRA funds.

As a result of this meeting, the RAB came up with the following suggestions:

- 1- Alternative energy practices should be used as much as possible
- 2- Local businesses should donate or give discounts for appliances and remodeling needs of units.
- 3- Community Service Workers should be used for help with easier non-professional needs of units.

These are very good suggestions which we have addressed over the course of the past several years.

The Energy Audits which were conducted in 2006/2007 addressed the issues of efficiency with the replacement of appliances with energy star equivalents. Incandescent bulbs were replaced with fluorescent ones. Whole house ventilation fans were installed in each unit. We are always looking for different and better ways to promote energy efficiency and alternative means for energy. Our efforts will continue in the future.

The businesses we deal with have already provided discounts on their products and services through the competitive bidding process. Those on our standing order contractor list have given discounted prices for those appliances and services we use on a regular basis. Contractors that provide services for larger jobs go through a competitive bidding process, as well, to ensure that we receive, in most cases, the lowest competitive price for the job.

We have addressed the use of community service workers as part of our maintenance routine. We, in fact, have worked with the County to use community service workers for cleanup of the Runway Avenue area. We run into insurance issues should we use community Service workers for unit maintenance work. In addition, with a high rate of turnover of community service workers, it would be difficult to maintain a standard of work with the make readies. We will continue to use community service workers, but we will limit the work to neighborhood clean ups.

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 Eau Claire	Grant Type and Number Capital Fund Program Grant No: WT39R20750104 Replacement Housing Factor Grant No: Date of CFPP:	FFY of Grant: 2004 FFY of Grant Approval: 2003
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Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: Summary by Development Account	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: )		Total Actual Cost <sup>1</sup>	
			Original	Total Estimated Cost Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 2b) <sup>3</sup>					
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—Nonependable					
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 <sup>4</sup>		2171.00			

<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>		FFY of Grant: 2004	
PHA Name: Housing Authority of the City of Eau Claire		FFY of Grant Approval: 2003	
Grant Type and Number Capital Fund Program Grant No: W139R20750104 Replacement Housing Factor Grant No: Date of CFPP:			

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)	2171.00			
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				

Type of Grant  
 Original Annual Statement  
 Performance and Evaluation Report for Period Ending:  
 Reserve for Disasters/Emergencies  
 Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Signature of Executive Director  
*Scott R. Garmata*

Date  
 9/28/09

Signature of Public Housing Director  
 Date

<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 CFPP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.







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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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U.S. Department of Housing and Urban Development  
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 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>		<b>FFY of Grant: 2006</b>	
PHA Name: Housing Authority of the City of Eau Claire		FFY of Grant Approval: 2006	
Grant Type and Number Capital Fund Program Grant No: W13PR20750106		Replacement Housing Factor Grant No: Date of CFFP:	

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies	Revised Annual Statement (revision no: )	
			Total Estimated Cost Revised <sup>2</sup>	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>			
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—Nonependable			
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 <sup>4</sup>		1020.00	

<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>		FFY of Grant: 2006	
PHA Name: Housing Authority of the City of Eau Claire	Grant Type and Number Capital Fund Program Grant No.: W139R20750106 Replacement Housing Factor Grant No: Date of CRFP:	FFY of Grant Approval: 2006	

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 <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)	1020.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director <i>[Signature]</i>		Date <i>9/28/09</i>	Signature of Public Housing Director		Date

<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 CRP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.





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 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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 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary  
 PHA Name: Housing Authority of the City of Eau Claire  
 Grant Type and Number  
 Capital Fund Program Grant No: WT39R20750107  
 Replacement Housing Factor Grant No:  
 Date of CFFP:  
 FFY of Grant: 2007  
 FFY of Grant Approval: 2006

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: )		Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	
1	Total non-CFFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
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 <sup>4</sup>		1636.00		

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<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 CFFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

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

<b>Part I: Summary</b>		FFY of Grant: 2007	
PHA Name: Housing Authority of the City of Eau Claire	Grant Type and Number Capital Fund Program Grant No.: WT39RC20750107 Replacement Housing Factor Grant No.: Date of CFPP:	FFY of Grant Approval: 2006	

<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
18a	1501 Collateralization or Debt Service paid by the PHA	Original	Obligated
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)	1636.00	
21	Amount of line 20 Related to LBR 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
<i>[Signature]</i>			
Date			Date

<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.  
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 Expires 4/30/2011

<b>Part I: Summary</b>		<b>FFY of Grant: 2008</b>	
PHA Name: Housing Authority of the City of Eau Claire	Grant Type and Number Capital Fund Program Grant No. W139R20750108 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant Approval: 2007</b>	

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Summary by Development Account	Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>	Obligated	Expended
1		Total non-CFP Funds				
2		1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
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 <sup>4</sup>	1726.00			

<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.

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<b>Part I: Summary</b>		FFY of Grant: 2008	
PHA Name: Housing Authority of the City of Eau Claire	Grant Type and Number Capital Fund Program Grant No: W139R20750108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval: 2007	

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)	1726.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director: <i>[Signature]</i>		Date: 9/28/09	Signature of Public Housing Director		Date

<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.





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 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>		FFY of Grant: 2009	
PHA Name: Housing Authority of the City of Eau Claire	Grant Type and Number Capital Fund Program Grant No: WI99S20750109 Replacement Housing Factor Grant No: Date of CFP:	FFY of Grant Approval: 2008	

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:1 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Obligated	Total Actual Cost <sup>1</sup>	
				Original	Revised <sup>2</sup>		Expended	
1	Total non-CFP Funds							
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>							
3	1408 Management Improvements							
4	1410 Administration (may not exceed 10% of line 21)			26019.00	26019.00			
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs			0	1704.00			
8	1440 Site Acquisition							
9	1450 Site Improvement							
10	1460 Dwelling Structures			211978.00	210274.00			
11	1465.1 Dwelling Equipment—Nonexpendable			0	22200.00			
12	1470 Non-dwelling Structures			22200.00	0			
13	1475 Non-dwelling Equipment							
14	1485 Demolition							
15	1492 Moving to Work Demonstration							
16	1495.1 Relocation Costs							
17	1499 Development Activities <sup>4</sup>							

<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 I: Summary

PHA Name: Housing Authority of the City of Eau Claire	Grant Type and Number Capital Fund Program Grant No.: W139S20750109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2008
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Type of Grant  
 Original Annual Statement  
 Performance and Evaluation Report for Period Ending:  Reserve for Disasters/Emergencies  
 Revised Annual Statement (revision no: 1 )  
 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)	260197.00	260197.00		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date	Signature of Public Housing Director		Date
<i>[Signature]</i>		9/28/09			

<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> RHP funds shall be included here.





**Capital Fund Program—Five-Year Action Plan**

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

**Part I: Summary**

PHA Name/Number Housing Authority of the City of Eau Claire/WI207		Locality (City/County & State) Eau Claire, WI			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name Public Housing WI207/000077	Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY <u>2013</u>	Work Statement for Year 5 FFY <u>2014</u>
B.	Physical Improvements Subtotal	Administrative Statement				
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment		20,383	20,383	20,383	20,383
E.	Administration					
F.	Other		183,450	183,450	183,450	183,450
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		203,833	203,833	203,833	203,833
L.	Total Non-CFP Funds		279,509	279,509	279,509	279,509
M.	Grand Total		483,342	483,342	483,342	483,342



Capital Fund Program—Five-Year Action Plan

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

Work Statement for Year 1 FFY 2010	Work Statement for Year 2011 FFY Grant 2009			Work Statement for Year 2012 FFY Grant 2010		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	W1207000077			W1207000077		
	Flooring replacements	17	26,750	Flooring replacements	20	30,050
	Window replacements	4	6,000	Window replacements	1	3,100
	Door replacements	10	5,200	Door replacements	5	2,700
	Furnace replacements	7	18,900	Furnace replacements	3	8,300
	Plumbing improvements	2	9,000	Plumbing improvements	1	4,500
	Porch replacements	6	9,600	Porch replacements	3	4,900
	Cabinets and countertop replacements	6	13,800	Cabinets and countertop replacements	2	4,700
	Landscape improvements	10	10,000	Landscape improvements	20	20,000
	Siding repairs/replacements	10	10,000	Siding repairs/replacements	5	5,000
	Roof replacements	1	6,000	Roof replacements	2	12,400
	Concrete/asphalt repairs/replacements	5	5,000	Concrete/asphalt repairs/replacements	10	10,000
	Microwaves installed	20	4,000	Microwaves installed	40	8,200
	Range replacements	40	14,000	Range replacements	25	9,000
	Refrigerator replacements	40	20,000	Refrigerator replacements	20	12,800
	Window treatment replacements	10	10,000	Window treatment replacements	20	20,600
	Electrical upgrades	5	5,000	Electrical upgrades	10	10,000
	Water heater replacements	5	6,500	Water heater replacements	10	13,400
	Dehumidifier replacements	25	3,700	Dehumidifier replacements	25	3,800
	Subtotal of Estimated Cost		\$183,450	Subtotal of Estimated Cost		\$183,450





