

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: THE HOUSING AUTHORITY OF THE CITY OF DEMOPOLIS, ALABAMA		Grant Type and Number Capital Fund Program Grant No: AL09P10950109 Replacement Housing Factor Grant No: Date of CFP:		FY of Grant: 2009 FY of Grant Approval: 2009	
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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: 06/30/2010	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:) <input type="checkbox"/>	Total Estimated Cost		Total Actual Cost ¹	
				Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³						
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs			24,200.00		24,200.00	0
8	1440 Site Acquisition						
9	1450 Site Improvement			75,000.00		0	0
10	1460 Dwelling Structures			193,899.00		49,779.39	49,779.39
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 ⁴						

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

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Part I: Summary		FFY of Grant: 2009	
PHA Name: THE HOUSING AUTHORITY OF THE CITY OF DEMOPOLIS, AL		Grant Type and Number Capital Fund Program Grant No: AL09P10950109 Replacement Housing Factor Grant No: Date of CFFP:	
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"/> 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)	293,099.00		73,979.39	49,779.39
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 ³				
Signature of Executive Director		Date		Signature of Public Housing Director	
<i>[Signature]</i>		9/29/2010		<i>[Signature]</i>	

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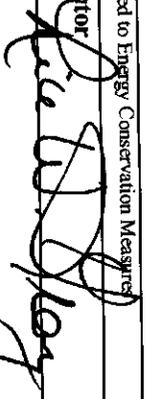
Part I: Summary		FFY of Grant: 2010	
PHA Name: The Housing Authority of the City of Demopolis, Alabama		FFY of Grant Approval: 2010	
Grant Type and Number Capital Fund Program Grant No: AL09PI0950110		Replacement Housing Factor Grant No:	
Date of CFFP:			

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:)		Total Actual Cost ¹ Expended
			Original	Revised ²	
1	Total non-CFF Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs		25,000.00	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures		265,353.00	0	0
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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Part I: Summary		FFY of Grant: 2010	
PHA Name: THE HOUSING AUTHORITY OF THE CITY OF DEMOPOLIS, AL		Grant Type and Number Capital Fund Program Grant No: AL09P10950110 Replacement Housing Factor Grant No: Date of CFFP:	
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"/> Final Performance and Evaluation Report			
Performance and Evaluation Report for Period Ending: 06/30/2010			
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
18a	1501 Collateralization or Debt Service paid by the PHA	Original	Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	Revised ²	Expended
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	290,353.00	0
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
		9/25/2010	
			Date

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Part I: Summary PHA Name: THE HOUSING AUTHORITY OF THE CITY OF DEMOPOLIS, ALABAMA	Grant Type and Number Capital Fund Program Grant No: AL09P10950111 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2011 FFY of Grant Approval:	

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"/>	Total Estimated Cost		Total Actual Cost ¹
			Original	Revised ²	
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs		25,000.00		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures		265,353.00		
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				
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PHA Name: THE HOUSING AUTHORITY OF THE CITY OF DEMOPOLIS, AL	Grant Type and Number Capital Fund Program Grant No: AL09P10950111 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

<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	Original	Total Estimated Cost Revised?	Obligated	Total Actual Cost ¹	Expended
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9006 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)	290,353.00				
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

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Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary

PHA Name/Number	THE HOUSING AUTHORITY OF THE CITY OF DEMOPOLIS, ALABAMA	AL109000001	Locality (City/County & State)	DEMOPOLIS, MARENGO, ALABAMA	<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name AL109000001 ALLEN GASTON LANE HOMES	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 12/31/2012	Work Statement for Year 3 FFY 12/31/2013	Work Statement for Year 4 FFY 12/31/2014	Work Statement for Year 5 FFY 12/31/2015
B.	Physical Improvements Subtotal	269,045.00	269,045.00	269,045.00	269,045.00	269,045.00
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other - A/E Fees	25,000.00	25,000.00	25,000.00	25,000.00	25,000.00
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing - Debt Service					
K.	Total CFP Funds	294,045.00	294,045.00	294,045.00	294,045.00	294,045.00
L.	Total Non-CFP Funds					
M.	Grand Total	294,045.00	294,045.00	294,045.00	294,045.00	294,045.00

Lice D. May
Director
 9/27/2010

