

2012 CFP Documentation

Cotton Valley Housing Authority,

Cotton Valley, Louisiana

LA117v01

8.1(a) Capital Fund Annual Statement/ Performance and Evaluation Report

Part I: Summary					
PHA Name: Cotton Valley Housing Authority		Grant Type and Number Capital Fund Grant Number: LA48P117501-12 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2012 FFY of Grant Approval: 2012	
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				
2	1406 Operations (may not exceed 20% of line 21) ³	\$2,000.00		\$2,000.00	
3	1408 Management Improvements	\$1,240.00		\$1,240.00	
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs	\$3,000.00		\$3,000.00	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$8,451.00		\$8,451.00	
11	1465.1 Dwelling Equipment – Nonexpendable	\$5,700.00		\$5,700.00	
12	1470 Non-Dwelling Structures				
13	1475 Non-Dwelling Equipment	\$500.00		\$500.00	
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Cost				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service Paid by the PHA				
18b	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)	\$20,891.00		\$20,891.00	
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

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

8.1(a) Capital Fund Annual Statement/ Performance and Evaluation Report

Part II: Supporting Pages								
PHA Name: Cotton Valley Housing Authority		Grant Type and Number Capital Fund Program Grant No: LA48P117501-12 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2012			
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	
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		<i>\$2,000.00</i>		<i>\$2,000.00</i>		
<i>PHA Wide</i>	<i>Staff training & software upgrades</i>	<i>1408</i>		<i>\$1,240.00</i>		<i>\$1,240.00</i>		
<i>PHA Wide</i>	<i>Fees & Costs (CFP Coordinator, PHA Plan)</i>	<i>1430</i>		<i>\$3,000.00</i>		<i>\$3,000.00</i>		
<i>LA117-000001</i>	<i>Remodel units as needed to include floor covering replacement, kitchen & bathroom fixture & cabinet replacement, painting interior of units, replacement of bathtubs/ tile; etc.</i>	<i>1460</i>	<i>3 units</i>	<i>\$8,451.00</i>		<i>\$8,451.00</i>		
<i>LA117-000001</i>	<i>Purchase stoves/ refrigerators & hot water heaters.</i>	<i>1465</i>	<i>4 each</i>	<i>\$5,700.00</i>		<i>\$5,700.00</i>		
<i>PHA Wide</i>	<i>Purchase a typewriter</i>	<i>1470</i>		<i>\$500.00</i>		<i>\$500.00</i>		
				<i>\$20,891.00</i>		<i>\$20,891.00</i>		

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

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8.1(b) – Annual Statement/ Performance and Evaluation Reports – 2009, 2010 & 2011

Part I: Summary					
PHA Name: Cotton Valley Housing Authority		Grant Type and Number Capital Fund Grant Number: LA48P117501-11 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2011 FFY of Grant Approval: 2011	
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				
2	1406 Operations (may not exceed 20% of line 21) ³	\$2,000.00		\$2,000.00	
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs	\$3,500.00		\$3,500.00	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$7,155.00		\$7,155.00	
11	1465.1 Dwelling Equipment – Nonexpendable	\$4,023.00		\$4,023.00	
12	1470 Non-Dwelling Structures				
13	1475 Non-Dwelling Equipment	\$6,000.00		\$6,000.00	
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Cost				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service Paid by the PHA				
18b	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)	\$27,294.00		\$27,294.00	
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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²To be completed for the Performance and Evaluations Report or a revised Annual Statement
³ PHAs with under 250 units in management may use 100% of CFP Grant for Operations.
⁴ RHF funds shall be included here.

8.1(b) – Annual Statement/ Performance and Evaluation Reports – 2009, 2010 & 2011

<i>Part II: Supporting Pages</i>								
PHA Name: <i>Cotton Valley Housing Authority</i>		Grant Type and Number Capital Fund Program Grant No: <i>LA48P117501-11</i> CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: <i>2011</i>			
<i>Development Number Name/PHA-Wide Activities</i>	<i>General Description of Major Work Categories</i>	<i>Development Account No.</i>	<i>Quantity</i>	<i>Total Estimated Cost</i>		<i>Total Actual Cost</i>		<i>Status of Work</i>
				<i>Original</i>	<i>Revised¹</i>	<i>Funds Obligated²</i>	<i>Funds Expended²</i>	
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		<i>\$2,000.00</i>		<i>\$2,000.00</i>		
<i>PHA Wide</i>	<i>Fees & Costs</i>	<i>1430</i>		<i>\$2,500.00</i>		<i>\$2,500.00</i>		
<i>PHA Wide</i>	<i>Fees & Costs (CFP Coordinator, PHA Plan)</i>	<i>1430</i>		<i>\$1,000.00</i>		<i>\$1,000.00</i>		
<i>LA117-000001</i>	<i>Complete remodel of vacant units to include, floor covering replacement, cabinet replacement, plumbing fixture replacement, replace bathtubs, install new lighting fixtures & painting of units.</i>	<i>1460</i>	<i>3 units</i>	<i>\$7,155.00</i>		<i>\$7,155.00</i>		
<i>LA117-000001</i>	<i>Purchase stoves/ refrigerators & hot water heaters.</i>	<i>1465</i>	<i>5 each</i>	<i>\$4,023.00</i>		<i>\$4,023.00</i>		
<i>PHA Wide</i>	<i>Riding Lawnmower</i>	<i>1475</i>	<i>1</i>	<i>\$6,000.00</i>		<i>\$6,000.00</i>		

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Part I: Summary					
PHA Name: Cotton Valley Housing Authority		Grant Type and Number Capital Fund Grant Number: LA48P117501-10 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval: 2010	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/11 <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				
2	1406 Operations (may not exceed 20% of line 21) ³	\$ 2,000.00	\$ 2,379.41	\$ 2,379.41	\$2,000.00
3	1408 Management Improvements	\$ 2,740.00	\$ 720.00	\$ 720.00	\$600.00
4	1410 Administration (may not exceed 10% of line 21)	\$ 4,200.00	-0-	-0-	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs		\$3,959.70	\$3,959.70	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$10,854.00	\$14,022.86	\$14,022.86	\$7,805.76
11	1465.1 Dwelling Equipment – Nonexpendable	\$ 2,500.00	\$ 2,500.00	\$ 2,500.00	\$2,500.00
12	1470 Non-Dwelling Structures				
13	1475 Non-Dwelling Equipment	\$ 5,000.00	\$ 3,712.03	\$ 3,712.03	\$2,582.03
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Cost				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service Paid by the PHA				
18b	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)	\$27,294.00	\$27,294.00	\$27,294.00	\$15,487.79
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

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

Part II: Supporting Pages

PHA Name: Cotton Valley Housing Authority	Grant Type and Number Capital Fund Program Grant No: LA48P117501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:	Federal FFY of Grant: 2010
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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	
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		<i>\$2,000.00</i>	<i>\$2,379.41</i>	<i>\$2,379.41</i>	<i>\$2,000.00</i>	<i>84%</i>
<i>PHA Wide</i>	<i>Training & software upgrades</i>	<i>1408</i>		<i>\$2,740.00</i>	<i>\$720.00</i>	<i>\$720.00</i>	<i>\$600.00</i>	<i>83%</i>
<i>PHA Wide</i>	<i>Administration</i>	<i>1410</i>		<i>\$4,200.00</i>	<i>-0-</i>			
<i>PHA Wide</i>	<i>A&E Fees & Costs (CFP Coordinator, PHA Plan, Environmental Review)</i>	<i>1430</i>		<i>-0-</i>	<i>\$3,959.70</i>	<i>\$3,959.70</i>		
<i>LA117-000001</i>	<i>Complete remodel of vacant units to include: floor covering replacement, cabinet replacement, plumbing fixture replacement, replace bathtubs, install new lighting fixtures & painting.</i>	<i>1460</i>	<i>3 units</i>	<i>\$10,854.00</i>	<i>\$12,014.86</i>	<i>\$12,014.86</i>	<i>\$7,805.76</i>	<i>65%</i>
<i>LA117-000001</i>	<i>Storm window installation</i>	<i>1460</i>		<i>-0-</i>	<i>\$972.00</i>	<i>\$972.00</i>		
<i>LA117-000001</i>	<i>Re-route wash drain/ plumbing</i>	<i>1460</i>		<i>-0-</i>	<i>\$870.00</i>	<i>\$870.00</i>		
<i>LA117-000001</i>	<i>Olney Sales</i>	<i>1460</i>		<i>-0-</i>	<i>\$166.00</i>	<i>\$166.00</i>		
<i>LA117-000001</i>	<i>Replace stoves, refrigerators, hot water heaters as needed</i>	<i>1465</i>		<i>\$2,500.00</i>	<i>\$2,500.00</i>	<i>\$2,500.00</i>	<i>\$2,500.00</i>	<i>100%</i>
<i>PHA Wide</i>	<i>Upgrade various maintenance tools and office equipment as needed.</i>	<i>1475</i>		<i>\$5,000.00</i>	<i>\$3,712.03</i>	<i>\$3,712.03</i>	<i>\$2,582.03</i>	<i>70%</i>
				<i>\$27,294.00</i>	<i>\$27,294.00</i>	<i>\$27,294.00</i>		

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.

8.2 Capital Fund Program 5 Year Action Plan

PART I: SUMMARY						
PHA Name/Number: Cotton Valley – LA117			Locality (City/County & State): Cotton Valley, Webster, Louisiana		<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 1	
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016
	Physical Improvements Subtotal	Annual Statement	\$12,591.00	\$8,391.00	\$9,771.00	\$9,771.00
C.	Management Improvements		\$800.00	\$1,000.00	\$5,620.00	\$5,620.00
D.	PHA-Wide Non-dwelling Structures and Equipment			\$6,000.00		
	ADMINISTRATION					
F.	Other		\$5,500.00	\$3,500.00	\$3,500.00	\$3,500.00
G.	Operations		\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		\$20,891.00	\$20,891.00	\$20,891.00	\$20,891.00
L.	Total Non-CFP Funds					
M.	Grand Total		\$20,891.00	\$20,891.00	\$20,891.00	\$20,891.00

8.2 Capital Fund Program 5 Year Action Plan

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013		Work Statement for Year: 3 FFY 2014	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
SEE ANNUAL Statement	<i>PHA Wide – Operations</i>	<i>\$2,000.00</i>	<i>PHA Wide – Operations</i>	<i>\$2,000.00</i>
	<i>PHA Wide – Staff training & software upgrades</i>	<i>\$800.00</i>	<i>PHA Wide – Staff training & software upgrades</i>	<i>\$1,000.00</i>
	<i>PHA Wide – Fees & Costs</i>	<i>\$5,500.00</i>	<i>PHA Wide – Fees & Costs</i>	<i>\$3,500.00</i>
			<i>PHA Wide – Purchase a riding lawnmower</i>	<i>\$6,000.00</i>
	Subtotal of Estimated Cost	<i>\$8,300.00</i>	Subtotal of Estimated Cost	<i>\$12,500.00</i>

8.1(b) – Annual Statement/ Performance and Evaluation Reports – 2009, 2010 & 2011

p.4

318-832-4385

Cotton Valley Housing Aut

Part I: Summary					
PHA Name: Cotton Valley Housing Authority		Grant Type and Number Capital Fund Grant Number: LA48P117501-11 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2011 FFY of Grant Approval: 2011	
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				
2	1406 Operations (may not exceed 20% of line 21) ³	\$2,000.00		\$2,000.00	
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs	\$3,500.00		\$3,500.00	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$7,155.00		\$7,155.00	
11	1465.1 Dwelling Equipment – Nonexpendable	\$4,023.00		\$4,023.00	
12	1470 Non-Dwelling Structures				
13	1475 Non-Dwelling Equipment	\$6,000.00		\$6,000.00	
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Cost				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service Paid by the PHA				
18b	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)	\$27,294.00		\$27,294.00	
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: 7-9-12	Signature of Public Housing Director		Date

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8.1(a) Capital Fund Annual Statement/ Performance and Evaluation Report

Part I: Summary					
PHA Name: <i>Cotton Valley Housing Authority</i>		Grant Type and Number Capital Fund Grant Number: <i>LA48P117501-12</i> Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: <i>2012</i> FFY of Grant Approval: <i>2012</i>	
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				
2	1406 Operations (may not exceed 20% of line 21) ³	\$2,000.00		\$2,000.00	
3	1408 Management Improvements	\$1,240.00		\$1,240.00	
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs	\$3,000.00		\$3,000.00	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$8,451.00		\$8,451.00	
11	1465.1 Dwelling Equipment – Nonexpendable	\$5,700.00		\$5,700.00	
12	1470 Non-Dwelling Structures				
13	1475 Non-Dwelling Equipment	\$500.00		\$500.00	
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Cost				
17	1499 Development Activities ⁴				
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20	Amount of Annual Grant:: (sum of lines 2 – 19)	\$20,891.00		\$20,891.00	
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>7-9-12</i>	Signature of Public Housing Director		Date

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Part I: Summary	
PHA Name: Cotton Valley Housing Authority	Grant Type and Number Capital Fund Grant Number: LA48P117501-10 Replacement Housing Factor Grant No: Date of CFFP:
	FFY of Grant: 2010 FFY of Grant Approval: 2010

Type of Grant
 Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: **3/31/11** 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	\$ 2,000.00		\$ 2,000.00	
3	1408 Management Improvements	\$ 2,740.00		\$ 2,740.00	
4	1410 Administration (may not exceed 10% of line 21)	\$ 4,200.00		\$ 4,200.00	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$10,854.00		\$10,854.00	\$6,177.76
11	1465.1 Dwelling Equipment – Nonexpendable	\$ 2,500.00		\$ 2,500.00	\$2,500.00
12	1470 Non-Dwelling Structures				
13	1475 Non-Dwelling Equipment	\$ 5,000.00		\$ 5,000.00	\$2,582.03
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Cost				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service Paid by the PHA				
18b	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)	\$27,294.00		\$27,294.00	\$5,095.00
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: 7-9-12	Signature of Public Housing Director	Date
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DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

Approved by OMB
0348-0046

1. Type of Federal Action: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input checked="" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known:	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency: U. S. Department of Housing and Urban Development	7. Federal Program Name/Description: 2012 Capital Fund Program CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$ 20,891.00	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u></u> Print Name: <u>Sue Sullivan</u> Title: <u>Executive Director</u> Telephone No.: <u>318-832-5251</u> Date: <u>7.9.12</u>	
Federal Use Only:	Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)	

Civil Rights Certification

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

Civil Rights Certification**Annual Certification and Board Resolution**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Cotton Valley Housing Authority

LA-117

PHA Name

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	
Name of Authorized Official KENNETH HARVEY	Title Chairperson
Signature <i>Kenneth Harvey</i>	Date July 9, 2012

form HUD-50077-CR (1/2009)
 OMB Approval No. 2577-0226

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Applicant Name

Cotton Valley Housing Authority

Program/Activity Receiving Federal Grant Funding

2012 Capital Fund Program

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

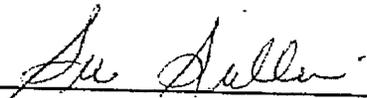
Name of Authorized Official

Sue Sullivan

Title

Executive Director

Signature



Date (mm/dd/yyyy)

7-9-2012

Previous edition is obsolete

form HUD 50071 (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1, & 7485.3

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Cotton Valley Housing Authority

Program/Activity Receiving Federal Grant Funding

2012 Capital Fund Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

- (1) The dangers of drug abuse in the workplace;
- (2) The Applicant's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

- (1) Abide by the terms of the statement; and
- (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
- (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. **Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Sue Sullivan

Signature

X *Sue Sullivan*

Title

Executive Director

Date

July 9, 2012

form HUD-50070 (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1 & .3