

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Housing Authority of Springfield</u> PHA Code: <u>MO058</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>07/2012</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>765</u> Number of HCV units: <u>754</u>				
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
4.0	PHA Consortia <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	No. of Units in Each Program
	PHA 1:				PH HCV
	PHA 2:				
	PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.				
5.1	Mission. 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:				
5.2	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.				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: No changes have been made this year. (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. Copy of the 5 year annual plan can be obtained from our main office and each Asset Management Project (AMP) where an office is located.				
7.0	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>				
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.				
8.1	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 Attachment G, H, I				
8.2	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. See Attachment J				
8.3	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.				

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> <p>The PHA has based its statement of needs of families on its waiting list on the needs expressed in the Consolidated Plan/s. There are 377 households that have applied for public housing assistance, with 96 households having been approved as eligible and are on the waiting list. There are 1,368 households that have been approved for Section 8 assistance, with 883 households having been approved as eligible and are on the waiting list.</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> <p>Due to reduced funding, we have no plans for addressing needs of families that are not currently being assisted.</p>
10.0	<p>Additional Information. 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.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p>

(a) We are continuing to improve our aging property to insure all residents have a safe, decent and affordable place to call home. We have implemented many energy efficient items when possible. Currently we have completed upgrading all the common area ceiling tiles that have been water damaged in the past, in each of the 4 high-rise buildings. We have replaced windows in one of our high-rise buildings, which were leaking and had broken seals. This has greatly improved the energy efficiency in each room. We re-sealed the exterior walls of 2 of our high-rise buildings, that had water and air leaks. This improved the energy efficiency in these buildings. Within the next twelve months we will be re-sealing the other 2 high-rise buildings.

We continue to upgrade the flooring in the units as tenants move out and the condition of the flooring is poor. To date we have upgraded from tile to carpet in approximately 90% of the units. As we remodel apartments we have also upgraded window shades in 90% of our units. This has reduced the damage caused by tenants tacking up blankets or curtains. We are also in the process of replacing kitchen and bathroom cabinets in all of our duplexes.

We are continuing to upgrade the domestic water pipes that are aging. We have added more security yard lighting at one of our developments to improve the safety of our residents.

The PHA adopted a partnership with the Springfield Police Department. This partnership includes a contracted Police Officer to work with the Tenant Services/Security Department as a liaison between the two agencies. The Police Officer provides safety and crime awareness education and guidance to the Security Department and HA Staff to ensure the safety of the public housing residents. The HA Security Department and the SPD liaison implemented a computer program that the police officers could verify at the scene of an incident that the subject/s had been issued a No-Trespassing Notification.

The PHA approved the Law Enforcement Housing Program under Code of Federal Regulations, Title 24, Section 960.505 to provide an increased sense of security for public housing residents and encourage Community Oriented Policing. The HA currently has four Police Officers participating in this housing program, along with two housing units available for drug surveillance.

H. A.S. works closely with public housing residents in a variety of programs to promote self-sufficiency. The HEARTS support group helps women begin to re-build their lives by healing their emotional issues. Self-esteem, healthy boundaries, abuse, dysfunctional relationships, and many other issues affect their ability to function successfully in all areas of their lives.

We work closely with Resident Councils by offering training and support. We believe that when residents are given the proper tools they can effect changes in their communities that will promote self-sufficiency and a better quality of life.

By partnering with various area organizations we are able to connect residents with the needed resources to become self-sufficient. In some cases we have been able to bring resources directly to the residents that enhance their quality of life. Our partnerships have provided several opportunities for residents to complete their community service requirements.

We continue to experience some employee turnover in the process of training employees in all aspects of site management. Attracting and retaining the highest caliber of employees dedicated to our mission continues to be a challenge due to the level of technical knowledge of all the rules and regulations needed and our inability to increase staff wages to affordable living levels.

We are also starting to prepare for our AMP restructuring that will occur July 01, 2012, as we have been approved to reduce our number of AMP's from seven to four. We are anticipating greater efficiencies as we close three offices, and shift the work and employees, to the remaining four offices. Although some residents will no longer have a manager on site, we plan to continue to provide good customer service by maintaining a Site Manager point of contact for these residents.

From July 01, 2010 To June 30, 2011 our average vacancy rate did improve from 95% to 96%, but this continues to be a challenge as we work to improve our vacancy rate.

We are also working to raise community awareness of our income based programs and help decrease our vacancies by increasing the number of applications from the homeless population. An example from the past year is our participation in the "Hope Connection." This was an event sponsored by the Community Partnership of the Ozarks to provide "One Stop Service for the Homeless." The event was attended by over 350 of the homeless population in Springfield, MO.

Our Section 8 program has maintained 100% occupancy during this time.

(b) Substantial Deviation from the 5-Year Plan:

This HA will amend or modify its 5-year Agency plan upon the occurrence of any of the following events during the term on an approved plan: A federal statutory or regulatory change is made effective and, in the opinion of the Authority, has either substantial programmatic or financial effects on the programs administered by the Authority, or creates substantial obligations or administrative burdens beyond the programs under administration at the start of the Plan year.

Significant Amendment or Modification to the Annual Plan: This HA will amend or modify its Annual Agency plan upon the occurrence of any of the following events during the term on an approved plan: A federal statutory or regulatory change is made effective and, in the opinion of the Authority, has either substantial programmatic or financial effects on the programs administered by the Authority, or creates substantial obligations or administrative burdens beyond the programs under administration at the start of the Plan year.

Any other event that the Authority's Board determines to be a significant amendment or modification of the approved annual plan.

11.0	<p>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.</p> <ul style="list-style-type: none"> (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (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, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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**PHA Certifications of Compliance with the PHA Plans and Related Regulations:
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

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 Commissioners, I approve the submission of the ___ 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning July 1, 2012, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan 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.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

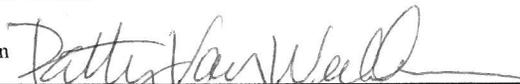
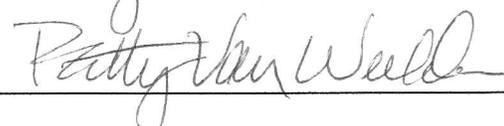
Housing Authority of Springfield, MO
PHA Name

MO058
PHA Number/HA Code

 5-Year PHA Plan for Fiscal Years 20 - 20

 X Annual PHA Plan for Fiscal Years 2012 - 2013

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	Title
Patty Van Weelden 	Board Vice-Chairman
Signature	Date
	03/16/2012

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

HOUSING AUTHORITY OF SPRINGFIELD, MISSOURI

Program/Activity Receiving Federal Grant Funding

OPERATING FUND

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 Federalagency 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.)

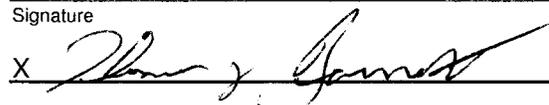
All complexes in Springfield, Greene, Missouri

420 W State 65806	515 W Mt Vernon 65806	421 W Madison 65806	770 South Ave 65806
525 S Campbell 65806	811 N Cedarbrook 65802	2336 N Bolivar Rd 65803	722 E Glenwood 65807
2628-2630 S Grant 65807	405-420 S Weaver 65806	1405-1425 E High 65803	330-336 W Madison 65806
714-738 W Edgewood 65807	809-917 W Sunset 65807	841-857B S Patton 65806	1633-1654 N Delaware 65803
1906-1921 S Wedgewood 65807	1000 Blk E Villa Marie & Norton Rd 65803		

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 Thomas J Barnett	Title Executive Director
Signature 	Date 3/16/12

Certification of Payments to Influence Federal Transactions

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

Applicant Name

HOUSING AUTHORITY OF SPRINGFIELD, MISSOURI

Program/Activity Receiving Federal Grant Funding

OPERATING SUBSIDY

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

THOMAS J. BARNETT

Title

EXECUTIVE DIRECTOR

Signature

Date (mm/dd/yyyy)

03/16/2012

1. Type of Federal Action:

- a. contract
- b. grant
- c. cooperative agreement
- d. loan
- e. loan guarantee
- f. loan insurance

2. Status of Federal Action:

- a. bid/offer/application
- b. initial award
- c. post-award

3. Report Type:

- a. initial filing
- b. material change

For Material Change Only:

year _____ quarter _____
 date of last report _____

4. Name and Address of Reporting Entity:

Prime Subawardee
 Tier _____, if known:

Housing Authority of Springfield, MO
 421 W Madison
 Springfield, MO 65806

Congressional District, if known: 4c

5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:

Congressional District, if known:

6. Federal Department/Agency:

7. Federal Program Name/Description:

CFDA Number, if applicable: N/A

8. Federal Action Number, if known:

N/A

9. Award Amount, if known:

N/A

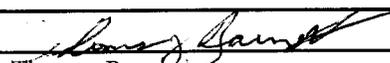
10. a. Name and Address of Lobbying Registrant
(if individual, last name, first name, MI):

N/A

b. Individuals Performing Services (including address if different from No. 10a)
(last name, first name, MI):

N/A

1. 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 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: 
 Print Name: Thomas Barnett
 Title: Executive Director
 Telephone No.: 417-866-4329 Date: 3/16/12

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 08/30/2011

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 Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Housing Authority of Springfield, MO

PHA Name

MO058

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 Patty Van Weelden		Title Board Vice-Chairman	
Signature 		Date 03/16/2012	

**Certification by State or Local Official PHA Plans Consistency with
the Consolidated Plan**

I, Brendan Griesemer the City of Springfield, MO Grants Administrator certify
that the Five Year and Annual PHA Plan of the Housing Authority of the City of Springfield, MO is
consistent with the Consolidated Plan of the City of Springfield, MO prepared
pursuant to 24 CFR Part 91.

 3-9-12

Signed / Dated by Appropriate State or Local Official

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 Springfield Missouri. 421 W. Madison Springfield MO. 65806		Grant Type and Number Capital Fund Program Grant No MO16PO5850110 TIN 43-0909995 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3 12/31/11) 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	60,000.00	53,248.59	30,294.31	25,943.45	
3	1408 Management Improvements	27,200.00	35,600.00	33,679.85	33,679.85	
4	1410 Administration (may not exceed 10% of line 21)	97,772.00	82,553.25	5,235.57	5,235.57	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	24,000.00	27,173.67	27,173.67	27,173.67	
8	1440 Site Acquisition					
9	1450 Site Improvement	127,021.00	9,882.00	9,882.00	9,882.00	
10	1460 Dwelling Structures	775,500.00	903,035.49	902,272.60	902,272.60	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities ⁴					

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

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 Springfield Missouri. 421 W. Madison Springfield MO. 65806		Grant Type and Number Capital Fund Program Grant No: MO16PO5850110 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval:	
Type of Grant Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> X Revised Annual Statement (revision no: 3 12/31/11) Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report <input type="checkbox"/>					
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)	1,111,493.00	1,111,493.00	1,008,538.00	1,004,187.14
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			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.

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 II: Supporting Pages								
Housing Authority of Springfield, Missouri 421 W. Madison Springfield, MO. 65806 TIN: 43-0909995		Grant Type and Number Capital Fund Program Grant No: MO16PO5850110 CFFP (Yes/ 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	
AMP 1								
MO-058-011A	Operations	1406	1	11,160.00	4,825.48	4,825.48	4,825.48	
	Security Salaries	1408	1	5,100.00	5,403.24	5,372.60	5,372.60	
	Administration	1410	1	19,069.00	17,506.60	973.82	973.82	
	Contingency	1502	1	-0-	-0-	-0-	-0-	
	Miniblinds Vacated Apartments	1460	22	1,000.00	3,892.89	3,892.89	3,892.89	
	Reflooring Vacated Apartments	1460	22	11,160.00	9,856.92	9,856.92	9,856.92	
	Window Replacement	1460	142	252,000.00	293,052.85	293,052.85	293,052.85	
	Common Area Ceiling Tile Replacement	1460	9	78,125.00	70,520.04	70,520.04	70,520.04	
	A & E	1430	1	3,580.50	3,923.28	3,923.28	3,923.28	
AMP 2								
MO-058-002	Operations	1406	1	7,680.00	7,263.11	3,320.76	3,320.76	
	Security Salaries	1408	1	3,500.00	3,697.27	3,697.27	3,697.27	
	Administration	1410	1	13,123.00	12,047.80	670.15	670.15	
	Contingency	1502	1	-0-	-0-	-0-	-0-	
	Miniblinds Vacated Apartments	1460	22	1,000.00	821.08	778.11	778.11	
	Reflooring Vacated Apartments	1460	22	7,680.00	12,155.56	12,155.56	12,155.56	
	Common Area Ceiling Tile	1460	9	53,880.00	49,496.48	49,496.48	49,496.48	

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 II: Supporting Pages								
PHA Name: Housing Authority of Springfield, Missouri 421 W. Madison Springfield, MO. 65806 TIN: 43-0909995			Grant Type and Number Capital Fund Program Grant No: MO16PO5850110 CFFP (Yes/ 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	
AMP 2								
MO-058-002	Replace Apartment Door Locks	1460	98	10,000.00	0.00	0.00	0.00	
	A & E	1430	1	2,464.00	4,780.65	4,780.65	4,780.65	
AMP 3								
MO-058-003	Operations	1406	1	10,080.00	10,080.00	4,358.50	4,358.50	
	Security Salaries	1408	1	4,600.00	9,647.65	9,647.65	9,647.65	
	Administration	1410	1	17,224.00	15,812.80	879.58	879.58	
	Contingency	1502	1	-0-	-0-	-0-	-0-	
	Miniblinds Vacated Apartments	1460	22	1,000.00	936.83	936.83	936.83	
	Reflooring Vacated Apartments	1460	22	10,080.00	18,619.32	18,619.32	18,619.32	
	Common Area Ceiling Tile Replacement	1460	11	71,420.00	64,381.52	64,381.52	64,381.52	
	A & E	1430	1	3,234.00	3,867.00	3,867.00	3,867.00	
AMP 4								
MO-058-004	Operations	1406	1	6,300.00	6,300.00	2,724.06	2,724.06	
	Security Salaries	1408	1	2,800.00	3,210.57	3,032.92	3,032.92	
	Administration	1410	1	10,765.00	9,883.00	549.74	549.74	
	Contingency	1502	1	-0-	-0-	-0-	-0-	

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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
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Part II: Supporting Pages								
PHA Name: Housing Authority of Springfield, Missouri 421 W. Madison Springfield, MO. 65806 TIN: 43-0909995			Grant Type and Number Capital Fund Program Grant No: MO16PO5850110 CFFP (Yes/ 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	
AMP 4								
MO-058-004	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00	949.62	949.62	
	Reflooring Vacated Apartments	1460	22	6,300.00	6,845.32	6,845.32	6,845.32	
	A & E	1430	1	2,021.25	2,738.48	2,738.48	2,738.48	
AMP 5								
MO-058-005	Operations	1406	1	2,520.00	2,520.00			
	Security Salaries	1408	1	1,100.00	1,445.11	1,213.15	1,213.15	
	Administration	1410	1	4,306.00	3,953.20	219.89	219.89	
	Contingency	1502	1	-0-	-0-	-0-	-0-	
	Miniblinds Vacated Apartments	1460	22	1,000.00	627.53	405.21	405.21	
	Reflooring Vacated Apartments	1460	22	2,520.00	1,133.35	1,133.35	1,133.35	
	Replace Stair Treads	1460	15	7,500.00	0.00	0.00	0.00	
	A & E	1430	1	808.50	1,095.39	1,095.39	1,095.39	
MO-058-006	Operations	1406	1	6,300.00	6,300.00	3,813.68	3,813.68	
	Security Salaries	1408	1	2,900.00	3,032.92	3,032.92	3,032.92	

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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
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Part II: Supporting Pages								
PHA Name: Housing Authority of Springfield, Missouri 421 W. Madison Springfield, MO. 65806 TIN: 43-0909995			Grant Type and Number Capital Fund Program Grant No: MO16PO5850110 CFFP (Yes/ 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	
AMP 5								
MO-058-006	Administration	1410	1	10,765.00	9,883.00	549.74	549.74	
	Contingency	1502	1	-0-	-0-	-0-	-0-	
	Miniblinds Vacated Apartments	1460	22	1,000.00	1,259.16	1,259.16	1,259.16	
	Reflooring Vacated Apartments	1460	22	6,300.00	11,828.77	11,828.77	11,828.77	
	Replace Water Service Mains	1460	80	129,000.00	174,092.31	174,092.31	174,092.31	
	A & E	1430	1	2,021.25	2,738.48	2,738.48	2,738.48	
AMP 6								
MO-058-008	Operations	1406	1	2,580.00	2,580.00	1,117.01	1,117.01	
	Miniblinds Vacated Apartments	1460	22	1,000.00	458.11	458.11	458.11	
	Reflooring Vacated Apartments	1460	22	2,580.00	5,244.59	5,244.59	5,244.59	
	Security Salaries	1408	1	1,200.00	1,290.04	1,242.34	1,242.34	
	Administration	1410	1	4,408.00	4,046.80	225.14	225.14	
	Contingency	1502	1	-0-	-0-	-0-	-0-	
	Yard Lighting	1450	1	10,000.00	9,300.00	9,300.00	9,300.00	
	Replace Concrete Lots	1450	2	117,021.00	582.00	582.00	582.00	
	A & E	1430	1	827.75	1,121.47	1,121.47	1,121.47	
MO-058-009	Operations	1406	1	2,340.00	2,340.00	1,014.82	1,014.82	
	Security Salaries	1408	1	1,100.00	1,427.60	1,127.14	1,127.14	

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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
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Part II: Supporting Pages								
PHA Name: Housing Authority of Springfield, Missouri 421 W. Madison Springfield, MO. 65806 TIN: 43-0909995			Grant Type and Number Capital Fund Program Grant No: MO16PO5850110 CFFP (Yes/ 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	
AMP 6								
MO-058-009	Administration	1410	1	3,998.00	3,670.40	204.20	204.20	
	Contingency	1502	1	-0-	-0-	-0-	-0-	
	Miniblinds Vacated Apartments	1460	22	1,000.00	200.67	189.76	189.76	
	Reflooring Vacated Apartments	1460	22	2,340.00	6,309.07	6,309.07	6,309.07	
	A & E	1430	1	750.75	1,017.15	1017.15	1,017.15	
MO-058-011C	Operations	1406	1	2,520.00	2,520.00	2,520.00	1,085.15	
	Security Salaries	1408	1	1,100.00	1,452.80	1,212.21	1,212.21	
	Administration	1410	1	4,306.00	3,953.20	219.88	219.88	
	Contingency	1502	1	-0-	-0-	-0-	-0-	
	Miniblinds Vacated Apartments	1460	22	1,000.00	316.54	316.54	316.54	
	Reflooring Vacated Apartments	1460	22	2,520.00	7,919.63	7,919.63	7,919.63	
	Window Replacement	1460	32	46,000.00	67,402.15	67,402.15	67,402.15	
	A & E	1430	1	808.50	1,095.39	1,095.39	1,095.39	
AMP 7								
MO-058-007	Operations	1406	1	6,600.00	6,600.00	6,600.00	3,683.99	
	Security Salaries	1408	1	3,000.00	3,924.00	3,177.13	3,177.13	
	Administration	1410	1	11,278.00	575.91	575.91	575.91	

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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 II: Supporting Pages								
PHA Name: Housing Authority of Springfield, Missouri 421 W. Madison Springfield, MO. 65806 TIN: 43-0909995			Grant Type and Number Capital Fund Program Grant No: MO16PO5850110 CFFP (Yes/ 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	
AMP 7	A & E	1430	1	2,117.50	3,961.79	3,961.79	3,961.79	
MO-058-007	Contingency	1502	1	-0-	-0-	-0-	-0-	
	Miniblinds Vacated Apartments	1460	22	1,000.00	897.49	461.18	461.18	
	Reflooring Vacated Apartments	1460	22	6,600.00	5,960.92	5,960.92	5,960.92	
	Replace Door Locks	1460	98	10,000.00	0.00	0.00	0.00	
	Replace Ceiling Tile Common Areas	1460	8	46,575.00	42,746.96	42,746.96	42,746.96	
	Seal Exterior Walls	1460	1	0.00	44,570.37	44,570.37	44,570.37	
MO-058-011B	Security Salaries	1408	1	800.00	1,068.80	924.52	924.52	
	Administration	1410	1	3,280.00	1,220.54	167.52	167.52	
	Contingency	1502	1	-0-	-0-	-0-	-0-	
	Miniblinds Vacated Apartments	1460	22	1,000.00	7.70	7.70	7.70	
	Reflooring Vacated Apartments	1460	22	1,920.00	481.36	481.36	481.36	
	Operations	1406	1	1,920.00	1,920.00			
	A & E	1430	1	616.00	834.59	834.59	834.59	

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, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

Part I: Summary						
PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, Missouri		Grant Type and Number Capital Fund Program Grant No: MO16P05850111 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2011 FFY of Grant Approval:	
Type of Grant						
Original Annual Statement		Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 12/31/11)		
Performance and Evaluation Report for Period Ending:				Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) ³	30,000.00	30,000.00			
3	1408 Management Improvements	27,500.00	37,400.00			
4	1410 Administration (may not exceed 10% of line 21)	85,500.00	75,600.00			
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	24,793.00	37,000.00	24,640.00		
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	892,200.00	652,910.00	165,149.41	49,684.41	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment	51,500.00	51,500.00	942.70	942.70	
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.

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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

ATTACHMENT H
 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: TIN 43-0909995 The Housing Authority of the City of Springfield, Missouri		Grant Type and Number Capital Fund Program Grant No: MO16P05850111 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2011 FFY of Grant Approval:	
Type of Grant Original Annual Statement Reserve for Disasters/Emergencies X Revised Annual Statement (revision no: 1 12/31/11) 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	
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)	1,111,493.00	884,410.00	190,732.11	50,627.11	
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		

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: TIN 43-0409995 The Housing Authority of the City of Springfield, Missouri			Grant Type and Number Capital Fund Program Grant No: MO16P05850111 CFFP (Yes/ No): Replacement Housing Factor Grant No:				FFY of Grant: 2011 FFY of Grant Approval:	
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	
AMP 1								
MO-058-011A	Operations	1406	1	5,580.00	5,580.00			
	Security Salaries	1408	1	5,100.00	6,956.40			
	Administration	1410	1	15,000.00	14,061.60			
	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00			
	Reflooring Vacated Apartments	1460	22	5,000.00	5,000.00	1,630.56	1,630.56	
	Domestic Water Pump	1460	1	15,000.00	15,000.00			
	Security Equipment	1475	1	11,000.00	11,000.00	175.34	175.34	
	A & E	1430	1	4,611.50	6,882.00	4,583.04		
AMP 2								
MO-058-002	Operations	1406	1	3,840.00	3,840.00			
	Security Salaries	1408	1	3,500.00	4,787.20			
	Administration	1410	1	11,000.00	9,676.80			
	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00			
	Reflooring Vacated Apartments	1460	22	5,000.00	5,000.00	2,833.26	2,833.26	
	Security Equipment	1475	1	11,000.00	11,000.00	120.66	120.66	
	A & E	1430	1	3,173.50	4,736.00	3,153.92		

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 II: Supporting Pages								
PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, Missouri			Grant Type and Number Capital Fund Program Grant No: MO16P05850111 CFFP (Yes/ No): Replacement Housing Factor Grant No:				FFY of Grant: 2011 FFY of Grant Approval:	
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	
AMP 3								
MO-058-003	Operations	1406	1	5,040.00	5,040.00			
	Security Salaries	1408	1	4,600.00	6,283.20			
	Administration	1410	1	15,000.00	12,700.80			
	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00			
	Reflooring Vacated Apartments	1460	22	5,000.00	5,000.00			
	Security Equipment	1475	1	12,300.00	12,300.00	158.37	158.37	
	Additional Electric Service Shop	1460	1	3,500.00	3,500.00			
	A & E	1430	1	4,165.22	6,216.00	4,139.52		
AMP 4								
MO-058-004	Operations	1406	1	3,150.00	3,150.00			
	Security Salaries	1408	1	2,800.00	3,927.00			
	Administration	1410	1	8,000.00	7,938.00			
	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00			
	Reflooring Vacated Apartments	1460	22	25,000.00	25,000.00	2,032.86	2,032.86	

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 II: Supporting Pages								
PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, Missouri			Grant Type and Number Capital Fund Program Grant No: MO16P05850111 CFFP (Yes/ No): Replacement Housing Factor Grant No:				FFY of Grant: 2011 FFY of Grant Approval:	
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	
AMP 4								
MO-058-004	Security Equipment	1475	1	1,400.00	1,400.00	98.99	98.99	
	A & E	1430	1	2,603.27	3,885.00	2,587.20		
AMP 5								
MO-058-005	Operations	1406	1	1,260.00	1,260.00			
	Security Salaries	1408	1	1,100.00	1,570.80			
	Administration	1410	1	4,300.00	3,175.20			
	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00			
	Reflooring Vacated Apartments	1460	22	5,000.00	5,000.00	1,022.56	1,022.56	
	Install Wall Insulation	1460	32	100,000.00	0.00			
	Install New Siding	1460	32	125,000.00	0.00			
	Security Equipment	1475	1	600.00	600.00	39.59	39.59	
	A & E	1430	1	1,041.31	1,554.00	1,034.88		
MO-058-006	Operations	1406	1	3,150.00	3,150.00			
	Security Salaries	1408	1	2,900.00	3,927.00			
	Administration	1410	1	8,000.00	7,938.00			

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 II: Supporting Pages								
PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, Missouri			Grant Type and Number Capital Fund Program Grant No: MO16P05850111 CFFP (Yes/ No): Replacement Housing Factor Grant No:				FFY of Grant: 2011 FFY of Grant Approval:	
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	
AMP 5								
MO-058-006	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00			
	Reflooring Vacated Apartments	1460	22	25,000.00	25,000.00	2,571.44	2,571.44	
	Security Equipment	1475	1	1,500.00	1,500.00	98.99	98.99	
	A & E	1430	1	2,603.27	3,885.00	2,587.20		
AMP 6								
MO-058-008	Operations	1406	1	1,290.00	1,290.00			
	Security Salaries	1408	1	1,200.00	1,608.20			
	Administration	1410	1	4,400.00	3,250.80			
	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00			
	Reflooring Vacated Apartments	1460	22	20,000.00	20,000.00			
	Install Wall Insulation	1460	33	100,000.00	0.00			
	New Siding	1460	33	125,000.00	0.00			
	Security Equipment	1475	1	600.00	600.00	40.59	40.59	
	A & E	1430	1	1,066.10	1,591.00	1,059.52		
MO-058-009	Operations	1406	1	1,170.00	1,170.00			

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² To be completed for the Performance and Evaluation Report.

PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, Missouri		Grant Type and Number Capital Fund Program Grant No: MO16P05850111 CFFP (Yes/ No): Replacement Housing Factor Grant No:				FFY of Grant: 2011 FFY of Grant Approval:		
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	
AMP 6								
MO-058-009	Security Salaries	1408	1	1,200.00	1,458.60			
	Administration	1410	1	4,400.00	2,948.40			
	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00			
	Reflooring Vacated Apartments	1460	22	20,000.00	20,000.00	2,278.68	2,278.68	
	Kitchen Cabinet Replacement	1460	32	60,000.00	115,465.00			
	Security Equipment	1475	1	600.00	600.00	36.88	36.88	
	A & E	1430	1	966.93	1,443.00	960.96		
MO-058-011C	Operations	1406	1	1,260.00	1,260.00			
	Security Salaries	1408	1	1,100.00	1,570.80			
	Administration	1410	1	4,400.00	3,175.20			
	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00			
	Reflooring Vacated Apartments	1460	22	3,000.00	2,413.33	904.40	904.40	
	Kitchen Cabinet Replacement	1460	30	60,000.00	4,535.00			
	Security Equipment	1475	1	600.00	600.00	39.42	39.42	
	A & E	1430	1	1,041.31	1,554.00	1,034.88		

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Part II: Supporting Pages								
PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, Missouri			Grant Type and Number Capital Fund Program Grant No: MO16P05850111 CFFP (Yes/ No): Replacement Housing Factor Grant No:				FFY of Grant: 2011 FFY of Grant Approval:	
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	
AMP 7								
MO-058-007	Operations	1406	1	3,300.00	3,300.00			
	Security Salaries	1408	1	3,000.00	4,114.00			
	Administration	1410	1	9,000.00	8,316.00			
	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00			
	Reflooring Vacated Apartments	1460	22	2,400.00	2,400.00			
	Security Equipment	1475	1	11,500.00	11,500.00			
	A & E	1430	1	2,727.23	4,070.00			
	Emergency Riser Replacement	1460	1	0.00	31,500.00	31,500.00	31,500.00	
	Domestic Riser Replacement	1460	13	0.00	302,108.44			
MO-058-011B	Operations	1406	1	960.00	960.00			
	Security Salaries	1408	1	1,000.00	1,196.80			
	Administration	1410	1	2,000.00	2,419.20			
	Miniblinds Vacated Apartments	1460	22	1,000.00	1,000.00			
	Reflooring Vacated Apartments	1460	22	2,300.00	376.02			
	Install Wall Insulation	1460	24	50,000.00	0.00			
	New Siding	1460	24	75,000.00	0.00			
	Kitchen Cabinet Replacement	1460	24	50,000.00	52,101.56			

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

ATTACHMENT I
 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: TIN 43-0909995 The Housing Authority of the City of Springfield, MO.		Grant Type and Number Capital Fund Program Grant No: MO16PO5850112 Replacement Housing Factor Grant No: Date of CFFP:		PROPOSED	
				FFY of Grant: 2012 FFY of Grant Approval:	
Type of Grant <input checked="" type="checkbox"/> 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				
2	1406 Operations (may not exceed 20% of line 21) ³	10,000.00			
3	1408 Management Improvements	36,000.00			
4	1410 Administration (may not exceed 10% of line 21)	60,000.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	36,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	46,000.00			
10	1460 Dwelling Structures	666,410.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	30,000.00			
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 II: Supporting Pages								
PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, MO.		Grant Type and Number Capital Fund Program Grant No: MO16PO5850112 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	
AMP 1								
MO-058-011A	Operations	1406	1	1,000.00				
	Security Salaries	1408	1	6,696.00				
	Administration	1410	1	11,160.00				
	Miniblinds vacated apartments	1460	22	1,000.00				
	Reflooring vacated apartments	1460	22	5,000.00				
	Exterior Walls Seal/Paint	1460	1	150,000.00				
	Security/Computer Equipment	1475	1	6,860.00				
	A & E	1430	1	6,696.00				
AMP 2								
MO-058-002	Operations	1406	1	1,000.00				
	Security Salaries	1408	1	4,608.00				
	Administration	1410	1	7,680.00				
	Miniblinds Vacated Apts.	1460	22	1,000.00				
	Reflooring Vacated Apts.	1460	22	5,000.00				
	Security/Computer Equipment	1475	1	6,280.00				
	A & E	1430	1	4,608.00				

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 II: Supporting Pages								
PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, MO.		Grant Type and Number Capital Fund Program Grant No: MO16PO5850112 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	
AMP 3								
MO-058-003	Operations	1406	1	1,000.00				
	Security Salaries	1408	1	6,048.00				
	Administration	1410	1	10,080.00				
	Miniblinds Vacated Apts.	1460	22	1,000.00				
	Reflooring Vacated Apts.	1460	22	5,000.00				
	Security/Computer Equipment	1475	1	6,680.00				
	A & E	1430	1	6,048.00				
AMP 4								
MO-058-004	Operations	1406	1	1,000.00				
	Security Salaries	1408	1	3,780.00				
	Administration	1410	1	6,300.00				
	Miniblinds Vacated Apt.	1460	22	1,000.00				
	Reflooring Vacated apt.	1460	22	25,000.00				
	Security/Computer Equipment	1475	1	1,050.00				
	Lanscaping	1450	1	10,000.00				
	A & E	1430	1	3,780.00				

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² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, MO.		Grant Type and Number Capital Fund Program Grant No: MO16PO5850112 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	
AMP 5								
MO-058-005	Operations	1406	1	1,000.00				
	Security Salaries	1408	1	1,512.00				
	Administration	1410	1	2,520.00				
	Miniblinds Vacated Apts.	1460	22	1,000.00				
	Reflooring Vacated Apts.	1460	22	5,000.00				
	Install New Siding	1460	32	130,000.00				
	Security/Computer Equipment	1475	1	420.00				
	Landscaping	1450	1	10,000.00				
	A & E	1430	1	1,512.00				
MO-058-006	Operations	1406	1	1,000.00				
	Security Salaries	1408	1	3,780.00				
	Administration	1410	1	6,300.00				
	Miniblinds Vacated Apts.	1460	22	1,000.00				
	Reflooring Vacated Apts.	1460	22	25,000.00				
	Security/Computer Equipment	1475	1	1,050.00				
	Landscaping	1450	1	10,000.00				
	A & E	1430		3,780.00				

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² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, MO.		Grant Type and Number Capital Fund Program Grant No: MO16PO5850112 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	
AMP 6								
MO-058-008	Operations	1406	1	1,000.00				
	Security Salaries	1408	1	1,548.00				
	Administration	1410	1	2,580.00				
	Miniblinds Vacated Apts.	1460	22	1,000.00				
	Reflooring Vacated Apts.	1460	22	20,000.00				
	Landscaping	1450	1	5,000.00				
	Security/Computer Equipment	1475	1	430.00				
	A & E	1430	1	1,548.00				
MO-058-009	Operations	1406	1	1,000.00				
	Security Salaries	1408	1	1,404.00				
	Administration	1410	1	2,340.00				
	Miniblinds Vacated Apts.	1460	22	1,000.00				
	Reflooring Vacated Apts.	1460	22	20,000.00				
	Security/Computer Equipment	1475	1	390.00				
	Landscaping	1450	1	3,000.00				
	A & E	1430	1	1,404.00				

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² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, MO.		Grant Type and Number Capital Fund Program Grant No: MO16PO5850112 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	
AMP 6								
MO-058-011C	Operations	1406	1	1,000.00				
	Security Salaries	1408	1	1,512.00				
	Administration	1410	1	2,520.00				
	Miniblinds Vacated Apts.	1460	20	1,000.00				
	Reflooring Vacated Apts.	1460	20	3,000.00				
	Kitchen Cabinet Replacement	1460	30	118,000.00				
	Landscaping	1450	1	3,000.00				
	Security/Computer Equipment	1475	1	420.00				
	A & E	1430	1	1,512.00				
AMP 7								
MO-058-007	Operations	1406	1	1,000.00				
	Security Salaries	1408	1	3,960.00				
	Administration	1410	1	6,600.00				
	Miniblinds Vacated Apts.	1460	22	1,000.00				
	Reflooring Vacated Apts.	1460	22	2,400.00				
	Dom. Water Riser Replacement	1460	7	64,010.00				
	Security/Computer Equipment	1475	1	6,100.00				
	A & E	1430	1	3,960.00				

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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 II: Supporting Pages								
PHA Name: TIN 43-0909995 The Housing Authority of the City of Springfield, MO.		Grant Type and Number Capital Fund Program Grant No: MO16PO5850112 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	
AMP 7								
MO-058-011B	Security Salaries	1408	1	1,152.00				
	Administration	1410	1	1,920.00				
	Miniblinds Vacated Apts.	1460	22	1,000.00				
	Reflooring Vacated Apts.	1460	22	2,000.00				
	Replace Siding	1460	24	76,000.00				
	Landscaping	1450	1	5,000.00				
	Security/Computer Equipment	1475	1	320.00				
	A & E	1430	1	1,152.00				

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.

Expires 4/30/2011

Capital Fund Program—Five-Year Action Plan

Part I: Summary						
PHA Name/Number		Locality (City/County & State)			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2012</u>	Work Statement for Year 2 FFY <u>2013</u>	Work Statement for Year 3 FFY <u>2014</u>	Work Statement for Year 4 FFY <u>2015</u>	Work Statement for Year 5 FFY <u>2016</u>
B.	Physical Improvements Subtotal	Annual Statement	1,775,800.00	1,389,100.00	1,374,410.00	1,063,212.00
C.	Management Improvements		355,160.00	277,820.00	274,882.00	212,642.40
D.	PHA-Wide Non-dwelling Structures and Equipment		40,000.00	-0-	-0-	40,000.00
E.	Administration		177,580.00	138,910.00	137,441.00	106,321.20
F.	Other					
G.	Operations		355,160.00	277,820.00	274,882.00	212,642.40
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		2,703,700.00	2,083,650.00	2,061,615.00	1,634,818.00
L.	Total Non-CFP Funds					
M.	Grand Total		2,703,700.00	2,083,650.00	2,061.615.00	1,634,818.00

Capital Fund Program—Five-Year Action Plan

Part I: Summary (Continuation)

PHA Name/Number		Locality (City/county & State)			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2012</u>	Work Statement for Year 2 FFY <u>2013</u>	Work Statement for Year 3 FFY <u>2014</u>	Work Statement for Year 4 FFY <u>2015</u>	Work Statement for Year 5 FFY <u>2016</u>
	AMP 1	Annual Statement	129,616.20	41,380.00	102,180.00	54,816.20
	MO-058-011A					
	AMP 2					
	MO-058-002		271,376.20	263,640.00	49,640.00	83,276.20
	AMP 3					
	MO-058-003		191,776.20	224,040.00	42,840.00	181,476.20
	AMP 4					
	MO-058-004		375,086.20	130,650.00	232,650.00	91,286.20
	AMP 5					
	MO-058,005,006		365,182.40	318,110.00	614,110.00	165,182.40
	AMP 6					
	MO-058,008,009,011C		64,430.40	215,820.00	200,530.00	416,442.40
	AMP 7					
	MO-058,007,011B		378,332.40	195,460.00	132,460.00	70,732.40
	TOTAL		1,775,800.00	1,389,100.00	1,374,410.00	1,063,212.00

Capital Fund Program—Five-Year Action Plan

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2012	Work Statement for Year <u>2</u> FFY 2013			Work Statement for Year: <u>3</u> FFY 2014		
	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	AMP 1			AMP 1		
Annual	MO-058-011A	22 Miniblinds	1,000.00	MO-058-011A	142 New Mailboxes	15,000.00
Statement		22 Reflooring	24,180.00		2 Elev. Cameras	1,200.00
		Repair Sidewalks	800.00		22 Miniblinds	1,000.00
		142 New Toilets	60,000.00		22 Reflooring	24,180.00
		Office Furniture	3,636.20	AMP 2		
		New Lighting	40,000.00	MO-058-002	98 GFI Bathrooms	4,000.00
					98 Kitchen Fixtures	3,000.00
	AMP 2				1 Com Kit. Renovation	4,000.00
	MO-058-002	Replace Lighting	33,300.00		22 Miniblinds	1,000.00
		2 Elev. Cameras	1,200.00		22 Reflooring	16,640.00
		98 Bathroom Renov.	215,600.00		98 New Stoves	35,000.00
		22 Miniblinds	1,000.00		98 Unit New Windows	200,000.00
		22 Reflooring	16,640.00	AMP 3		
		Office Furn/Equipment	3,636.20	MO-058-003	130 Bathroom GFI	5,200.00
					130 Bathroom Renov.	65,000.00
	AMP 3				130 New Stoves	43,000.00
	MO-058-003	Replace Lighting	33,300.00		22 Miniblinds	1,000.00
		2 Elevator Cameras	1,200.00		22 Reflooring	21,840.00
		22 Reflooring	21,840.00		130 New Toilets	50,000.00
		Subtotal of Estimated Cost	\$457,332.40		Subtotal of Estimated Cost	\$491,060.00

Capital Fund Program—Five-Year Action Plan

Part II: Supporting Pages – Physical 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	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	MO-058-003	22 Miniblinds	1,000.00	MO-058-003	130 Closet Doors	26,000.00
		Side Walk Repair	800.00		Apt. Light Fixturs	12,000.00
		Office Furn/Equipment	3,636.20			
		Seal/Paint Ext. Walls	130,000.00	AMP 4		
	AMP 4			MO-058-004	80 Wall Hydrants	12,000.00
	MO-058-004	80 New Siding	200,000.00		22 Miniblinds	1,000.00
		22 Miniblinds	1,000.00		22 Reflooring	13,650.00
		22 Reflooring	13,650.00		New Lighting	12,000.00
		Repair Sidewalks	800.00		80 Water Stops	24,000.00
		Office Furn/Equip	3,636.20		260 Interior Doors	55,000.00
		80 Exterior Doors	60,000.00		80 new Mailboxes	13,000.00
		80 Porches	96,000.00	AMP 5		
				MO-058-005	160 Interior Doors	30,000.00
	AMP 5				64 Storm Doors	40,000.00
	MO-058-005	64 Exterior Doors	30,000.00		Landscaping	25,000.00
		Repair Sidewalks	5,000.00		32 Wall Hydrants	6,000.00
		22 Reflooring	5,460.00		32 Breaker Boxes	32,000.00
		22 Miniblinds	1,000.00		22 Reflooring	5,460.00
					22 Miniblinds	1,000.00
		Subtotal of Estimated Cost		\$551,982.40	Subtotal of Estimated Cost	

Capital Fund Program—Five-Year Action Plan

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY <u>2012</u>	Work Statement for Year <u>2</u> FFY <u>2013</u>			Work Statement for Year: <u>3</u> FFY <u>2014</u>		
	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 Statement	MO-058-005	Office Furn/Equipment	3,636.20	MO-058-006	New Lighting	7,000.00
					80 New Mailboxes	10,000.00
	MO-058-006	80 New Siding	200,000.00		22 Miniblinds	1,000.00
		22 Miniblinds	1,000.00		22 Reflooring	13,650.00
		22 Reflooring	13,650.00		4 Dumpster pads	8,000.00
		60 New Porches	40,000.00		New Lighting	14,000.00
		Repair Sidewalks	800.00		80 Tub Surrounds	125,000.00
		Outside Lighting	11,000.00	AMP 6		
		160 Exterior Doors	50,000.00	MO-058-008	33 Wall Hydrants	5,000.00
		Office Furn/Equip	3,636.20		22 Miniblinds	1,000.00
					22 Reflooring	5,590.00
		AMP 6			New Lighting	4,300.00
	MO-058-008	Repair Sidewalks	800.00		33 T.V. Drop Lines	10,000.00
		22 Reflooring	5,590.00			
		22 Miniblinds	1,000.00	MO-058-009	22 Miniblinds	1,000.00
		Office Furn/Equip	3,636.20		22 Reflooring	5,070.00
					32 New Mailboxes	3,000.00
	MO-058-009	Repair Sidewalks	800.00		32 Wall Insulation	25,000.00
		22 Reflooring	5,070.00		32 Wall Hydrants	10,000.00
		22 Miniblinds	1,000.00			
	Subtotal of Estimated Cost	\$341,618.60		Subtotal of Estimated Cost	\$248,610.00	

Capital Fund Program—Five-Year Action Plan

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY <u>2012</u>	Work Statement for Year <u>2</u> FFY <u>2013</u>			Work Statement for Year: <u>3</u> FFY <u>2014</u>		
	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 Statement	MO-058-009	Office Furn/Equip	3,636.20	MO-058-009	32 Fence Replacement	5,000.00
					32 Bathroom Cabinets	30,000.00
	MO-058-011C	22 Miniblinds	1,000.00			
		22 Reflooring	5,460.00	MO-058-011C	22 Miniblinds	1,000.00
		Repair Sidewalks	800.00		22 Reflooring	5,460.00
		Office Furn/Equip	3,638.00		32 Mailboxes	3,000.00
		32 Carport Sec. Lights	32,000.00		32 Wall Insulation	76,000.00
	AMP 7				32 Outside Faucets	10,000.00
	MO-058-007	Renovate Bathrooms	184,800.00		32 Entry Doors	14,000.00
		22 Miniblinds	1,000.00		32 Range Hoods	1,400.00
		22 Reflooring	14,300.00	AMP 7		
		Repair Sidewalks	800.00	MO-058-007	84 Range Lights	9,000.00
		New Lighting	40,000.00		168 Closet Doors	20,000.00
		Office Furniture	3,636.20		22 Miniblinds	1,000.00
					22 Reflooring	14,300.00
	MO-058-011B	22 Blinds/Reflooring	5,160.00		84 Bathroom GFI	4,000.00
		Office Furn/Equip	3,636.20	MO-058-011B	48 Storm Doors	15,000.00
		24 Apt. Siding	125,000.00		22 Miniblinds	1,000.00
					22 Reflooring	4,160.00
					1 Parking Lot Addition	20,000.00
	Subtotal of Estimated Cost		\$424,866.60	Subtotal of Estimated Cost		\$234,320.00

Capital Fund Program—Five-Year Action Plan

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY <u>2012</u>	Work Statement for Year <u>4</u> FFY <u>2015</u>			Work Statement for Year: <u>5</u> FFY <u>2016</u>		
	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	AMP 4			MO-058-003	130 Partition Walls	130,000.00
Annual	MO-058-004	22 Miniblinds	1,000.00		1 st Floor Reflooring	15,000.00
Statement		22 Reflooring	13,650.00		Landscaping	10,000.00
		80 Wall Insulation	218,000.00		22 Miniblinds	1,000.00
					22 Reflooring	21,840.00
	AMP 5				Office Furn/Equip	3,636.20
	MO-058-005	5 Concrete Lots	200,000.00			
		6 Sidewalk Railing	10,000.00	AMP 4		
		3 Dumpster Pads	6,000.00	MO-058-004	80 New Mailboxes	10,000.00
		22 Miniblinds	1,000.00		Landscaping	10,000.00
		22 Reflooring	5,460.00		4 Dumpster Pads	21,000.00
	MO-058-006	4 Security Fences	140,000.00		22 Miniblinds	1,000.00
		80 Wall Insulation	180,000.00		22 Reflooring	13,650.00
		22 Miniblinds	1,000.00		Office Furn/Equip	3,636.20
		40 Patio Fences	10,000.00		80 Water Heaters	32,000.00
		Retaining Wall	10,000.00			
		1 Drainage Ditch	5,000.00	AMP 5		
		22 Reflooring	13,650.00	MO-058-005	2 Security Fences	90,000.00
		80 Water Heaters	32,000.00		32 Water Heaters	12,800.00
		Subtotal of Estimated Cost	\$846,760.00		Subtotal of Estimated Cost	\$375,562.40

Capital Fund Program—Five-Year Action Plan

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY <u>2012</u>	Work Statement for Year <u>4</u> FFY <u>2015</u>			Work Statement for Year: <u>5</u> FFY <u>2016</u>		
	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	AMP 6			MO-058-005	22 Miniblinds	1,000.00
Annual	MO-058-008	33 New Mailboxes	7,000.00		22 Reflooring	5,460.00
Statement		2 Dumpster Pads	10,000.00		Office Furn/Equip	3,636.20
		22 Miniblinds	1,000.00			
		33 Porches	40,000.00	MO-058-006	Landscaping	30,000.00
	MO-058-009	22 Miniblinds	1,000.00		22 Miniblinds	1,000.00
		22 Reflooring	5,070.00		22 Reflooring	13,650.00
		New Lighting	3,200.00		4 Security Cameras	4,000.00
		30 New Toilets	12,000.00		Office Furn/Equip	3,636.20
		30 New Tubs	42,000.00			
		30 Water Heaters	12,000.00	AMP 6		
	MO-058-011C	22 Miniblinds	1,000.00	MO-058-008	Landscaping	10,000.00
		22 Reflooring	5,460.00		4 Security Fences	78,000.00
		New Lighting	4,000.00		22 Miniblinds	1,000.00
		32 New Toilets	13,000.00		22 Reflooring	5,590.00
		16 Carport Ceilings	31,000.00		33 Apt. Siding	100,000.00
		32 Water Heaters	12,800.00		33 New Vanities	20,000.00
	AMP 7				33 Water Heaters	13,200.00
	MO-058-007	84 New Mailboxes	10,000.00			
		22 Miniblinds	1,000.00			
		Subtotal of Estimated Cost	\$211,530.00		Subtotal of Estimated Cost	\$290,172.40

Capital Fund Program—Five-Year Action Plan

Part II: Supporting Pages – Physical Needs Work Statement(s)							
Work Statement for Year 1 FFY 2012	Work Statement for Year 4 FFY 2015			Work Statement for Year: 5 FFY 2016			
	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 Statement	MO-058-007	22 Reflooring	14,300.00	MO-058-008	Office Furn/Equip	3,636.20	
		84 New Toilets	32,000.00				
	MO-058-011B	4 Security Fences	60,000.00	MO-058-009	22 Miniblinds	1,000.00	
		22 Miniblinds	1,000.00		22 Reflooring	5,070.00	
		22 Reflooring	4,160.00		Office Furn/Equip	3,636.20	
		24 Water Heaters	10,000.00		64 Entry Doors	5,400.00	
					32 New Stoves	9,312.00	
					32 Refrigerators	13,500.00	
					32 Carport Ceilings	31,000.00	
				MO-058-011C	32 Renovate Bathrooms	64,000.00	
					22 Miniblinds	1,000.00	
					22 Reflooring	5,460.00	
					Office Furn/Equip	3,638.00	
					32 New Tubs	42,000.00	
				AMP 7			
				MO-058-007	Landscaping	4,000.00	
					8 Floor Drains	2,000.00	
					22 Miniblinds	1,000.00	
		Subtotal of Estimated Cost		\$121,460.00	Subtotal of Estimated Cost		\$195,652.40

BOARD OF DIRECTORS OF THE RESIDENT COUNCILS

MEMBERS

LOCATION/ POSITION

Ruth Barton	Heritage-Chairman
Linda McCabe	Heritage -Vice- Chairman, Secretary
Roberta, Perez	Heritage -2 nd Vice- Chair
Brandy Friend	Heritage - Treasurer
Debbie Vote	South - Chairman
Will Starnes	South-Vice-Chair
Carol Weber	South-2 nd Vice- Chairman
Debbie Vote	South - Treasurer
Leita Merrill	South- Secretary

Madison Towers does not currently have a council.

Page 1 of 1

SIGN-IN SHEET FOR PUBLIC MEETING February 17, 2012

<u>Name</u>	<u>Building/Apartment #</u>	<u>Phone #</u>
<u>Pat Killingsworth</u>	<u>Commissioner</u>	<u>865-3126</u>
<u>Jo Wadler</u>	<u>Employee</u>	<u>866-4329</u>
<u>Joan</u>	<u>Employee</u>	<u>866-4329</u>
<u>Sarah Fleming</u>	<u>Employee</u>	<u>866-4329</u>
<u>Tom Junot</u>	<u>Exec. Director</u>	<u>417-447-4566</u>
<u>Edna Owens</u>	<u>Employee</u>	<u>866-4329</u>
<u>Laura Hayes</u>	<u>Employee</u>	<u>866-4329</u>
<u>Katrina Hacker</u>	<u>Employee</u>	<u>866-4329</u>

Public meeting was held on February 17, 2012 and no comments were received.