

**Or027v01**  
**Streamlined Annual Plan for Fiscal Year**  
**2012**  
**Housing Authority of Malheur County OR027**



Prepared by the Housing Authority of Malheur County  
Merlene Bourasa, Executive Director  
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# 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

1.0	<b>PHA Information</b> PHA Name: <u>Housing Authority of Malheur County</u> PHA Code: <u>OR027</u> PHA Type: <input checked="" 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>10/2012</u>				
2.0	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>40</u> Number of HCV units: <u>349</u>				
3.0	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
4.0	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
					PH HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
5.0	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.				
5.1	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: <b>The Housing Authority of Malheur County (HAMC) is dedicated to assist eligible Malheur and Harney County residents obtain decent and affordable housing, rental assistance, home ownership opportunities. The HAMC will accomplish our mission with programs designed to provide the elderly and disabled individuals with long term affordable housing.</b>				
5.2	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.  <b>HAMC Goal: expand the supply of affordable Section 8 Vouchers</b> <b>Objective: The HAMC has not been able to obtain additional Section 8 Vouchers for Malheur and Harney County. The HAMC has continued to maintain their "High Performer" certification enabling the HAMC for consideration if additional Vouchers should be made available.</b>  <b>The HAMC is currently working on expanding the supply of affordable low income housing in both Malheur and Harney County.</b> <b>Objective: The HAMC is presently working with CW Capital (approved HUD Lender) we are successfully refinancing the Riverside Manor 31 unit elderly/disabled project which will result in improvements to the property as well as the reduction of the current high market interest rate to a lower rate. Lowering costs will enable additional amenities to this project.</b>  <b>The HAMC was notified to two additional HUD subsidized projects for our consideration. One project is located in Harney County and another project is located in Malheur County. CW will be assisting the HAMC with financing.</b>  <b>HAMC Goal: work closely with our community partners in order to define areas of need. The HAMC identifies the need for affordable special needs housing, and homeless veterans.</b>				
6.0	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <b>Capital Improvement Needs successfully completed to Low Rent Public Housing Units and ACOP and Section 8 Administrative Plan updates. All documents are available for public review and inspection.</b>  (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. <b>Main administrative office – Housing Authority of Malheur County, 959 Fortner Street, Ontario, Oregon 97914; Malheur and Harney County Courthouse.</b>				
7.0	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> Include statements related to these programs as applicable. <i>N/A</i>				
8.0	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable. See Exhibits 1				

8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing. See Exhibits 1</p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. See Exhibits 1</p>
8.3	<p><b>Capital Fund Financing Program (CFFP).</b>  <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. N/A</p>
9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>The State of Oregon Consolidated Plan FY 2011-2015 indicates 23% of Oregon's population lives in non-metro areas. Population growth is less than 1%. The unemployment rate in Oregon is still above 10% with Oregon homelessness up by 12% in the 2010 "Point of Time Survey". Among those indicated are families with children. The Plan indicates 3.6% of Oregon households receive public assistance with rural poverty approximately 30% higher than urban areas.</p> <p>Obstacles to meeting the needs of low income persons in rural areas are considered high risk for private financing; lack of incentives for private development of affordable housing; and public funding too competitive and hard to obtain.</p> <p><u>Housing Priorities</u></p> <p><b>High Priorities:</b> Small and large family and elderly renters at or below 50% median family income, affordable housing units, and first time home buyer assistance. All special needs households are a high priority (i.e includes farm workers, physically, mentally, and developmentally disabled, frail elderly, HIV/AIDS and families, homeless and near homeless, and victims of state or federally declared disasters.</p> <p><b>Medium Priorities:</b> Small and large family and elderly renters with incomes 51% to 60% of median using rent assistance, and first time home buyer assistance.</p> <p><b>Low Priorities:</b> All renter incomes at or above 61% of median income.</p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan</p> <p>The HAMC will continue to work with its local community partners to identify the obstacles to meeting underserved affordable housing needs.</p>

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

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

Year Plan.

*Housing Choice Voucher Program* – SEMAP Score of 99% designated as a High Performer

*Public Housing Program* – designated as a High Performer Public Housing units have an average of 4.50 days with an average of 12.73 lease up days.

*Home Ownership Program* – The HAMC has seven participants purchasing homes.

*Family Self Sufficiency Program* – The HAMC has nine participants successfully participating.

*Home Ownership Fair* – On January 12-14, 2012, the HAMC partnered with Community in Action along with lending institutions and other service providers to conduct the first Housing Fair to inform participants of housing homeownership opportunities available to them.

*Family Unification Program* – HAMC received 25 Section 8 FUP Vouchers to provide families with rental assistance who lack adequate housing and a primary factor in the separation, of children from their families. Presently, the HAMC is serving 14 families.

*Property Management* – began managing the Washington Square Projects in Vale, Oregon. The project consists of 8 units of subsidized housing for elderly and disabled. The units are subsidized by Rural Development and the HAMC is pursuing purchasing these units.

*Program Development* – the HAMC is pursuing purchasing 18 units of HUD Section 8 Project based subsidized units located in Burns Oregon. These units are for elderly and disabled known as Marylhurst Apartments. Another project the HAMC is considering for purchase is Ontario Villa Apartments. These 13 units are HUD Section 8 Project Based family units. Identifying sources for funding purchase of these projects is being researched.

*Project Refinance and Rehabilitation* – The HAMC is presently working with CW Capital in Washington State to refinance our 31 units elderly and disabled HUD Section 8 Based project. The refinance will greatly reduce the current high interest loan as well as accomplishing much needed repairs to these units to include elevator installation, residing, and new upgraded windows.

*The HAMC considering changing their name* – The HAMC serves both Malheur and Harney County consideration by the HAMC Board of Commissioners to change the agencies name to "Southeastern Oregon Housing Authority" is being viewed.

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

10.0

HAMC Signification Amendment and Substantial Deviation/Modification

The HAMC defines substantial deviation as: significant amendments or modifications to the annual plan, which materially impact the goal and objectives of the five-year plan. This would include any changes in the mission statement or a major revision or abandonment of one or more of the goals in the five-year plan. It would not include a delay in the implementation of any particular component caused by business needs or deviations based on emergencies or circumstances out of the HAMC's control. Includes admissions preferences, demolition or disposition or conversion programs. Discretionary or administrative amendments consonant with the HAMC's state overall mission and basic objectives will not be considered substantial deviations or significant modifications.

Significant Amendment or Modification to the Annual Plan

After submitting the five-year plan or annual plan to HUD, the HAMC may amend or modify any policy, rule, regulation or other aspect of the plan. Each signification amendment or modification to a plan submitted to HUD is subject to the requirements of 903.13, 903.15, and 903.17. If the amendment or modification is a significant amendment or modification, the HAMC:

- a. May not adopt the amendment or modification until the HAMC has duly called a meeting of its Board of Commissioners and the meeting, at which the amendment or modification is adopted, is open to the public; and
- b. May not implement the amendment or modification until notification of the amendment or modification is provided to HUD and approved by HUD in accordance with HUD's plan review procedures, as provided in 903.23.

The following items will be considered as significant amendments or modifications to the annual plan and accordingly, will require the above process prior to adoption:

- a. Changes to rent policies or admission preferences
- b. Additions of non-emergency work items (items not included in the current Annual Statement or Five-Year Action Plan under the Capital Fund
- c. Any change with regard to proposed public housing demolition or disposition, designation, conversion activities, or ownership of public housing units.

Exceptions to these definitions will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements or other mandated regulatory changes such as building codes, health codes, etc., such changes will not be considered significant amendments by HUD.

11.0	<p><b>Required Submission for HUD Field Office Review.</b> 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. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"><li>(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)</li><li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li><li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li><li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li><li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li><li>(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.</li><li>(g) Challenged Elements</li><li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li><li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li></ul>
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# Exhibits

## Index

**HUD Form – 50077 & 50077-CR**

**HUD Form – 50070**

**HUD Form – 50071**

**SF-LLL**

**Certificate of Consistency**

**Resident Advisory Board Comments**

**Challenged Elements – None Received**

**HUD Form – 50071.1 for FY 2010; FY 2011 and  
FY 2012**

**HUD Form – 50075 Annual Action Plan**

Resolution R-2012-3

**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 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.

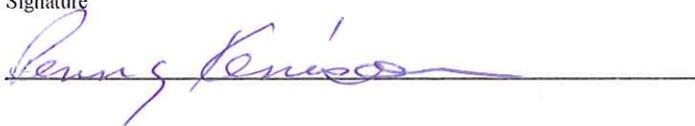
Housing Authority of Malheur County  
 PHA Name

OR027  
 PHA Number/HA Code

       5-Year PHA Plan for Fiscal Years 20   - 20  

  X   Annual PHA Plan for Fiscal Years 20  12   - 20  13  

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  Penny Kenison	Title  Chairman HAMC Board
Signature  	Date July 17, 2012

**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.

Housing Authority of Malheur County

OR027

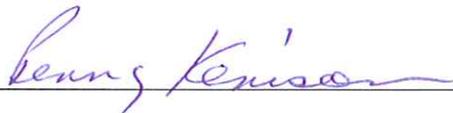
\_\_\_\_\_  
PHA Name

\_\_\_\_\_  
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	Penny Kenison	Title	HAMC Board Chair
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Signature



Date 07/17/2012

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority of Malheur County

Program/Activity Receiving Federal Grant Funding

Low Rent Public Housing and Section 8 Voucher Rental Assistance

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.)

Housing Authority of Malheur County  
959 Fortner Street  
Ontario, Oregon 97914

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

Merlene Bourasa

Title

Executive Director

Signature

Date

07/12/2012

# 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 Malheur County

Program/Activity Receiving Federal Grant Funding

Low Rent Public Housing and Section 8 Voucher Rental Assistance

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.

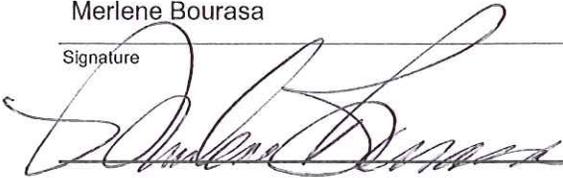
I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**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

Merlene Bourasa

Signature



Title

Executive Director

Date (mm/dd/yyyy)

07/12/2012

## DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, <i>if known:</i>  <b>Congressional District, if known:</b> 4c	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>  <b>Congressional District, if known:</b>	
<b>6. Federal Department/Agency:</b> US Department of Housing & Urban Development	<b>7. Federal Program Name/Description:</b>  CFDA Number, <i>if applicable:</i> _____	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$ _____	
<b>10. a. Name and Address of Lobbying Registrant</b> <i>(if individual, last name, first name, MI):</i> Housing Authority of Malheur County 959 Fortner Street Ontario, Oregon 97914	<b>b. Individuals Performing Services</b> <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>  <div style="text-align: center;">             _____            Print Name: Merlene Bourasa            Title: Executive Director            Telephone No.: (541) 889-9661 ext. 111      Date: 07/12/2012         </div>	
<b>11.</b> 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.		
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

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

I, Margaret S. Van Vliet, Director, Oregon Housing and Community Services, certify that  
the

2012 PHA Annual Plan of the Housing Authority of Malheur County is consistent with  
the Consolidated Plan of Oregon 2011-2015 prepared pursuant to 24 CFR Part 91.



\_\_\_\_\_  
Director, Oregon Housing & Community Services

7.19.12

Date

**RESIDENT ADVISORY BOARD MEETING FOR THE HOUSING AUTHORITY OF MALHEUR  
COUNTY (HAMC) PHA PLAN FOR FISCAL YEAR 2012**

**AGENDA FOR**

The Resident Advisory Board (RAB) is meeting to review and discuss the Housing Authority of Malheur County's PHA Plan update for Fiscal Year 2012.

Hearing Agenda

3:00 p.m.

1. Opening Comments - PHA Plan for Fiscal Year 2012
2. Introductions
3. Agency Annual Plan Overview
4. Discussion and Comments

Adjournment   4:00   p.m.

MINUTES FROM THE RESIDENT ADVISORY BOARD MEETING  
PHA PLAN UPDATE FOR FISCAL YEAR 2012  
OF THE HOUSING AUTHORITY OF MALHUE COUNTY HELD  
June 8, 2012

The Resident Advisory Board (RAB) met to review and discuss the Housing Authority of Malheur County's PHA Plan update for Fiscal Year 2012. The meeting was held at 3:00 p.m. June 8, 2012 at the Housing Authority of Malheur County Conference Room, Ontario, Oregon.

PRESENT:

The meeting was called to order with the following Resident Advisory Board members in attendance:

Penny Kennison – Public Housing Participant and Tenant Commissioner  
Barbara Ann Hart – Absent  
Alberta Savala – Absent

Housing Authority Staff in attendance:  
Merlene Bourasa, Executive Director

Guests Present:       None

Executive Director reviewed PHA Plan for Fiscal Year 2012.

Though the PHA Plan for Fiscal Year 2012, had no significant changes Mrs. Bourasa highlighted the PHA Plan mission and goals, our financial resources, highlighted the several programs the agency is involved with, plans to expand homeownership opportunities for low income families and attachments along with supporting documents.

RAB Comments and Suggestions – None received

Adjournment:

Mrs. Bourasa adjourned the meeting at: 4:00 pm., June 8, 2012 at the Housing Authority of Malheur County Conference Room.

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 Malheur County	Grant Type and Number Capital Fund Program Grant No: OR16P027501-10 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant 2010 FFY of Grant Approval:
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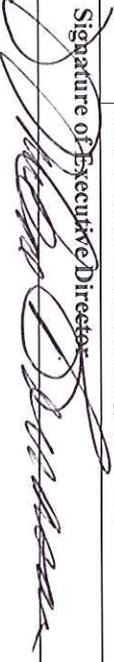
Type of Grant		Revised Annual Statement (revision no: )			
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012		<input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Original	Total Estimated Cost Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	15,451.40		22,532.30	9,364.05
3	1408 Management Improvements	40,079.90		32,281.86	32,281.86
4	1410 Administration (may not exceed 10% of line 21)	7,725.70		644.80	644.80
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	14,000.00		14,000.00	14,000.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

<b>Part I: Summary</b>		<b>FFY of Grant: 2010</b>	
<b>PHA Name:</b> Housing Authority of Malheur County		<b>FFY of Grant Approval:</b>	
<b>Grant Type and Number</b> Capital Fund Program Grant No: OR16P027501-10 Replacement Housing Factor Grant No: Date of CFPP:			

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	77,257.00		69,458.96	56,290.71
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				
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012 <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Signature of Executive Director: 		Date: May 26, 2012		Signature of Public Housing Director: _____ Date: May 26, 2012	

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

**Part II: Supporting Pages**

PHA Name: Housing Authority of Malheur County		Grant Type and Number Capital Fund Program Grant No: OR16P027501-10 CFFP (Yes/No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2010		Status of Work		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost Original	Revised <sup>1</sup>	Total Actual Cost Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	Status of Work
PHA-Wide	Operations	1406		15,451.40		22,532.30	9,364.05	
	<b>SUB TOTAL</b>	<b>1406</b>		<b>15,451.40</b>		<b>22,532.30</b>	<b>9,364.05</b>	Work ongoing
	Administration	1410		7,725.70		644.80	644.80	Work ongoing
	<b>SUB TOTAL</b>	<b>1410</b>		<b>7,725.70</b>		<b>644.80</b>	<b>644.80</b>	
PHA-Wide	Management Improvements	1408		40,079.90		32,281.86	32,281.86	
	Software & Hardware Replacement to be installed in the HAMC Admin/Ofc.							Work Almost Completed
	<b>SUB TOTAL</b>			<b>40,079.90</b>		<b>32,281.86</b>	<b>32,281.86</b>	
	Maintenance Equipment	1475		14,000.00		14,000.00	14,000.00	Completed
	<b>SUB TOTAL</b>			<b>14,000.00</b>		<b>14,000.00</b>	<b>14,000.00</b>	
	<b>GRAND TOTAL</b>			<b>77,257.00</b>		<b>69,458.96</b>	<b>56,290.71</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.



Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

<b>Part I: Summary</b>		PHA Name: Housing Authority of Malheur County		Grant Type and Number Capital Fund Program Grant No: OR16P027501-11 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2011 FFY of Grant Approval:	
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Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012	Summary by Development Account	Original	Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		Obligated	Total Actual Cost <sup>1</sup> Expended
				Total Estimated Cost	Revised <sup>2</sup>		
1		Total non-CFP Funds					
2		1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	38,679.50			0.00	0.00
3		1408 Management Improvements					
4		1410 Administration (may not exceed 10% of line 21)	7,151.50			0.00	0.00
5		1411 Audit					
6		1415 Liquidated Damages					
7		1430 Fees and Costs					
8		1440 Site Acquisition					
9		1450 Site Improvement					
10		1460 Dwelling Structures	25,684.00			0.00	0.00
11		1465.1 Dwelling Equipment—Nonexpendable					
12		1470 Non-dwelling Structures					
13		1475 Non-dwelling Equipment					
14		1485 Demolition					
15		1492 Moving to Work Demonstration					
16		1495.1 Relocation Costs					
17		1499 Development Activities <sup>4</sup>					

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

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

<b>Part I: Summary</b>		FFY of Grant: 2011	
PHA Name: Housing Authority of Malheur County	Grant Type and Number Capital Fund Program Grant No: OR16P027501-11 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

Type of Grant		Revised Annual Statement (revision no: )	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012 <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
		Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	71,515.00	36,283.15
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: May 26, 2012	Signature of Public Housing Director
			Date

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





Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

<b>Part I: Summary</b>	<b>PHA Name:</b> Housing Authority of Malheur County	<b>Grant Type and Number</b> Capital Fund Program Grant No: OR16P027501-12 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2012</b> <b>FFY of Grant Approval:</b>
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Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012	Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report	Original	Revised Annual Statement (revision no: )		Total Actual Cost <sup>1</sup> Expended
				Total Estimated Cost	Revised <sup>2</sup>	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		12,694.00		12,694.00	0.00
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)		6,347.00		6,347.00	0.00
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures		44,433.00		44,433.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					

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

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

<b>Part I: Summary</b>		<b>FFY of Grant: 2012</b>	
<b>PHA Name:</b> Housing Authority of Malheur County	<b>Grant Type and Number</b> Capital Fund Program Grant No: OR16P027501-12 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant Approval:</b>	

<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
<b>Type of Grant</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	<b>Total Actual Cost<sup>1</sup></b>
18a	1501 Collateralization or Debt Service paid by the PHA	Original	Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	Revised <sup>2</sup>	Expended
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	63,474.00	63,474.00
21	Amount of line 20 Related to LBP Activities		0.00
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		
<b>Signature of Executive Director</b> 		<b>Date</b> 05/26/2012	<b>Signature of Public Housing Director</b>
			<b>Date</b>

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

**Part II: Supporting Pages**

PHA Name: Housing Authority of Malheur County  
 Grant Type and Number  
 Capital Fund Program Grant No: OR16P027501-12  
 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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA-Wide	Operations	1406						
	<b>SUB TOTAL</b>	<b>1406</b>						
	Administration	1410						
	<b>SUB TOTAL</b>	<b>1410</b>						
<b>OR027001-Dwelling Improvements</b>		1460						
	Replacement of Deteriorated Foundation Vents		3/2 Bdr Units 3/3 Bdr Dplx 1/4 Bdr Units = 60 vents	44,433.00		44,433.00		
	Replacement of Deteriorated Wood Fascia under gutters and downspouts replace with steel		3/2 Bdr Units 3/3 Bdr Dplx 1/4 Bdr Units = 395 sq. ft.	32,500.00				
	Slope Front Concrete Entries to meet with ADA slope and grade		3/2 Bdr Dplx 3/3 Bdr Dplx 1/4 Bdr Units = 120 sq. ft.	7,478.00				
	<b>GRAND TOTAL</b>			<b>63,474.00</b>		<b>63,474.00</b>		

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.



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

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

**Part I: Summary**

PHA Name/Number Housing Authority of Malheur County <b>OR027</b>		Locality (City/County & State) Ontario, Malheur County, Oregon			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name <b>OR027001</b>	Work Statement for Year 1 FFY <b>2012</b>	Work Statement for Year 2 FFY <b>2013</b>	Work Statement for Year 3 FFY <b>2014</b>	Work Statement for Year 4 FFY <b>2015</b>	Work Statement for Year 5 FFY <b>2016</b>
B.	Physical Improvements Subtotal	\$663,474.00				
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		6,347.00	6,347.00	6,347.00	6,347.00
F.	Other					
G.	Operations		64,363.50	64,363.50	64,363.50	64,363.50
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		63,474.00	63,474.00	63,474.00	63,474.00
L.	Total Non-CFP Funds					
M.	Grand Total		<b>\$63,474.00</b>	<b>\$63,474.00</b>	<b>\$63,474.00</b>	<b>\$63,474.00</b>



