

NORTHEAST OREGON HOUSING AUTHORITY

RESOLUTION # 429

A RESOLUTION OF PHA CERTIFICATIONS OF COMPLIANCE WITH THE PHA PLANS AND RELATED REGULATIONS TO ACCOMPANY THE PHA PLAN.

WHEREAS, The Board of Commissioners of the Northeast Oregon Housing Authority has received a copy of the Housing Authority Agency Plan; Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan; Civil Rights Certification; and PHA Certification of Compliance with the PHA Plans and Related Regulations.

NOW THEREFORE BE IT RESOLVED by the Board of Commissioners of the Northeast Oregon Housing Authority to approve the Public Housing Agency Plan and Certifications for fiscal year beginning April 1, 2012.

DATED THIS 20TH DAY OF DECEMBER 2011.

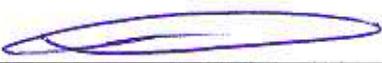
NORTHEAST OREGON HOUSING AUTHORITY



Mike Hayward, Chairperson

ATTESTED:

(Seal)



Dale Inslee, Secretary

**PHA Certifications of Compliance
with PHA Plans and Related
R e g u l a t i o n s**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/30/2011

RESOLUTION # 429

**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 ___ Annual PHA Plan for the PHA fiscal year beginning 04/2012, 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.

NORTHEAST OREGON HOUSING AUTHORITY

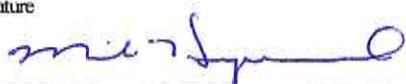
OR032

PHA Name

PHA Number/HA Code

Annual PHA Plan for Fiscal Year 04/2012

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 Mike Hayward	Title Chairperson
Signature 	Date 12/20/11

1.0	PHA Information PHA Name: <u>NORTHEAST OREGON HOUSING AUTHORITY</u> PHA Code: <u>OR032</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input checked="" type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2012</u>																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>129</u> Number of HCV units: <u>710</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.)																										
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width:35%;">Participating PHAs</th> <th rowspan="2" style="width:10%;">PHA Code</th> <th rowspan="2" style="width:20%;">Program(s) Included in the Consortia</th> <th rowspan="2" style="width:20%;">Programs Not in the Consortia</th> <th colspan="2" style="width:15%;">No. of Units in Each Program</th> </tr> <tr> <th style="width:5%;">PH</th> <th style="width:10%;">HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	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:					
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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: Admissions and Continued Occupancy Policy – Section 8 Housing Choice Voucher Administrative Plan – Northeast Oregon Housing Personnel Policy – Homeownership Policy – Transitional Housing Policy - Northeast Oregon Housing Succession Plan - (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. Northeast Oregon Housing Authority office 2608 May Lane, La Grande, Oregon – City Hall and County Courthouse for Grant, Baker, Union, and Wallowa Counties.																										
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> <i>None</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 Attachments A,B,C, & D																										
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 E																										
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>Housing Priorities</p> <ul style="list-style-type: none"> - High Priorities: Small and large family and elderly renters at or below 50% median family income, using the HOME program for rent assistance, new affordable housing units, and acquisition/rehabilitation of existing affordable units and first time home buyer assistance. All special population households are a high priority. "Special populations" includes farm workers, physically, mentally, and developmentally disabled, frail elderly, HIV/AIDS and families, persons in recovery, post incarceration persons, homeless and near homeless, and victims of state or federally declared disasters. - Medium Priorities: Small and large family and elderly renters with incomes 51% to 60% of median using HOME program dollars for rent assistance, new affordable housing units, and acquisition/rehabilitation of existing affordable units and first time home buyer assistance. Owner households at 51% to 80% of median income using CDBG dollars for housing rehabilitation loans. - Low Priorities: All renter incomes at or above 61% of median income. Due solely to repayment ability, owner households with incomes below 50% of median are a low priority for amortized housing rehabilitation loans.
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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>
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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.

Fair Housing Training

- New Staff attended Fair Housing in Island City at The Place on August 25, 2011

Housing Choice Voucher Program

- Leased up rate for FYE 03/31/11 was 96%
- SEMAP Score of 96% - Designated as High Performer

Public Housing Program

- PHAS Score for FYE 03/31/10 was 94% - Designated as High Performer
- FYE 03/31/11 Statistics
Union County Vacancy Rate 1.88% - Baker/Grant Counties Vacancy Rate 3%
Union County Turnaround Days - Maintenance Days 6.2 - Occupancy Days 22.5 - Total of 28.6 Days
Union County Work Order Response Time: 7.9 Days
Baker/Grant Counties Turnaround Days - Maintenance Days 3.4 - Occupancy Days 53.63 - Total of 57.0 Days
Baker/Grant County Work Order Response Time: 3.48 Days

Homeownership Program

- Ten families purchased homes with Housing Choice Vouchers
- One family purchased without a Voucher
- Zero Rent to Own homes were purchased
- One family is in the process of qualifying for a loan
- Six Rent to Own families moved without purchasing the unit
- ABC's of Home Buying classes were held on:
Union County - April 30, 2011
Wallowa County - June 4, 2011
Baker County - August 27, 2011
Grant County - October 15, 2011

Family Self-Sufficiency Program

- Eight Public Housing families are currently participating in FSS
- Eighty-six Housing Choice Voucher Families are currently participating in FSS
- Twenty-one families were terminated as FSS participants for termination of Section 8 assistance
- Twenty new families were enrolled on FSS
- Eight FSS graduates received escrow balances. Total disbursed was \$48,792.30

Rent Ready Class

- Rent Ready Classes were held on February 19, 2011 and September 24, 2011. All counties are invited

Public Housing Asset Management Change Over

- Site Manager switch was implemented on October 1, 2006
- Units were divided into two projects: Union County and Baker / Grant Counties
- Income and expenses are tracked per project effective April 1, 2007
- A request to not have a Central Office was sent on March 28, 2009 and received approval on August 31, 2009

Property Management

Started managing the Sommers Apartments, 10 units of HOME in Elgin, Oregon effective April 23, 2009 - on going management of Tamarack Court Apartments and Strawberry Village Apartments

Program Development

- *Richland School Project - Elderly Housing project in Richland, Oregon.*
Completed a market assessment
Submitted information to the State for #1 Priority of Elderly Housing
July 17, 2009 approval from State received for Elderly as #1 Priority
September 14, 2009 Pine/Eagle School District Board approved gifting Richland School to NEOHA to be used for elderly/disabled low income housing
April 2010 hired architect and have preliminary site plan and drawings
Application submitted for funding April 15, 2011 - Funding approved August 19, 2011
- *Possible purchase of Strawberry Village Apartments - Application to purchase and rehab submitted April 15, 2011 - Funding approved August 19, 2011*
- *Possible purchase of Tamarack Court Apartments*

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

Substantial Deviation:

Any changes in goals and objectives that are not to address specific local emergencies or changes required for reasonable accommodations.

Significant Amendment or Modification:

- 1) *Changes to rent or admissions policies or organization of the waiting list - to be approved November 2010*
- 2) *Additions of non-emergency work items, or change in use of replacement reserves fund under the Capital Fund in excess of \$20,000*
Approved by the Northeast Oregon Housing Authority Board of Commissioners May 22, 2001, Resolution #265
- 3) *Any changes with regard to demolition or disposition, designation, homeownership programs, or conversion activities. None*

© Disposition of Public Housing

Northeast Oregon Housing Authority may consider the disposition of the 129 Public Housing dwelling units if HUD does not provide sufficient Operating Subsidy and/or Capital Fund Grants to effectively operate the units as Public Housing.

(d) List of Resident Advisory Board

Teresa Duffy, Section 8, La Grande, Oregon
Patty Barnum, Section 8, La Grande, Oregon
Jeff Corum, Section 8, La Grande, Oregon
Shirley Watts, Section 8, La Grande, Oregon
Beverly Mathena, Section 8, La Grande, Oregon
Joe Scott, Public Housing, La Grande, Oregon
Ulee Yanok, Public Housing, Huntington, Oregon

10.0

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11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. **Note:** Faxed copies of these documents will not be accepted by the Field Office.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights)
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only)
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only)
- (d) Form SF-L.L.L., *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only)
- (e) Form SF-L.L.L.-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only)
- (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.

MINUTES OF NORTHEAST OREGON HOUSING AUTHORITY'S
AGENCY PLAN PUBLIC MEETING
HELD, NOVEMBER 30, 2011 @ 10:00 A.M.
AT 2608 MAY LANE, LA GRANDE, OR
IN THE COMMUNITY ROOM

The public meeting was called to Order by Executive Director, Maggie LaMont with Administrative Aide, Lola Dutton in attendance. Guests present were Resident Advisory Board members Shirley Watts from Tamarack Apartments, Patty Barnum from the May Lane Apartments, and Ulee Yanok from Huntington Public Housing.

There were no written comments received on the published 2012 Agency Plan.

The meeting was Open for Public Comments and the following comment was received:

Comment # 1 - Huntington resident commented how much she appreciated the Housing Authority using the preference for Veterans to place a homeless veteran and his family in one of the Huntington Units. The family is very appreciative to have a home. The Resident Advisory Board members present added they are glad the Housing Authority was able to use the preference to place the family. The Huntington resident added the response from the community has been very positive.

After a brief discussion of the comment the public hearing was closed.

- (g) Challenged Elements
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only)
Attachment A - 2009 CFP, Attachment B-2010 CFP, Attachment C- 2011 CFP, Attachment D - 2012 CFP,
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only) *Attachment E Attachment F - 2012 PHA Plan VAWA Description*

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

ATTACHMENT A

Part I: Summary		Grant Type and Number		Date of CEPP		FY of Grant: 2009	
PHA Name: NORTHEAST OREGON HOUSING AUTHORITY NEOMA		Capital Fund Program Grant No: OR16PO32-501-09		Date of CEPP:		FY of Grant of Grant: 2009	
		Replacement Housing Factor Grant No:				Approval: 2009	
<input type="checkbox"/> Original Annual Statement Reserve for Disasters <input type="checkbox"/> Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Final Performance and Evaluation Report		Total Estimated Cost		Total Actual Cost ¹			
Line No.	Summary by Development Account	Original	Revised ²	Obligated	Expended		
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³	\$116,502.95	\$117,101.95	\$117,101.95	\$117,101.95		
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)	\$25,001.00	\$25,001.00	\$25,001.00	\$25,001.00		
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement	\$18,830.50	\$19,513.00	\$19,513.00	\$19,513.00		
10	1460 Dwelling Structures	\$10,125.00	\$10,125.00	\$10,125.00	\$10,125.00		
11	1465 1 Dwelling Equipment—Nonexpendable	\$42,247.50	\$42,135.50	\$42,135.50	\$42,135.50		
12	1470 Nondwelling Structures	\$14,350.50	\$13,181.00	\$13,181.00	\$13,181.00		
13	1475 Nondwelling Equipment	\$22,955.55	\$22,955.55	\$22,955.55	\$22,955.55		
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495 1 Relocation Costs						
17	1499 Development Activities						
18a	1501 Collateralization or Debt Service paid by the PHA						
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of lines 2-19)	\$250,013.00	\$250,013.00	\$250,013.00	\$250,013.00		
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Section 504 Compliance	38,601.50	38,114.50	38,114.50	38,114.50		
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Cost						
25	Amount of line 20 Related to Energy Conservation Measures						

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: NORTHEAST OREGON HOUSING AUTHORITY		NEOHA		Grant Type and Number		FFY of Grant: 2009	
				Capital Fund Program Grant No: OR16PO32-501-09		FFY of Grant of Grant Approver: 2009	
				Replacement Housing Factor Grant No:		Date of CFFP:	
<input type="checkbox"/> Original Annual Statement Reserve for Disasters <input type="checkbox"/> Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)				<input checked="" type="checkbox"/> Final Performance and Evaluation Report			
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:				Total Estimated Cost			
Line No.	Summary by Development Account	Original	Revised ²	Obligated	Total Actual Cost ¹	Expended	
	Signature of Executive Director	Date	Signature of Public Housing Director	Date			
		3-1-12					

ATTACHMENT A

Part II: Supporting Pages

PHA Name: Northeast Oregon Housing Authority	Grant Type and Number		Capital Fund Program Grant No: OR16P032-501-09		CFPP (Yes/No):		Federal FTY of Grant: 2009		Status of Work
	Development Number: Name: HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost	Revised ¹	Funds Obligated ²	Funds Expended ³	
HA-Wide	OPERATIONS	1406		Original					
	ADMINISTRATIVE								
	Salary & Benefits	1410		\$25,001.00	\$25,001.00	\$25,001.00	\$25,001.00	\$25,001.00	completed
OR032000001P	SITE IMPROVEMENTS	1450							
scattered sites	Concrete Replacement 504			\$10,000.00	\$10,682.50	\$10,682.50	\$10,682.50	\$10,682.50	completed
scattered sites	DWELLING STRUCTURES	1460							
scattered sites	Kitchen remodel 504			\$5,125.00	\$5,125.00	\$5,125.00	\$5,125.00	\$5,125.00	completed
scattered sites	DWELLING EQUIPMENT	1465.1							
scattered sites	Replace A/C units		14	\$22,500.00	\$22,500.00	\$22,500.00	\$22,500.00	\$22,500.00	completed
La Grande	Community Rm Kitchen 504	1470	1	\$7,175.25	\$6,590.50	\$6,590.50	\$6,590.50	\$6,590.50	completed
	NONDWELLING EQUIPMENT	1475							
				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	SUB-TOTAL			\$44,800.25	\$44,898.00	\$44,898.00	\$44,898.00	\$44,898.00	
OR032000002P	SITE IMPROVEMENTS	1450							
scattered sites	Concrete Replacement			\$4,704.50	\$4,704.50	\$4,704.50	\$4,704.50	\$4,704.50	completed
Baker City	504 Parking lot repair		1 site	\$4,126.00	\$4,126.00	\$4,126.00	\$4,126.00	\$4,126.00	completed
				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	DWELLING STRUCTURES	1460							
scattered sites	Kitchen remodel 504		5 units	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	completed
				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	DWELLING EQUIPMENT	1465.1							
scattered sites	Replace A/C units		14 units	\$19,747.50	\$19,635.50	\$19,635.50	\$19,635.50	\$19,635.50	completed
Baker City	Community Rm Kitchen 504	1470	1	\$7,175.25	\$6,590.50	\$6,590.50	\$6,590.50	\$6,590.50	completed
	NONDWELLING EQUIPMENT	1475							
	Maintenance Vehicle		1	\$22,955.55	\$22,955.55	\$22,955.55	\$22,955.55	\$22,955.55	completed
				\$63,708.80	\$63,012.05	\$63,012.05	\$63,012.05	\$63,012.05	
	SUB-TOTAL			\$75,013.00	\$75,013.00	\$75,013.00	\$75,013.00	\$75,013.00	
	GRAND TOTAL			\$119,813.25	\$119,911.00	\$119,911.00	\$119,911.00	\$119,911.00	

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.

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

ATTACHMENT B

Part I: Summary

PHA Name: NORTHEAST OREGON HOUSING AUTHORITY	NEOHA	Grant Type and Number	Capital Fund Program Grant No: OR16PO32-501-10	FY of Grant: 2010
			Replacement Housing Factor Grant No:	FY of Grant of Grant
				Approval: 2009
			Date of CFFP:	

Original Annual Statement Reserve for Disasters Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 9-30-11 Final Performance and Evaluation Report

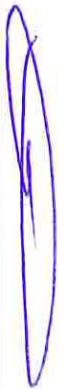
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	\$93,607.70	\$0.00	\$93,421.00	\$59,543.47
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$24,528.00	\$0.00	\$24,528.00	\$24,528.00
5	1411 Audit				
6	1413 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	\$11,144.30	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
11	1465 I Dwelling Equipment—Nonexpendable	\$116,000.00	\$0.00	\$92,051.00	\$92,051.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495 I Relocation Costs				
17	1499 Development Activities				
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)	\$245,280.00	\$0.00	\$210,000.00	\$176,122.47
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Section 504 Compliance				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security Hard Cost				
25	Amount of line 20 Related to Energy conservation Measures	116,000.00	0.00	92,051.00	92,051.00

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: NORRHEAST OREGON HOUSING AUTHORITY		NECHA		Grant Type and Number		FFY of Grant: 2010	
				Capital Fund Program Grant No: OR16PO32-501-10		FFY of Grant of Grant Approval: 2009	
				Replacement Housing Factor Grant No:		Date of CEFP:	
<input type="checkbox"/> Original Annual Statement Reserve for Disasters () Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/11				<input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost	Original	Revised ²	Obligated	Total Actual Cost ¹	Expended
	Signature of Executive Director	Date		Signature of Public Housing Director			
		3-1-12					

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: Northeast Oregon Housing Authority	Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Grant Type and Number		Total Estimated Cost		Federal FFY of Grant: 2010		Status of Work
			Capital Fund Program Grant No. OR16P032-501-10	CEFP (Yes/No): Replacement Housing Factor Grant No.	Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	HA-Wide	OPERATIONS	1406		\$93,607.70	\$0.00	\$93,421.00	\$59,543.47	
		ADMINISTRATIVE							
		Salary & Benefits	1410		\$24,528.00	\$0.00	\$24,528.00	\$24,528.00	
	OR032000001P	SITE IMPROVEMENTS	1430						
	scattered	Concrete Replacement		1 site	\$6,144.30	\$0.00	\$0.00	\$0.00	contracted
		DWELLING STRUCTURES	1460						
		DWELLING EQUIPMENT		1465.1	\$0.00	\$0.00	\$0.00	\$0.00	
	scattered	Replace electric range		46	\$36,800.00	\$0.00	\$32,918.00	\$32,918.00	in progress
		NONDWELLING EQUIPMENT	1475						
					\$0.00	\$0.00	\$0.00	\$0.00	
		SUB-TOTAL			\$42,944.30	\$0.00	\$32,918.00	\$32,918.00	
	OR032000002P	SITE IMPROVEMENTS	1450						
	scattered	Concrete Replacement		1 site	\$5,000.00	\$0.00	\$0.00	\$0.00	contracted
					\$0.00	\$0.00	\$0.00	\$0.00	
					\$0.00	\$0.00	\$0.00	\$0.00	
		DWELLING STRUCTURES		1460	\$0.00	\$0.00	\$0.00	\$0.00	
					\$0.00	\$0.00	\$0.00	\$0.00	
	scattered	DWELLING EQUIPMENT		1465.1	\$79,200.00	\$0.00	\$59,133.00	\$59,133.00	in progress
		Replace electric range		83	\$0.00	\$0.00	\$0.00	\$0.00	
		NONDWELLING EQUIPMENT		1475	\$0.00	\$0.00	\$0.00	\$0.00	
					\$0.00	\$0.00	\$0.00	\$0.00	
		SUB-TOTAL			\$81,200.00	\$0.00	\$59,133.00	\$59,133.00	
		GRAND-TOTAL			\$145,144.30	\$0.00	\$115,000.00	\$115,000.00	

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.

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

ATTACHMENT C

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: NORTHEAST OREGON HOUSING AUTHORITY NEOHA Grant Type and Number: Capital Fund Program Grant No: OR16PO32-501-11
 Replacement Housing Factor Grant No: Date of CFFP: FFY of Grant: 2011
 (X) Performance and Evaluation Report for Period Ending: 9/30/11 () Revised Annual Statement (revision no:) FRY of Grant of Grant: Approved: 2010

Line No.	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	\$79,548.50	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration (may not exceed 10% of line 21)	\$21,175.20	\$0.00	\$10,000.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$15,000.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$37,500.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment—Nonexpendable	\$58,528.30	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18be	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (may not exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant: (sum of lines 2-19)	\$211,752.00	\$0.00	\$10,000.00	\$0.00
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Section 504 Compliance	\$10,000.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security - Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security Hard Cost	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of line 20 Related to Energy conservation Measures	\$58,528.30	\$0.00	\$0.00	\$0.00

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: NORTHEAST OREGON HOUSING AUTHORITY		NEOHA		Grant Type and Number		Capital Fund Program Grant No: OR16PO32-501-11		Date of CFFP:		FFY of Grant: 2011	
				Replacement Housing Factor Grant No:						FFY of Grant of Grant Approval: 2010	
<input type="checkbox"/> Original Annual Statement Reserve for Disasters <input type="checkbox"/> Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/11 <input type="checkbox"/> Final Performance and Evaluation Report											
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹							
		Original	Revised ²	Obligated	Date						
Signature of Executive Director		Date		Signature of Public Housing Director		Date					
		3-1-12									

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

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Grant Type and Number		Total Estimated Cost	Federal FFY of Grant: 2011		Status of Work	
		Dev. Acct No.	Quantity		FFY of Grant Approval: 2010	Total Actual Cost		
HA-Wide	OPERATIONS	1406		Original \$79,548.50	Revised ¹ \$0.00	Funds Obligated ² \$0.00	Funds Expended ² \$0.00	
	ADMINISTRATIVE Salary & Benefits	1410		\$21,175.20	\$0.00	\$18,000.00	\$0.00	
OR032000001P	SITE IMPROVEMENTS	1450						
La Grande	Concrete Replacement		1 site	\$7,000.00	\$0.00	\$0.00	\$0.00	summer
	DWELLING STRUCTURES	1460						
Elgin	Cabinets / Countertops		4 units	\$27,500.00	\$0.00	\$0.00	\$0.00	winter
La Grande	504 Workstation		2 units	\$5,000.00	\$0.00	\$0.00	\$0.00	winter
	DWELLING EQUIPMENT	1465.1						
Scattered	Replace Garbage Disposals		46 units	\$13,800.00	\$0.00	\$0.00	\$0.00	winter
	NONDWELLING EQUIPMENT	1475						
	SUB-TOTAL			\$53,300.00	\$0.00	\$0.00	\$0.00	
OR032000002P	SITE IMPROVEMENTS	1450						
scattered	Concrete Replacement		1 site	\$8,000.00	\$0.00	\$0.00	\$0.00	summer
	DWELLING STRUCTURES	1460						
Baker city	504 Workstation		2 units	\$5,000.00	\$0.00	\$0.00	\$0.00	winter
	DWELLING EQUIPMENT	1465.1						
Baker City	Replace A/C units		25 units	\$20,000.00	\$0.00	\$0.00	\$0.00	spring
Baker City	Replace Garbage Disposals		83 units	\$24,728.30	\$0.00	\$0.00	\$0.00	winter
	NONDWELLING EQUIPMENT	1475						
	SUB-TOTAL			\$0.00	\$0.00	\$0.00	\$0.00	
	GRAND TOTAL			\$311,752.00	\$0.00	\$18,000.00	\$0.00	

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.

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 8/31/2011

ATTACHMENT D

Part I: Summary

PHA Name: NOHRTEAST OREGON HOUSING AUTHORITY		NEOHA		Grant Type and Number		Capital Fund Program Grant No: OR16PO32-501-112		Date of CFFP		FFY of Grant: 2012	
				Replacement Housing Factor Grant No:						FFY of Grant of Grant Approval: 2011	
(X) Original Annual Statement Reserve for Disasters () Emergencies () Revised Annual Statement (revision no:)											
(0) Performance and Evaluation Report for Period Ending: () Final Performance and Evaluation Report											
Line No.	Summary by Development Account	Total Estimated Cost				Total Actual Cost ¹					
		Original	Revised ²	Obligated	Expended						
1	Total non-CFF Funds										
2	1406 Operations (may not exceed 20% of line 21) ³	\$79,363.80	\$0.00	\$0.00	\$0.00						
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00						
4	1410 Administration (may not exceed 10% of line 21)	\$21,175.20	\$0.00	\$0.00	\$0.00						
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00						
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00						
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00						
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00						
9	1450 Site Improvement	\$10,000.00	\$0.00	\$0.00	\$0.00						
10	1460 Dwelling Structures	\$101,213.00	\$0.00	\$0.00	\$0.00						
11	1465 1 Dwelling Equipment—Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00						
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00						
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00						
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00						
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00						
16	1495 1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00						
17	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00						
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00						
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00						
19	1502 Contingency (may not exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00						
20	Amount of Annual Grant (sum of lines 2-19)	\$211,752.00	\$0.00	\$0.00	\$0.00						
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00						
22	Amount of line 20 Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00						
23	Amount of line 20 Related to Security - Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00						
24	Amount of line 20 Related to Security Hard Cost	\$0.00	\$0.00	\$0.00	\$0.00						
25	Amount of line 20 Related to Energy conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00						

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 CFF 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 8/31/2011

Part I: Summary

PHA Name: NORRTEAST OREGON HOUSING AUTHORITY NEOHA		Grant Type and Number Capital Fund Program Grant No: OR16P032-501-12 Replacement Housing Factor Grant No:		Date of CFFP:		FFY of Grant: 2012 FFY of Grant of Grant Approval: 2011	
(X) 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 No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹			
		Original	Revised ²	Obligated	Date	Expended	
	Signature of Executive Director	Date		Signature of Public Housing Director		Date	
		3-1-12					

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. 2517-0226

Part II: Supporting Pages

PHA Name: Northeast Oregon Housing Authority		Grant Type and Number Capital Fund Program Grant No. OR16P032-501-12 CFPP (Yes/No):		Federal FY of Grant: 2012		FFY of Grant Approval: 2011		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost	Total Actual Cost	Funds Obligated ²	Funds Expended ²	Status of Work
HA-Wide	OPERATIONS	1406		Original \$79,363.88	Revised ¹ \$0.00	\$0.00	\$0.00	
	ADMINISTRATIVE							
	Salary & Benefits	1410		\$21,175.20	\$0.00	\$0.00	\$0.00	
OR032000001P	SITE IMPROVEMENTS	1450						
La Grande	Concrete Replacement	1460	1 site	\$5,000.00	\$0.00	\$0.00	\$0.00	
Union Family	Cabinets / Countertops		7 units	\$30,000.00	\$0.00	\$0.00	\$0.00	
	DWELLING EQUIPMENT	1465.1						
	DWELLING EQUIPMENT	1475		\$0.00	\$0.00	\$0.00	\$0.00	
	NONDWELLING EQUIPMENT							
	SEB TOTAL			\$35,000.00	\$0.00	\$0.00	\$0.00	
OR032000002P	SITE IMPROVEMENTS	1450						
Baker City	Concrete Replacement		1 site	\$5,000.00	\$0.00	\$0.00	\$0.00	
Carvon City	DWELLING STRUCTURES	1460						
Dayville	Exterior Paint		3 sites	\$71,213.00	\$0.00	\$0.00	\$0.00	
Mt. Vernon	DWELLING EQUIPMENT	1465.1						
				\$0.00	\$0.00	\$0.00	\$0.00	
	NONDWELLING EQUIPMENT	1475						
				\$0.00	\$0.00	\$0.00	\$0.00	
	SUB TOTAL			\$76,213.00	\$0.00	\$0.00	\$0.00	
	GRAND TOTAL			\$211,752.08	\$0.00	\$0.00	\$0.00	

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.

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 08/30/2011

ATTACHMENT E

Part I: Summary						
PHA :Northeast Oregon Housing Authority OR032		Locality: La Grande, Union Co., Oregon			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016	
A.	OR032000001P OR032000002P	Adopted Statement 46,900.00	57,500.00	63,506.00 33,505.00	16,500.00 82,301.60	34,520.00 55,480.00
B.	Physical Improvements Subtotal		104,400.00	97,011.00	98,801.60	90,000.00
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment			10,000.00		
E.	Administration		21,175.20	21,175.20	21,175.20	21,175.20
F.	Other		0.00	0.00		
G.	Operations		86,176.80	83,565.80	91,775.20	100,576.80
H.	Demolition		0.00	0.00	0.00	0.00
I.	Development		0.00	0.00	0.00	0.00
J.	Capital Fund Financing – Debt Service		0.00	0.00	0.00	0.00
K.	Total CFP Funds		211,752.00	211,752.00	211,752.00	211,752.00
L.	Total Non-CFP Funds		0.00	0.00	0.00	0.00
M.	Grand Total		211,752.00	211,752.00	211,752.00	211,752.00

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226

Expires 08/30/2011

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
Sec	OR032000001P Union Family Exterior Doors	8	3,750.00	OR032000001P La Grande Elderly Replace Concrete	800sf	5,000.00
	Cabinets Countertops	4 units	30,000.00	Exterior doors	8	4,000.00
	Elgin family Exterior Doors	8	3,750.00	Water Heaters	30	15,930.00
	La Grande Elderly Parking lot Seal	1	20,000.00	Union Family Water Heaters	8	4,288.00
	Total OR032000001P		57,500.00	Cabinets Countertops	4 units	30,000.00
				Elgin Family Water Heaters	8	4,288.00
				Total OR032000001P		63,506.00
	OR032000002P Haines Family Replace Concrete	800sf	5,000.00	OR032000002P Baker Elderly Replace Concrete	800sf	5,000.00
	Exterior Doors	8	3,750.00	Exterior doors	8	4,000.00
	Baker Elderly Parking lot seal	1	10,000.00	Water Heaters	30	15,929.00
	Baker Family Replace Concrete	800sf	5,000.00	Water Heaters	8	4,288.00
	Exterior Doors	8	3,750.00	Water Heaters	8	4,288.00
	Canyon City Replace A/C's	12	11,640.00	Baker Family Water Heaters	8	4,288.00
	Mt Vernon Replace A/C's	8	7,760.00	Water Heaters	8	4,288.00
	Total OR032000002P		46,900.00	Total OR032000002P		33,505.00
	Subtotal of Estimated Cost		\$104,400.00	Subtotal of Estimated Cost		\$97,011.00

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/30/2011

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
Sec	OR032000001P			OR032000001P		
Month	La Grande replace thermostats	30	7,500.00	La Grande Elderly fluorescent lighting	30 units	18,600.00
State/Federal	Replace Concrete	800sf	5,000.00	Elgin Family fluorescent lighting	8 units	4,960.00
	Union Family replace thermostats	8	2,000.00	Concrete replacement	200 sf	3,000.00
	Elgin Family replace thermostats	8	2,000.00	Union Family fluorescent lighting	8 units	4,960.00
	Total OR032000001P		16,500.00	Concrete replacement	200 sf	3,000.00
	OR032000002P			Total OR032000001P		34,520.00
	Baker Elderly replace thermostats	30	7,500.00	OR032000002P		
	Replace Concrete	800sf	5,000.00	Baker Elderly fluorescent lighting	30 units	18,600.00
	Baker Family Cabinets countertops	4 units	25,000.00	Baker Family fluorescent lighting	8 units	4,960.00
	replace thermostats		2,000.00	Concrete replacement	300 sf	4,000.00
				Huntington fluorescent lighting	12 units	7,440.00
	Mt Vernon Install Softfus	8 units	20,000.00	Mt Vernon fluorescent lighting	8 units	4,960.00
	replace thermostats		2,000.00	Dayville fluorescent lighting	5 units	3,100.00
				Canyon City fluorescent lighting	12 units	7,460.00
	Dayville Install Softfus	5 units	13,801.60	Haines fluorescent lighting	8 units	4,960.00
	replace thermostats		2,000.00	Total OR032000002P		55,480.00
	Canyon City replace thermostats	12	5,000.00			
	Total OR032000002P		82,301.60	Subtotal of Estimated Cost		\$90,000.00
	Subtotal of Estimated Cost		\$98,801.60			

ATTACHMENT F

2012 PHA PLAN

VAWA DESCRIPTION

Northeast Oregon Housing Authority (NEOHA) serves four Counties and each County has an Organization that serves victims of domestic violence, dating violence, sexual assault and stalking. Listed below are the organization and services provided:

Baker County – MayDay, Inc.

- 1) Crisis and Support Services
 - 24/7 crisis hotline
 - Trained Advocates to discuss your options with
 - Someone to listen
 - Escort to the hospital, police or court
 - Restraining/stalking order assistance
 - Support groups
 - Children's activities, child advocacy
 - Transportation to access resources
 - Clothing donations
 - Emergency gas vouchers

- 2) Obtaining or maintain housing
 - Safe, clean emergency shelter for victims and their children
 - Advocacy with local agencies

- 3) Prevention
 - Speakers and presentations for groups
 - Professional training
 - Lending library

Grant County – Heart of Grant County

- 1) Crisis and Support Services
 - 24-Hour crisis hotline
 - Crisis counseling and referrals to other available services
 - Emergency Transportation
 - Court, legal and medical advocacy
 - Self-Help Materials
 - Individual Peer Advocacy for adults and children
 - Survivor classes and support groups

- 2) Obtaining or maintain housing
 - Temporary safe housing locally & access to a nationwide network of crisis centers
- 3) Prevention
 - Prevention and educational presentations in the community & schools

Union County – Shelter From the Storm

- 1) Crisis and Support Services
 - Someone who will listen to you
 - 24-hour crisis hotline
 - Trained advocates to discuss options
 - Information and referral to other community resources
 - Escort to the hospital, police or court
 - Restraining or stalking order assistance
 - Advocacy with local agencies
- 2) Obtaining or maintain housing
 - Safe, clean emergency shelter for victims and their children
- 3) Prevention
 - Lending library
 - Speakers and presentations for groups
 - Professional trainings

Wallowa County – Safe Harbors

- 1) Crisis and Support Services
 - 24 hour crisis line
 - Support the choices you make
 - Referrals for free counseling services for you and your children
 - Women's empowerment class
 - Listen to you
 - Provide 911 cell phone for you to keep for emergencies
 - Help you find options
 - Help you access financial resources in the community if you are trying to leave an abusive situation
 - Restraining order assistance
 - Go to court with you
 - Safety plan with you and your children
 - Provide legal assistance referrals

- Emergency transportation
 - To the hospital with you if needed
 - 24 hour sexual assault response team
- 2) Obtain or maintain housing
- Shelter for you, your children, and small pets.
 - Referrals to help you find housing
- 3) Prevention
- Provide you with information on domestic violence and the cycle of violence

NEOHA'S Public Housing Admission and Continued Occupancy Policy (ACOP) and Housing Choice Voucher Administrative Plan contain language on the rights and obligation under the violence against women act 2005 (VAWA).

NEOHA put a priority in the ACOP for a family whose head or sole member is a victim of violent criminal activity that has as one of its elements, the use or threatened use of physical force against the person or property of another, to include documented domestic violence cases and victims referred by prosecutors who are deemed intimidated witnesses in criminal cases.

PROCEDURES IN PLACE THAT ASSURE TENANTS ARE NOTIFIED OF THEIR RIGHTS:

The notice of rights and obligations under the violence against women act 2005 (VAWA) is given to Public Housing Tenants at move in and when a Housing Choice Voucher applicant receives a Voucher. Also the notice is sent again at Annual Re-examination time for both Programs.

DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB
0348-0046

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 2nd		5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:
6. Federal Department/Agency: Dept. of Housing and Urban Development	7. Federal Program Name/Description: Public Housing Capital Fund CFDA Number, if applicable: 14.872	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): None	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): None	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: Dale Inslee Title: Interim Executive Director Telephone No.: 541-963-5360 Ext. 22 Date: 1-4-12	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Northeast Oregon Housing Authority

Program/Activity Receiving Federal Grant Funding

Section 8 Housing Choice Voucher and Public Housing

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

Dale Inslee

Title

Interim Executive Director

Signature

Date (mm/dd/yyyy)

1/4/2012

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Northeast Oregon Housing Authority

Program/Activity Receiving Federal Grant Funding

Section 8 Housing Choice Voucher and Public Housing

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.)

2608 May Lane, La Grande, OR 97850, Union County
2970 Walnut Street, Baker City, OR 97814, Baker County
Scattered Sites Public Housing, Oregon, Grant County

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

Dale Inslee

Title

Interim Executive Director

Signature

Date

X

1/4/2012