

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 Cheraw

SC031

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 Larrie J. Foster	Title Chairman
Signature <i>Larrie J. Foster</i>	Date <i>5-28-12</i>

Attachment SC031b01 (1 of 2)
**Certification for
a Drug-Free Workplace**

U.S. Department of Housing
and Urban Development

Applicant Name

Housing Authority of Cheraw

Program/Activity Receiving Federal Grant Funding

Capital Funds

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.)

See Attachment

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

Cynthia W. Williams

Title

Executive Director

Signature

X

Date

5/29/12

**HOUSING AUTHORITY OF CHERAW
1343 DIZZY GILLESPIE DRIVE
CHERAW, SOUTH CAROLINA 29520**

2. Sites for Work Performance

**Dizzy Gillespie Apartments
Inglis Road / Dizzy Gillespie Drive
Cheraw, South Carolina 29520
(Chesterfield County)**

**Miller Ingram Apartments
Miller Ingram Drive
Cheraw, South Carolina 29520
(Chesterfield County)**

**John Motley Apartments
John Motley Drive
Cheraw, South Carolina 29520
(Chesterfield County)**

**William F. Harris Apartments
Harris Drive
Cheraw, South Carolina 29520
(Chesterfield County)**

Certification of Payments to Influence Federal Transactions

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

Attachment SC031c01

Applicant Name

Housing Authority of Cheraw

Program/Activity Receiving Federal Grant Funding

Capital Fund

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 sub recipients 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)

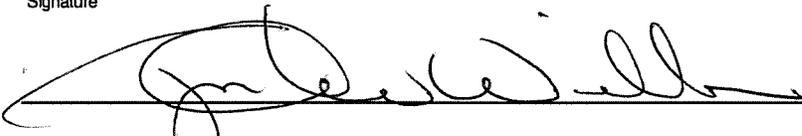
Name of Authorized Official

Cynthia W. Williams

Title

Executive Director

Signature



Date (mm/dd/yyyy)

5/29/12

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0046

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

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee 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: Housing Authority of Cheraw 1343 Dizzy Gillespie Drive Cheraw, SC 29520 Congressional District, if known: 4c	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency: Public Housing	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
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 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: Cynthia W. Williams Title: Executive Director Telephone No.: 843-669-4163 Date: 5/29/12	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

Part I: Summary

PHA Name: Housing Authority of Cheraw	Grant Type and Number Capital Fund Program Grant No.: SC16P03150112 Replacement Housing Factor Grant No: Date of CFFP _____	FFY of Grant: 2012 FFY of Grant Approval: 2012
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Line No.	Summary by Development Account	Original	Revised	Obligated	Expended
		Total Estimated Cost		Total Actual Cost	
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements		\$8,000		
4	1410 Administration		\$31,381		
5	1411 Audit		\$2,000		
6	1415 Liquidated Damages				
7	1430 Fees and Costs		\$37,700		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures		\$189,500		
11	1465.1 Dwelling Equipment--Nonexpendable		\$4,000		
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				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment		\$44,658		
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)		\$317,239		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security--Soft Costs				
24	Amount of line 20 Related to Security--Hard Costs		8,000		
25	Amount of line 20 Related to Energy Conservation Measures		4,000		

Part I: Summary		
PHA Name: Housing Authority of Cheraw	Grant Type and Number Capital Fund Program Grant No: SC16P03150112 Date of CFFP _____	FY of Grant: 2012 FY of Grant Approval: 2012
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report		
Signature of Executive Director	Date	Signature of Public Housing Director
<i>Cynthia W. Williams</i>	June 28, 2012	

Part III: Implementation Schedule

PHA Name: Housing Authority of Cheraw	Grant Type and Number			Original	Revised	Actual	Original	Revised	Actual	FFY of Grant:
	Capital Fund Program No:	SC16P03150112	CFFP (Yes/No):							
Development Number Name/PHA-Wide Activities	Original	Revised	Actual	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
				Original	Revised	Actual	Original	Revised	Actual	
HA Wide Management	3/11/2014			3/11/2016						
HA Wide Administration	3/11/2014			3/11/2016						
HA Wide Audit	3/11/2014			3/11/2016						
HA Wide Fees/Costs	3/11/2014			3/11/2016						
31-1 Gillespie/Ingram/ Morley/Harris	3/11/2014			3/11/2016						
HA Wide Dwelling Equip.	3/11/2014			3/11/2016						
HA Wide Debt Service	3/11/2014			3/11/2016						

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 3/31/2014

Part I: Summary		FFY of Grant: 2011	
PHA Name: Housing Authority of Cherraw		FFY of Grant Approval: 2011	
Grant Type and Number Capital Fund Program Grant No: SC16P03150111 Replacement Housing Factor Grant No: Date of CFFP:			

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
			Original	Revised ²	
1		Total non-CFP Funds			
2		1406 Operations (may not exceed 20% of line 21) ³	\$65,000		\$65,000
3		1408 Management Improvements	\$8,000		\$8,000
4		1410 Administration (may not exceed 10% of line 21)	\$35,393		\$34,000
5		1411 Audit	\$2,000		\$2,000
6		1415 Liquidated Damages			0
7		1430 Fees and Costs	\$37,700		\$37,604
8		1440 Site Acquisition			0
9		1450 Site Improvement			
10		1460 Dwelling Structures	\$10,215		\$10,215
11		1465.1 Dwelling Equipment—Nonexpendable	154,284.76	772.7	\$131,209
12		1470 Non-dwelling Structures	\$4,000		\$4,000
13		1475 Non-dwelling Equipment			
14		1485 Demolition			
15		1492 Moving to Work Demonstration			
16		1495.1 Relocation Costs			
17		1499 Development Activities ⁴			

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

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

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

Part I: Summary

PHA Name: Housing Authority of Cherau	Grant Type and Number: Capital Fund Program Grant No: SC16P03150111 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2011 FFY of Grant Approval: 2011
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Type of Grant: Original Annual Statement Reserve for Disasters/Emergencies
 Performance and Evaluation Report for Period Ending: 3/31/2012 Revised Annual Statement (revision no:)
 Summary by Development Account Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Revised ¹	Obligated	Total Actual Cost ¹	Expended
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$44,658.24	33,333	\$44,658.24	33,333	0
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$361,251		\$336,686	\$171,144	
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	\$8,000		\$8,000	\$1,515	
25	Amount of line 20 Related to Energy Conservation Measures	\$4,000		\$4,000	\$4,000	
Signature of Executive Director		Date		Signature of Public Housing Director		Date
Cynthia W. Williams		April 1, 2012		Eric A. Bickley		6/26/12

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 RUF funds shall be included here.

Eric A. Bickley
 Director
 Public Housing Program Center

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

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

Part II: Supporting Pages		Grant Type and Number	Federal FY of Grant:	Total Actual Cost		Status of Work
PHA Name:	Capital Fund Program Grant No.:	Development Account No.	2011	Funds Obligated ²	Funds Expended ²	
Housing Authority of Cheraw	SC16P03150111	Development Account No.:				
	CFPP (Yes/No):	Quantity	Total Estimated Cost			
	Replacement Housing Factor Grant No.:		Original	Revised ¹		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories					
HA Wide Operations	Operations	1406	N/A	\$65,000	\$65,000	N/A
HA Wide Management	Security Patrols	1408	3 Officers	\$8,000	\$8,000	Ongoing Expenditure
HA Wide Administration	1) IFB/RFP Advertising Costs 2) CFP Management Fee	1410 1410	N/A N/A	\$1,393 \$34,000	0 \$34,000	0 Obligate as Needed Complete
HA Wide Audit	CFP Audit Costs	1411	4 Years	\$2,000	\$2,000	0 Contract Signed
HA Wide Fees & Costs	1) Annual UPICS Inspections 2) Construction Inspection Costs	1430 1430	1 Firm 2 Staff	\$2,100 \$35,600	\$2,004 \$35,600	0 0 Contract Signed Staff in Place
31-1 Gillespie/Ingram/Motley/Harris	1) Roofing 2) Water Heaters 3) Security Camera System	1460 1460 1450	75 Units 5 Units 1 Site	\$151,785 \$2,500 \$10,215	\$131,209 0 \$10,215	0 0 \$10,251 Complete Preparing IFB Construction Phase
HA Wide Dwelling Equipment	Appliances	1465	6 Units	\$4,000	\$4,000	\$4,000 Complete
HA Wide Debt Service	CFP Bond Debt Service	9000	N/A	\$44,658, ²	\$44,658, ²	0 Ongoing Expenditure

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

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

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

Part III: Implementation Schedule for Capital Fund Financing Program
 PHA Name: Housing Authority of Cheraw Federal FFY of Grant: 2011

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide Operations	8/2/2013	9/30/2011	8/2/2015		
HA Wide Management	8/2/2013	9/30/2011	8/2/2015		
HA Wide Administration	8/2/2013		8/2/2015		
HA Wide Audit	8/2/2013	9/30/2011	8/2/2015		
HA Wide Fees & Costs	8/2/2013		8/2/2015		
31-1 Gillespie/Ingram Motley/Harris	8/2/2013		8/2/2015		
Ha Wide Dwelling Equipment	8/2/2013	12/31/2011	8/2/2015	12/31/2011	
HA Wide Debt Service	8/2/2013	9/30/2011	8/2/2015		

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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 Cheraw Grant Type and Number: Capital Fund Program Grant No: SC16P03150110 Replacement Housing Factor Grant No: SC16P03150110 FFY of Grant: 2010
 Housing Authority of Cheraw Date of CFFP: Final Performance and Evaluation Report: FFY of Grant Approval: 2010

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$65,000		\$65,000	\$65,000
3	1408 Management Improvements	\$8,000		\$8,000	\$8,000
4	1410 Administration	\$41,733		\$41,733	\$41,733
5	1411 Audit	1,999.76	2740	1,999.76	1500
6	1415 Liquidated Damages				\$500
7	1430 Fees and Costs	\$37,672		\$37,672	\$2,004
8	1440 Site Acquisition				
9	1450 Site Improvement	\$55,186		\$55,186	\$37,635
10	1460 Dwelling Structures	\$163,060		\$163,060	\$160,060
11	1465.1 Dwelling Equipment—Nonexpendable	\$4,000		\$4,000	\$4,000
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				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$44,658	24 3120	\$44,658	24 3120 0
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$421,309		\$421,309	\$321,932
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security—Soft Costs				
24	Amount of line 20 Related to Security—Hard Costs	\$63,186		\$63,186	\$45,635
25	Amount of line 20 Related to Energy Conservation Measures	\$4,000		\$4,000	\$4,000

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:	Grant Type and Number	FFY of Grant:	FFY of Grant Approval:
Housing Authority of Cheraw	Capital Fund Program Grant No: SC16P03150110 Date of CFFP _____	2010	2010
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2012 <input type="checkbox"/> Final Performance and Evaluation Report			
Signature of Executive Director	Date	Signature of Public Housing Director	Date
<i>Cynthia W. Williams</i> Cynthia W. Williams	April 1, 2012	<i>Eric A. Bickley</i> Eric A. Bickley Director Public Housing Program Center	6/26/12

Part II: Supporting Pages

PHA Name: **Housing Authority of Cheraw** Grant Type and Number: **Capital Fund Program Grant No: SC16P03150110** CFFP (Yes/No): **No** FFY of Grant: **2010**
 Replacement Housing Factor Grant No:

Development Number/PHA-Wide Name/PHA-Wide Activities	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide Operations	Operations	1406	N/A	\$65,000		\$65,000	\$65,000	Complete
HA Wide Operations	Security Patrols	1408	6 Officers	\$8,000		\$8,000	\$8,000	Complete
HA Wide Management	1) IFB/RFP Advertising Costs	1410	N/A	\$1,733		\$1,733	\$1,733	Complete
HA Wide Administration	2) CFP Management Fee	1410	N/A	\$40,000		\$40,000	\$40,000	Complete
HA Wide Audit	CFP Audit Costs	1411	4 Years	\$2,000	1,997.76	\$2,000	\$500	Ongoing Expenditure
HA Wide Fees/Costs	1) Annual UP/CS Inspections	1430	1 Firm	\$2,004		\$2,004	\$2,004	Complete
HA Wide Site	2) Construction Inspection Costs	1430	2 Staff	\$35,668		\$35,668	0	Staff in Place
31-1 Gillespie/Ingram/Motley/Harris	Security Camera System	1450	1 Site	\$55,186		\$55,186	\$37,635	Construction Phase
HA Wide Dwelling Equip.	1) Interior Stair Treads	1460	132 Units	\$102,178		\$102,178	\$102,178	Complete
HA Wide Debt Service	4) Roofing	1460	17 Bldg's	\$60,882		\$60,882	\$60,882	Complete
HA Wide Debt Service	Appliances	1465	5 Units	\$4,000		\$4,000	\$4,000	Complete
HA Wide Debt Service	CFP Bond Debt Service	9000	N/A	\$44,658.24		\$44,658.24	0	Ongoing Expenditure

Part III: Implementation Schedule

Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA Name: _____ Grant Type and Number _____ Housing Authority of Cheraw _____ Capital Fund Program No: SC16P03150110 CFFP (Yes/No): No Replacement Housing Factor No: _____							
HA Wide Operations	7/14/2012		9/30/2010	7/14/2014		3/31/2011	
HA Wide Management	7/14/2012		9/30/2010	7/14/2014		3/31/2011	
HA Wide Administration	7/14/2012		12/31/2011	7/14/2014		12/31/2011	
HA Wide Audit	7/14/2012		9/30/2010	7/14/2014			
HA Wide Fees/Costs	7/14/2012		3/31/2011	7/14/2014			
HA Wide Site	7/14/2012		6/30/2011	7/14/2014			
31-1 Gillespie/Ingram/ Motley/Harris	7/14/2012		12/31/2011	7/14/2014		3/31/2012	
HA Wide Dwelling Equip.	7/14/2012		3/31/2011	7/14/2014		6/30/2011	
HA Wide Debt Service	7/14/2012		9/30/2010	7/14/2014			

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 Cherraw

Grant Type and Number
 Capital Fund Program Grant No: SC16P03150109
 Date of CFFP _____

Replacement Housing Factor Grant No:

FFY of Grant: 2009
 FFY of Grant Approval: 2009

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	64,999.76	65,000	64,999.76	65,000
3	1408 Management Improvements	\$18,319	\$18,319	\$18,319	\$8,000
4	1410 Administration	\$42,609	\$42,609	\$42,609	\$42,609
5	1411 Audit	\$2,000	\$2,000	\$2,000	\$1,500
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$38,921	\$38,921	\$38,921	\$37,114
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$213,717	\$213,717	\$213,717	\$213,717
11	1465.1 Dwelling Equipment—Nonexpendable	\$3,960	\$3,960	\$3,960	\$3,960
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				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$44,658.09	73,314	73,314	\$26,051
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$429,184	\$429,184	\$429,184	\$397,951
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security—Soft Costs				
24	Amount of line 20 Related to Security—Hard Costs	\$18,319	\$18,319	\$18,319	\$8,000
25	Amount of line 20 Related to Energy Conservation Measures	\$5,095	\$5,095	\$5,095	\$5,095

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 Cheraw		Grant Type and Number Capital Fund Program Grant No: SCI6P03150109 Date of CFFP _____		Replacement Housing Factor Grant No:	FFY of Grant: 2009
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report		Performance and Evaluation Report for Period Ending: 3/31/2012		FFY of Grant Approval: 2009	
Signature of Executive Director		Date		Signature of Public Housing Director	
 Cynthia W. Williams, Executive Director		April 1, 2012		 Eric A. Bickley Director Public Housing Program Center	

Part II: Supporting Pages

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide Operations	Operations	1406	N/A	\$65,000 24,999.76	13,722	\$65,000 64,999.76	\$65,000	Complete
HA Wide Management	Security Patrols	1408	6 Officers	\$18,319		\$18,319	\$8,000	Ongoing Expenditure
HA Wide Administration	1) IFB/RFP Advertising Costs 2) CFP Management Fee	1410 1410	N/A N/A	\$1,609 \$41,000		\$1,609 \$41,000	\$1,609 \$41,000	Complete Complete
HA Wide Audit	CFP Audit Costs	1411	4 Years	\$2,000		\$2,000	\$1,500	Ongoing Expenditure
HA Wide Fees/Costs	1) Annual UPICS Inspections 2) Energy Audits (5 Year) 3) Construction Inspection Costs	1430 1430 1430	1 Firm 1 Firm 2 Staff	\$2,118 \$1,135 \$35,668		\$2,118 \$1,135 \$35,668	\$2,118 \$1,135 \$32,309	Complete Complete Ongoing Expenditure
31-1 Gillespie/ Ingram/Motley/ Harris	1) Kitchen Cabinets	1460	30 Units	\$88,305		\$88,305	\$88,305	Complete
	2) Codes / Combustion Air Ducts	1460	60 Units	\$7,000		\$7,000	\$7,000	Complete
	3) Mechanical Room Locksets	1460	230 Units	\$12,000		\$12,000	\$12,000	Complete
	4) Floors/Lighting/Handrails (Wm. F. Harris Elderly Common Areas)	1460	1 Bldg	\$25,383		\$25,383	\$25,383	Complete
	5) Gutters & Downspouts	1460	12 Bldgs	\$20,000		\$20,000	\$20,000	Complete
	6) Interior Flooring	1460	30 Units	\$61,029		\$61,029	\$61,029	Complete
HA Wide Dwelling Equip.	Appliances	1465	5 Units	\$3,960		\$3,960	\$3,960	Complete
HA Wide Debt Service	CFP Bond Debt Service	9000	N/A	\$44,658 24		\$44,658 24	\$22,329	Ongoing Expenditure

PHA Name: **Grant Type and Number**
 Housing Authority of Cherraw
 Capital Fund Program Grant No: SC16P03150109
 Replacement Housing Factor Grant No: CFFP (Yes/No): No

FFY of Grant: 2009

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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Part III: Implementation Schedule

Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA Name: Housing Authority of Cheraw	Grant Type and Number Capital Fund Program No: SCI6P03150109 Replacement Housing Factor No:			FFY of Grant: 2009			
HA Wide Operations	9/14/2011		9/30/2009	9/14/2013		12/31/2009	
HA Wide Management	9/14/2011		9/30/2009	9/14/2013			
HA Wide Administration	9/14/2011		3/31/2011	9/14/2013		3/31/2011	
HA Wide Audit	9/14/2011		9/30/2009	9/14/2013			
HA Wide Fees/Costs	9/14/2011		3/31/2010	9/14/2013			
31-1 Gillespie/ Ingram/Motley/Harris	9/14/2011		12/31/2010	9/14/2013		3/31/2011	
HA Wide Dwelling Equipment	9/14/2011		9/30/2010	9/14/2013		9/30/2010	
HA Wide Debt Service	9/14/2011		9/30/2009	9/14/2013			