**Program Under Review:**

**Program Office:**

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| **Preparer Name:** |  | **Job Title:**  |  |
| **Program Office:** |  | **Division:** |  |
| **Phone Number:** |  | **HUD Email:** |  |

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| **FERA Preparer (Signature):** |  | **Date:**  |  |

**APPROVAL SIGNATURES:**

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| **General Deputy Assistant Secretary (GDAS):** |  | **Date of Approval (mm/dd/yy):**  |  |

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| **Reviewer Name:** |  | **Job Title:**  |  |
| **Phone Number:** |  | **HUD Email:** |  |

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| **OCFO Reviewer:** |  | **Date of Approval:**  |  |

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| **Approver Name:** |  | **Job Title:**  |  |
| **Program Office:** |  | **HUD Email:** |  |

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| **Chief Risk Officer (CRO):** |  | **Date of Approval:**  |  |

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| **Approver Name:** |  | **Job Title:**  |  |
| **Program Office:** |  | **HUD Email:** |  |

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| **RMC Chair** **(If Applicable):**  |  | **Date of Approval:**  |  |