Office of Housing Voucher Programs

Interest Earned on Excess HAP Funds and RNP Balances

PHA Annual Certification for Internal Records

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

PHA Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHA FYE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Select one:**

* Housing Choice Voucher (HCV) Program :\_\_\_
* Mainstream Vouchers (MV):\_\_\_
* Emergency Housing Vouchers (EHV): \_\_\_
* Other HCV Related Program: (Program Name): \_\_\_

This is to certify that the (PHA Code) earned interest on invested (Program Name) HAP and restricted net position (RNP) funds) were remitted to Health and Human Services (HHS) in accordance with 2 CFR 200.305 requirements, for the PHA fiscal year ending shown above.

The PHA remitted $(amount remitted) on (date).

**Certification**: 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)

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Signature of Authorized PHA Official Date

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Printed Official’s Name and Title

This Certification can be signed by the appropriate PHA official and keep for financial review purposes by the auditor or the Housing Voucher Quality Assurance Division (QAD). Interest must be remitted to the Treasury via the HHS Payment Management System no later than 45 days following the PHA FYE covered by this certification.

HHS guidance related to funds remittances can be found on the HHS Division of Payment Management website at the following link: <http://www.dpm.psc.gov/grant_recipient/funding_requests/returning_interest.aspx>

Click on “*returning funds*” for specific information.