

# Indian Housing Block Grant Fund Reservation

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

1. Name & Address of Tribe (or TDHE):	2. Date of preparation:
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3. Program/Reservation Number:	4. Name & Title of Source Officer:
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<b>5. Funding and Accounting Classification</b>			
a. Appropriation:	b. Reservation Outstanding:	c. Increase or (Decrease):	d. Net Amount:

6. **Purpose of this Action** (Check applicable box(es))

a. Initial Reservation

b. Increase or (Decrease) Reservation (amendment number: \_\_\_\_\_ )

c. Cancel Reservation (bracket amount in item 5c)

7a. Date: (mm/dd/yyyy)	7b. Signature of Source Officer:
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8. **To be completed by Originating Office**  
**Recommendation and Authorization:** In accordance with authority vested in or delegated to the undersigned; In consequence of provisions and requirements of applicable law under decisions of record regarding the project of program identified in item 3 above; and with determination that the actions in item 5 are in the public interest, those actions are recommended and authorized herein.

a. Recommended: (name)	d. Authorized: (name)
b. Title:	e. Title:
c. Signature:	f. Signature:
d. Date: (mm/dd/yyyy)	g. Date: (mm/dd/yyyy)
h. Official Press Release Date: (mm/dd/yyyy)	

9. **For Accounting Use Only**

Funds available

Reservation Recorded or Adjust to amount show in item 5d

By:	Date (mm/dd/yyyy)
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