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

Small PHA Plan Update
Annual Plan for Fiscal Year: 2003

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan Agency Identification

PHA Name: Merrill Housing Authority
PHA Number: WI017
PHA Fiscal Year Beginning: 01/20003
PHA Plan Contact Information: Name: Wayne Zimmerman Phone: 715-536-7386 TDD: Email (if available): wpz42218@aol.com
Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) Main administrative office of the PHA PHA development management offices
Display Locations For PHA Plans and Supporting Documents The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below)
PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)
PHA Programs Administered:
☐ Public Housing and Section 8 ☐ Section 8 Only ☐ Public Housing Only

Annual PHA Plan Fiscal Year 2002

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

	Contents	Page #
Anı	nual Plan	
i.	Executive Summary (optional)	
ii.	Annual Plan Information	
iii.	Table of Contents	
1.	Description of Policy and Program Changes for the Upcoming Fiscal Year	2
2.	Capital Improvement Needs	2
3.	Demolition and Disposition	2 2 3
4.	Homeownership: Voucher Homeownership Program	3
5.	Crime and Safety: PHDEP Plan	4
6.	Other Information:	4
	A. Resident Advisory Board Consultation Process	
	B. Statement of Consistency with Consolidated Plan	
	C. Criteria for Substantial Deviations and Significant Amendments	
Att	achments	
\boxtimes	Attachment A: Supporting Documents Available for Review	
	Attachment B: Capital Fund Program Annual Statement	
	Attachment: Capital Fund Program 5 Year Action Plan	
	Attachment: Capital Fund Program Replacement Housing Factor Annual	
	Statement	
	Attachment: Public Housing Drug Elimination Program (PHDEP) Plan	
\boxtimes	Attachment C: Resident Membership on PHA Board or Governing Body	
\boxtimes	Attachment D: Membership of Resident Advisory Board or Boards	
	Attachment: Comments of Resident Advisory Board or Boards &	
	Explanation of PHA Response (must be attached if not included in PHA	
	Plan text)	
	Other (List below, providing each attachment name)	
	ii. Executive Summary	
[24	CFR Part 903.7 9 (r)]	
At P	PHA option, provide a brief overview of the information in the Annual Plan	

None
2. Capital Improvement Needs [24 CFR Part 903.7 9 (g)]
Exemptions: Section 8 only PHAs are not required to complete this component.
A. X Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?
B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 140,000
C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.
D. Capital Fund Program Grant Submissions
(1) Capital Fund Program 5-Year Action Plan
The Capital Fund Program 5-Year Action Plan is provided as Attachment
(2) Capital Fund Program Annual Statement The Capital Fund Program Annual Statement is provided as Attachment B
3. Demolition and Disposition
[24 CFR Part 903.7 9 (h)] Applicability: Section 8 only PHAs are not required to complete this section.
Applicationity. Section 6 only 111718 are not required to complete this section.
1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)
2. Activity Description
Demolition/Disposition Activity Description
Small DHA Dlan Undata Paga 2

1. Summary of Policy or Program Changes for the Upcoming Year
In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other

sections of this Update.

(Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition
Disposition
3. Application status (select one)
Approved
Submitted, pending approval
Planned application
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one)
Part of the development
Total development
7. Relocation resources (select all that apply)
Section 8 for units
Public housing for units
Preference for admission to other public housing or section 8
Uther housing for units (describe below)
8. Timeline for activity:
a. Actual or projected start date of activity:
b. Actual or projected start date of relocation activities:
c. Projected end date of activity:
4. Voucher Homeownership Program [24 CFR Part 903.7 9 (k)]
A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)
B. Capacity of the PHA to Administer a Section 8 Homeownership Program The PHA has demonstrated its capacity to administer the program by (select all that apply): Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan
[24 CFR Part 903.7 (m)] Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide
a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.
A. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$
C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
D. Yes No: The PHDEP Plan is attached at Attachment
6. Other Information
[24 CFR Part 903.7 9 (r)]
A. Resident Advisory Board (RAB) Recommendations and PHA Response
1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment (File name)
3. In what manner did the PHA address those comments? (select all that apply)
The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
Yes No: below or
Yes No: at the end of the RAB Comments in Attachment
Considered comments, but determined that no changes to the PHA Plan were
necessary. An explanation of the PHA's consideration is included at the at the end
of the RAB Comments in Attachment
Other: (list below)
B. Statement of Consistency with the Consolidated Plan
For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).
1. Consolidated Plan jurisdiction: (Wisconsin)
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

	The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s. The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below) Other: (list below) nests for support from the Consolidated Plan Agency To Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
comm	lidated Plan of the jurisdiction supports the PHA Plan with the following actions and itments: (describe below) certification document or Substantial Deviation and Significant Amendments ent and Deviation Definitions
Significant Ame defines when the	8.7(r) ed to define and adopt their own standards of substantial deviation from the 5-year Plan and ndment to the Annual Plan. The definition of significant amendment is important because it e PHA will subject a change to the policies or activities described in the Annual Plan to full public D review before implementation.
A. Substantia	al Deviation from the 5-year Plan:
B. Significan	t Amendment or Modification to the Annual Plan:

Attachment A Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review					
Applicable &	Supporting Document	Related Plan Component			
On Display	DIA DI CONTROL CONTROL IN CONTROL DI LA DIA DIA DI LA DIA DI LA DIA DI LA DIA DIA DIA DI LA DIA DIA DIA DIA DIA DIA DIA DIA DIA DI	777 1 A 1			
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans			
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans			
	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans			
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs			
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources			
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies			
	Any policy governing occupancy of Police Officers in Public Housing check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies			
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies			
X	Public housing rent determination policies, including the method for setting public housing flat rents check here if included in the public housing A & O Policy	Annual Plan: Rent Determination			

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component			
X	Schedule of flat rents offered at each public housing development check here if included in the public housing A & O Policy	Annual Plan: Rent Determination			
	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination			
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance			
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations			
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency			
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations			
	Any required policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance			
X	Public housing grievance procedures check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures			
	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures			
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year Most recent CIAP Budget/Progress Report (HUD 52825) for any	Annual Plan: Capital Needs Annual Plan: Capital			
X	active CIAP grants Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Needs Annual Plan: Capital Needs			
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs			
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition			
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing			

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component			
On Display	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937,	Annual Plan: Conversion of Public Housing			
	or Section 33 of the US Housing Act of 1937 Approved or submitted public housing homeownership programs/plans Policies governing any Section 8 Homeownership program (sectionof the Section 8 Administrative Plan) Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Homeownership Annual Plan: Homeownership Annual Plan: Community Service & Self-Sufficiency Annual Plan: Community Service & Self-Sufficiency			
	Section 3 documentation required by 24 CFR Part 135, Subpart E Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency Annual Plan: Community Service & Self-Sufficiency			
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report PHDEP-related documentation: PHDEP-related documents services for public housing developments assisted under the PHDEP plan; Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and	Annual Plan: Safety and Crime Prevention Annual Plan: Safety and Crime Prevention			
X	All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) check here if included in the public housing A & O Policy	Pet Policy			

List of Supporting Documents Available for Review				
Applicable & On Display	Related Plan Component			
X				
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs		
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)		

Ann	Annual Statement/Performance and Evaluation Report (Attachment B)					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Merrill Housing Authority		Grant Type and Number Capital Fund Program: WI017 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 10/2002	
	ginal Annual Statement			tevised Annual Statement (1	revision no:	
	formance and Evaluation Report for Period Ending:		e and Evaluation Report			
Line	Summary by Development Account	Total Estin	mated Cost	Total Ac	l Actual Cost	
No.			<u>, </u>			
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations					
3	1408 Management Improvements					
4	1410 Administration					
5	1411 Audit					
6	1415 liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	140,000				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1498 Mod Used for Development					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2-19)	140,000				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504					
	Compliance					

Annual Statement/Performance and Evaluation Report (Attachment B)						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA N	ame: Merrill Housing Authority	Grant Type and Number Capital Fund Program: WI017 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 10/2002	
⊠Ori	☐ Original Annual Statement					
Per	Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report					
Line Summary by Development Account		Total Estimated Cost Total A		tual Cost		
No.						
23	Amount of line 20 Related to Security		_	_		
24	Amount of line 20 Related to Energy Conservation Measures					

Annual Statement/Performance and Evaluation Report (Attachment B) Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Merril	l Housing Authority	Grant Type and Nu Capital Fund Progra Capital Fund Progra Replacement I	ım #: WI017	:	Federal FY of Grant: 10/2002			
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity		mated Cost	Total Ac	tual Cost	Status of Proposed
Name/HA-Wide Activities				Original	Revised	Funds Obligated	Funds Expended	Work
M-03-1	Replacement of bathtubs	1460		140,000				

Annual Statemen	Annual Statement/Performance and Evaluation Report (Attachment B)														
Capital Fund Pro	gram and	Capital F	und Pro	gram Replac	cement Hous	ing Factor	r (CFP/CFPRHF)								
	Part III: Implementation Schedule														
PHA Name:		Grant	Type and Nu			Federal FY of Grant: 10/2002									
		Capita	al Fund Program	m #: WI017											
D 1	1			m Replacement Hous			D								
Development Number		l Fund Obligate			Il Funds Expended		Reasons for Revised Target Dates								
Name/HA-Wide	(Qı	uart Ending Da	ite)	(Q	uarter Ending Date	e)									
Activities	Ori sin al	Davisad	A atrial	Oni aire al	Davisad	A atrea1									
M 02 1	Original	Revised	Actual	Original	Revised	Actual									
M-03-1	12/31/200			12/31/2005											
	4														
	1														
	1														
	1														

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Original statem			
Development	Development Name		
Number	(or indicate PHA wide)		
Description of Need	led Physical Improvements or Management	Estimated Cost	Planned Start Date
Improvements	in a my siem impi o , ements of ividing ement	Zimatea Cost	(HA Fiscal Year)
Total estimated cos	t over next 5 years		

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-I	PHDEP Plan) is to be co	mpleted in accordan	ce with Instructions located in applicable PIH Notices.
Section 1: General Information/History			
A. Amount of PHDEP Grant \$			
B. Eligibility type (Indicate with an "x") N1	N2	R	
C. FFY in which funding is requested			
D. Executive Summary of Annual PHDEP Pla			
•		ts of major initiatives of	r activities undertaken. It may include a description of the expected
outcomes. The summary must not be more than five (5)		,	·
E. Target Areas			
			will be conducted), the total number of units in each PHDEP Target
Area, and the total number of individuals expected to par available in PIC.	rticipate in PHDEP sponsor	ed activities in each Tai	rget Area. Unit count information should be consistent with that
available iii FIC.			
PHDEP Target Areas	Total # of Units within	Total Population	
(Name of development(s) or site)	the PHDEP Target	to be Served	
• • • • • • • • • • • • • • • • • • • •	Area(s)	within the PHDEP	
		Target Area(s)	
F. Duration of Program			
	quired) of the PHDEP Prog	ram proposed under thi	s Plan (place an "x" to indicate the length of program by # of month
For "Other", identify the # of months).			
10 M 4L 10 M 4L	24 M 41		
12 Months 18 Months_	24 Months		

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs <u>have not</u> been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						
FY1998						
FY 1999						

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY PHDEP Budget Sun	nmary
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement	Total PHDEP Funding: \$
Goal(s)	

Objectives							
Proposed Activities	# of	Target	Start	Expected	PHEDE	Other Funding	Performance Indicators
	Persons	Population	Date	Complete	P	(Amount/	
	Served			Date	Funding	Source)	
1.							
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators	
1.								
2.								
3.								

9116 - Gun Buyback TA Match					Total PHDEP Funding: \$				
Goal(s)					<u> </u>				
Objectives									
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators		
1.									
2.									
3.									

9120 - Security Personnel					Total PHDEP Funding: \$				
Goal(s)					JI				
Objectives									
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators		
1.									
2.									
3.									

9130 - Employment of Investigators					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of	Target	Start	Expected	PHEDEP	Other Funding	Performance Indicators	
	Persons	Population	Date	Complete	Funding	(Amount /Source)		
	Served			Date				
1.								
2.								
3.								

9140 – Voluntary Tena		Total PHDEP Funding: \$					
Goal(s)					<u> </u>		
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2. 3.							

9150 - Physical Improvement			Total PHDEP Funding: \$				
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention	1	Total PHDEP Funding: \$
Goal(s)		
Objectives		

Proposed Activities	# of	Target	Start	Expected	PHEDEP	Other Funding	Performance Indicators
	Persons	Population	Date	Complete	Funding	(Amount /Source)	
	Served			Date			
1.							
2.							
3.							

9170 - Drug Intervention		Total PHDEP Funding: \$					
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9180 - Drug Treatment					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Required Attachment C: Resident Member on the PHA Governing Board

1.[Yes No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)
A.	Name of resident member(s) on the governing board: Nondus Krueger
В.	How was the resident board member selected: (select one)? ☐ Elected ☐ Appointed
C.	The term of appointment is (include the date term expires): $11/10/2000$ to $11/10/2005$
2.	A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain):
В.	Date of next term expiration of a governing board member: 11/10/2002
C.	Name and title of appointing official(s) for governing board (indicate appointing

- В
- Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Michael Caylor, Mayor of Merrill

Required Attachment D: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Ray Waschick Dorthy Boquist Emma Geiger Dennis Harder Doris Kelm