PHA 5-Year and	U.S. Department of Housing and Urban	OMB No. 2577-0226				
	Development	Expires 4/30/2011				
Annual Plan	Office of Public and Indian Housing					

1.0	PHA Information													
	PHA Name:	Daufaunina	Standard	PHA Code:										
	PHA Type: Small High PHA Fiscal Year Beginning: (MM/YYYY):	Performing		HCV (Section 8)										
	The risear rear beginning. (whw/ 1111).													
2.0	Inventory (based on ACC units at time of F	Y beginning i	n 1.0 above)											
	Number of PH units:	8 8 -		CV units:										
3.0	Submission Type													
	5-Year and Annual Plan	Annual F	Plan Only	5-Year Plan Only										
4.0														
	PHA Consortia	HA Consortia	: (Check box if submitting a join	nt Plan and complete table bel	ow.)									
		DILA			No. of Uni	ts in Each								
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	Program									
		Code	Consortia	Consortia	PH	HCV								
	PHA 1:													
	PHA 2:													
	PHA 3:													
5.0	5-Year Plan. Complete items 5.1 and 5.2 on	iy at 5-Year F	lan update.											
5.1	Mission. State the PHA's Mission for servin	o the needs o	f low-income very low-income	and extremely low income for	milies in the I	PHA's								
5.1	jurisdiction for the next five years:	ig the needs o	i low-meome, very low-meome	, and extremely low medine in	annines in the I	IIA S								
	J													
5.2	Goals and Objectives. Identify the PHA's of													
	low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.													
	and objectives described in the previous 5-Year Plan.													
6.0	PHA Plan Update													
	(a) Identify all PHA Plan elements that have	hoon ravisor	the DHA since its last Appu	al Plan submission										
	(a) Identify all FHA Flair elements that have	e been tevised	i by the FHA since its last Allitu	iai Fian suonnission.										
	(b) Identify the specific location(s) where the	a muhlia mari	obtain agning of the 5 Vacuard	Annual DUA Dian Ean a ann	alata list of DI	IA Dlam								
	elements, see Section 6.0 of the instruction		obtain copies of the 5-1 ear and	Allitual FHA Flail. For a com	piete list of FF	IA FIall								
	cientents, see Section 0.0 of the instruction													
7.0	Hope VI, Mixed Finance Modernization of	r Developme	nt. Demolition and/or Disposit	tion, Conversion of Public H	ousing, Home	ownership								
	Programs, and Project-based Vouchers. In				,	o where simp								
				**										
8.0	Capital Improvements. Please complete Pa	rts 8.1 throug	gh 8.3, as applicable.											
	Capital Fund Program Annual Statement/	Donformor -	a and Evoluation Depart	part of the DUA 5 Veer and A	nnual Dian are	anolly								
8.1	complete and submit the <i>Capital Fund Progr</i>													
	open CFP grant and CFFP financing.	um runnuu S	uneni/1 erjormunice unu Eval	<i>aanon Report</i> , 101111110D-300	575.1, 101 Caell	current and								
	I - 0													
8.2	Capital Fund Program Five-Year Action I													
0.2	Program Five-Year Action Plan, form HUD-				ent year, and a	dd latest year								
	for a five year period). Large capital items n	nust be includ	ed in the Five-Year Action Plan	l.										
8.3	Capital Fund Financing Program (CFFP).													
0.5	Capital Fund Financing Program (CFFP).		npital Fund Program (CFP)/Repl	acement Housing Factor (RH	F) to renav deb	t incurred to								
	finance capital improvements.		prose i uno i rogiuni (ci i //Repi	accinent riousing racioi (KII	. , to repuy det	incuried to								
	<b>A 1</b>													

9.0	<b>Housing Needs</b> . Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.
9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.
10.0	Additional Information. Describe the following, as well as any additional information HUD has requested.
	(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5- Year Plan.
	(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
11.0	Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following
	<ul> <li>documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</li> <li>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</li> <li>(g) Challenged Elements</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ul>

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

# **Instructions form HUD-50075**

**Applicability**. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

# 1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

#### 2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

# 3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

#### 4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

#### 5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

**5.1 Mission**. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

**5.2 Goals and Objectives**. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

- **6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:
  - (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
  - (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central off ice of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

### PHA Plan Elements. (24 CFR 903.7)

1. Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures. Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

- 2. Financial Resources. A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
- **3. Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
- 4. Operation and Management. A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
- **5. Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
- 6. Designated Housing for Elderly and Disabled Families. With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: 1) development name and number; 2) designation type; 3) application status; 4) date the designation was approved, submitted, or planned for submission, and; 5) the number of units affected.
- 7. Community Service and Self-Sufficiency. A description of: (1) Any programs relating to services and amenities provided or offered to assisted families; (2) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; (3) How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (Note: applies to only public housing).
- Safety and Crime Prevention. For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

- 9. Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
- 10. Civil Rights Certification. A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
- 11. Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA.
- 12. Asset Management. A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
- 13. Violence Against Women Act (VAWA). A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

#### Hope VI, Mixed Finance Modernization or Development, 7.0 Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

Hope VI or Mixed Finance Modernization or Development. (a) 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm

(b) Demolition and/or Disposition. With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/demo\_dispo/index.c fm

Note: This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.

Conversion of Public Housing. With respect to public (c) housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/conversion.cfm

- (d) Homeownership. A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) Project-based Vouchers. If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.
- 8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.
  - 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the Capital Fund Program Annual Statement/Performance and Evaluation Report (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:
    - (a) To submit the initial budget for a new grant or CFFP;
    - To report on the Performance and Evaluation Report progress **(b)** on any open grants previously funded or CFFP; and
    - To record a budget revision on a previously approved open (c) grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the Capital Fund Program Annual Statement/Performance and Evaluation (form HUD-50075.1), at the following times:

- At the end of the program year; until the program is 1. completed or all funds are expended;
- When revisions to the Annual Statement are made, 2. which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
- 3. Upon completion or termination of the activities funded in a specific capital fund program year.

#### 8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the Capital Fund Program Five-Year Action Plan (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm

- **9.0 Housing Needs.** Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (**Note:** Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
  - 9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
- **10.0 Additional Information.** Describe the following, as well as any additional information requested by HUD:
  - (a) Progress in Meeting Mission and Goals. PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
  - (b) Significant Amendment and Substantial Deviation/Modification. PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (Note: Standard and Troubled PHAs complete annually).
- **11.0 Required Submission for HUD Field Office Review.** In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only)
  - (f) Resident Advisory Board (RAB) comments.
  - (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
  - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.1.
  - (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.2.

11.0 (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.

-The Resident Advisory Board (RAB) has no comments.

Annual S Capital F Capital I	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	tor and	U.S. J	Department of Hor Office	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011
FARLE: SUITINALY PHA Name: Central Housing Authority	Oregon Regional Grant Type and Number Capital Fund Program Grant No: OR16P03- Replacement Housing Factor Grant No: Date of CFFP:	1501-10			FFY of Graut: 2010 FFY of Graut Approval: 2010
Type of G Origin Derfor	Type of Grant           Type of Grant         Image: Construction of Construction           Original Annual Statement         Image: Construction Construction           Image: Construct on the Construction Report for Period Ending:		☐ Revised Annual Statement (revision no: □ Final Performance and Evaluation Report	) (	
Line	Summary by Development Account	Total Es	Total Estimated Cost		Total Actual Cost '
		Original	Revised <sup>1</sup> Oblig	Obligated	Expended
1	Total non-CFP Funds	0	0		0
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	71,933.00	0		0
3	1408 Management Improvements	0	0		0
4	1410 Administration (may not exceed 10% of line 21)	7,992.00	0		0
5	1411 Audit	0	0		0
9	1415 Liquidated Damages	0	0		0
L	1430 Fees and Costs	0	0		0
8	1440 Site Acquisition	0	0		0
6	1450 Site Improvement	0	0		0
10	1460 Dwelling Structures	0	0		0
11	1465.1 Dwelling Equipment-Nonexpendable	0	0		0
12	1470 Non-dwelling Structures		0		0
13	1475 Non-dwelling Equipment	0	0		0
14	1485 Demolition	0	0	THE REPORT OF THE PARTY OF THE	0
15	1492 Moving to Work Demonstration	0	0		0
16	1495.1 Relocation Costs	0	0		0
17	1499 Development Activities <sup>4</sup>	0			0

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

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

Office of Public and Indian Housing OMB No. 2577-0226 U.S. Department of Housing and Urban Development

	1				Expires 4/30/2011
rart I: 0	raru: Summary				
PHA Name: Central Oregon Regional Housing Authority	re: Graut Type and Number regon Capital Fund Program Grant No: OR16P034501-10 Housing Replacement Housing Factor Grant No: Date of CFFP:		FFY 01	FFY of Grant:2010 FFY of Grant Approval: 2010	
Type of G	lrant				
origi	🔀 Original Annual Statement	mergencies	Revised A	Revised Annual Statement (revision no:	(
Perfo	Performance and Evaluation Report for Period Ending:		Einal Perfe	<b>Final Performance and Evaluation Report</b>	
Line	Summary by Development Account	Total Estimated Cost		Total Ac	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Scrvice paid by the PHA	0		0	0
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0		0	0
19	1502 Contingency (may not exceed 8% of line 20)	0		0	0
20	Amount of Annual Grant:: (sum of lines 2 - 19)	79,925.00		0	0
21	Amount of line 20 Related to LBP Activities	0		0	0
22	Amount of line 20 Related to Section 504 Activities	0		0	0
23	Amount of line 20 Related to Security - Soft Costs	0		0	0
24	Amount of line 20 Related to Security - Hard Costs	0		0	0
25	Amount of line 20 Related to Energy Conservation Measures	0		0	0
Signatur	Signature of Executive Director	Date $1 < 1 < 1 < 1 < 1 < 1 < 1 < 1 < 1 < 1 $	Signature of Public Housing Director	Director	Date
	and the second of the second o				

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

CEPP of vision of Major Work     CEPP of vision of Major Work     CEPP of vision of Major Work     Cerema to controgram to controgram to controgram to controgram to controgram to controgram to control and contred and control and control and contred and contred a	PHA Name: Central Oreg	PHA Name: Central Oregon Regional Housing Authority	Grant Ty	pe and Number		¢.	Federal	Federal FFY of Grant: 2010	010	
Inputert     General Description of Major Work     Development     Quantity     Total Estimated Cost     Total Actual Cost       rPHA-Wide     Categories     Account No.     Account No.     Conginal     Revised <sup>1</sup> Funds       rites     PH Operations     1406     71,933.00     0.00     0.00     0.00       VIDE     PH Operations     1410     7.992.00     0.00     0.00     0.00       VIDE     Administration     1410     7.992.00     0.00     0.00     0.00       VIDE     Administration     1410     7.992.00     0.00     0.00     0.00			CEFP (Ye CFFP (Ye Replacem	und Program Grant No s/ No): ent Housing Factor Gr	e: UK16P054501 ant No:	01-1				
VIDEPH Operations $1406$ OriginalRevised 1FundsVIDEPH Operations $1406$ $71.933.00$ $0.00$ VIDEAdministration $1410$ $7.992.00$ $0.00$ VIDEAdministration $1410$ $7.992.00$ $0.00$ VIDEPH Operations $1410$ $7.992.00$ $0.00$ VIDEPH Operation $1410$ $7.992.00$ $0.00$ PH OperationPH OperationPH Operation $1400$ $1400$ PH OperationPH Operation<	Development Number Name/PHA-Wide Activities	General Description of Major Categories	- Work	Development Account No.	Quantity	Total Estim	ated Cost	Total Actual	Cost	Status of Work
VIDE     PH Operations     1406     71,933.00     0.00       VIDE     Administration     1410     7.992.00     0.00       VIDE     Administration     1410     7.992.00     0.00       VIDE     Photomatical endormed end						Original	Revised	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
VIDE     Administration     1410     7,992.00     0.00       Image: Second state	HA-WIDE	PH Operations		1406		71,933.00		0.00	0.00	
	HA-WIDE	Administration		1410		7,992.00		0.00	0.00	
				LOUIS CANADA A MA ANALYSIA MANA MANA MANANA ANALYSIA.						
0										
79.925.00 0										
	Total				-	79.925.00		0	0	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> 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

[					····	T.	T	 -	 T	 1			T	T	T	
		Status of Work										-				
	010	Cost	Funds Expended <sup>2</sup>													
	Federal FFY of Grant: 2010	Total Actual Cost	Funds Obligated <sup>2</sup>													
	Federal 1	ated Cost	Revised													
	-10	Total Estimated Cost	Original													
	OR16P034501 ant No:	Quantity												-		
	<b>Grant Type and Number</b> Capital Fund Program Grant No: OR16P034501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:	Development Account No.														
	Part II: Supporting Pages           PHA Name: Central Oregon Regional Housing Authority         Grant Ty           Capital Fu         Capital Fu           CFFP (Ye         CFFP (Ye           Replacem         Replacem	General Description of Major Work Categories														
нал түйрөлүү бүлүлүү каларуу жарауу каралар алуу байна айруу байту түүү байту түүү байна түүүүлөнө түүүүүүүүүү	Part II: Supporting Pages PHA Name: Central Orego	Development Number Name/PHA-Wide Activities														

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> 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	
Annual Statement/Pe	Capital Fund Progran Capital Fund Financi	

Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	I Financing Program			
PHA Name: Central Oregon Regional Housing Authority	Regional Housing Au	thority			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter )	All Fund Obligated (Quarter Ending Date)	All Funds (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
Development # 034-001					
HA -Wide					
		· · · · · · · · · · · · · · · · · · ·			

<sup>1</sup> 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

	Federal FFY of Grant:	Reasons for Revised Target Dates <sup>1</sup>									
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date								
		All Funds (Quarter E	Original Expenditure End Date								
Part III: Implementation Schedule for Capital Fund Financing Program	Autonom v	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date								
dulo for Conital Fund	NAL APPENDIX AND APPENDIX AND	All Fund (Quarter F	Original Obligation End Date								
Dant III. Implomoutation Schoo	PHA Name:	Development Number Name/PHA-Wide Activities									

<sup>1</sup> 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.

Par	t I: Summary					
PHA #034	Name/Number Central Oreg -001	gon Regional HA		County & State) efferson Counties, Oregon	Original 5-Year Plan	Revision No:
А.	Development Number and Name #034-001 HA-Wide	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
В.	Physical Improvements Subtotal	Annual Statement				
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		7,992	7,992	7,992	7,992
F.	Other					
G.	Operations		71,933	71,933	71,933	71,933
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
Κ.	Total CFP Funds					
L.	Total Non-CFP Funds					
М.	Grand Total	79,925	79,925	79,925	79,925	79,925

Par	t I: Summary (Continua	ation)				
PHA	Name/Number		Locality (City/	county & State)	Original 5-Year Plan	Revision No:
А.	Development Number and Name	Work Statement for Year 1 FFY	Work Statement for Year 2 FFY	Work Statement for Year 3 FFY	Work Statement for Year 4 FFY	Work Statement for Year 5 FFY
		Annual Statement				

for Voor 2						
k Statement for Year: 3 FFY 2012						
y Estimated Cost						
ted Cost						

Part II: Sup	porting Pages – Physic	cal Needs Work State	ement(s)			
Work		Work Statement for Year: 4	4	1	Work Statement for Year:	5
Statement for		FFY 2013			FFY 2014	
Year 1 FFY 2010	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See						
Annual						
Statement						
	<u> </u>					
	Sub	total of Estimated Cost		Sut	ototal of Estimated Cost	

Part III: Su	oporting Pages – Management Needs Worl	k Statement(s)		
Work	Work Statement for Year 2		Work Statement for Year: 3	5
Statement for	FFY 2011		FFY 2012	
Year 1 FFY	Development Number/Name	Estimated Cost	Development Number/Name	Estimated Cost
2010	General Description of Major Work Categories		General Description of Major Work Categories	
See	#034-001 HA-Wide - PH Operations	71,933	#034-001 HA-Wide - PH Operations	71,933
Annual	#034-001 HA-Wide - Administration	7,992	#034-001 HA-Wide - Administration	7,992
Statement				
	Subtotal of Estimated Cost	\$79,925	Subtotal of Estimated Cost	\$79,925
	Subtotal of Estimated Cost	φι 2,220	Subtour of Estimated Cost	Ψ1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,

Part III: Su	pporting Pages – Management Needs Worl	k Statement(s)		
Work	Work Statement for Year 4	1	Work Statement for Year: 5	5
Statement for	FFY 2013		FFY 2014	
Year 1 FFY	Development Number/Name	Estimated Cost	Development Number/Name	Estimated Cost
2010	General Description of Major Work Categories		General Description of Major Work Categories	
See	#034-001 HA-Wide - PH Operations	71,933	#034-001 HA-Wide - PH Operations	71,933
Annual	#034-001 HA-Wide- Administration	7,992	#034-001 HA-Wide- Administration	7,992
Statement				
	Subtotal of Estimated Cost	\$79,925	Subtotal of Estimated Cost	\$79,925
				1

Annual Capital Capital	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	ctor and		U.S. Department of Ho Office	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011
PHA Nat PHA Nat Housing	PHA Name: Central Oregon Regional Grant Type and Number Housing Authority Capital Fund Program Grant No: OR16P034501-08 Replacement Housing Factor Grant No: Date of CFFP:	501-08			FFY of Grant: 2008 FFY of Grant Approval: 2008
Type of Grant Original A Performan	Type of Grant ☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ⊠ Performance and Evaluation Report for Period Ending: 12/31/2009		☐ Revised Annual Statement (revision no: □ Final Performance and Evaluation Report	ion no: Luation Report	
Line	Summary by Development Account	Total Ev	Total Estimated Cost		Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	Obligated	Expended
	Total non-CFP Funds	0		0	0
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	76,705.00		30,272.01	30,272.01
9	1408 Management Improvements	0		0	0
4	1410 Administration (may not exceed 10% of line 21)	8,522.00		8,522.00	8,522.00
5	1411 Audit	0		0	0
9	1415 Liquidated Damages	0		0	0
7	1430 Fees and Costs	0		0	0
8	1440 Site Acquisition	0		0	0
6	1450 Site Improvement	0		0	0
10	1460 Dwelling Structures	0		0	0
Ĩ	1465.1 Dwelling Equipment-Nonexpendable	0		0	0
12	1470 Non-dwelling Structures	0		0	0
13	1475 Non-dwelling Equipment	0		0	0
14	1485 Demolítion	0		0	0
15	1492 Moving to Work Demonstration	0		0	0
16	1495.1 Relocation Costs	0		0	0
17	1499 Development Activities <sup>4</sup>	0		0	0

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

Amual Capital J Capital J	Statemen Fund Pro <sub>§</sub> Fund Fin	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	P		U.S. Department of Hou Office	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011
Part I: S	Part I: Summary					
PHA Name: Central Oregon Regional Housing Authority	ne: Dregon Housing	Grant Type and Number Capital Fund Program Grant No: OR16P034501-08 Replacement Housing Factor Grant No: Date of CFFP:		FFY of C FFY of C	FFY of Grant:2008 FFY of Grant Approval: 2008	
Type of Grant	Jrant				TO FOR PAPER FOR FOR FOR FOR FOR FOR FOR FOR FOR THE BUILDING FOR HUMAN VIA BUILDING VIA HUMAN VIA AND AND AND AND AND AND AND AND AND AN	
Orig	<b>Original Annual Statement</b>	I Statement		🗌 Revised Ann	Revised Annual Statement (revision no:	(
Rerfi	ormance an	X Performance and Evaluation Report for Period Ending: 12/31/2009		Final P	Final Performance and Evaluation Report	ort
Line	Summai	Summary by Development Account	Total Estimated Cost	nated Cost	Total /	Total Actual Cost
			Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Co	1501 Collateralization or Debt Service paid by the PHA 0	(		0	0
18ba	9000 Co	9000 Collateralization or Debt Service paid Via System of Direct	(	<u></u>	0	0
		Payment				17
19	1502 Co	1502 Contingency (may not exceed 8% of Jine 20)			0	
20	Amount	Amount of Annual Grant:: (sum of lines 2 - 19)	85,227.00		38,794.01	38,794.01
21	Amount	Amount of line 20 Related to LBP Activities	0		0	0
22	Amount	Amount of line 20 Related to Section 504 Activities			0	0
23	Amount	Amount of line 20 Related to Security - Soft Costs	(		0	0
24	Amount	Amount of line 20 Related to Security - Hard Costs 0			0	0
25	Amount	Amount of line 20 Related to Energy Conservation Measures 0			0	. 0
Signatu	ure of Exe	Signature of Excentive Director	Signatu	Signature of Public Housing Director	irector	Date
		<sup>1</sup> To be completed for the Performance and Evaluation Report. <sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised <sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants <sup>4</sup> RHF funds shall be included here.	Revised Annual Statement. Grants for operations.			

form HUD-50075.1 (4/2008)

Page2

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	S	-						THE REAL PROPERTY AND A DESCRIPTION OF A	
PHA Name: Central Ore	PHA Name: Central Oregon Regional Housing Authority	<b>Grant Typ</b> Capital Fun CFFP (Yes Replacemet	<b>Grant Type and Number</b> Capital Fund Program Grant No: OR16P034501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:	OR16P034501 int No:	80-	Federal	Federal FFY of Grant: 2008	800	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	tted Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-WIDE	PH Operations		1406		76,705.00		30,272.01	30,272.01	
HA-WIDE	Administration		1410		8,522.00		8,522.00	8,522.00	
ал — алала — торону торону и сала — торону и с									
							*** C ********************************		
1. 1. A.									
Total					85,227.00	PVPPINA 4 4 4 4 4 4	38,794.01	38,794.01	

<sup>1</sup>To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

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

			1		1	1		[	T		1	[	[	1	}			
		Status of Work																
		Cost	Funds Expended <sup>2</sup>							**************************************								
	Federal FFY of Grant:	Total Actual Cost	Funds Obligated <sup>2</sup>		1927-1441020													
	Federal	ated Cost	Revised <sup>1</sup>															
· · · · ·	at No:	Total Estimated Cost	Original		************													
		Quantity																
	<b>Grant Type and Number</b> Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	Development Account No.				and a management of the second se												
	Grant Typ Capital Fun CFFP (Yes/ Replacemen	General Description of Major Work Categories																
Part II: Supporting Pages	PHA Name:	Development Number Name/PHA-Wide Activities																

 $^{\rm t}$  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

	Federal FFY of Grant: 2008	Reasons for Revised Target Dates											774
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date										ar an
		All Fund (Quarter E	Original Expenditure End Date	6/12/2012	6/12/2012								
Financing Program	hority	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date	and the second of the second o									
edule for Capital Fund	Regional Housing Aut	All Fund (Quarter E	Original Obligation End Date	6/12/2010	6/12/2010								
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: Central Oregon Regional Housing Authority	Development Number Name/PHA-Wide Activities		Development #034-001	HA-Wide								

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUID 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	ce and Evaluation Re il Fund Program Rep ram	port lacement Housing Facto	or and	<b>D</b>	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	dule for Capital Fund	Financing Program				
PHA Name:					Federal FFY of Grant:	]
Development Number Name/PHA-Wide Activities	All Fund (Quarter F	All Fund Obligated (Quarter Ending Date)	All Funds (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates <sup>1</sup>	1
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		[
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						1
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	And and a second se		The second s	and a second		1

<sup>1</sup> 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 S Capital I Capital I	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	tor and		U.S. Department of Hc Offic	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011
Part 1: Summary PHA Name: Central Housing Authority	Part I: Summary           PHA Name: Central Oregon Regional         Grant Type and Number           Housing Authority         Capital Fund Program Grant No: OR16P034501-09           Replacement Housing Factor Grant No:         Date of CFFP:	60-10			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant Original A Rerforman	nnual Statement		☐ Revised Annual Statement (revision no: □ Final Performance and Evaluation Report	on no: () nation Report	
Line	Summary by Development Account	Total Est	Total Estimated Cost		Total Actual Cost '
		Original	Revised <sup>2</sup>	Obligated	Expended
<b>,</b>	Total non-CFP Funds	0		0	0
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	71,933.00		0	0
3	1408 Management Improvements	0			0
4	1410 Administration (may not exceed 10% of line 21)	7,992.00		0	0
5	1411 Audit	0		0	0
9	1415 Liquidated Damages	0		0	0
7	1430 Fees and Costs	0		0	0
8	1440 Site Acquisition	0		0	0
6	1450 Site Improvement	0		0	0
10	1460 Dwelling Structures	0		0	0
11	1465.1 Dwelling Equipment-Nonexpendable	0		0	0
12	1470 Non-dwelling Structures	0		0	0
13	1475 Non-dwelling Equipment	0		0	0
14	1485 Demolition	0		0	0
15	1492 Moving to Work Demonstration	0		0	0
16	1495.1 Relocation Costs	0		0	0
17	1499 Development Activities <sup>4</sup>	0		0	0

 $^{\rm t}$  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 5 Capital I Capital I	Statement Fund Prog Fund Fins	Amual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	or and		U.S. Department of Ho Office	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011
Part I: S	Part I: Summary					
PHA Name: Central Oregon Regional Housing Authority	me: Dregon Housing Y	Graut Type and Number Capital Fund Program Grant No: OR16P034501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant	Frant		THE MALE AND	AND A THE REAL PROPERTY AND A THE PROPERTY AND A THE REAL PROPERTY AND A THE R		
Origi	<b>Original Annual Statement</b>	Il Statement	acies	🗌 Revised	Revised Annual Statement (revision no:	-
Perfe	formance an	X Performance and Evaluation Report for Period Ending: 12/31/2009		nn 🗆	Final Performance and Evaluation Report	bort
Line	Summar	Summary by Development Account	Total Esti	Total Estimated Cost	Total	Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Coi	1501 Collateralization or Debt Service paid by the PHA	0		0	0
18ba	9000 Co	9000 Collateralization or Debt Service paid Via System of Direct Payment	0		0	0
19	1502 Coi	1502 Contingency (may not exceed 8% of line 20)	0		0	0
20	Amount	Amount of Annual Grant:: (sum of lines 2 - 19)	79,925.00		0	0
21	Amount	Amount of line 20 Related to LBP Activities	0		0	0
22	Amount	Amount of line 20 Related to Section 504 Activities	0		0	0
23	Amount	Amount of line 20 Related to Security - Soft Costs	0		0	0
24	Amount	Amount of line 20 Related to Security - Hard Costs	0		0	0
25	Amount	Amount of line 20 Related to Energy Conservation Measures	0		0	0
Signatu	ire of Exe	Signathure of Executive Director	11 201	Signature of Public Housing Director	g Director	Date

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

form HUD-50075.1 (4/2008)

)	rogram							Ex	Expires 4/30/2011
Part II: Supporting Pages PHA Name: Central Oreg	Part II: Supporting Pages PHA Name: Central Oregon Regional Housing Authority	Grant Type and Number Capital Fund Program Gra CFFP (Yes/No): Replacement Housing Fact	<b>Grant Type and Number</b> Capital Fund Program Grant No: OR16P034501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:	OR16P034501 ant No:	60-	Federal J	Federal FFY of Grant: 2009	600	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	ted Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-WIDE	PH Operations	1406	9		71,933.00		0.00	0.00	
HA-WIDE	Administration	1410	0		7,992.00		0.00	0.00	
								1000001/100000000000000000000000000000	· · · · · · · · · · · · · · · · · · ·
Total					79,925.00		00.0	0.00	

To be completed for the Performance and Evaluation Report.

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

Part II: Supporting Pages								
PHA Name: Central Oreg	on Regional Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: OR16P034501-09 CFFP (Y es/ No): Replacement Housing Factor Grant No:	: OR16P034501 ant No:	60-	Federal I	Federal FFY of Grant: 2009	60	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
							100.00.A	
						1		
			-					

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

PHA Name: Central Oregon Regional Housing Authority					
0	dute tor Capital Fund tegional Housing Aut	Financing Program thority			Federal RFV of Crant: 2000
		(avora			ECUCIALEE A VI OLAHU, 2007
Development Number Name/PHA-Wide Activities	All Fund (Quarter F	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
Development # 034-001	9/15/2011		9/15/2013		
HA -Wide	9/15/2011		9/15/2013		
· · · ·					

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

Annual Statement/Performance and Evaluation Report

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9 of the U.S. Housing Act of 1937, as amended.

form HUD-50075.1 (4/2008)

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011		Federal FFY of Grant:	Reasons for Revised Target Dates								
			All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date							
or and			All Funds (Quarter E	Original Expenditure End Date							
port lacement Housing Factor	inancing Program		All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date							
Fund Program Replacent			All Fund (Quarter F	Original Obligation End Date							
Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name:	Development Number Name/PHA-Wide Activities								

<sup>1</sup> 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 Capital Capital	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	actor and		U.S. Department of Ho Offic	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011
PHA Nar Housing	Fart I: Summary PHA Name: Central Oregon Regional Grant Type and Number Housing Authority Capital Fund Program Grant No: OR16S034 Replacement Housing Factor Grant No: Date of CFPP.	450109			FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant	nual Statement ce and Evaluation Report fo		☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report	ion no: Luation Report	
Line	Summary by Development Account	Tota	Total Estimated Cost		Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0		0	0
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	0		0	0
ŝ	1408 Management Improvements	0		0	0
4	1410 Administration (may not exceed 10% of line 21)	10,788		5,946.54	5,946.54
5	1411 Audit	0		0	0
6	1415 Liquidated Damages	0		0	0
7	1430 Fees and Costs	0		0	0
8	1440 Site Acquisition	0		0	0
6	1450 Site Improvement	0		0	0
10	1460 Dwelling Structures	56,065		55,065	33,911.39
11	1465.1 Dwelling Equipment-Nonexpendable	41,027		39,574.15	25,553.90
12	1470 Non-dwelling Structures	0		0	0
13	1475 Non-dwelling Equipment	0		0	0
14	1485 Demolition	0		0	0
15	1492 Moving to Work Demonstration	0		0	0
16	1495.1 Relocation Costs	0		0	0
17	1499 Development Activities <sup>4</sup>	0		0	0
			22.00 / 2	•	

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

Annual S Capital F Capital I	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	sing Factor and		U.S. Department of F Off	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011
Part I: S	Part I: Summary				Non and a low on the second
PHA Name: Central Oregon Regional Housing Authority	ne: Grant Type and Number Dregon Housing Replacement Housing Factor Grant No: Date of CFFP:		FFY 0 FFY 0	FFY of Grant:2009 FFY of Grant Approval:	
Type of Grant				And the second se	
	Original Annual Statement	ars/Emergencies	Revised Ai	☐ Revised Annual Statement (revision no:	-
Perfo	Performance and Evaluation Report for Period Ending: 12/31/2009		□ Final	Final Performance and Evaluation Report	Report
Line	Summary by Development Account	Total Estimated Cost	ted Cost		Total Actual Cost
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0		0	0
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0		0	0
19	1502 Contingency (may not exceed 8% of line 20)	0		0	0
20	Amount of Annual Grant:: (sum of lines 2 - 19)	107,880		100,585.69	65,411.83
21	Amount of line 20 Related to LBP Activities	0	A STATE OF	0	0
22	Amount of line 20 Related to Section 504 Activities	0		0	0
23	Amount of line 20 Related to Security - Soft Costs	0		0	0
24	Amount of line 20 Related to Security - Hard Costs	0		0	0
25	Amount of line 20 Related to Energy Conservation Measures	19,300		19,300	17,300
Signatu	Signature of Executive Director	$\underbrace{\text{Date}}_{\mathcal{O}}$ Signature	Signature of Public Housing Director	Director	Date

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

form HUD-50075.1 (4/2008)

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

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

								AND ADDRESS OF THE OWNER ADDRE	
PHA Name: Central Ore	PHA Name: Central Oregon Regional Housing Authority	Grant Type and Capital Fund Pro CFFP (Yes/ No): Replacement Hoi	<b>Grant Type and Number</b> Capital Fund Program Grant No: OR16S03450109 CFFP (Yes/ No): Replacement Housing Factor Grant No:	o: OR16S03450 rant No:	109	Federal	Federal FFY of Grant: 2009	60	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	ted Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
Dev #34-001	Planning, Implementation, Monitoring and Management of Physical Improvements	oring	410		10,788		5,946.54	5,946.54	incomplete
Dev #34-001	Flooring Replacement (vinyl)		1460	8	6,965	Not be a party manufacture of a state of the	6,965	1,395	incomplete
2	Flooring Replacement (carpet)		1460	13	21,900		21,900	14,032.48	incomplete
	Kitchen Sinks (revised: 1 sink, 2 faucets		1460	2	363	-	363	0	incomplete
	replaced)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			12 074 4	
	Bath Vanity Cabinet/Sink/Mirror		1460	5	2,431		2,431	1,460.55	incomplete
	Interior Doors (revised: 56 doors)	-	1460	72	9,326		8,326	6,980.16	incomplete
	Exterior Doors		1460	10	2,526		2,526	0	incomplete
	Countertops (revised: 16)		1460	12	8,4640		8,464	6,771.20	incomplete
	Cabinets		1460	2 units	4,090		4,090	3,272	incomplete
W	Ranges		1465	17	9,405		7,952.15	0	incomplete
	Range Hoods		1465	14	1,332		1,332	967.90	incomplete
	Refrigerators		1465	13	5,291		5,291	4,836	incomplete
A PERSON AND A PE	Energy Efficient Water Heaters		1465	20	19,300		19,300	17,300	incomplete
	24" Dishwashers		1465	8	5,200		5,200	1,950	incomplete
	Disposals		1465	2	500		500	500	complete
Total					107 000 001		100 585 60	K 411 82	

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

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

	Status of Work			 									 
6	ost	Funds Expended <sup>2</sup>											
Federal FFY of Grant: 2009	Total Actual Cost	Funds Obligated <sup>2</sup>											
Federal F	ated Cost	Revised <sup>1</sup>											
60	Total Estimated Cost	Original		 									
: OR16S034501 ant No:	Quantity			 						5 W. W.			
<b>Grant Type and Number</b> Capital Fund Program Grant No: OR16S03450109 CFFP (Yes/ No): Replacement Housing Factor Grant No:	Development Account No.					AN ANALYMAN WAR AN AN AN ANALYMAN ANA							
Grant Ty Capital Fu CFFP (Ye Replacemo	or Work									The second s			
Part II: Supporting Pages PHA Name: Central Oregon Regional Housing Authority	General Description of Major Work Categories							A CARACTER AND					
Part II: Supporting Pages PHA Name: Central Orego	Development Number Name/PHA-Wide	CAULY HILLS				v							

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

Expires 4/30/2011 Reasons for Revised Target Dates Federal FFY of Grant: OR16S03450109 Actual Expenditure End Date (Quarter Ending Date) All Funds Expended Original Expenditure End Date 3/18/2012 Actual Obligation Part III: Implementation Schedule for Capital Fund Financing Program End Date (Quarter Ending Date) All Fund Obligated PHA Name: Central Oregon Regional Housing Authority **Obligation End** Original Date 03/18/2010 Development Number Name/PHA-Wide Activities DEV #034-001

<sup>1</sup> 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.

form HUD-50075.1 (4/2008)

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

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

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Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	ce and Evaluation Re al Fund Program Rep ram	port lacement Housing Facto	r and	Ω	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 <b>Expires 4/30/2011</b>	ului La
Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financing Program				
PHA Name:					Federal FFY of Grant:	
Development Number Name/PHA-Wide Activities	All Fund (Quarter F	All Fund Obligated (Quarter Ending Date)	All Funds (Quarter E	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		
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Annual Statement/Performance and Evaluation Report

<sup>1</sup> 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.