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

1.0 PHA Information

PHA Name: HOUSING AUTHORITY OF THE CITY OF AUBURN PHA Code: AL050

PHA Type: ☐ Small ☒ High Performing ☐ Standard ☐ HCV (Section 8)

PHA Fiscal Year Beginning: (MM/YYYY): **07/2011**

2.0 Inventory (based on ACC units at time of FY beginning in 1.0 above)

Number of PH units: 304 Number of HCV units: 280

3.0 Submission Type

☐ 5-Year and Annual Plan ☒ Annual Plan Only ☐ 5-Year Plan Only

4.0 PHA Consortia ☐ PHA Consortia: (Check box if submitting a joint Plan and complete table below.)

Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
				PH	HCV
PHA 1:					
PHA 2:					
PHA 3:					

5.0 5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.

5.1 Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:

5.2 Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very 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.

6.0 PHA Plan Update

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:

(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.

(a) The Admissions and Continued Occupancy Policy (ACOP), Section 8 Administration Policy and the Lease were amended.

(b) PHA's main administrative office.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. *Include statements related to these programs as applicable.*

Resolution FYE2011-018 commits 1 million dollars of reserves for collateralization to secure 108 loan for Moton dated February 22, 2011. The City of Auburn has also contributed funds for the Moton project.

Resolution FYE2011-014 earmarked $2,232,000.00 of reserves for low income housing development, specifically for betterments and additions dated February 22, 2011.

8.0 Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the *Capital Fund Program Annual Statement/Performance and Evaluation Report,* form HUD-50075.1, for each current and open CFP grant and CFFP financing.

8.2 Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the *Capital Fund Program Five-Year Action Plan,* form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.

8.3 Capital Fund Financing Program (CFFP).

☐ Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.

9.0	**Housing Needs**. 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 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. (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights) (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. 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. (g) Challenged Elements (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only) (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

****11.0 PART (F): THERE WERE NO COMMENTS FROM A RESIDENT ADVISORY BOARD TO ATTACH.**

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Auburn Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

See Attached Document

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Lee Eastman	Executive Director
Signature	**Date**
X	03/03/2011

(Attachment to HUD-50070)

2. Sites for Work Performance

The Housing Authority of the City of Auburn, Alabama
931 Booker St.
Auburn, Alabama 36832-2904

Capital Funding Program

Auburn, (Lee County), Alabama

AL50-1	East Park	Dean Road, Auburn, AL 36830
AL50-2	Moton	Martin Luther King Drive, Auburn, AL 36832
AL50-3	East Park	Old Mill Road, Auburn, AL 36830
AL50-4	Drake	Foster Street, Auburn, AL 36832
AL50-5A	East Park	Old Mill Road, Auburn, AL 36830
AL50-5B	Moton	Martin Luther King Drive, Auburn, AL 36832
AL50-5C	Drake	Foster Street, Auburn, AL 36832
AL50-6A	Ridgecrest	Booker Street, Auburn, AL 36832
AL50-6B	Porter	White Street, Auburn, AL 36832
AL50-8	Sparkman Park	Commerce Drive, Auburn, AL 36830

OMB Approval No. 2577-0157 (Exp. 3/31/2010)

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Auburn Housing Authority (AL050)

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

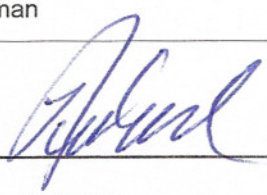
(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Lee Eastman	Executive Director

Signature	Date (mm/dd/yyyy)
	03/03/2011

Previous edition is obsolete

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

1. Type of Federal Action:
[B] a. contract
b. grant
c. cooperative agreement
d. loan
e. loan guarantee
f. loan insurance

2. Status of Federal Action:
[A] a. bid/offer/application
b. initial award
c. post-award

3. Report Type:
[A] a. initial filing
b. material change
For Material Change Only:
year _____ quarter _____
date of last report _____

4. Name and Address of Reporting Entity:
[x] Prime [ ] Subawardee
Tier _____, *if known*:

Auburn Housing Authority
931 Booker St.
Auburn, AL 36832

Congressional District, *if known*: AL Dist 3

5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:

Congressional District, *if known*:

6. Federal Department/Agency:
US Department of Housing Development

7. Federal Program Name/Description:
CFDA Number, *if applicable*: 14.872

8. Federal Action Number, *if known*:

9. Award Amount, *if known*:
$

10. a. Name and Address of Lobbying Registrant
(*if individual, last name, first name, MI*):

b. Individuals Performing Services (*including address if different from No. 10a*)
(*last name, first name, MI*):
N/A

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Signature: _____
Print Name: Lee Eastman
Title: Executive Director
Telephone No.: 334-821-2262 Ext 112 Date: 04/02/2011

Federal Use Only:

Authorized for Local Reproduction
Standard Form LLL (Rev. 7-97)

Auburn Housing Authority
Resolution FYE2011-020
March 29, 2011

PHA Certifications of Compliance with PHA Plans and Related Regulations	**U.S. Department of Housing and Urban Development** Office of Public and Indian Housing **Expires 4/30/2011**

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-*Year and Annual* PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the___ 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 7/1/11, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
   - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
   - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
   - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
   - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
   - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
    (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
    (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
    (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Auburn Housing Authority
PHA Name

AL050
PHA Number/HA Code

____ 5-Year PHA Plan for Fiscal Years 20____ - 20____

_X_ Annual PHA Plan for Fiscal Years 20_11_ - 20_12_

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Robert L. Smith	Chairman
Signature	Date
	04/05/2011

Civil Rights Certification

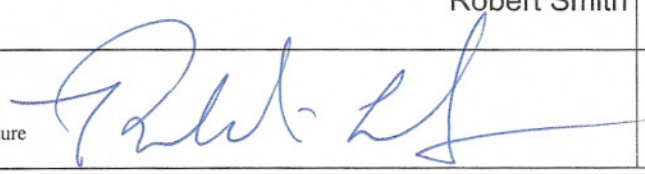
Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Auburn Housing Authority	AL050
PHA Name	PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Robert Smith	Board Chairperson
Signature 	Date 03/03/2011

OFFICE OF THE GOVERNOR

ROBERT BENTLEY
GOVERNOR

STATE OF ALABAMA

ALABAMA DEPARTMENT OF ECONOMIC AND COMMUNITY AFFAIRS

JIM BYARD, JR.
DIRECTOR

CERTIFICATION BY STATE OF PHA PLAN'S CONSISTENCY WITH STATE CONSOLIDATED PLAN

I, Jim Byard, Jr., Director of the Alabama Department of Economic and Community Affairs, certify that the Streamlined Annual PHA Plan for Fiscal Year 2011 of the Auburn Housing Authority is consistent with the Consolidated Plan of the State of Alabama prepared pursuant to 24 CFR Part 91.

Certifying Official of State:

Name: Jim Byard, Jr.

Title: Director
Alabama Department of Economic and Community Affairs

Signature: _____

Date: April 11, 2011

Auburn Housing Authority

2011 Annual Plan Public Hearing
April 8, 2011 at 10:00 am

Name	Date/Time	Comment

no show
no comments
8a

Hearing held by Shannon Walters, Property Manager

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 I: Summary

PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2010** **FFY of Grant Approval:**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:01)**
☒ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds	0	0	0	0
2	1406 Operations (may not exceed 20% of line 21) [3]	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration (may not exceed 10% of line 21)	57,000	57,000	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	0	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	77,275	83,278	83,278.00	74,323.68
10	1460 Dwelling Structures	430,750	420,239	420,239.00	403,633.61
11	1465.1 Dwelling Equipment—Nonexpendable	5,000	5,000	5,000.00	4,174.54
12	1470 Non-dwelling Structures	0	0	0	0
13	1475 Non-dwelling Equipment	5,000	5,000	0	0
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	0	0	0	0
17	1499 Development Activities [4]	0	0	0	0

[1] 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 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 I: Summary

PHA Name: **Auburn Housing Authority**	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2010** **FFY of Grant Approval: 2010**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: 01)**

☒ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	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)	575,025	570,517	508,517.00	482,131.83
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	

Signature of Executive Director Date 7/29/11 **Signature of Public Housing 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 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.

Part II: Supporting Pages

PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2010**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
AL050000001 Ridgecrest								
Administration	Mod Coordinator/cellular communication	1410	1Ls	28,500	28,500	0	0	
Site Improvements	Paving/wtr.lines/ R&R sewage lines/side walks/fence/ drainage	1450	1Ls	38,638	44,641	44,641.00	37,161.84	
Kitchens	Kitchen cabinets/ctr.tops/sinks/fixtures	1460	4	11,000	11,000	0	0	
Baths	Baths tubs/ fixtures/tub surrounds/FRP	1460	4	6,400	6,400	6,400.00	4,687.55	
Floors	Floor tile	1460	4	8,400	8,400	0	0	
Mechanical	Hvac slabs/heat pumps	1460	4	9,500	9,500	9,500.00	9,500.00	
Plumbing	Wtr.htrs./compartments	1460	4	7,350	7,350	7,300.00	19,626.08	
Electrical	Electrical upgrade/fixtures	1460	4	10,000	12,000	12,000.00	12,000.00	
Exterior	Roofs/windows/porch slabs/ pressurewash & seal brick	1460	4	119,600	125,600	125,600.00	123,156.36	
Other	Interior doors/ sht.rk.walls/ ceilings/insulation	1460	4	43,125	43,125	43,125.00	43,125.00	
Dwelling Equipment	Refrig/Ranges/Hood & Dryer vents	1465	4	2,500	2,500	2,500.00	2,087.27	
HA-Wide	Equip./tools/rentals/repairs/safety training	1475	1Ls	2,500	2,500	0	0	
			amp 1total		301,516			

[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.

Part II: Supporting Pages

PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2010**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
AL050000002 Drake								
Administation	Mod Coordinator/cellular communication	1410	1Ls	28,500	28,500	0	0	
Site Improvements	Paving/wtr.lines/ R&R sewage lines/side walks/fence/ drainage	1450	1Ls	38,637	38,637	0	37,161.84	
Kitchens	Kitchen cabinets/ctr.tops/sinks/fixtures	1460	4	11,000	9,489	0	0	
Baths	Baths tubs/ fixtures/tub surrounds/FRP	1460	4	6,400	6,400	6,400	4,687.55	
Floors	Floor tile	1460	4	8,400	6,400	0	0	
Mechanical	Hvac slabs/heat pumps	1460	4	9,500	9,500	9,500.00	9,500.00	
Plumbing	Wtr.htrs./compartments	1460	4	7,350	7,350	7,350.00	19,626.07	
Electrical	Electrical upgrade/fixtures	1460	4	10,000	10,000	10,000.00	10,000.00	
Exterior	Roofs/windows/porch slabs/ pressurewash & seal brick	1460	4	119,600	104,600	104,600.00	104,600.00	
Other	nterior doors/ sht.rk.walls/ ceilings/insulation	1460	4	43,125	43,125	43,125.00	43,125.00	
Dwelling Equipment	Refrigerators/ Ranges	1465	4	2,500	2,500	2,500	2,087.27	
PHA-Wide	Equip./tools/rentals/repairs/safety training	1475	1Ls	2,500	2,500	0	0	
			amp2 total		269,001			

[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.

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 III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Auburn Housing Authority					**Federal FFY of Grant: 2010**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AL050000001 Ridgecrest	7/31/2012		7/31/2014		
AL050000002 Drake	7/31/2012		7/31/2014		
HA-Wide	7/31/2012		7/31/2014		

[1] 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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					**Federal FFY of Grant:**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] 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.

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

Part I: Summary

PHA Name/Number Auburn Housing Authority/ AL050			Locality (City/County & State) Auburn/Lee County, Alabama		☒**Original 5-Year Plan** ☐**Revision No:**	
A.	Development Number and Name AL050000001 Ridgecrest AL050000002 Drake	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015
B.	Physical Improvements Subtotal	~~Annual Statement~~	448,317	464,317	461,517	460,517
C.	Management Improvements		0	0	0	0
D.	PHA-Wide Non-dwelling Structures and Equipment		29,200	13,200	16,000	17,000
E.	Administration		57,000	57,000	57,000	57,000
F.	Other		36,000	36,000	36,000	36,000
G.	Operations		0	0	0	0
H.	Demolition		0	0	0	0
I.	Development		0	0	0	0
J.	Capital Fund Financing – Debt Service		0	0	0	0
K.	Total CFP Funds		570,517	570,517	570,517	570,517
L.	Total Non-CFP Funds		0	0	0	0
M.	Grand Total		570,517	570,517	570,517	570,517

Part I: Summary (Continuation)

PHA Name/Number			Locality (City/county & State)		☐ **Original 5-Year Plan** ☐ **Revision No:**	
A.	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				

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY __2011____	Work Statement for Year _2_____ FFY ___2012_____			Work Statement for Year: __2_____ FFY __2012_____		
	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	AL050000001 Ridgecrest			AL050000002 Drake		
	Administration	1Ls Mod Coordinator/ comm. devices	28,500	Administration	1Ls Mod Coordinator/ comm. devices	28,500
	Site Improvements	1Ls /Ridge Crest/ Sparkman/ ½ Moton /wtr. Lines/drainage	2,500	Site Improvements	1Ls/ Drake/E. Park /Porter/5B Moton/ ½ Moton/ wtr lines/drainge	2,500
	Kitchens	R&R Cabinets/ ctr.tps/sinks/ fixtures	3,000	Kitchens	R&R Cabinets/ ctr.tps/sinks/ fixtures	17,000
	Baths	R&R Baths tubs/ fixtures/tub surrounds/FRP	2,500	Baths	R&R Baths tubs/ fixtures/tub surrounds/FRP	7,000
	Floors	R&R Floor tile	11,000	Floors	R&R Floor tile	11,000
	Mechanical	R&R Hvac	2,800	Mechanical	R&R Hvac	2,800
	Electrical	R&R elec./lghts/swtchs	5,000	Electrical	R&R elec./lghts/swtchs	7,000
	Plumbing	R&R Plumbing/wtr.Htr.	2,500	Plumbing	R&R Plumbing/wtr. Htr.	5,500
	Exterior	R&R Roof/win/extr.dr	31,700	Exterior	R&R Roof/win/extr.dr	104,300
	Other	R&R wall&ceilings/ paint/clean/demo	101,250	Other	R&R wall&ceilings/ doors paint/clean/demo	123,967
	Foreman	Construction foreman	18,000	Foreman	Construction foreman	18,000
	Dwelling Equipment	Refrigerators, ranges	5,100	Dwelling Equipment	Refrigerators, ranges	5,100
	Non Dwelling Structures	Office, R.C. Daycare, Spkmn. Womens ctr	1,500	Non Dwelling Structures	Porter Ctr., E. Park office, Moton D. care	1,500
	Relocation Cost	Ridge Crest/ Sparkman/ ½ Moton	2,500	Relocation Cost	Drake/E. Park /Porter /5B Moton/ ½ Moton	2,500
	HA-WIDE	Equip./tools/rentals/ safety training/ repairs/ gasoline	8,000	HA-WIDE	Equip./tools/rentals/ safety training/ repairs/ gasoline	8,000

	Subtotal of Estimated Cost		$225,850	Subtotal of Estimated Cost		$344,667

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY __2011____	Work Statement for Year ___3_____ FFY ___2013_____			Work Statement for Year: ___3_____ FFY ____2013_____		
	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	AL050000001 Ridgecrest			AL050000002 Drake		
Annual	Administration	1Ls Mod Coordinator/ comm. devices	28,500	Administration	1Ls Mod Coordinator/ comm. devices	28,500
Statement	Site Improvements	1Ls /Ridge Crest/ Sparkman/ ½ Moton	2,500	Site Improvements	1Ls/ Drake/E. Park /Porter/5B Moton/ ½ Moton	14,200
	Kitchens	R&R Cabinets/ ctr.tps/sinks/ fixtures	1,500	Kitchens	R&R Cabinets/ ctr.tps/sinks/ fixtures	1,500
	Baths	R&R Baths tubs/ fixtures/tub surrounds/FRP	1,500	Baths	R&R Baths tubs/ fixtures/tub surrounds/FRP	1,500
	Floors	R&R Floor tile	1,500	Floors	R&R Floor tile	1,500
	Mechanical	R&R Hvac	1,000	Mechanical	R&R Hvac	1,000
	Electrical	R&R elec./lghts/swtchs	2,500	Electrical	R&R elec./lghts/swtchs	2,500
	Plumbing	R&R Plumbing/wtr.Htr.	5,000	Plumbing	R&R Plumbing/wtr. Htr.	5,000
	Exterior	R&R Roof/win/extr.dr	112,500	Exterior	R&R Roof/win/extr.dr	155,617
	Other	R&R wall&ceilings/ paint/clean/demo	38,000	Other	R&R wall&ceilings/ doors paint/clean/demo	111,500
	Foreman	Construction foreman	18,000	Foreman	Construction foreman	18,000
	Dwelling Equipment	Refrigerators, ranges	2,800	Dwelling Equipment	Refrigerators, ranges	2,800
	Non Dwelling Structures	Office, R.C. Daycare, Spkmn. Womens ctr	1,000	Non Dwelling Structures	Porter Ctr., E. Park office, Moton D. care	1,000

	Relocation Cost	Ridge Crest/ Sparkman/ ½ Moton	2,000	Relocation Cost	Drake/E. Park /Porter /5B Moton/ ½ Moton	2,000
	HA-WIDE	Equip./tools/rentals/ safety training/ repairs/ gasoline	2,800	HA-WIDE	Equip./tools/rentals/ safety training/ repairs/ gasoline	2,800
	Subtotal of Estimated Cost		$221,100			$349,417

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY ___2011___	Work Statement for Year __4____ FFY 2014			Work Statement for Year: ____4_____ FFY __2014_____		
	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	AL050000001 Ridgecrest			AL050000002 Drake		
Annual	Administration	1Ls Mod Coordinator/ comm. devices	28,500	Administration	1Ls Mod Coordinator/ comm. devices	28,500
Statement	Site Improvements	1Ls /Ridge Crest/ Sparkman/ ½ Moton	1,000	Site Improvements	1Ls/ Drake/E. Park /Porter/5B Moton/ ½ Moton	1,000
	Kitchens	R&R Cabinets/ ctr.tps/sinks/ fixtures	3,500	Kitchens	R&R Cabinets/ ctr.tps/sinks/ fixtures	3,500
	Baths	R&R Baths tubs/ fixtures/tub surrounds/FRP	1,000	Baths	R&R Baths tubs/ fixtures/tub surrounds/FRP	2,000
	Floors	R&R Floor tile	1,800	Floors	R&R Floor tile	2,400
	Mechanical	R&R Hvac	2,400	Mechanical	R&R Hvac	1,000
	Electrical	R&R elec./lghts/swtchs	2,000	Electrical	R&R elec./lghts/swtchs	
	Plumbing	R&R Plumbing/wtr.Htr.	1,200	Plumbing	R&R Plumbing/wtr. Htr.	8,500
	Exterior	R&R Roof/win/extr.dr	20,200	Exterior	R&R Roof/win/extr.dr	114,900

	Other	R&R wall&ceilings/ paint/clean/demo	89,100	Other	R&R wall&ceilings/ doors paint/clean/demo	203,017
	Foreman	Construction foreman	18,000	Foreman	Construction foreman	18,000
	Dwelling Equipment	Refrigerators, ranges	3,500	Dwelling Equipment	Refrigerators, ranges	3,500
	Non Dwelling Structures	Office, R.C. Daycare, Spkmn. Womens ctr	2,000	Non Dwelling Structures	Porter Ctr., E. Park office, Moton D. care	2,000
	Relocation Cost	Ridge Crest/ Sparkman/ ½ Moton	1,500	Relocation Cost	Drake/E. Park /Porter /5B Moton/ ½ Moton	1,500
	HA-WIDE	Equip./tools/rentals/ safety training/ repairs/ gasoline	2,500	HA-WIDE	Equip./tools/rentals/ safety training/ repairs/ gasoline	2,500
	Subtotal of Estimated Cost		$178,200	Subtotal of Estimated Cost		$392,317

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2011	Work Statement for Year 5 FFY 2015			Work Statement for Year: 5 FFY 2015		
	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	AL050000001 Ridgecrest			AL050000002 Drake		
	Administration	1Ls Mod Coordinator/ comm. devices	28,500	Administration	1Ls Mod Coordinator/ comm. devices	28,500
	Site Improvements	1Ls /Ridge Crest/ Sparkman/ ½ Moton	2,000	Site Improvements	1Ls /Ridge Crest/ Sparkman/ ½ Moton	2,000
	Kitchens	R&R Cabinets/ ctr.tps/sinks/ fixtures	15,000	Kitchens	R&R Cabinets/ ctr.tps/sinks/ fixtures	15,000
	Baths	R&R Baths tubs/ fixtures/tub surrounds/FRP	1,000	Baths	R&R Baths tubs/ fixtures/tub surrounds/FRP	1,000
	Floors	R&R Floor tile	1,800	Floors	R&R Floor tile	1,800
	Mechanical	R&R Hvac	1,400	Mechanical	R&R Hvac	1,400
	Electrical	R&R elec./lghts/swtchs	2,500	Electrical	R&R elec./lghts/swtchs	2,500
	Plumbing	R&R Plumbing/wtr.Htr.	1,400	Plumbing	R&R Plumbing/wtr.Htr.	1,400
	Exterior	R&R Roof/win/extr.dr	125,500	Exterior	R&R Roof/win/extr.dr	125,500
	Other	R&R wall&ceilings/ paint/clean/demo	50,000	Other	R&R wall&ceilings/ paint/clean/demo	105,717
	Foreman	Construction foreman	18,000	Foreman	Construction foreman	18,000
	Dwelling Equipment	Refrigerators, ranges	3,500	Dwelling Equipment	Refrigerators, ranges	3,500
	Non Dwelling Structures	Office, R.C. Daycare, Spkmn. Womens ctr	2,500	Non Dwelling Structures	Office, R.C. Daycare, Spkmn. Womens ctr	2,500
	Relocation Cost	Ridge Crest/ Sparkman/ ½ Moton	1,800	Relocation Cost	Ridge Crest/ Sparkman/ ½ Moton	1,800
	HA-WIDE	Equip./tools/rentals/ safety training/ repairs/ gasoline	2,500	HA-WIDE	Equip./tools/rentals/ safety training/ repairs/ gasoline	2,500

	Subtotal of Estimated Cost		$257,400	Subtotal of Estimated Cost		$313,117

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement				
	Subtotal of Estimated Cost	$	Subtotal of Estimated Cost	$

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement				
	Subtotal of Estimated Cost	$	Subtotal of Estimated Cost	$

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 I: Summary

PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09P050108 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2008** **FFY of Grant Approval: 2008**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:01)**
☒ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds	0	0	0	0
2	1406 Operations (may not exceed 20% of line 21) [3]	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration (may not exceed 10% of line 21)	55,000	55,000	55,000	256.00
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	0	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	148,161	27,000	27,000	24,903.54
10	1460 Dwelling Structures	366,484	477,845	477,845	270,286.70
11	1465.1 Dwelling Equipment—Nonexpendable	11,900	11,900	11,900	2,979.00
12	1470 Non-dwelling Structures	0	0	0	0
13	1475 Non-dwelling Equipment	0	7,500	7,500	0
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	0	2,300	2,300	0
17	1499 Development Activities [4]	0	0	0	0

[1] 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.

Part I: Summary

PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09P050108 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2008** **FFY of Grant Approval: 2008**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: 01)**

☒ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0	0	0
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0
20	Amount of Annual Grant:: (sum of lines 2 - 19)	581,545	581,545	581,545	298,425.24
21	Amount of line 20 Related to LBP Activities	0	0	0	0
22	Amount of line 20 Related to Section 504 Activities	0	0	0	0
23	Amount of line 20 Related to Security - Soft Costs	0	0	0	0
24	Amount of line 20 Related to Security - Hard Costs	0	0	0	0
25	Amount of line 20 Related to Energy Conservation Measures	0	0	0	0

Signature of Executive Director Date 7/29/11 **Signature of Public Housing 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 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.

Part II: Supporting Pages		
PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09P050108 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2008**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
AL50-4 Drake	Admin/ Sundry	1410	1Ls	55,000	55,000	55,000	256.00	
	Site Improvements/patch roads	1450	1Ls	68,131	2,000	2,000	336.75	
	R&R Kitchens	1460	21	68,000	38,000	38,000	8,035.81	
	R&R Baths	1460	21	23,800	30,800	30,800	17,042.78	
	R&R Floors	1460	21	34,000	68,500	68,500	42,728.83	
	R&R HVAC	1460	21	34,000	9,200	9,200	2,001.36	
	R&R Water Heaters	1460	21	10,200	17,500	17,500	3,053.13	
	R&R Electrical	1460	21	23,800	46,300	46,300	11,431.67	
	R&R Windows & Doors/Roofs	1460	21	51,000	30,000	30,000	25,949.52	
	R&R Paint/Walls/Ceilings	1460	21	122,400	165,045	165,045	126,982.22	
	Attic Insulation	1460	0	17,000	0	0	0	
	Refrigerators/Ranges	1465	16	11,900	11,900	11,900	2,979.00	
	Construction Foreman	1460	1Ls	0	48,000	48,000	30,333.42	
	Debris/demo	1460	1Ls	0	4,500	4,500	522.75	
	relocation	1495	1Ls	0	2,300	2,300	0	
	equipment/rentals	1460	1Ls	0	2,500	2,500	2205.21	

[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.

Part II: Supporting Pages		
PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09P050108 CFFP (Yes/ No): no Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2008**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
Al50-8 Sparkman	Site Improvements/roads/wtr. lines	1450	1Ls	68,130	25,000	25,000	24,566.79	
	interior-exterior paint/clean/ repairs	1460	31	0	17,500	17,500	0	
HA-Wide	repairs/fuel/equipment/rentals	1475	1Ls	0	7,500	7,500	0	

[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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Auburn Housing Authority					**Federal FFY of Grant: 2008**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AL50-1 East Park	9/30/2010		9/30/2012		
AL50-2 Moton	9/30/2010		9/30/2012		
AL50-3 East Park	9/30/2010		9/30/2012		
AL50-4 Drake	9/30/2010		9/30/2012		
AL50-5A East Park	9/30/2010		9/30/2012		
AL50-5B Moton	9/30/2010		9/30/2012		
AL50-5C Drake	9/30/2010		9/30/2012		
AL50-6A Ridgecrest	9/30/2010		9/30/2012		
AL50-6B Porter	9/30/2010		9/30/2012		
AL50-8 Sparkman	9/30/2010		9/30/2012		
HA Wide	9/30/2010		9/30/2012		

[1] 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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					**Federal FFY of Grant:**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] 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

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

Part I: Summary

PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09S05050109 Replacement Housing Factor Grant No: No Date of CFFP:	**FFY of Grant: 2009** **FFY of Grant Approval: 2009**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:02)**
☒ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]				
3	1408 Management Improvements		SCROLL		
4	1410 Administration (may not exceed 10% of line 21)		DOWN		
5	1411 Audit		FOR		
6	1415 Liquidated Damages		CONTINUED		
7	1430 Fees and Costs		PAGES		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

[1] 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.

Part I: Summary

PHA Name:	**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:** **FFY of Grant Approval:**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: 02)**

☒ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)		KEEP		
20	Amount of Annual Grant:: (sum of lines 2 - 19)		SCROLLING		
21	Amount of line 20 Related to LBP Activities		DOWN		
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director Date 7/29/11 **Signature of Public Housing 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 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.

Part II: Supporting Pages		
PHA Name: AUBURN HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant No: AL09S05050109 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2009**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
50-5C Drake (cont.)	R&R Exterior/window & doors/siding/ pressure wash/ seal brick/weather.strip	1460	26	0	17,773.23	17,773.23	17,773.23	
	Mechanical/concrete slabs /fence/ HVAC	1460	26	0	5,200.00	5,200.00	5,200.00	
	range vent flame extinguisher @ HC unit	1460	2	0	1,000.00	1,000.00	1,000.00	
50-6A Ridgecrest	Site & landscape impvmts/ drainage/ topsoil/sod	1450	1Ls	0	22,500.00	22,500.00	22,162.82	
	Attic Insulation	1460	106	0	21,448.72	21,448.72	21,448.72	
	R&R Exterior siding/ pressure wash/ seal brick/weather.strip	1460	106	0	62,667.70	62,677.70	62,677.70	
	range vent flame extinguisher @ HC unit	1460	5	0	3,960.00	3,960.00	3,960.00	
50-6B Porter (Senior tenants)	Site & landscape impvmts/ drainage/ topsoil/sod/site entrnce sign (1)	1450	1Ls	0	2,200.00	2,200.00	1,081.89	
	Attic Insulation	1460	15	0	1,687.38	1,687.38	1,687.38	
	R&R Exterior siding/ pressure wash/ seal brick/weather.strip	1460	15	0	4,870.86	4,870.86	4,870.86	
	range vent flame extinguisher (senior tenants)	1460	15	0	8,587.54	8,587.54	8,587.54	
	Mechanical/concrete slabs /fence/ HVAC	1460	15	0	0	0	0	
50-8 Sparkman	Site & landscape impvmts/ drainage/ topsoil/sod/site entrnce sign (1)	1450	1Ls	40,000	15,600.00	15,600.00	14,598.82	
	Attic Insulation/other	1460	31	0	5,536.09	5,536.09	5,536.09	
	R&R Exterior siding/ pressure wash/ seal brick/weather.strip	1460	31	0	16,470.65	16,470.65	16,470.65	
	range vent flame extinguisher for HC unit	1460	2	0	1,729.48	1,729.48	1,729.48	
	Mechanical/concrete slabs /fence/ HVAC	1460	31	0	6,200.00	6,200.00	6,200.00	

[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.

Part II: Supporting Pages

PHA Name: AUBURN HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant No: AL09S05050109 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2009**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
HA-Wide	Tools/equipment/repairs/rentals/storage	1475	1Ls	4,000	7,000.00	7,000.00	6,337.33	
	MOD dump truck 2-1/2	1475	1Ls	0	39,566.50	39,566.50	39,566.50	
	MOD pick-up truck	1475	1Ls	0	0	0	0	
	storage container	1475	1Ls	0	0	0	0	
50-6A Ridgecrest	HA Staff Parking (50x115 concrete slab)	1470	1Ls	0	26,000.00	26,000.00	26,000.00	
	Enlarage Entrance to shop area	1470	1Ls	0	10,784.90	10,784.90	10,784.90	
	Electronic twin shop gate	1470	1Ls	0	12,970.00	12,970.00	12,970.00	
	Security Cameras PHA office	1470	1Ls	0	5,870.00	5,870.00	5,870.00	
	overhead garage door opener to shop	1470	2	0	1,509.67	1,509.67	1,509.67	
	Insulation HA Office & Daycare	1470	2	0	3,051.98	3,051.98	3,051.98	
50-5B Daycare(Moton	insulation	1470	1	0	555.99	555.99	555.99	
50-3 office bldg	pad lock	1470	1	0	5.99	5.99	5.99	
50-6B Porter Community Center	Porter Center 3 ton Heat Pump/duct work	1470 1470	1 1	18,046.00 4,457.00	0 4,457.00	0 4,457.00	0 4,457.00	
	Insulation	1470	1	0	531.71	531.71	531.71	
	Mechanical/concrete slabs @ HVAC	1470	1	0	0	0	0	
	Exterior	1470	1	0	376.80	376.80	376.80	
50-8 Sparkman W. Ctr.	Insulation/other	1470	1	645	317.12	317.12	317.12	
	Mechanical/concrete slabs @ HVAC	1470	1	0	200.00	200.00	200.00	

50-1 East Park	site improvement	1450	1	0	1,000.00	1,000.00	0	
	Mechanical/concrete slabs /fence/ HVAC	1460	2	0	200.00	200.00	200.00	
	temporary fencing	1460	1	0	33.94	33.94	33.94	
HA-Wide	equipment	1460	1	0	268.80	268.80	268.80	
	extra range vent flame extinguisher&ship	1460	2	0	1,754.09	1,754.09	1873.44	

[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.

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 III: Implementation Schedule for Capital Fund Financing Program

PHA Name:					**Federal FFY of Grant:**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] 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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					**Federal FFY of Grant:**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] 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

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

Part I: Summary

PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050111 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2011** **FFY of Grant Approval:**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no: 01)**
☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds	0	0	0	
2	1406 Operations (may not exceed 20% of line 21) [3]	0	0	0	
3	1408 Management Improvements	0	0	0	
4	1410 Administration (may not exceed 10% of line 21)	57,000	15,000	0	
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	
9	1450 Site Improvement	105,000	50,000	0	
10	1460 Dwelling Structures	375,917	374,216	0	
11	1465.1 Dwelling Equipment—Nonexpendable	12,800	12,800	0	
12	1470 Non-dwelling Structures	7,800	0	0	
13	1475 Non-dwelling Equipment	7,000	6,500	0	
14	1485 Demolition	0	0	0	
15	1492 Moving to Work Demonstration	0	0	0	
16	1495.1 Relocation Costs	5,000	3,000	0	
17	1499 Development Activities [4]	0	0	0	

[1] 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 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 I: Summary

PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050111 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2011** **FFY of Grant Approval:**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no: 01)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	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)	570,517	461,516	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	17,000	4,000	0	

Signature of Executive Director **Date** 7/29/11

Signature of Public Housing 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 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.

Part II: Supporting Pages

PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2011**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
AL050000001 Ridgecrest	Ridgecrest,Sparkman and 1/2 of Moton							
Administration	S/ Cellular Communication	1410	1Ls	28,500	7,500	0		
Site Improvements	Rdgcrst/Spkmn/Moton/ Lndscp/sdwks/ drang/sod/trees/wtr.lines/sewg Lns/ R&R	1450	1Ls	50,000	25,000	0		
Dwelling Structures								
Kitchens	R&R ctr.tps/ cab/sinks/fixtures	1460	8	15,500	1,500	0		
Baths	R&R baths/FRP/tubsurround/fxtrs	1460	8	14,000	2,100	0		
Floors	R&R VCT/basebd	1460	8	12,500	3,200	0		
Mechanical	R&R heat pumps	1460	8	5,000	2,000	0		
Electrical	lites,swtchs,smk.dtectr,recpt,	1460	8	10,000	1,000	0		
Plumbing	wtr.htrs/compartments	1460	8	5,100	1,000	0		
Exterior	R&R roof/windows/scrn.drs	1460	8	48,716	51,500	0		
Other	R&R wall/ceilng/intr.drs/hdwr/demo/pnt.	1460	8	52,000	50,000	0		
Foreman	construction foreman	1460	1Ls	18,000	9,000	0		
Weather Stripg	xtra wide weather stripping ea. extr. dr.	1460	157 x 2	8,000	2,000	0		
Relocation	tenant move costs	1495.1	8	2,000	500	0		
Dwelling Equipment	Refrigeraters/Ranges	1465.1	8 ea	6,400	6,400	0		
Non Dwelling Structrs	office/daycare/womens ctr.	1470	3	5,300	0	0		
HA-WIDE	Equip./tools/rentals/fuel/safety training	1475	1Ls	5,000	1,500	0		
			amp1 total	286,016	164,200			

[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.

Part II: Supporting Pages

PHA Name: Auburn Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050111 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2011**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
AL050000002 Drake								
Administration	Mod Coordinator/ Cellular Communication	1410	1Ls	28,500	7,500	0		
Site Improvements	Drake,East Park,Moton,Porter/ Lndscp/sdwks/ drang/ sod/trees/ wtr.lines/sewg Lns/ R&R	1450	1Ls	55,000	25,000	0		
Dwelling Structures								
Kitchens	R&R ctr.tps/ cab/sinks/fixtures	1460	10	7,800	20,000	0		
Baths	R&R baths/FRP/tubsurround/fxtrs	1460	10	3,600	15,000	0		
Floors	R&R VCT/basebd	1460	10	3,200	12,500	0		
Mechanical	R&R heat pumps	1460	10	2,000	2,000	0		
Electrical	lites,swtchs,smk.dtectr,recpt.	1460	10	2,500	2,500	0		
Plumbing	wtr.htrs/compartments	1460	10	2,500	2,500	0		
Exterior	R&R roof/windows/scrn.drs	1460	10	91,001	97,500	0		
Other	R&R wall/ceilng/intr.drs/hdwr/demo/pnt.	1460	10	48,500	71,916	0		
Foreman	construction foreman	1460	1Ls	18,000	25,000	0		
Weather Stripg	xtra wide weather stripping ea. extr. dr.	1460	147 x 2	8,000	2,000	0		
Relocation	tenant move costs	1495.1	10	3,000	2,500	0		
Dwelling Equipment	Refrigeraters/Ranges	1465.1	8	6,400	6,400	0		
Non Dwelling Structrs	Porter Ctr.,E. Park office,Moton Daycare	1470	3	2,500	0	0		
HA-WIDE	Equip./tools/rentals/fuel/safety training	1475	1Ls	2,000	5,000	0		
			amp2 total	284,501	297,316			

[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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Auburn Housing Authority					**Federal FFY of Grant: 2011**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AL050000001 Ridgecrest	4/30/2013		4/30/2015		
AL050000002 Drake	4/30/2013		4/30/2015		
HA-WIDE	4/30/2013		4/30/2015		

[1] 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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					**Federal FFY of Grant:**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] 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

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

Part I: Summary

PHA Name: AUBURN HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant No: AL09S05050109 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2009** **FFY of Grant Approval: 2009**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:02)**
☒ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds	0	0	0	0
2	1406 Operations (may not exceed 20% of line 21) [3]	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration (may not exceed 10% of line 21)	2,500	7,500.00	7,500.00	1,095.24
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	0	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	127,000	105,500.00	105,500.00	100,397.54
10	1460 Dwelling Structures	570,730	494,723.34	494,723.34	425,664.97
11	1465.1 Dwelling Equipment—Nonexpendable	11,200	13,200.00	13,200.00	11,272.00
12	1470 Non-dwelling Structures	18,691	66,631.16	66,631.16	66,631.16
13	1475 Non-dwelling Equipment	4,000	46,566.50	46,566.50	45,903.83
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	2,000	2,000.00	2,000.00	718.31
17	1499 Development Activities [4]	0	0	0	0

[1] 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.

Part I: Summary

PHA Name: AUBURN HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant No: AL09S05050109 Replacement Housing Factor Grant No: No Date of CFFP:	**FFY of Grant:2009** **FFY of Grant Approval: 2009**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: 02)**

☒ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0	0	0
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0
20	Amount of Annual Grant:: (sum of lines 2 - 19)	736,121	736,121	736,121.00	651,683.05
21	Amount of line 20 Related to LBP Activities	0	0	0	0
22	Amount of line 20 Related to Section 504 Activities	0	0	0	0
23	Amount of line 20 Related to Security - Soft Costs	0	0	0	0
24	Amount of line 20 Related to Security - Hard Costs	0	0	0	0
25	Amount of line 20 Related to Energy Conservation Measures	216,221	60,900	0	0

Signature of Executive Director **Date** 7/29/11 **Signature of Public Housing 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 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.

Part II: Supporting Pages		
PHA Name: AUBURN HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant No: AL09S05050109 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2009**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
50-4 Drake	Admin/sundry/communication devices	1410	1Ls	2,500	7,500.00	7,500.00	1,095.24*	*
	Site & landscape impvmts/ drainage/ topsoil/sod/site entrnce sign (2)	1450	1Ls	9,000	12,500.00	12,500.00	11,529.04*	*
	R$R Kitchens/Cabinets/Ctr.tps.	1460	20	68,000	40,000.00	40,000.00	32,774.65	
	R&R Baths	1460	20	23,800	6,000.00	6,000.00	6,070.84	
	R&R Floors	1460	20	34,000	15,000.00	15,000.00	14,265.83	
	R&R Mechanical/ HVAC/slabs @HVAC	1460	20	34,000	11,000.00	11,000.00	9,904.02	
	R&R Plumbing/water heaters&comprtmts	1460	20	10,200	12,382.04	12,382.04	12,528.64	
	R&R Electrical/hide wire molding	1460	20	23,800	54,000.00	54,000.00	41,160.28	
	R&R Exterior/window & doors/siding/ pressure wash/ seal brick/	1460	20	51,000.00	15,667.52	5,667.52	8,215.50	
	Sht.Rk.plastered walls/clngs	1460	20	116,584	76,953.97	76,953.97	41,949.67	
	Attic Insulation R-30+	1460	20	17,000	5,618.27	5,618.27	5,618.27	
	Refrigerators/Ranges	1465.1	17	11,200	13,200.00	13,200.00	11,272.00*	*
	Relocation Cost	1495.1	20	2,000	2,000.00	2,000.00	718.31*	*
	chn.lnk.Security Fence@storge container	1460	1Ls	0	0	0	0	
	range vent flame extinguisher @ HC unit	1460	1	0	810.00	810.00	810.00	
	Construction foreman	1460	1	0	12,000.00	12,000.00	6,946.38	
50-3 East Park	Site & landscape impvmts/ drainage/ topsoil/sod/site entrnce sign (1)/pave Rd	1450	1Ls	6,000	19,000.00	19,000.00	17,037.90*	*
	Attic Insulation R-30+	1460	16	15,300	3,137.18	3,137.18	3,137.18	
	Replce sidng/fascia/soffit	1460	16	0	18,975.25	18,975.25	18,975.25	

[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.

Part II: Supporting Pages

PHA Name: AUBURN HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant No: AL09S05050109 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2009**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
50-3 East Park (cont.)	R&R Exterior/window & doors/ pressure wash/ seal brick/weather.strip	1460	16	0	9,748.25	9,748.25	9,748.25	
	Mechanical/concrete slabs /fence/ HVAC	1460	16	0	3,200.00	3,200.00	3,200.00	
	range vent flame extinguisher @ HC unit	1460	1	0	1,000.00	1,000.00	1,000.00	
50-5A East Park	Site Imprvmts/remove trees/plant trees/ drainage/ topsoil/sod/site entrnce sign (1)	1450	1Ls	0	22,500.00	22,500.00	25,842.40*	*
	Attic Insulation	1460	18	0	3,143.17	3,143.17	3,143.17	
	Replce sidng/fascia/soffit	1460	18	0	21,347.15	21,347.15	21,347.15	
	R&R Exterior/window & doors/ pressure wash/ seal brick/weather.strip	1460	18	0	8,737.45	8,737.45	8,737.45	
	Mechanical/concrete slabs /fence/ HVAC	1460	18	0	3,000.00	3,000.00	3,000.00	
	range vent flame extinguisher @ HC unit	1460	1	0	600.00	600.00	600.00	
				0				
50-5B Moton	Site & landscape impvmts/ drainage/ topsoil/sod/site entrnce sign (1)	1450	1Ls	2,265	1,200.00	1,200.00	321.36*	*
	Attic Insulation	1460	6	5,100	1,325.25	1,325.25	1,325.25	
	R&R Exterior/window & doors/siding/ pressure wash/ seal brick/weather.strip	1460	6	0	3,904.21	3,904.21	3,904.21	
	Mechanical/concrete slabs /fence/ HVAC	1460	6	0	1,600.00	1,600.00	1,600.00	
	range vent flame extinguisher @ HC unit	1460	1	0	500.00	500.00	500.00	
50-5C Drake	Site & landscape impvmts/ drainage/ topsoil/sod/site entrnce sign (2)	1450	1Ls	9,815	9,000.00	9,000.00	7,823.31	
	Attic Insulation	1460	26	22,100	5,685.15	5,685.15	5,685.15	
	CONTINUED on ARRA Revision #02 PART #2							

[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.

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 III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: AUBURN HOUSING AUTHORITY					**Federal FFY of Grant: 2009**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AL50-1	05/31/2010		9/30/2012		
AL50-2	05/31/2010		9/30/2012		
AL50-3	05/31/2010		9/30/2012		
AL50-4	05/31/2010		9/30/2012		
AL50-5A	05/31/2010		9/30/2012		
AL50-5B	05/31/2010		9/30/2012		
AL50-5C	05/31/2010		9/30/2012		
AL50-6A	05/31/2010		9/30/2012		
AL50-6B	05/31/2010		9/30/2012		
AL50-8	05/31/2010		9/30/2012		
HA-WIDE	05/31/2010		9/30/2012		

[1] 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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					**Federal FFY of Grant:**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] 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

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

Part I: Summary

PHA Name: AUBURN HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050109 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2009** **FFY of Grant Approval: 2009**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: 2)**
☒ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds	0	0	0	0
2	1406 Operations (may not exceed 20% of line 21) [3]	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration (may not exceed 10% of line 21)	55,000	55,000	55,000	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	97,700	97,700	84,748.30
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	80,000	195,000	195,000	175,533.55
10	1460 Dwelling Structures	418,445	219,825	219,825	211,494.40
11	1465.1 Dwelling Equipment—Nonexpendable	17,600	0	0	0
12	1470 Non-dwelling Structures	0	0	0	0
13	1475 Non-dwelling Equipment	7,500	7,500	7,500	5,262.34
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	3,000	0	0	0
17	1499 Development Activities [4]	0	0	0	0

[1] 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.

Part I: Summary

PHA Name: AUBURN HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050109 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2009** **FFY of Grant Approval: 2009**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: 2)**

☒ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0	0	0
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0
20	Amount of Annual Grant:: (sum of lines 2 - 19)	581,585	575,025	575,025	477,038.59
21	Amount of line 20 Related to LBP Activities	0	0	0	0
22	Amount of line 20 Related to Section 504 Activities	0	0	0	0
23	Amount of line 20 Related to Security - Soft Costs	0	0	0	0
24	Amount of line 20 Related to Security - Hard Costs	0	0	0	0
25	Amount of line 20 Related to Energy Conservation Measures	0	0	0	0

Signature of Executive Director Date 7/29/11 **Signature of Public Housing 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 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.

Part II: Supporting Pages

PHA Name: AUBURN HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050109 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2009**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
AL050000001 Ridgecrest (Moton)	Admin/Sundry/Cellular Communication	1410	1Ls	27,500	27,500	27,500	0	
	Site Improvements/Parking/Sdwks/Pave	1450	1Ls	40,000	97,500	97,500	87,766.79	
	Kitchens/Cabinets/Ctntr.Tps/Fixtures	1460	4	25,000	0	0	0	
	Baths/New Tubs/Tub Surnd./ FRP/Fxtrs.	1460	4	14,000	0	0	0	
	Floors/new VCT/baseboard	1460	4	15,000	0	0	0	
	Mechanical/HVAC	1460	4	39,250	0	0	0	
	Plumbing/Elec.Wtr.Heaters	1460	4	5,250	0	0	0	
	Electrical/Upgrade/Fixtures/Wiring	1460	4	10,750	23,913	23,913	26,980.70	
	Ext./Windows/Doors/Roofs/Porches	1460	4	41,500	50,000	50,000	45,000.00	
	Other/Paint/Sht.Rk.Walls,Ceilings/ Interior Doors/demo interior	1460	4	58,223	36,000	36,000	33,766.50	
	Dwelling Equipment-Refrig/Ranges	1465.1	1Ls	8,800	0	0	0	
	Relocation	1495.1	1LS	1,500	0	0	0	
	Architects Fees and Cost	1430	1Ls	0	48,850	48,850	42,374.18	
AL050000002 Drake (Moton)	Admin/Sundry/Cellular Communication	1410	1Ls	27,500	27,500	27,500	0	
	Site Improvements/Parking/Sdwks/Pave	1450	1Ls	40,000	97,500	97,500	87,766.76	
	Kitchens/Cabinets/Ctntr.Tps/Fixtures	1460	4	25,000	0	0	0	
	Baths/New Tubs/Tub Surnd./ FRP/Fxtrs.	1460	4	14,000	0	0	0	

[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.

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Part II: Supporting Pages		
PHA Name: AUBURN HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program Grant No: AL09P05050109 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2009**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
	Floors/new VCT/baseboard	1460	4	15,000	0	0	0	
	Mechanical/HVAC	1460	4	39,250	0	0	0	
	Plumbing/Elec.Wtr.Heaters	1460	4	5,250	0	0	0	
	Electrical/Upgrade/Fixtures/Wiring	1460	4	10,750	23,912	23,912	26,980.70	
	Ext./Windows/Doors/Roofs/Porches	1460	4	41,500	50,000	50,000	45,000.00	
	Other/Paint/Sht.Rk.Walls,Ceilings/ Interior Doors/demo interior	1460	4	58,222	36,000	36,000	33,766.50	
	Dwelling Equipment-Refrig/Ranges	1465.1	1Ls	8,800	0	0	0	
	Relocation	1495.1	1Ls	1,500	0	0	0	
	Architects Fees and Cost	1430	1Ls	0	48,850	48,500	42,374.12	
HA-Wide	Equip./Tools/Rentals/Repairs	1475	1Ls	7,500	7,500	7,500	5,262.34	
	OSHA Safety Traning	1460	1Ls	500	0	0	0	
				581,545	575,025			

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[2] To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: AUBURN HOUSING AUTHORITY | **Federal FFY of Grant: 2009**

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AL050000001 Ridgecrest	04/30/2009		09/30/2013		
AL050000002 Drake	04/30/2009		09/30/2013		
HA-Wide	04/30/2009		09/30/2013		

[1] 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.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: AUBURN HOUSING AUTHORITY					**Federal FFY of Grant: 2009**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] 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.