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| 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 |
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| 1.0 | PHA Information PHA Name: <u>Community Development Commission of Mendocino County</u> PHA Code: <u>CA084</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input checked="" type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/1/2011</u> | | | | | | | | | | | | |
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| 2.0 | Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>0</u> Number of HCV units: <u>925</u> | | | | | | | | | | | | |
| 3.0 | Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only | | | | | | | | | | | | |
| 4.0 | PHA Consortia <input type="checkbox"/> 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 <table border="1"> <thead> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> </tr> </tbody> </table> | PH | HCV | PHA 1: | | PHA 2: | | PHA 3: | |
| 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: "Provide opportunities for decent, safe, affordable housing and suitable living environment to low-and moderate-income, special needs households, and communities in an effective, efficient, and respectful manner." | | | | | | | | | | | | |

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| 5.2 | <p>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.</p> <p>Progress made on meeting the goals and objectives described in the previous 5-Year Plan:</p> <p>Expand the supply of assisted housing through reducing public housing vacancies, leveraging private/public funds to increase additional housing opportunities and acquire or build units or developments. Agency has reduced public housing vacancies and averaged 95% lease up rate last two years. Agency has worked with local affordable housing developers and issued bonds to assist in the financing of new affordable housing developments. Agency has built new 10 unit apartment building.</p> <p>Improve the quality of assisted housing through improvements in PHAS score, SEMAP score, increase customer satisfaction, improve public housing finance, modernize public housing units, provide replacement public housing and explore outside management services. Agency is high performer in SEMAP for 2009. Agency has worked to improve public housing finance through disposition of public housing. Units are being modernized with the improved cash flow from disposition. With this transition have received replacement vouchers and thus increased vouchers in Mendocino County.</p> <p>Increase assisted housing choices through outreach to potential landlords and implement public housing or other homeownership programs. Agency has conducted landlord meetings to educate on programs and encourage participation. Agency did implement public housing homeownership program and sell three homes to public housing residents.</p> <p>Goals for coming 5 Years:</p> <p>Increase assisted housing choices.</p> <ol style="list-style-type: none"> 1. Agency will implement and increase veterans voucher program to minimum of 50 vouchers. 2. Agency will keep allocation rate at 95% or above to ensure available funds are being utilized by those in need in Mendocino County. <p>Improve the quality of assisted housing.</p> <ol style="list-style-type: none"> 1. Agency will renovate coastal units that were previously public housing utilizing needs assessment. Goal is substantially complete needs assessment work on units on coast. Renovate substantially at least 20 units. 2. Agency will complete renovation of 15 units of agency owned housing that are located in same development as previously renovated 10 unit apartment building <p>Expand the supply of assisted housing.</p> <ol style="list-style-type: none"> 1. Agency will work to identify local projects to develop new assisted housing. Goal is at least 20 new units. 2. Agency will work with local affordable housing developers to assist in financing for their assisted housing developments. Goal is at least 30 new units. |
| 6.0 | <p>PHA Plan Update</p> <ol style="list-style-type: none"> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: None. (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. % Year and Annual PHA Plan are located at the office of the Community Development Commission of Mendocino County, 1076 North State Street, Ukiah, CA 95482. |
| 7.0 | <p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. On 5/31/2010 CDC disposed 139 units of public housing. Building Better Neighborhoods (BBN) was awarded 139 Project Based Vouchers for the units. As of today CDC may not be able to issue additional Project Based Vouchers due to the regulatory restrictions on the maximum 20% of the allocation of Voucher funds and funding issues at the State and Federal level.</p> |
| 8.0 | <p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p> |
| 8.1 | <p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> |
| 8.2 | <p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, 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.</p> |
| 8.3 | <p>Capital Fund Financing Program (CFFP).</p> <p><input type="checkbox"/> 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.</p> |

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| 9.0 | <p>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. This review includes surveying the needs of elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the Project Based Voucher and the 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. CDC's currently funded programs also include the Shelter Plus Care program and the Veterans Affairs Supportive Housing program. We were funded for the HOME Tenant Based Rental Assistance (TBRA) program through December 31, 2011. CDC has a waiting list of 239. Of these applicants 158 or 66% are elderly/disabled; 103 or 34% are applicant families; the majority of these applicants have been waiting for assistance since 2008.</p> |
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| 9.1 | <p>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. Due to funding issues at federal and state level, Agency does not forecast being able to open the waiting list this coming year. We will continue to market and lease up VASH vouchers and look for other funding sources to address our county's housing needs.</p> |
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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.

Goals for coming 5 Years:

Increase assisted housing choices.

3. Agency will implement and increase veterans voucher program to minimum of 50 vouchers. *Agency is currently allocated 60 Veterans Affairs Supportive Housing(VASH) program vouchers. Almost 30% of the allocation is under contract. This program has provided housing for the neediest of our Veterans.*
4. Agency will keep allocation rate at 95% or above to ensure available funds are being utilized by those in need in Mendocino County. *Once a Federal budget is approved, Agency will finally be able to know available funding and will take action to maintain a minimum 95% allocation rate. The addition of 139 Tenant Protection Vouchers in 2010 have allowed the Agency to maintain affordable housing in Mendocino County.*

Improve the quality of assisted housing.

3. Agency will renovate coastal units that were previously public housing utilizing needs assessment. Goal is substantially complete needs assessment work on units on coast. *Renovate substantially at least 20 units. Have begun rehabilitation of 43 units this past year with the assistance of the City of Fort Bragg and CDBG funding. Expect work to be completed by July of 2011 and adoption of this year's plan.*
4. Agency will complete renovation of 15 units of agency owned housing that are located in same development as previously renovated 10 unit apartment building. *Agency is working to identify funding for this project to be completed.*

Expand the supply of assisted housing.

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3. Agency will work to identify local projects to develop new assisted housing. Goal is at least 20 new units. *Agency is working to identify potential projects given changing and limited development funding.*
4. Agency will work with local affordable housing developers to assist in financing for their assisted housing developments. Goal is at least 30 new units. *Agency is working with local affordable housing developer by providing partial financing of 32 units of new affordable housing.*

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

The Code of Federal Regulations (CFR) at 24 CFR Part 903 Section 7, Public Housing Agency Plans: Final Rule issued on October 21, 1999 is very specific with respect to the information a PHA must provide in its Agency Plan. Part 903 Section 7 (r) (2) states that a PHA must identify the basic criteria the PHA will use for determining:

- ◇ A substantial deviation from its Five-Year Plan; and
- ◇ A significant amendment or modification to its Five-Year Plan and Annual Plan.

Notice PIH 99-51 states that PHAs must define the terms "Substantial Deviation" and "Significant Amendment or Modification" by stating the basic criteria for such definitions in an annual plan that has met full public process and Resident Advisory Board review.

The Community Development Commission of Mendocino County defines a "substantial deviation" as any action or policy change that in large part is contrary to the mission statement and/or goals and objectives of the Community Development Commission of Mendocino County.

The Community Development Commission of Mendocino County defines "significant Amendment or Modification" as any action or amended language that in large part contradicts language in the approved plan and/or the goals and objectives of the Community Development Commission of Mendocino County.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements. Such changes do not constitute significant amendments.

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| 11.0 | <p>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.</p> <ul style="list-style-type: none"> (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) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (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, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) |
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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 office 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).**
8. **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.

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

- (a) **Hope VI or Mixed Finance Modernization or Development.** 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.cfm
Note: This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public 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;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open 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:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, 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 5-year 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.

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| 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 |
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**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 10/1/11, 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.


Community Development Commission of Mendocino County
PHA Name

CA084
PHA Number/HA Code

 5-Year PHA Plan for Fiscal Years 20 - 20

 X Annual PHA Plan for Fiscal Years 2011 - 2012

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 Gary Mirata | Title Chairperson |
| Signature  | Date 5/26/11 |

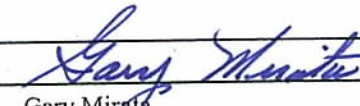
DISCLOSURE OF LOBBYING ACTIVITIES

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: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance | 2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award | 3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____ |
| 4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 4c | 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known: | |
| 6. Federal Department/Agency: | 7. Federal Program Name/Description: CFDA Number, if applicable: 14.872 | |
| 8. Federal Action Number, if known: | 9. Award Amount, if known: \$ 219,857.00 | |
| 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): | |
| 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: <u></u> Print Name: <u>Gary Mirala</u> Title: <u>Chairperson</u> Telephone No.: <u>707 463-5462 x114</u> Date: <u>05/26/11</u> | |
| Federal Use Only: | | Authorized for Local Reproduction Standard Form LLL (Rev. 7-97) |


DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

| | | |
|--|---|--|
| 1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance | 2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award | 3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____ |
| 4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: | 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known: | |
| 6. Federal Department/Agency: | 7. Federal Program Name/Description: CFDA Number, if applicable: <u>14.885</u> | |
| 8. Federal Action Number, if known: | 9. Award Amount, if known: \$ <u>289,670.</u> | |
| 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): | |
| 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: <u></u> Print Name: <u>Gary Mirata</u> Title: <u>Chairperson</u> Telephone No.: <u>(707) 463-5462 x112</u> Date: <u>5/26/11</u> | |
| Federal Use Only: | | Authorized for Local Reproduction Standard Form LLL (Rev. 7-97) |

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Community Development Commission of Mendocino County

Program/Activity Receiving Federal Grant Funding

ARRA

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)

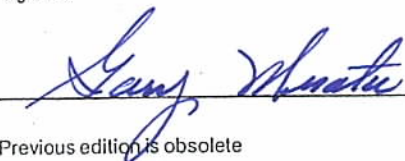
Name of Authorized Official

Gary Mirata

Title

Chairperson

Signature



Date (mm/dd/yyyy)

5/26/11

Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

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.

Community Development Commission of Mendocino

CA084

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 | Gary Mirata | Title | Chairperson |
| Signature |  | Date | 05/26/2011 |

form HUD-50077-CR (1/2009)
OMB Approval No. 2577-0226

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 8/31/2011

| Part I: Summary | | PHA Name: Community Development Commission of Mendocino County, Housing Authority- | | Grant Type and Number Capital Fund Program Grant No.: CA39P084501-04 Replacement Housing Factor Grant No.: Date of CFFP: | | FFY of Grant: 2004 FFY of Grant Approval: | |
|--------------------------|--|--|--|---|-----------|--|----------|
| Type of Grant | Original Annual Statement | Reserve for Disasters/Emergencies | Revised Annual Statement (revision no:) | Final Performance and Evaluation Report | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | | |
| Line | Summary by Development Account | | Original | Total Estimated Cost Revised ² | Obligated | Total Actual Cost ¹ | Expended |
| 1 | Total non-CFFP Funds | | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | | | |
| 3 | 1408 Management Improvements | | 57,559.00 | | | 57,559.00 | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | 28,780.00 | | | 28,780.00 | |
| 5 | 1411 Audit | | | | | | |
| 6 | 1415 Liquidated Damages | | | | | | |
| 7 | 1430 Fees and Costs | | 17,000.00 | | | 17,000.00 | |
| 8 | 1440 Site Acquisition | | | | | | |
| 9 | 1450 Site Improvement | | 25,000.00 | | | 25,000.00 | |
| 10 | 1460 Dwelling Structures | | 144,105.27 | | | 144,105.27 | |
| 11 | 1465.1 Dwelling Equipment—Nonependable | | | | | | |
| 12 | 1470 Non-dwelling Structures | | | | | | |
| 13 | 1475 Non-dwelling Equipment | | 9,107.59 | | | 9,107.59 | |
| 14 | 1485 Demolition | | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | | |
| 16 | 1495.1 Relocation Costs | | 6,245.14 | | | 6,245.14 | |
| 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 CFFP 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 08/31/2011

| | | | |
|---|---|--|--|
| Part I: Summary | | | |
| PHA Name: Community Development Commission of Mendocino County, Housing Authority | Grant Type and Number Capital Fund Program Grant No: CA39P084501-04 Replacement Housing Factor Grant No: Date of CFFP: | FFY of Grant: 2004 FFY of Grant Approval: | |

| 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) | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | 287,797.00 | | | 287,797.00 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 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 | | Signature of Public Housing Director | |

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 8/31/2011

| | | | |
|--|--|--|--|
| Part I: Summary | | FFY of Grant: 2005 | |
| PIA Name: Community Development Commission of Mendocino County, Housing Authority | | Grant Type and Number Capital Fund Program Grant No: CA39P084501-05 Replacement Housing Factor Grant No: Date of CFFP: | |
| Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | | <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Final Performance and Evaluation Report | |
| Reserve for Disasters/Emergencies | | | |

| Line | Summary by Development Account | Original | Total Estimated Cost Revised ² | Obligated | Total Actual Cost ¹ Expended |
|------|--|-----------|---|-----------|---|
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | |
| 3 | 1408 Management Improvements | 45,878.00 | | | 45,878.00 |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 22,939.00 | | | 22,939.00 |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 20,000.00 | | | 20,000.00 |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | 5,000.00 | | | 5,000.00 |
| 10 | 1460 Dwelling Structures | 69,574.00 | | | 69,574.00 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 3,000.00 | | | 3,000.00 |
| 12 | 1470 Non-dwelling Structures | 41,000.00 | | | 41,000.00 |
| 13 | 1475 Non-dwelling Equipment | 12,000.00 | | | 12,000.00 |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | 10,000.00 | | | 10,000.00 |
| 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.

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 08/31/2011

| | | | |
|---|---|------------------------|--|
| Part I: Summary | | FFY of Grant: 2005 | |
| PHA Name: Community Development commission of Mendocino County, HA | Grant Type and Number Capital Fund Program Grant No: CA39P084501-05 Replacement Housing Factor Grant No: Date of CFFP: | FFY of Grant Approval: | |

| 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) | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | 229,391.00 | | | 229,391.00 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 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 | | Signature of Public Housing Director | |
| | | 9/1/11 | | | |
| | | | | 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.

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 8/31/2011

| Part I: Summary | | Grant Type and Number | | FFY of Grant: 2006 | |
|---|---|--|--|------------------------|---|
| PHA Name: Community Development Commission of Mendocino County, Housing Authority | | Capital Fund Program Grant No: CA39P084501-06 Replacement Housing Factor Grant No: Date of CFFP: | | FFY of Grant Approval: | |
| Type of Grant | <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | <input type="checkbox"/> Reserve for Disasters/Emergencies | <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Final Performance and Evaluation Report | | |
| Line | Summary by Development Account | Original | Total Estimated Cost Revised ² | Obligated | Total Actual Cost ¹ Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | |
| 3 | 1408 Management Improvements | 10,451.16 | | | 10,451.16 |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 21,424.00 | | | 21,424.00 |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 13,000.00 | | | 13,000.00 |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | 18,196.31 | | | 18,196.31 |
| 10 | 1460 Dwelling Structures | 128,048.53 | | | 128,048.53 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 3,000.00 | | | 3,000.00 |
| 12 | 1470 Non-dwelling Structures | 12,703.23 | | | 12,703.23 |
| 13 | 1475 Non-dwelling Equipment | 3,746.77 | | | 3,746.77 |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | 10,000.00 | | | 10,000.00 |
| 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.

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 08/31/2011

| | | | |
|--|---|------------------------|--|
| Part I: Summary | | FFY of Grant: 2006 | |
| PHA Name: Community Development Commission of Mendocino County, Housing Authority | Grant Type and Number Capital Fund Program Grant No: CA39P084501-06 Replacement Housing Factor Grant No: Date of CFFP: | FFY of Grant Approval: | |

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

| Line | Summary by Development Account | Total Estimated Cost | Revised ² | Obligated | Total Actual Cost ¹ | 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) | | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | 220,570.00 | | | 220,570.00 | |
| 21 | Amount of line 20 Related to LBP Activities | | | | | |
| 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 | 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.

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 8/31/2011

| | | | |
|---|--|------------------------|--|
| Part I: Summary | | FFY of Grant: 2007 | |
| PIA Name: Community Development Commission of Mendocino County, Housing Authority | | FFY of Grant Approval: | |
| Grant Type and Number Capital Fund Program Grant No: CA39P084501-07 Replacement Housing Factor Grant No: Date of CFFP: | | | |

| Line | Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | Reserve for Disasters/Emergencies <input type="checkbox"/> | Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Final Performance and Evaluation Report | Total Estimated Cost | | Obligated | Total Actual Cost ¹ | |
|------|--|---|---|----------------------|----------------------|-----------|--------------------------------|--|
| | | | | Original | Revised ² | | Expended | |
| 1 | Total non-CFP Funds | | | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | 40,881.00 | 31,284.00 | | 31,284.00 | |
| 3 | 1408 Management Improvements | | | 21,424.00 | 28,717.00 | | 28,717.00 | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | 0 | 21,424.00 | | 21,424.00 | |
| 5 | 1411 Audit | | | | | | | |
| 6 | 1415 Liquidated Damages | | | | | | | |
| 7 | 1430 Fees and Costs | | | 18,000.00 | 17,971.95 | | 17,971.95 | |
| 8 | 1440 Site Acquisition | | | | | | | |
| 9 | 1450 Site Improvement | | | 15,957.00 | 50.00 | | 50.00 | |
| 10 | 1460 Dwelling Structures | | | 116,112.00 | 116,112.00 | | 116,112.00 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | 3,000.00 | 0 | | 0 | |
| 12 | 1470 Non-dwelling Structures | | | | | | | |
| 13 | 1475 Non-dwelling Equipment | | | 2,000.00 | 1,836.75 | | 1,836.75 | |
| 14 | 1485 Demolition | | | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | | | |
| 16 | 1495.1 Relocation Costs | | | 5,000.00 | 4,978.30 | | 4,978.30 | |
| 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.

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 08/31/2011

| | | | |
|--|---|------------------------|--|
| Part I: Summary | | FFY of Grant: 2007 | |
| PHA Name: Community Development Commission of Mendocino County, Housing Authority | Grant Type and Number Capital Fund Program Grant No: CA39P084501-07 Replacement Housing Factor Grant No: Date of CFFP: | FFY of Grant Approval: | |

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

| Line | Summary by Development Account | Original | Total Estimated Cost | Revised ² | Obligated | Total Actual Cost ¹ | 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) | | | | | | |
| 20 | Amount of Annual Grant:: (sum of lines 2 - 19) | | 222,374.00 | | | 222,374.00 | |
| 21 | Amount of line 20 Related to LBP Activities | | | | | | |
| 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: <i>[Signature]</i> | | Date: <i>9/11/07</i> | | 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.

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 8/31/2011

| | | | |
|---|---|------------------------|--|
| Part I: Summary | | FFY of Grant: 2008 | |
| PHA Name: Community Development Commission of Mendocino County, Housing Authority | Grant Type and Number Capital Fund Program Grant No.: CA39P084501-08 Replacement Housing Factor Grant No.: Date of CFFP: | FFY of Grant Approval: | |

| Line | Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies | Revised Annual Statement (revision no:) | | Final Performance and Evaluation Report | |
|------|--|---|--|----------------------|---|--------------------------------|
| | | | Original | Total Estimated Cost | Obligated | Total Actual Cost ¹ |
| 1 | Total non-CFP Funds | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ² | 30,959.00 | 100,165.06 | | 100,165.06 | |
| 3 | 1408 Management Improvements | 22,884.00 | 6,665.26 | | 6,665.26 | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 0 | 22,884.00 | | 22,884.00 | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | 18,000.00 | 10,143.30 | | 10,143.30 | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | 5,000.00 | 0 | | 0 | |
| 10 | 1460 Dwelling Structures | 118,000.00 | 83,587.64 | | 8,3587.64 | |
| 11 | 1465.1 Dwelling Equipment—Nonependable | 2,000.00 | 0 | | 0 | |
| 12 | 1470 Non-dwelling Structures | 15,000.00 | 0 | | 0 | |
| 13 | 1475 Non-dwelling Equipment | 2,000.00 | 1,516.05 | | 1,516.05 | |
| 14 | 1485 Demolition | 15,000.00 | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | |
| 16 | 1495.1 Relocation Costs | 0 | 3,881.69 | | 3,881.69 | |
| 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.

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 08/31/2011

| Part I: Summary | | FFY of Grant: 2008 | |
|---|---|--------------------------------------|--------------------------------|
| PHA Name: Community Development Commission of Mendocino County, Housing Authority | Grant Type and Number Capital Fund Program Grant No: CA39P084501-08 Replacement Housing Factor Grant No: Date of CFFP: | FFY of Grant Approval: | |
| Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Final Performance and Evaluation Report | | | |
| Line | Summary by Development Account | Total Estimated Cost | Total Actual Cost ¹ |
| | | Original | Revised ² |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | | Obligated |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | | Expended |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | 228,843.00 | 228,843.00 |
| 21 | Amount of line 20 Related to LBP Activities | | |
| 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 | | Signature of Public Housing Director | |
| Date | | 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.

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 8/31/2011



| | | | | | |
|---|--|---|--|--|--|
| Part I: Summary | | | | | |
| PHA Name: Community Development Commission of Mendocino County, Housing Authority | | Grant Type and Number Capital Fund Program Grant No: CA39P084501-09 Replacement Housing Factor Grant No: Date of CFFP: | | FFY of Grant: 2009 FFY of Grant Approval: | |

| Line | Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: | Reserve for Disasters/Emergencies <input type="checkbox"/> | Revised Annual Statement (revision no:) | | Total Actual Cost ¹ Expended |
|------|---|---|--|----------------------|--|
| | | | Original | Revised ² | |
| 1 | Total non-CFFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | 219,857.00 | | 218,857.00 |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonependable | | | | |
| 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 CFFP 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 08/31/2011

| | | | | | |
|--|--|--|----------------------|--|----------|
| Part I: Summary | | PHA Name: Community Development Commission of Mendocino County, Housing Authority Grant Type and Number: Capital Fund Program Grant No: CA39P084501-09 Replacement Housing Factor Grant No: _____ Date of CFFP: _____ | | FFY of Grant: 2009 FFY of Grant Approval: _____ | |
| Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____ | | <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: _____) <input checked="" type="checkbox"/> Final Performance and Evaluation Report | | | |
| Line | Summary by Development Account | Total Estimated Cost | Obligated | Total Actual Cost ¹ | Expended |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | Original | Revised ² | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | | | | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | 219,857.00 | | 219,857.00 | |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 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  | | Signature of Public Housing Director  | | Date 5/16/11 | |

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 RHHF funds shall be included here.

| | | |
|---|---|---|
| Part I: Summary | | |
| PHA Name: Community Development Commission of Mendocino County | Grant Type and Number Capital Fund Program Grant No: CA39S08450109 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: 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 | | 57934 | 95934 | 57934 |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | 19437.79 | 19437.79 | 19437.79 |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | 9512 | 9512 | 9512 |
| 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 | 289,670 | 97,964.95 | 97,964.95 | 97,964.95 |
| 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.

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: Community Development Commission of Mendocino Coutny, Housing Authroity | Grant Type and Number Capital Fund Program Grant No: CA39S08450109 Replacement Housing Factor Grant No: Date of CFFP: | FFY of Grant:2009 FFY of Grant Approval: 2009 | | | |
| Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> 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) | | | | |
| 20 | Amount of Annual Grant:: (sum of lines 2 - 19) | 289,670 | 289670 | 184,848.71 | 184,848.71 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 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 | | 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: Community Development Commission of Mendocino Coutny, Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: CA39S08450109 CFFP (Yes/ 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 | |
| 000002 | Counseling services and relocation for disposition and implementation of Project Based Vouchers | 1495.1 | | 30000 | 10000 | 9925.88 | 9925.88 | |
| 000003 | Counseling services and relocation for disposition and implementation of Project Based Vouchers | 1495.1 | | 30000 | 44074 | 20923.56 | 20923.96 | |
| 000008 | Counseling services and relocation for disposition and implementation of Project Based Vouchers | 1495.1 | | 100000 | 53353 | 21514.64 | 21514.64 | |
| 000010 | Counseling services and relocation for disposition and implementation of Project Based Vouchers | 1495.1 | | 30000 | 20877 | 11495.84 | 11495.84 | |
| 000014 | Counseling services and relocation for disposition and implementation of Project Based Vouchers | 1495.1 | | 50000 | 30156 | 18345.84 | 18345.84 | |
| 000015 | Counseling services and relocation for disposition and implementation of Project Based Vouchers | 1495.1 | | 49670 | 34796 | 15759.19 | 15759.19 | |
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|--------|---|------|--|---|-------|---------|---------|--|
| | | | | | | | | |
| 000002 | Management Iprovements software purchase | 1408 | | 0 | 25007 | 9655.70 | 9655.70 | |
| 000003 | Management Improvements software purchase | 1408 | | 0 | 7919 | 9655.66 | 9655.66 | |
| 000008 | Management Improvements software purchase | 1408 | | 0 | 9586 | 9655.66 | 9655.66 | |
| 000010 | Management Improvements software purchase | 1408 | | 0 | 3751 | 9655.65 | 9655.65 | |
| 000014 | Management Improvements software purchase | 1408 | | 0 | 5418 | 9655.65 | 9655.65 | |
| 000015 | Management Improvements software purchase | 1408 | | 0 | 6252 | 9655.65 | 9655.65 | |
| | | | | | | | | |

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: Community Development Commission of Mendocino County, Housing Authority | | | Grant Type and Number Capital Fund Program Grant No: CA39S08450109 CFFP (Yes/ 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 | |
| 000002 | Administration | 1410 | | 0 | 12504 | 4827.80 | 3239.64 | |
| 000003 | Administration | 1410 | | 0 | 3960 | 4827.84 | 3239.63 | |
| 000008 | Administration | 1410 | | 0 | 4793 | 4827.84 | 3239.63 | |
| 000010 | Administration | 1410 | | 0 | 1876 | 4827.84 | 3239.63 | |
| 000014 | Administration | 1410 | | 0 | 2709 | 4827.84 | 3239.63 | |
| 000015 | Administration | 1410 | | 0 | 2126 | 4827.84 | 3239.63 | |
| | | | | | | | | |
| 000002 | Costs associated with disposition | 1440 | | 0 | 4106 | 1585.34 | 1585.34 | |
| 000003 | Costs associated with disposition | 1440 | | 0 | 1300 | 1585.34 | 1585.34 | |
| 000008 | Costs associated with disposition | 1440 | | 0 | 1574 | 1585.33 | 1585.33 | |
| 000010 | Costs associated with disposition | 1440 | | 0 | 616 | 1585.33 | 1585.33 | |
| 000014 | Costs associated with disposition | 1440 | | 0 | 890 | 1585.33 | 1585.33 | |
| 000015 | Costs associated with disposition | 1440 | | 0 | 1026 | 1585.33 | 1585.33 | |
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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: Community Development Commission of Mendocino County, 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 | |
| 000002 | 3/17/2010 | | 3/18/2012 | | |
| 000003 | 3/17/2010 | | 3/18/2012 | | |
| 000008 | 3/17/2010 | | 3/18/2012 | | |
| 000010 | 3/17/2010 | | 3/18/2012 | | |
| 000014 | 3/17/2010 | | 3/18/2012 | | |
| 000015 | 3/17/2010 | | 3/18/2012 | | |
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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 | |
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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.

Violence Against Women Act

The Community Development Commission of Mendocino County (CDC) supports the Violence Against Women Act (VAWA) and refers victims of domestic violence to the appropriate local agencies, including:

Ukiah Community Center 888 North State Ukiah 800-575-4357

Project Sanctuary 1 800 575-HELP (4357)

38550 S. Hwy 1 Gualala 964-HELP 884-3924

499 Leslie Ukiah 463-HELP 462-9196



Community Development Commission of Mendocino County

1076 N. State St., Ukiah, CA 95482

707/463-5462
Fax: 707/463-4188
TDD: 707/463-5697

Dear Rental Assistance Participant:

March 31, 2011

Each year the Community Development Commission of Mendocino County (CDC) is required to prepare an Annual Agency Plan which is submitted to the US Department of Housing and Urban Development.

Part of the process of preparing the Agency plan is for CDC to meet with a resident group, the Resident Advisory Board, and present a draft plan for their input.

You are receiving this letter because you are among the residents recommended and appointed to this Advisory Board.

The meeting is scheduled for:

Thursday, April 7th 2011 at 11:00 AM
Baechtel Creek Village Community Room
61 Alder Court
Willits, CA 95490

Under a separate mailing, in the next few days, you will receive a draft agency plan for your review. At the meeting CDC would like to get input on the plan from you, which will help us in developing the final plan for submission to HUD. The Agency Plan will be presented to the Board of Commissioners at its May 26, 2011 meeting for adoption.

Should you be unable to attend, and would like to make comments on the agency plan, comments must be received no later than 5:00 P.M. on April 10, 2011. Please mail any comments to:

Todd Crabtree, Executive Director
Community Development Commission Housing Authority
Agency Plan
1076 N. State Street
Ukiah, CA 95482

Sincerely,

A handwritten signature in black ink, appearing to read "TC for".

Todd Crabtree
Executive Director
Enc.





Community Development Commission of Mendocino County

1076 N. State St., Ukiah, CA 95482

707/463-5462
Fax: 707/463-4188
TDD: 707/463-5697

July 14, 2011

Memo for file

At the Resident Advisory Board Meeting held on Thursday, April 7th at 11:00AM at the Baechtel Creek Village Community Room 61 Alder Crt Willits Ca 95490, no public comment was received on the agency plan draft. No written comment was received either.

A handwritten signature in cursive script that reads "Michele Roth". The signature is written in black ink and is positioned above the printed name.

Michele Roth,
for Todd Crabtree
Executive Director