

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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**1.0 PHA Information**  
 PHA Name: **Housing Authority of the City of Natchitoches, Louisiana** PHA Code: **LA115**  
 PHA Type:  Small  High Performing  Standard  HCV (Section 8)  
 PHA Fiscal Year Beginning: (MM/YYYY): **04/01/2011**

**2.0 Inventory** (based on ACC units at time of FY beginning in 1.0 above)  
 Number of PH units: **398** Number of HCV units: **449**

**3.0 Submission Type**  
 5-Year and Annual Plan  Annual Plan Only  5-Year Plan Only

**4.0 PHA Consortia** N/A  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:					

**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: **The mission of the H.A.C.N. is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.**

**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.  
**The goals and objectives of the H.A.C.N. have not changed from those of our FYE 3/31/11 approved 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.  
**In the administrative office of the Housing Authority, located at 536 Culbertson Lane, Natchitoches, LA 71457; additionally, a copy is given to each member of the Resident Advisory Board.**

**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.* **We finished converting 36 very small efficiency apartments into (12) 1-bedroom apartments and (12) 2-bedroom apartments. Our Section 8 homeownership program provides for the utilization of 10 vouchers to be designated for the purchase of a home.**

**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. **N/A**

**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. **On file at the H.A.C.N.**

9.1	<p><b>Strategy for Addressing Housing Needs.</b> 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. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p><b>Our strategies for addressing the housing needs have not changed from those of our FYE 3/31/11 approved plan.</b></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(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.</p> <p><b>Statement of Progress in Meeting the 5-Year Plan Mission &amp; Goals --</b> The H.A.C.N. strongly feels that we are, indeed, meeting our mission. We ARE promoting adequate and affordable housing. Our maintenance department does an outstanding job of keeping our apartments in good repair. We will continue to strive to keep our neighborhoods and apartments in excellent condition and improve them as much as funding will permit. We do promote economic opportunity. We have 10 remaining family self-sufficiency units through our Section 8 program. We work with participants to improve themselves in all aspects. We also promote economic opportunity through Capital funding and through Resident Participation funding. We also have implemented a Homeownership Program.</p> <p><b>GOALS</b></p> <p><b>Increase the availability of decent, safe, and affordable housing</b> – Our last PHAS score was 92.0. We continuously strive to improve customer satisfaction. In an effort to increase safety in our subdivisions, we continue to work with the local Police Department to house police oriented facilities in both of our AMPS. Recently, we renovated 36 very small efficiency apartments that reduced down to 24 apartments. Through ARRA funding, we renovated (12) 3-bedroom apartments in our Highland Park Subdivision are presently renovating the remainder of the 3-bedroom apartments in that subdivision with 2009 Capital Grant funding.</p> <p><b>Improve community quality of life and economic vitality</b> -- We have implemented public housing security improvements by installing fencing, security lighting and housed a Resident Police Officer on each AMP. We also have a police substation on one of our sites—LA115-2; we have a Community Policing Programs (C.O.P.s) facility on one of our sites – LA115-1. The Natchitoches Police Department has relocated its Investigation Division to our C.O.P.s facility; we also provide a facility for the local Boys &amp; Girls Club to benefit our resident youth in another of our subdivisions – LA115-3.</p> <p><b>Promote self-sufficiency and asset development of families and individuals</b> -- We give preference to working families in public housing, thereby increasing the number and percentage of employed persons. We have a Memorandum of Understanding with the Natchitoches Parish Office of Family Support to work with our mutual clients, providing them a place to obtain job experience.</p> <p><b>Ensure equal opportunity in housing for all Americans</b> -- We have undertaken affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status and disability. We have also undertaken affirmative measures to provide a suitable living environment for all families living in assisted housing. Additionally, we have handicap accessible units for those persons with disabilities.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b>Significant amendment – if the mission should be altered in any way that would result in anything short of providing adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</b></p> <p><b>Substantial deviation/modification – if any alteration did not ensure that the above goals could not be met</b></p>
11.0	<p><b>Required Submission for HUD Field Office Review.</b> 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. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(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)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(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.</p> <p>(g) Challenged Elements <b>NONE</b></p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHA's receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>



# *Housing Authority of the City of Natchitoches*

536 Culbertson Lane  
Post Office Box 754 - Natchitoches, Louisiana 71458-0754  
Telephone (318) 352-9774  
Fax (318) 357-8064

GENEVA B. BARROW, Chairman  
L. J. MELDER, Vice-Chairman  
SYLVIA MADISON  
E. C. BREEDLOVE, JR.  
WAYNE BOSTICK

**MONICA H. MCKINNEY**  
Executive Director-Secretary

December 21, 2010

Ms. Cheryl Williams  
U. S. Department of Housing & Urban Development  
500 Poydras Street, 9<sup>th</sup> Floor  
New Orleans, LA 70130-3099

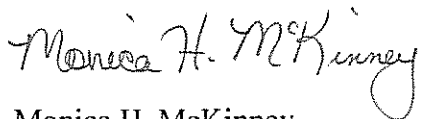
Dear Ms. Williams:

This is to advise you that our 2011-2012 Agency Plan was submitted today via the internet. Enclosed you will find the following documents relative to our Agency Plan:

1. PHA Certification of Compliance with PHA Plans & Related Regulations
2. Statement of Conformity with Title VI of the Civil Rights Act of 1964
3. Form HUD-50070, Certification of a Drug Free Workplace
4. Form HUD-50071, Certification of Payments to Influence Federal Transactions
5. Standard Form LLL, Disclosure of Lobbying Activities
6. Certification by State of PHA Plans Consistency with the Consolidated Plan
7. Form HUD-50075.1, Annual Statement/Performance and Evaluation Report for fiscal year 2011 Capital Fund Program Grant
8. Form HUD-50075.2 Capital Fund Program—Five Year Action Plan
9. Annual Report for 2007 Capital Fund Grant
10. Annual Report for 2008 Capital Fund Grant
11. Annual Report for 2009 Capital Fund Grant
12. Annual Report for 2009 ARRA Capital Fund Grant
13. Annual Report for 2010 Capital Fund Grant
14. Comments from the Resident Advisory Board

If you have any questions or require additional, please advise.

Sincerely yours,



Monica H. McKinney

MM/s

Enclosures



**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 X 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 04/01/2011, 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.

Housing Authority of the City of Natchitoches, LA

LA115


PHA Name

PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 20<sup>11</sup> - 20<sup>15</sup>

Annual PHA Plan for Fiscal Years 20<sup>11</sup> - 20<sup>12</sup>

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
Geneva B. Barrow	Chairman of the Board of Commissioners
Signature	Date
	December 20, 2010

*Housing Authority of the City of Natchitoches, Louisiana*

*P.O. Box 754, 536 Culbertson Lane*

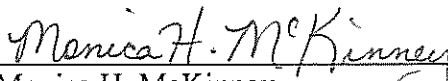
*Natchitoches, LA 71457*

*(318) 352-9774 Phone*

*(318) 357-8064 Fax*

December 20, 2010

The Housing Authority of the City of Natchitoches, Louisiana, 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.

  
\_\_\_\_\_  
Monica H. McKinney  
Executive Director



# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority of the City of Natchitoches, Louisiana

Program/Activity Receiving Federal Grant Funding

Capital Fund Grant 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 Federal agency 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 list.*

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 Monica H. McKinney	Title Executive Director
Signature <i>x Monica H. McKinney</i>	Date 12/20/2010



**ATTACHMENT TO FORM HUD 50070**

Project LA115-1

Azalea Drive, Natchitoches Parish, Natchitoches, Louisiana  
Shady Lane Drive, Natchitoches Parish, Natchitoches, Louisiana  
Culbertson Lane, Natchitoches Parish, Natchitoches, Louisiana  
Camellia Drive, Natchitoches Parish, Natchitoches, Louisiana  
Tulip Walk, Natchitoches Parish, Natchitoches, Louisiana  
Rosebud Drive, Natchitoches Parish, Natchitoches, Louisiana  
Scarborough Street, Natchitoches Parish, Natchitoches, Louisiana

Project LA115-2

Brahma Drive, Natchitoches Parish, Natchitoches, Louisiana  
Myrtle Drive, Natchitoches Parish, Natchitoches, Louisiana  
Virginia Drive, Natchitoches Parish, Natchitoches, Louisiana

Project LA115-3

Clarence Drive, Natchitoches Parish, Natchitoches, Louisiana  
Abbie Drive, Natchitoches Parish, Natchitoches, Louisiana

Project LA115-4

John Clarence DeBlieux , Natchitoches Parish, Natchitoches, Louisiana

Project LA115-7

Jackson Drive, Natchitoches Parish, Natchitoches, Louisiana  
Woodyard Drive, Natchitoches Parish, Natchitoches, Louisiana  
Ouida Drive, Natchitoches Parish, Natchitoches, Louisiana

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**

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)	Federal FY of Grant:  Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date
			Actual Expenditure End Date
INTENTIONALLY			
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<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

# Certification of Payments to Influence Federal Transactions

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

Applicant Name

Housing Authority of the City of Natchitoches, Louisiana

Program/Activity Receiving Federal Grant Funding

Capital Fund Grant

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

Monica H. McKinney

Title

Executive Director

Signature

*Monica H. McKinney*

Date (mm/dd/yyyy)

12/20/2010

## 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.)

<b>1. Type of Federal Action:</b> <input checked="" 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	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  Congressional District, if known: 4c	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>  N/A  Congressional District, if known:	
<b>6. Federal Department/Agency:</b>	<b>7. Federal Program Name/Description:</b>  CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI):  N/A	<b>b. Individuals Performing Services</b> (including address if different from No. 10a) (last name, first name, MI):  N/A	
<b>11.</b> 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>Monica H. McKinney</u> Print Name: <u>Monica H. McKinney</u> Title: <u>Executive Director</u> Telephone No.: <u>318-352-9774, ext. 13</u> Date: <u>12/20/2010</u>	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

DISCLOSURE OF LOBBYING ACTIVITIES  
CONTINUATION SHEET

Approved by OMB  
0348-0046

Reporting Entity: Housing Authority of the  
City of Natchitoches, LA Page 1 of 1

BOBBY JINDAL  
GOVERNOR



ANGELE DAVIS  
COMMISSIONER OF ADMINISTRATION

State of Louisiana  
DIVISION OF ADMINISTRATION  
OFFICE OF COMMUNITY DEVELOPMENT

August 6, 2010

Ms. Monica H. McKinney, Executive Director  
City of Natchitoches Housing Authority  
P.O. Box 754  
Natchitoches, Louisiana 71458-0754

RE: Certification of Consistency – PHA Plan

Dear Ms. McKinney:

We have reviewed the Section 903.15 Plan Consistency Certification Request which was received on August 4, 2010. Based on our review of that checklist, enclosed is the signed certification of the PHA Plans' consistency with the State's 2010-2014 Consolidated Plan. This signed form must accompany your completed plan to HUD.

We wish you every success in your planning process.

Sincerely,

A handwritten signature in black ink, appearing to read "Carol M. Newton".

Carol M. Newton  
Director, Louisiana Community  
Development Block Grant Program

Enclosure

File: FY 2010 Certifications of Consistency - PHA

Post Office Box 94095 • Baton Rouge, Louisiana 70804-9095  
Claiborne Building, Suite 7-270  
(225) 342-7412 • Fax (225) 342-1947 • 1-800-354-9548  
An Equal Opportunity Employer

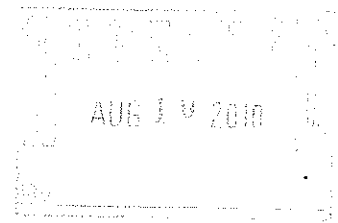
Certification by State or Local  
Official of PHA Plans Consistency  
with the Consolidated Plan

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

**Certification by State or Local Official of PHA Plans Consistency with the  
Consolidated Plan**

I, Carol M. Newton the Louisiana Community Development Block Grant Program Director certify that the Five Year and Annual PHA Plan of the City of Natchitoches Housing Authority is consistent with the Consolidated Plan of the State of Louisiana prepared pursuant to 24 CFR Part 91.

Carol M. Newton 8-10-10  
Signed / Dated by Appropriate State or Local Official



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

<b>Part I: Summary</b>		<b>FFY of Grant: 2011</b>	
PHA Name: Housing Authority of the City of Natchitoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-11 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3	1408 Management Improvements		\$ 10,000			
4	1410 Administration (may not exceed 10% of line 21)		\$ 67,660			
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		\$ 52,400			
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures		\$463,568			
11	1465.1 Dwelling Equipment—Nonependable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment		\$ 83,000			
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					

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



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		FFY of Grant: 2011	
PHA Name: Housing Authority of the City of Natchitoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-11 Replacement Housing Factor Grant No: Date of CFP:	FFY of Grant Approval:	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
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)	\$676,628	
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>Mona H. McHenry</i>		Date 12-20-10	Signature of Public Housing Director
			Date

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

Part II: Supporting Pages

PHA Name: H.A. of the City of Natchitoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-11 CFPP (Yes/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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA-Wide	Computer Upgrades	1408		\$ 10,000				
PHA Wide	Management Fees to Central Office	1410		\$ 67,160				
PHA-Wide	Advertisements	1410		\$ 500				
PHA Wide	Accountant	1430		\$ 2,400				
PHA Wide	A/E	1430		\$ 50,000				
LA115000010	Remove attic fans, new thermostats, wire in conduit, check freon/clean condensers	1460		\$ 64,000				
LA115000010	Interior Paint/Ceiling Repair	1460		\$ 78,878				
LA115000010	Exterior brick shelf (River Road Village)	1460		\$315,690				
PHA-Wide	Install cable tv wire throughout all apts.	1460		\$ 5,000				
LA115000010	Convert vacant bldg. to Community Ctr.	1470		\$ 20,000				
LA115000010	Lawn tractor	1475	1	\$ 11,000				
LA115000010	Pole saws	1475	2	\$ 3,000				
LA115000010	Weed Trimmers	1475	4	\$ 2,000				
LA115000010	Chain Saws	1475	2	\$ 2,000				
LA115000010	Tractor	1475	1	\$ 20,000				
LA115000010	Replace maintenance truck	1475	1	\$ 25,000				
	<b>TOTAL:</b>			\$676,628				

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

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

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

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

Part II: Supporting Pages		Grant Type and Number		Federal FFY of Grant: 2011		
PHA Name: Housing Authority of the City of Natchitoches, LA		Capital Fund Program Grant No: LA48 P115 501-11 CFPP (Yes/No): Yes Replacement Housing Factor Grant No:				

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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
	THIS PAGE INTENTIONALLY LEFT BLANK							

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Housing Authority of the City of Natchitoches, LA

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<sup>1</sup>

Development Number Name/PHA-Wide Activities	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	Reasons for Revised Target Dates <sup>1</sup>
PHA-Wide	07/14/2012		07/14/2014		
LA115000010	07/14/2012		07/14/2014		
LA115000020	07/14/2012		07/14/2014		

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

**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 of Natchitoches, Louisiana	Housing Authority of the City of Natchitoches, Louisiana	Locality (City/County & State)	City of Natchitoches, Natchitoches Parish	<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:	
A.	Development Number and Name	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	\$515,966	\$515,966	\$515,966	\$515,966
C.	Management Improvements		\$13,000	\$13,000	\$13,000	\$13,000
D.	PHA-Wide Non-dwelling Structures and Equipment		\$30,000	\$30,000	\$30,000	\$30,000
E.	Administration		\$117,662	\$117,662	\$117,662	\$117,662
F.	Other					
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing -- Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		\$676,628	\$676,628	\$676,628	\$676,628

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 (Continuation)**

PHA Name/Number	Locality (City/county & State)			<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> 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 _____
INTENTIONALLY LEFT BLANK	Annual Statement				

**Capital Fund Program—Five-Year Action Plan**

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

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

Work Statement for Year 1 FFY	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	AMP LA11500010			AMP LA11500010		
Annual Statement	Replace windows/trim		\$83,000	Floor Tile Replacement	96 apartments (LA115-1)	\$109,471
	Replace exterior doors		\$65,099	Replace Kitchen Cabinets	96 apartments (LA115-1)	\$70,895
	--Storage Buildings			Enamel Splash @ Stoves	96 apartments (LA115-1)	\$15,000
	Wall insulation		\$50,000	Replace Windows/Trim	96 apartments (LA115-1)	\$83,000
	Replace sewer line/		\$10,000	Range Hoods	96 apartments (LA115-1)	\$21,600
	--locate sewer cleanouts			Smoke/CO Detectors	96 apartments (LA115-1)	\$16,000
	Replace sagging ceilings		\$10,000	Interior Paint/Ceiling Repair	96 apartments (LA115-1)	\$72,000
	Soil stabilizer		\$10,000	Replace Counter Tops	96 apartments (LA115-1)	\$54,000
				Remove Attic Fans/clean all condenser units outside	96 apartments (LA115-1)	\$54,000
				Landscaping	3 subdivisions-East Natch.	\$10,000
	<b>AMP LA11500020</b>			<b>AMP LA11500020</b>		
	Ceiling/interior painting	96 apartments (LA115-2)	\$103,067	Landscaping	3 subdivisions-West Natch.	\$10,000
	Kitchen faucets	96 apartments (LA115-2)	\$19,600			
	Hard wired smoke detectors	96 apartments (LA115-2)	\$19,200			
	Bathtubs/invarities/	96 apartments (LA115-2)	\$50,000			
	Fixture replacement	96 apartments (LA115-2)	\$76,000			
	Replace sagging ceilings		\$10,000			
	Soil stabilizer		\$10,000			
	<b>Subtotal of Estimated Cost</b>		\$515,966	<b>Subtotal of Estimated Cost</b>		\$515,966

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

Work Statement for Year 1 FFY	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
Annual Statement	<b>AMP LA11500010</b> Bathroom Replacement	96 apartments (LA115-1)	\$119,800	<b>AMP LA11500010</b> Trim Trees/Landscaping	96 apartments (LA115-1)	\$77,562
	Replace roof/roof jacks/ vents	216 apts. (LA115-1, -3, -7)	\$149,010	Patch sidewalks	96 apartments (LA115-1)	\$6,750
	Replace floor tile	80 apartments (LA115-7)	\$10,000	Additional parking	96 apartments (LA115-1)	\$44,800
				Repair & paint fence	96 apartments (LA115-1)	\$3,750
				Install addit. site lighting	96 apartments (LA115-1)	\$4,500
				Patch gypsum board-ceiling	96 apartments (LA115-1)	\$19,559
				Replace shoe molding	96 apartments (LA115-1)	\$220
				Replace ceramic tile surr.	96 apartments (LA115-1)	\$220
				Replace bath cabinets	96 apartments (LA115-1)	\$220
				Wall insulation	96 apartments (LA115-1)	\$220
	<b>AMP LA11500020</b> Roof Replacement	182 apts. (LA115-2 & -4)	\$217,156	Paint Interior/Ceiling Repair	40 apartments (LA115-3)	\$40,000
	Window replacement	40 apts. (LA15-4)	\$10,000	Vent Floods	40 apartments (LA115-3)	\$5,000
	Replace sagging ceilings	40 apts. (LA15-4)	\$10,000	Security Lights	40 apartments (LA115-3)	\$50,000
				Peep Holes	40 apartments (LA115-3)	\$2,000
				Extra parking	40 apartments (LA115-3)	\$10,000
				Replace kitchen cabinets	40 apartments (LA115-3)	\$220
				Replace kitchen countertops	40 apartments (LA115-3)	\$220
				Enamel splash @ stove	40 apartments (LA115-3)	\$220
				Replace refrigerators	40 apartments (LA115-3)	\$220
				CONTINUED ON ATTACHED LIST (page 7)		***
	Subtotal of Estimated Cost		\$515,966	Subtotal of Estimated Cost (Including attached list)		\$515,966







Capital Fund Program—Five-Year Action Plan

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

Work Statement for Year 1 FFY	Work Statement for Year: FFY 2015	Work Statement for Year: FFY 2015	Estimated Cost
Development Number/Name General Description of Major Work Categories	Quantity	Development Number/Name General Description of Major Work Categories	Quantity
AMF LA1150010	40 apartments (LA115-3)	AMF LA1150020	96 apartments
Replace range hoods	40 apartments (LA115-3)	Grind and/or replace sidewalk	LA115-2 (96 apartments)
Remove attic fans/grill	40 apartments (LA115-3)	Trim Trees	LA115-2 (96 apartments)
Patch ceiling gypsum board	40 apartments (LA115-3)	Plant low light ground cover	LA115-2 (96 apartments)
Relexure & paint ceiling	40 apartments (LA115-3)	Repair & paint fence	LA115-2 (96 apartments)
Replace win. Trim & stools	40 apartments (LA115-3)	Install additional lighting	LA115-2 (96 apartments)
Recaulk window interiors	40 apartments (LA115-3)	Power clean bldg. Exterior	LA115-2 (96 apartments)
Replace int. doors/frames	40 apartments (LA115-3)	Install aluminum fascia	LA115-2 (96 apartments)
Replace vinyl tile	40 apartments (LA115-3)	Patch gypsum board-ceiling	LA115-2 (96 apartments)
Replace shoe molding	40 apartments (LA115-3)	Replace vinyl siding	LA115-2 (96 apartments)
Replace light fixtures	40 apartments (LA115-3)	Replace shoe molding	LA115-2 (96 apartments)
Replace bath. cabinets	40 apartments (LA115-3)	Replace bathtubs	LA115-2 (96 apartments)
Replace bath. Counter tops	40 apartments (LA115-3)	Replace ceramic tiles	LA115-2 (96 apartments)
Smoke/CO detectors	40 apartments (LA115-3)	Replace light fixtures	LA115-2 (96 apartments)
Replace windows	40 apartments (LA115-3)	Bathroom heater/vents	LA115-2 (96 apartments)
Termite Treatment	216 apartments	Replace bath. counter tops	LA115-2 (96 apartments)
Smoke Detectors	136 apartment (LA115-1 & 4)	Replace kitchen counter tops	LA115-2 (96 apartments)
		Install enamel stove splash	LA115-2 (96 apartments)
		Termite Treatment	182 apartments
		Smoke Detectors	136 apartment (LA115-2 & 4)
		Paint Interior	40 apartments (LA115-4)
	Subtotal of Estimated Cost		Subtotal of Estimated Cost
			\$

# Housing Authority of the City of Natchitoches

536 Culbertson Lane  
Post Office Box 754 - Natchitoches, Louisiana 71458-0754  
Telephone (318) 352-9774  
Fax (318) 357-8064

GENEVA B. BARROW, Chairman  
L. J. MELDER, Vice-Chairman  
SYLVIA MADISON  
E. C. BREEDLOVE, JR.  
WAYNE BOSTICK

MONICA H. MCKINNEY  
Executive Director-Secretary

October 5, 2010

Ms. Cheryl Williams, Director  
U.S. Dept. of Housing & Urban Development  
500 Poydras Street, 9<sup>th</sup> Floor  
New Orleans, LA 70130

ATTENTION: Ms. Linda Drake

Dear Ms. Williams:

Enclosed you will find the following documents regarding the closeout of our 2007 Capital Fund Grant:

1. Actual Modernization Cost Certificate (AMCC)
2. Annual Statement/Performance Evaluation Report, Part I
3. Annual Statement/Performance Evaluation Report, Part II
4. Annual Statement/Performance Evaluation Report, Part III
5. Exerpt from FYE 3/31/10 Audit Report reflecting Actual Modernization Cost

Should you have any questions or require additional information, please advise.

Sincerely yours,

*Monica H. McKinney*  
Monica H. McKinney

MM/s

Enclosures



**Actual Modernization  
Cost Certificate**

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

OMB Approval No. 2577-0157 (exp. 12/31/2011)

Comprehensive Improvement Assistance Program (CIAP)  
Comprehensive Grant Program (CGP)

Public reporting burden for this collection of information is estimated to average 2 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Paperwork Reduction Project (2577-0044 and 0157), Office of Information Technology, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

Do not send this form to the above address.

This collection of information requires that each Housing Authority (HA) submit information to enable HUD to initiate the fiscal closeout process. The information will be used by HUD to determine whether the modernization grant is ready to be audited and closed out. The information is essential for audit verification and fiscal close out. Responses to the collection are required by regulation. The information requested does not lend itself to confidentiality.

HA Name: <b>Housing Authority of the City of Natchitoches, LA</b>	Modernization Project Number: <b>LA48P11550107</b>
--	---

The HA hereby certifies to the Department of Housing and Urban Development as follows:

- That the total amount of Modernization Cost (herein called the "Actual Modernization Cost") of the Modernization Grant, is as shown below:

A. Original Funds Approved	\$	635,549.00
B. Funds Disbursed	\$	635,549.00
C. Funds Expended (Actual Modernization Cost)	\$	635,549.00
D. Amount to be Recaptured (A-C)	\$	0
E. Excess of Funds Disbursed (B-C)	\$	0
- That all modernization work in connection with the Modernization Grant has been completed;
- That the entire Actual Modernization Cost or liabilities therefor incurred by the HA have been fully paid;
- That there are no undischarged mechanics', laborers', contractors', or material-men's liens against such modernization work on file in any public office where the same should be filed in order to be valid against such modernization work; and
- That the time in which such liens could be filed has expired.

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)

Signature of Executive Director & Date:

X *Monica H. McKinney*

10/05/2010

For HUD Use Only

The Cost Certificate is approved for audit:

Approved for Audit (Director, Office of Public Housing / ONAP Administrator)

Date:

X

The audited costs agree with the costs shown above:

Verified: (Designated HUD Official)

Date:

X

Approved: (Director, Office of Public Housing / ONAP Administrator)

Date:

X

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: Housing Authority of the City of Natchitoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48P11550107 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval:
---	--	--

Line	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	Summary by Development Account	Revised Annual Statement (revision no: final ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFF Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		\$ 203.85		\$ 203.85	\$ 203.85
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)		\$ 11,638.42		\$ 11,638.42	\$ 11,638.42
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		\$ 48,915.00		\$ 48,915.00	\$ 48,915.00
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures		\$570,246.73		\$570,246.73	\$570,246.73
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		\$ 4,545.00		\$ 4,545.00	\$ 4,545.00
17	1499 Development Activities <sup>4</sup>					

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

<b>Part I: Summary</b>	PHA Name: Housing Authority of the City of Natchitoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48P11550107 Replacement Housing Factor Grant No: Date of CRFP:	FY of Grant: 2007 FY of Grant Approval:
------------------------	--	--	--

Type of Grant  
 Original Annual Statement       Reserve for Disasters/Emergencies  
 Performance and Evaluation Report for Period Ending:       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	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)	\$635,549.00		\$635,549.00	\$635,549.00
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	\$ 11,084.42	\$ 11,084.42		
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>Monica H. McKinney</i>		Date 10/05/2010	Signature of Public Housing Director		Date

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
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U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part II: Supporting Pages  
 PHA Name: H.A. of the City of Natchitoches, LA  
 Grant Type and Number: Capital Fund Program Grant No: LA48P11550107  
 Federal FFY of Grant: 2007  
 CFPP (Yes/No):  
 Replacement Housing Factor Grant No:

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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA-Wide	Operations	1406		\$ 203.85		\$ 203.85	\$ 203.85	
PHA Wide	Community Police Officer	1410		\$ 11,084.42		\$ 11,084.42	\$ 11,084.42	
PHA-Wide	Advertisement	1410		\$ 554.00		\$ 554.00	\$ 554.00	
PHA Wide	A & E Fees	1430		\$ 35,000.00		\$ 35,000.00	\$ 35,000.00	
PHA Wide	Comp Grant Consultant	1430		\$ 12,710.00		\$ 12,710.00	\$ 12,710.00	
PHA-Wide	Project Based Accounting	1430		\$ 1,205.00		\$ 1,205.00	\$ 1,205.00	
LA115000020	Replace door frames, rear doors	1460		\$ 86,500.00		\$ 86,500.00	\$ 86,500.00	
LA115000010	Replace ext. doors & frames	1460		\$ 42,746.73		\$ 42,746.73	\$ 42,746.73	
LA115000010	Renovate efficiency apartments	1460		\$441,000.00		\$441,000.00	\$441,000.00	
LA115000010	Resident Relocation	1495.1		\$ 4,545.00		\$ 4,545.00	\$ 4,545.00	
TOTALS:				\$635,549.00		\$635,549.00	\$635,549.00	

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

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



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

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

Part II: Supporting Pages

PHA Name: Housing Authority of the City of  
 Natchitoches, LA

Grant Type and Number  
 Capital Fund Program Grant No: LA48 P115 501-07  
 CFPP (Yes/No):  
 Replacement Housing Factor Grant No:

Federal FFY of Grant: 2007

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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

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: Housing Authority of the City of Natchitoches, LA

Federal FFY of Grant: 2007

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-Wide	12/30/2010	11/30/2009	12/30/2010	03/31/2010	
LA115000010	12/30/2010	11/30/2009	12/30/2010	03/31/2010	
LA115000020	12/30/2010	11/30/2009	12/30/2010	03/31/2010	

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

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

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:

Reasons for Revised Target Dates <sup>1</sup>

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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

HOUSING AUTHORITY OF NATCHITOCHEs  
STATEMENT AND CERTIFICATION OF ACTUAL MODERNIZATION COST  
ANNUAL CONTRIBUTION CONTRACT

YEAR ENDED MARCH 31, 2010

	2006 <u>Capital Fund</u>	2007 <u>Capital Fund</u>
Funds approved	\$ 678,433	\$ 635,549
Funds expended	<u>678,433</u>	<u>635,549</u>
Excess of funds approved	<u>\$ 0</u>	<u>\$ 0</u>
Funds advanced	\$ 678,433	\$ 635,549
Funds expended	<u>678,433</u>	<u>635,549</u>
Excess of funds advanced	<u>\$ 0</u>	<u>\$ 0</u>

1. The Actual Modernization Costs are as follows:
2. The distribution of costs by project as shown on the Final Statements of Modernization Costs dated March 3, 2010 and September 3, 2010 accompanying the Actual Modernization Costs Certificates submitted to HUD for approval are in agreement with the PHA's records.
3. All modernization costs have been paid and all related liabilities have been discharged through payment.

See accountants' 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

<b>Part I: Summary</b>		<b>FFY of Grant: 2008</b>	
PHA Name: Housing Authority of the City of Natchitoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48P115501-08 Replacement Housing Factor Grant No: Date of CFPP: 2008	FFY of Grant Approval: 2008	

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/20/2010	Reserve for Distasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3	1408 Management Improvements	\$ 500.00		\$ 500.00	\$ 500.00	
4	1410 Administration (may not exceed 10% of line 21)	\$ 69,174.00		\$ 69,174.00	\$ 69,174.00	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	\$ 66,874.91		\$ 66,874.91	\$ 65,032.91	
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	\$ 440,337.94		\$ 440,337.94	\$ 440,337.94	
11	1465.1 Dwelling Equipment—Nonexpendable	\$ 35,808.00		\$ 35,808.00	\$ 35,808.00	
12	1470 Non-dwelling Structures	\$ 29,493.35		\$ 29,493.35	\$ 29,493.35	
13	1475 Non-dwelling Equipment	\$ 48,804.80		\$ 48,804.80	\$ 48,804.80	
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs	\$ 750.00		\$ 750.00	\$ 750.00	
17	1499 Development Activities <sup>4</sup>					

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

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: Housing Authority of the City of Natchitoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48P115501-08 Replacement Housing Factor Grant No: Date of CFFP: 2008	FFY of Grant: 2008 FFY of Grant Approval: 2008
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Type of Grant  
 Original Annual Statement  
 Performance and Evaluation Report for Period Ending: 12/20/2010  
 Reserve for Disasters/Emergencies  
 Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Total Estimated Cost Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	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)		\$691,743.00		\$691,743.00	\$689,901.00
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>Wanda J. McHenry</i>		Date 12/20/2010	Signature of Public Housing Director		Date	

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

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

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

Part II: Supporting Pages

PHA Name: Housing Authority of the City of  
 Natchitoches, LA

Grant Type and Number  
 Capital Fund Program Grant No: LA48P115501-08  
 CFFP (Yes/ 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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide	General Operations	1408		\$ 500.00		\$ 500.00	\$ 500.00	
PHA Wide	Management Fee	1410		\$ 69,174.00		\$ 69,174.00	\$ 69,174.00	
PHA Wide	A & E Fees	1430		\$ 42,929.91		\$ 42,929.91	\$ 42,929.91	
PHA-Wide	Comp Grant Consultant	1430		\$ 10,380.00		\$ 10,380.00	\$ 8,633.00	
PHA-WIDE	Project Based Accounting for CFP	1430		\$ 1,415.00		\$ 1,415.00	\$ 1,320.00	
AMP LA115000020	Asbestos Testing	1430		\$ 12,150.00		\$ 12,150.00	\$ 12,150.00	
AMP LA115000010	Conversion of efficiency apts.	1460		\$319,086.78		\$319,086.78	\$319,086.78	
AMP LA115000020	Renovations to 3-bedroom apartments:	1460		\$121,251.16		\$121,251.16	\$121,251.16	
AMP LA115000020	Replace ranges	1465		\$ 35,808.00		\$ 35,808.00	\$ 35,808.00	
AMP LA115000010	Canopy behind warehouse	1470		\$ 29,493.35		\$ 29,493.35	\$ 29,493.35	
AMP LA115000010	Replace 2 maintenance trucks	1475		\$ 48,804.80		\$ 48,804.80	\$ 48,804.80	
AMP LA115000010	Relocation expense	1495		\$ 750.00		\$ 750.00	\$ 750.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

**Part II: Supporting Pages**

PHA Name: Housing Authority of the City of Natchitoches, LA

Grant Type and Number  
 Capital Fund Program Grant No: LA48P115501-08  
 CFIP (Yes/ 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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
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<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>2</sup> To be completed for the Performance and Evaluation Report.



**Annual Statement/Performance and Evaluation Report**

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

**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: Housing Authority of the City of Natchitoches, LA

Federal FY of Grant: 2008

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date) Original Obligation End Date	Actual Obligation End Date	All Funds Expended (Quarter Ending Date) Original Expenditure End Date	Actual Expenditure End Date	Reasons for Revised Target Dates
PHA-Wide	09/30/2009	06/01/2010	09/30/2011	12/31/2010	

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

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

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: Housing Authority of the City of Natchitoches, LA

Federal FFY of Grant: 2008

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	Reasons for Revised Target Dates
INTENTIONALLY	LEFT	BLANK					

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

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

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

<b>Part I: Summary</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48 P11550109 Replacement Housing Factor Grant No: Date of CFFP: 09/14/09		<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval:</b>	
<b>PHA Name: Housing Authority of the City of Natchitoches, LA</b>					
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/20/2010 <input type="checkbox"/> Reserve for Disasters/Emergencies		<b>Revised Annual Statement (revision no: )</b> <input type="checkbox"/> Final Performance and Evaluation Report			
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	<b>Obligated</b>	<b>Total Actual Cost<sup>1</sup></b> Expended	
		<b>Original</b>			
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements	\$ 5,000	\$ 0.00		
4	1410 Administration (may not exceed 10% of line 21)	\$ 64,075	\$ 64,075.00	\$ 442.75	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 37,000	\$ 41,950.00	\$ 23,874.43	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$476,760	\$ 452,760.00	\$ 165,909.39	
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$ 52,918	\$ 0.00		
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	\$ 5,000	\$ 875.00	\$ 875.00	\$ 875.00
17	1499 Development Activities <sup>4</sup>				

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

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  
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<b>Part I: Summary</b>		FFY of Grant: 2009				
PHA Name: Housing Authority of the City of Natchitoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-09 Replacement Housing Factor Grant No: Date of CFFP: 09/14/09	FFY of Grant Approval:				
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/20/2010 <input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Original	Revised <sup>1</sup>	Total Estimated Cost	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)	\$ 640,753			\$ 559,660.00	\$ 191,101.57
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>Monica H. McKenney</i>		Date 12/20/2010		Signature of Public Housing Director		Date

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFFP Grants for operations.  
<sup>4</sup> 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 II: Supporting Pages		Federal FFY of Grant: 2009						
PHA Name: H.A. of the City of Natchitoches, LA		Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-09 CFPP (Yes/No): Replacement Housing Factor Grant No:						
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA-Wide	Computer Upgrades	1408		\$ 5,000		\$ 0.00		
PHA-Wide	Management Fees to Central Office	1410		\$ 63,575		\$ 63,632.25	\$ 0.00	
PHA Wide	Advertisements	1410		\$ 500		\$ 442.75	\$ 442.75	
PHA-Wide	Accountant	1430		\$ 4,800		\$ 800.00	\$ 0.00	
PHA Wide	A/E	1430		\$ 25,000		\$ 33,950.00	\$ 16,674.43	
LA115000020	Asbestos Testing/Abatement Oversight	1430		\$ 7,200		\$ 7,200.00	\$ 7,200.00	
LA115000020	Asbestos Abatement/Removal	1460		\$ 26,460		\$ 26,460.00	\$ 26,460.00	
LA115000020	Complete renovations to remaining 3-bedroom apartments in Highland Park	1460		\$426,300		\$426,300.00	\$139,449.39	
PHA-Wide	Cluster Mail Boxes	1460		\$ 10,000		\$ 0.00		
PHA-Wide	Stripe Parking Lots	1460		\$ 6,000		\$ 0.00		
PHA-Wide	Replace All Outside Faucets	1460		\$ 8,000		\$ 0.00		
LA115000020	Replace Maintenance Truck(s)	1475	2	\$ 52,918		\$ 0.00		
LA115000020	Relocation Expense	1495		\$ 5,000		\$ 875.00	\$ 875.00	
	<b>TOTAL:</b>			\$640,753		\$559,660.00	\$191,101.57	

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

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

Part II: Supporting Pages		Federal FFY of Grant: 2009						
PHA Name: Housing Authority of the City of Natchitoches, LA		Grant Type and Number	Capital Fund Program Grant No: LA48 P115 501-09					
Development Number Name/PHA-Wide Activities		CFFP (Yes/No): Yes Replacement Housing Factor Grant No:						
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
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<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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

Part III: Implementation Schedule for Capital Fund Financing Program				Federal FFY of Grant: 2009	
PHA Name: Housing Authority of the City of Natchitoches, LA					
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-Wide	12/30/2010		12/30/2012		
LA115000010	12/30/2010		12/30/2012		
LA115000020	12/30/2010		12/30/2012		

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

Part III: Implementation Schedule for Capital Fund Financing Program				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 <sup>1</sup>	
	Original Obligation End Date	Actual Obligation End Date			
INTENTIONALLY	LEFT	BLANK			

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



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

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		FFY of Grant: 2009 FFY of Grant Approval:	
PHA Name: Housing Authority of the City of Natchitoches, LA		Grant Type and Number Capital Fund Program Grant No: LA48 S115 501-09 Replacement Housing Factor Grant No: Date of CFFP: 03/18/2009	
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"/> Performance and Evaluation Report for Period Ending:		<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	Total Actual Cost <sup>1</sup>
		Original	Obligated
		Revised <sup>2</sup>	Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)	\$ 81,845.41	\$ 81,845.41
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition	\$ 53,677.71	\$ 53,677.71
9	1450 Site Improvement		
10	1460 Dwelling Structures		
11	1465.1 Dwelling Equipment—Nonexpendable	\$739,621.88	\$739,621.88
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs	\$ 465.00	\$ 465.00
17	1499 Development Activities <sup>4</sup>		

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

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

<b>Part I: Summary</b>		<b>FFY of Grant: 2009</b>	
<b>PHA Name:</b> Housing Authority of the City of Natchitoches, LA	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48 S115 501-09 Replacement Housing Factor Grant No: Date of CFFP: 03/18/2009	<b>FFY of Grant Approval:</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: 02 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report	
<b>Type of Grant</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	<b>Total Actual Cost<sup>1</sup></b>
		<b>Original</b>	<b>Obligated</b>
		<b>Revised<sup>2</sup></b>	<b>Expended</b>
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)	\$875,610.00	\$875,610.00
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		
<b>Signature of Executive Director</b> <i>Monica H. McKinney</i>		<b>Date 12/20/2010</b>	<b>Signature of Public Housing Director</b>
			<b>Date</b>

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

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

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

Part II: Supporting Pages									
PHA Name: H.A. of the City of Natchitoches, LA				Grant Type and Number Capital Fund Program Grant No: LA48 S115 501-09 CFPP (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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
PHA-Wide	Advertising	1410		\$ 101.00		\$ 101.00	\$ 101.00		
PHA-Wide	Contract Administration Fee to COCC	1410		\$ 81,744.41		\$ 81,744.41	\$ 81,744.41		
PHA Wide	Grant Accounting Fees	1430		\$ 686.00		\$ 686.00	\$ 686.00		
LA115000010	A/E Fees	1430		\$ 52,991.71		\$ 52,991.71	\$ 52,991.71		
LA115000020	Completion of renovations currently underway to efficiency apartments	1460		\$474,263.59		\$474,263.59	\$474,263.59		
LA115000020	Renovations to 3-bedroom apartments (Highland Park Subdivision)	1460		\$265,358.29		\$265,358.29	\$265,358.29		
LA115000020	Relocation Costs	1495		\$ 465.00		\$ 465.00	\$ 465.00		
	TOTALS:			\$875,610.00		\$875,610.00	\$875,610.00		

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Federal FFY of Grant:				
				Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	Total Estimated Cost	Total Actual Cost		
			Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	Status of Work	
	INTENTIONALLY LEFT BLANK							

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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 Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program				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 <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-Wide	03/17/2010	01/31/2010	03/17/2011	09/30/2010	

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

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

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

Part III: Implementation Schedule for Capital Fund Financing Program							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 <sup>1</sup>			
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date				
INTENTIONALLY	LEFT	BLANK						

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

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

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 Expires 4/30/2011

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-10 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval:	
PHA Name: Housing Authority of the City of Natchitoches, LA		Reserve for Disasters/Emergencies <input type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending: 12/30/2010 <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost <sup>1</sup>	
Line	Summary by Development Account	Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements	\$ 4,000		\$ 0	
4	1410 Administration (may not exceed 10% of line 21)	\$ 67,660		\$ 0	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition	\$ 42,400		\$ 0	
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable	\$535,568		\$ 0	
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$ 25,000		\$ 0	
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	\$ 2,000		\$ 0	
17	1499 Development Activities <sup>4</sup>				

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

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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U.S. Department of Housing and Urban Development  
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 Expires 4/30/2011

<b>Part I: Summary</b>		FFY of Grant: 2010	
PHA Name: Housing Authority of the City of Natchitoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-10 Replacement Housing Factor Grant No: Date of CFFP: 09/14/09	FFY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/20/2010 <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
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)	\$ 676,628	\$ 0
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	\$ 4,000	\$ 0
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>Mona F. McKinnsey</i>		Signature of Public Housing Director	
Date 12/20/2010		Date	

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



Part II: Supporting Pages		Federal FFY of Grant: 2010					
PHA Name: H.A. of the City of Natchitoches, LA		Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-10 CFPP (Yes/ No): Replacement Housing Factor Grant No:					
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>
PHA-Wide	Community Police Officer	1408		\$ 4,000		\$ 0	
PHA Wide	Management Fees to Central Office	1410		\$ 67,160		\$ 0	
PHA-Wide	Advertisements	1410		\$ 500		\$ 0	
PHA Wide	Accountant	1430		\$ 2,400		\$ 0	
PHA Wide	A/E	1430		\$ 40,000		\$ 0	
LA115000020	Relocation Expense	1495		\$ 2,000		\$ 0	
LA115000020	Interior Doors & Trim	1460		\$ 48,000		\$ 0	
LA115000020	Replace Panel/Trim	1460		\$ 48,600		\$ 0	
LA115000020	Remove Attic Fans	1460		\$ 30,000		\$ 0	
LA115000020	Wall insulation	1460		\$ 20,000		\$ 0	
LA115000020	Replace Kitchen Cabinets & Sinks	1460		\$ 24,000		\$ 0	
LA115000020	Vent Hoods	1460		\$ 15,000		\$ 0	
LA115000020	Light Fixtures-Outside Porch	1460		\$ 11,000		\$ 0	
LA115000020	Dryer/Vents/Plugs	1460		\$ 12,000		\$ 0	
LA115000020	Bathroom Medicine Cabinets/All Fixtures	1460		\$ 25,000		\$ 0	
LA115000020	Replace Floor Tiles	1460		\$ 57,605		\$ 0	
LA115000020	Replace Window Screens	1460		\$ 52,043		\$ 0	
LA115000020	Commodes/Heater- Vent Lights	1460		\$ 25,000		\$ 0	

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

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

<b>Part II: Supporting Pages</b>		<b>Federal FFY of Grant: 2010</b>					
PHA Name: Housing Authority of the City of Natchitoches, LA		Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-10 CFFP (Yes/No): Yes					
Development Number Name/PHA-Wide Activities		Replacement Housing Factor Grant No:					
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 <sup>1</sup>		
LA115000010	Exterior Doors	1460		\$143,320		\$ 0	
PHA-Wide	Cluster Mail Boxes	1460		\$ 10,000		\$ 0	
PHA-Wide	Stripe Parking Lots	1460		\$ 6,000		\$ 0	
PHA-Wide	Replace All Outside Faucets	1460		\$ 8,000		\$ 0	
LA115000020	Replace Maintenance Truck	1475		\$ 25,000		\$ 0	
	TOTAL:			\$676,628		\$ 0	

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

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

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

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

Part III: Implementation Schedule for Capital Fund Financing Program							Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Actual Expenditure End Date	Reasons for Revised Target Dates <sup>1</sup>	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	All Funds Expended (Quarter Ending Date)			
PHA-Wide	07/14/2012		07/14/2014				
LA115000010	07/14/2012		07/14/2014				
LA115000020	07/14/2012		07/14/2014				

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

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

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

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

Resident Advisory Board Comments –

1. As a member of the resident advisory board, I would like to focus my interest towards community involvement such as an active Neighborhood Watch which will decrease potential criminal activity and developing community clean up programs and after-school programs. This will help increase community involvement by both adults and children. –Crittie Conley
2. I am pleased to have been invited back to the Resident Advisory Board this year. I believe the agency plan is right on target and well done. I am impressed with the five year plan. I will continue working with the Advisory Council for as long as I am needed. –Rosia Felton
3. As a member of the Resident Advisory Board, I would like to reiterate my interest towards landscaping and beautification of the housing authority units. This will increase the marketability of the units as well as the appearance. The appearance of marketable units will help us target different demographics and complete the conventional apartment complexes. –Weda Pierre
4. I have served on this board for several years & I am always interested and pleased with the improvements that are done to the Housing Authority apartments with the capital grants each year. For these apartments to be as old as they are, they are kept in great shape. The Housing Authority is right on focus with the ongoing annual and 5-year agency plan. –Sylvia Madison

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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**1.0 PHA Information**  
 PHA Name: **Housing Authority of the City of Natchitoches, Louisiana** PHA Code: **LA115**  
 PHA Type:  Small  High Performing  Standard  HCV (Section 8)  
 PHA Fiscal Year Beginning: (MM/YYYY): **04/01/2011**

**2.0 Inventory** (based on ACC units at time of FY beginning in 1.0 above)  
 Number of PH units: **398** Number of HCV units: **449**

**3.0 Submission Type**  
 5-Year and Annual Plan  Annual Plan Only  5-Year Plan Only

**4.0 PHA Consortia** N/A  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:					

**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: **The mission of the H.A.C.N. is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.**

**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.  
**The goals and objectives of the H.A.C.N. have not changed from those of our FYE 3/31/11 approved 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.  
**In the administrative office of the Housing Authority, located at 536 Culbertson Lane, Natchitoches, LA 71457; additionally, a copy is given to each member of the Resident Advisory Board.**

**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.* **We finished converting 36 very small efficiency apartments into (12) 1-bedroom apartments and (12) 2-bedroom apartments. Our Section 8 homeownership program provides for the utilization of 10 vouchers to be designated for the purchase of a home.**

**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. **N/A**

**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. **On file at the H.A.C.N.**

9.1	<p><b>Strategy for Addressing Housing Needs.</b> 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. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p><b>Our strategies for addressing the housing needs have not changed from those of our FYE 3/31/11 approved plan.</b></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(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.</p> <p><b>Statement of Progress in Meeting the 5-Year Plan Mission &amp; Goals --</b> The H.A.C.N. strongly feels that we are, indeed, meeting our mission. We ARE promoting adequate and affordable housing. Our maintenance department does an outstanding job of keeping our apartments in good repair. We will continue to strive to keep our neighborhoods and apartments in excellent condition and improve them as much as funding will permit. We do promote economic opportunity. We have 10 remaining family self-sufficiency units through our Section 8 program. We work with participants to improve themselves in all aspects. We also promote economic opportunity through Capital funding and through Resident Participation funding. We also have implemented a Homeownership Program.</p> <p><b>GOALS</b></p> <p><b>Increase the availability of decent, safe, and affordable housing</b> – Our last PHAS score was 92.0. We continuously strive to improve customer satisfaction. In an effort to increase safety in our subdivisions, we continue to work with the local Police Department to house police oriented facilities in both of our AMPS. Recently, we renovated 36 very small efficiency apartments that reduced down to 24 apartments. Through ARRA funding, we renovated (12) 3-bedroom apartments in our Highland Park Subdivision are presently renovating the remainder of the 3-bedroom apartments in that subdivision with 2009 Capital Grant funding.</p> <p><b>Improve community quality of life and economic vitality</b> -- We have implemented public housing security improvements by installing fencing, security lighting and housed a Resident Police Officer on each AMP. We also have a police substation on one of our sites—LA115-2; we have a Community Policing Programs (C.O.P.s) facility on one of our sites – LA115-1. The Natchitoches Police Department has relocated its Investigation Division to our C.O.P.s facility; we also provide a facility for the local Boys &amp; Girls Club to benefit our resident youth in another of our subdivisions – LA115-3.</p> <p><b>Promote self-sufficiency and asset development of families and individuals</b> -- We give preference to working families in public housing, thereby increasing the number and percentage of employed persons. We have a Memorandum of Understanding with the Natchitoches Parish Office of Family Support to work with our mutual clients, providing them a place to obtain job experience.</p> <p><b>Ensure equal opportunity in housing for all Americans</b> -- We have undertaken affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status and disability. We have also undertaken affirmative measures to provide a suitable living environment for all families living in assisted housing. Additionally, we have handicap accessible units for those persons with disabilities.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b>Significant amendment – if the mission should be altered in any way that would result in anything short of providing adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</b></p> <p><b>Substantial deviation/modification – if any alteration did not ensure that the above goals could not be met</b></p>
11.0	<p><b>Required Submission for HUD Field Office Review.</b> 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. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(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)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(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.</p> <p>(g) Challenged Elements <b>NONE</b></p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHA's receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

