PH	A 5-Year and		ment of Housing and	Urban	OMB No. 2577-0226
	nual Plan	Developmen			Expires 4/30/2011
A 111	PHA Information	Office of Pu	blic and Indian Housi	ng	
1.0	PHA Name: Housing Authority of the PHA Type: Small D PHA Fiscal Year Beginning: (MM/YY	High Performing YY): <u>04/01/2011</u>	x Standard	HCV (Sect	ion 8)
2.0	Inventory (based on ACC units at time Number of PH units: 398	e of FY beginning i	in 1.0 above) Number of HCV units: 4	149	
3.0	Submission Type X 5-Year and Annual Plan	🗌 Annual I	Plan Only	5-Year Plan Only	
4.0	PHA Consortia N/A	PHA Cons	ortia: (Check box if submitting	a joint Plan and com	
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in th Consortia	he No. of Units in Each Program PH HCV
	PHA 1:				
5.0	5-Year Plan. Complete items 5.1 and 5	5.2 only at 5-Year l	Plan update.		
5.1	Mission. State the PHA's Mission for jurisdiction for the next five years: Th Development: To promote adeq from discrimination.	ne mission of the uate and afforda	H.A.C.N. is the same as thable housing, economic opp	at of the Departm oortunity and a su	nent of Housing and Urban iitable living environment free
5.2	Goals and Objectives. Identify the Ph low-income, and extremely low-incom and objectives described in the previou The goals and objectives of the F	e families for the n is 5-Year Plan.	ext five years. Include a report of	on the progress the P	HA has made in meeting the goals
6.0	 PHA Plan Update (a) Identify all PHA Plan elen (b) Identify the specific location complete list of PHA Plan e In the administrative office of 71457; additionally, a copy in 	on(s) where the lements, see Se f the Housing A	public may obtain copies action 6.0 of the instruction uthority, located at 536 Cu	of the 5-Year an ns. lbertson Lane, Na	d Annual PHA Plan. For a
7.0	Hope VI, Mixed Finance Moo Housing, Homeownership Pr applicable. We finished conver bedroom apartments. Our Secti for the purchase of a home.	ograms, and P ting 36 very sma	roject-based Vouchers. Ill efficiency apartments int	Include statements re to (12) 1-bedroom	elated to these programs as a apartments and (12) 2-
8.0	Capital Improvements. Pleas	e complete Par	ts 8.1 through 8.3, as appl	icable.	
8.1	Capital Fund Program Annu Annual Plan, annually complete Evaluation Report, form HUD-	e and submit t h -50075.1, for ea	e <i>Capital Fund Program</i> and open CFP	Annual Statemen grant and CFFP	nt/Performance and financing.
8.2	Capital Fund Program Five- and submit the <i>Capital Fund P</i> a rolling basis, e.g., drop currer in the Five-Year Action Plan.	<i>rogram Five-Ye</i> nt year, and add	ear Action Plan, form HU	D-50075.2, and s	subsequent annual updates (on
8.3	Capital Fund Financing Prog Check if the PHA proposes (RHF) to repay debt incurred to	to use any port finance capita	l improvements. N/A		
9.0	Housing Needs. Based on info and other generally available da low-income, and extremely low families, families with disabilit the public housing and Section address issues of affordability,	ata, make a reas v-income famili ies, and househ 8 tenant-based	sonable effort to identify t tes who reside in the jurisc olds of various races and assistance waiting lists. T	he housing needs diction served by ethnic groups, ar 'he identification	s of the low-income, very the PHA, including elderly nd other families who are on of housing needs must

9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.
	Our strategies for addressing the housing needs have not changed from those of our FYE 3/31/11 approved plan.
	Additional Information. Describe the following, as well as any additional information HUD has requested.
	(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5- Year Plan.
	Statement of Progress in Meeting the 5-Year Plan Mission & Goals 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.
10.0	GOALS Increase the availability of decent, safe, and affordable housing – 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.
	Improve community quality of life and economic vitality 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 & Girls Club to benefit our resident youth in another of our subdivisions – LA115-3.
	Promote self-sufficiency and asset development of families and individuals 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.
	Ensure equal opportunity in housing for all Americans 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.
	(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
	<u>Significant amendment</u> – 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. Substantial deviation/modification – if any alteration did not ensure that the above goals could not be met
11.0	Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following
11.0	documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
	(a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
	 (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only) (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only) (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
	 (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (c) Challenged Elements NONE
	 (g) Challenged Elements NONE (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHA's receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)

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

December 21, 2010

MONICA H. McKINNEY Executive Director-Secretary

Ms. Cheryl Williams U. S. Department of Housing & Urban Development 500 Poydras Street, 9th 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
- 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,

Moneca H. M.Kinney

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 \times 5-Year and/or \times 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.
- 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:
 - 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 Natchit	oches, LA
--	-----------

LA115

PHA Name

PHA Number/HA Code

x	5-Year PHA Plan for Fiscal Years 20	15 - 20
x	11 Annual PHA Plan for Fiscal Years 20	- 20 ¹²

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

Name of Authorized Official	Title
Geneva B. Barrow	Chairman of the Board of Commissioners
Signature S. B. Barra	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



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 Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

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

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

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

g. Making a good faith effort to continue to maintain a drugfree 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	Title
Monica H. McKinney	Executive Director
Signature * Monica H. M.Kinney	Date 12/20/2010
	form HUD-50070 (3 /98) ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

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

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		Title
Monica H. McKinney		Executive Director
Signature		Date (mm/dd/yyyy)
Monica H. M.K	inney	12/20/2010
Previous edition is obsolete	\bigcirc	form HUD 50071 (3/98) ref. Handboooks 7417.1, 7475.13, 7485.1, & 7485.3

DISC	LOSURE OF LO	BBYING ACTIV	ITIES	Approved by OMB
Complete this form	to disclose lobbying	g activities pursuant	to 31 U.S.C. 1352	0348-0046
	(See reverse for pul	blic burden disclosu	re.)	
1. Type of Federal Action:	2. Status of Federa	al Action: ffer/application	3. Report Type:	ilina
b. grant	b. initia		b. materia	-
c. cooperative agreement	c. post-			Change Only:
d. loan	0. pour			quarter
e. loan guarantee				st report
f. loan insurance				
4. Name and Address of Reporting	Entity:	5. If Reporting En	tity in No. 4 is a S	ubawardee, Enter Name
Prime Subawardee		and Address of	-	,
	if known :			
		N/A		
Congressional District, <i>if known</i>	· 4c	Congressional	District, if known:	
6. Federal Department/Agency:	•	7. Federal Progra		ion:
			f applicable:	
8. Federal Action Number, if known	1:	9. Award Amount	, if known :	
		\$		
10. a. Name and Address of Lobby (<i>if individual, last name, first ne</i> N/A	ame, MI):	different from N (last name, first N/A	lo. 10a) name, MI):	(including address if
11. Information requested through this form is authorized 1352. This disclosure of tobbying activities is a mat	by title 31 U.S.C. section edat representation of fact	Signature:/	Unica H.	M. Kennen
upon which reliance was placed by the tier above when	this transaction was made	Print Name: Moni	ca H. McKinney	
or entered into. This disclosure is required pursuan information will be available for public inspection. An	y person who fails to file the	Title: Executive Dir		
required disclosure shall be subject to a civil penalty o not more than \$100,000 for each such failure.	f not less than \$10,000 and		*****	10/00/0012
		Telephone No.: 31	8-552-9774, ext. 13	Date: <u>12/20/2010</u>
Federal Use Only:				Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

	DISCLOSURE OF LOBBYING ACTIVITIES CONTINUATION SHEET		Approved by OMB 0348-0046
Reporting Entity: City of	Authority of the Natchitoches LA	Page of	

Authorized for Local Reproduction Standard Form--LLL-A

BOBBY JINDAL GOVERNOR



ANGELE DAVIS COMMISSIONER OF ADMINISTRATION

State of Louisiana division of administration OFFICE OF COMMUNITY DEVELOPMENT

August 6, 2010

AUG 1 0 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,

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

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



-) &-la-10 Signed / Dated by Appropriate State or Local Official

الراري الرابي المتحصين المتحديد وتصاحبه فاستسببه

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

						Expires 4/30/2011
Part I:	Part I: Summary					
PHA Nat City of N	PHA Name: Housing Authority of the Grant Type and Number City of Natchitoches, LA Capital Fund Program Grant No: LA48 PH15 501-11 Replacement Housing Factor Grant No: Date of CFFP:	3 P115 501-11 5:			1	FFY of Grant: 2011 FFY of Grant Approval:
Type of Grant	pe of Grant Original Annual Statement Reserve for Disasters/Emergencies		Revised Annual Statement (revision no:	ement (revision no:	>	
LI Perio	Performance and Evaluation Report for Period Ending:		Final Performance a	Final Performance and Evaluation Report		
Line	Summary by Development Account		Total Estimated Cost		Total A	Fotal Actual Cost ¹
		Original	Revised ²	Obligated		Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) 3	54.0000				
ц Ц	1408 Management Improvements	\$ 10,000				
4	1410 Administration (may not exceed 10% of line 21)	\$ 67,660				
U.	1411 Audit					
9	1415 Liquidated Damages				77 Y 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
7	1430 Fees and Costs	\$ 52,400			-	
8	1440 Site Acquisition					
6	1450 Site Improvement					
10	1460 Dwelling Structures	\$463,568				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment	\$ 83,000				array - marcar shine the at Billion - BAANS SAN AND IN A WAY SAN AND IN THE PARTY AND A WAY SAN
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					

17

1499 Development Activities 4

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

⁴ RHF funds shall be included here.

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

######################################	1999 2011 A.W. MARAAA A.M 2014 A 2014 A 2014 A.W. A 2014 A.W	**********			11 100 100
Date	Housing Director	Signature of Public Hous	Date $ \cap (\cap $	Signature of Executive Director	Signature of E
			-	Amount of line 20 Related to Energy Conservation Measures	25 Amou
				Amount of line 20 Related to Security - Hard Costs	24 Amou
				Amount of line 20 Related to Security - Soft Costs	23 Amou
				Amount of line 20 Related to Section 504 Activities	22 Amou
				Amount of line 20 Related to LBP Activities	
			\$676,628	Amount of Annual Grant.: (sum of lines 2 - 19)	20 Amou
				1502 Contingency (may not exceed 8% of line 20)	19 1502 (
				Payment	
				9000 Collateralization or Deht Service naid Via System of Direct	18ba 9000 (
				1501 Collateralization or Debt Service paid by the PHA	18a 1501 (
Expended	Obligated	Revised ²	Original		
Total Actual Cost ¹	Total A	Total Estimated Cost	Tot	Summary by Development Account	Line Sumn
	Final Performance and Evaluation Report	🗌 Final		Performance and Evaluation Report for Period Ending:	Performance
_	Revised Annual Statement (revision no:	🗌 Revis	ocies	ual Statement Reserve for Disasters/Emergencies	Original Annual Statement
					Type of Grant
	FFY of Grant:2011 FFY of Grant Approval:			Y Grant Type and Number Y Capital Fund Program Grant No: LA48 P115 501-11 Replacement Housing Factor Grant No: Date of CFFP:	PHA Name: Housing Authority of the City of Natchitoches, LA
					Part I: Summary
Expires 4/30/2011					

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages					n diri ha diri ha sa shi na sa shi na da na sa shi ƙafa ya sa shi ƙafa ya sa shi ƙafa ya sa sa sa sa sa sa sa s				
PHA Name: H.A. of the City of Natchitoches, LA		rant Typ apital Fun FFP (Yes/ splacemer	Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-11 CFFP (Yes/ No): Replacement Housing Factor Grant No:	: LA48 P115 50 ant No:	- 	Federal I	Federal FFY of Grant: 2011	11	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised ^T	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Computer Upgrades		1408		\$ 10,000		1		
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	wire	1460		\$ 64,000				
	in conduit, check freon/clean condensers	sers							
LA115000010	Interior Paint/Ceiling Repair		1460		\$ 78,878				
LA115000010	Exterior brick shelf (River Road Village)	age)	1460		\$315,690				
PHA-Wide	Install cable tv wire throughout all apts.	ots.	1460		\$ 5,000				
LA115000010	Convert vacant bldg. to Community Ctr.	Cfr.	1470		\$ 20,000				
LA115000010	Lawn tractor		1475		\$ 11,000				
LA115000010	Pole saws		1475	2					
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		\$ 25,000				
	TOTAL:				\$676,628				

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name: Housing Authority of the City of Natchitoches, LA	hority of the City of	Grant Ty Capital Fu CFFP (Yes Replaceme	Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-11 CFFP (Ycs/ No): Yes Replacement Housing Factor Grant No:	LA48 P115 50) ant No:	-11	Federal F	Federal FFY of Grant: 2011	11	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	Ited Cost	Total Actual Cost	òost	Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

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	dule for Capital Fund	Financing Program			
PHA Name: Housing Authority of the City of Natchitoches, LA	ty of the City of Natc	hitoches, LA			Federal FFY of Grant: 2011
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	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	07/14/2012		07/14/2014		
LA115000010	07/14/2012		07/14/2014		
LA115000020	07/14/2012		07/14/2014		

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

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Par PHA of N	Part I: Summary PHA Name/Number Housing Authority of the City of Natchitoches, Louisiana	athority of the City	Locality (City/ City of Natchitoches	Locality (City/County & State) City of Natchitoches, Natchitoches Parish	X OI	X Original 5-Year Plan Revision No:
	Development Number and	Work Statement	Work Statement for Year 2	Work Statement for Year 3	W	Work Statement for Year 4
Ą.	Name	for Year 1 FFY 2011	FFY 2012	FFY 2013		FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	\$515,966	\$515,966		\$515,966
<u>0</u>	Management Improvements		\$13,000	\$13,000		\$13,000
D,	PHA-Wide Non-dwelling		9 9 9 9 9 9 9 9 9		,	
	Structures and Edublicit		000,000	000,000	Ľ	
E	Administration		\$117,662	\$117,662	•••	\$117,662
F	Other					
G.	Operations					
H.	Demolition					
	Development					
J.	Capital Fund Financing -					
	Debt Service					
K	Total CFP Funds					
Ļ	Total Non-CFP Funds					
Μ.	Grand Total		\$676,628	\$676,628	28	28 \$676,628

Part	Part I: Summary (Continuation)	tion)				
PHA	PHA Name/Number		Locality (City/county & State)	ounty & State)	🗌 Original 5-Year Plan 🔲	Revision No:
A.	Development Number and Name	Work Statement for	Work Statement for Year 2 FFY	Work Statement for Year 3 FFY	Work Statement for Year 4 FFY	Work Statement for Year 5
		Year 1 FFY				
	INTENTIONALLY LEFT BLANK	Annual Statement				

\$515,966	Subtotal of Estimated Cost	Sub	\$515,966	Subtotal of Estimated Cost	Sub	
			000,01\$		Soil stabilizer	
			000,01\$		Replace sagging ceilings	
			\$76,000	96 apartments (LA115-2)	Fixture replacement	
			\$50,000	96 apartments (LA115-2)	Bathtubs/lavatories/	
			\$19,200	96 apartments (LA115-2)	Hard wired smoke detectors	
			\$19,600	96 apartments (LA115-2)	Kitchen faucets	
\$10,000	3 subdivisions-West Natch.	Landscaping	\$103,067	96 apartments (LA115-2)	Ceiling/interior painting	
		AMP LA11S00020			AMP LA11500020	
\$10,000	3 subdivisions-East Natch.	Landscaping				
\$54,000	96 apartments (LA115-1)	condenser units outside				
\$54,000	96 apartments (LA115-1)	Replace Counter Tops	\$10,000		Soil stabilizer	
\$72,000	96 apartments (LA115-1)	Interior Paint/Ceiling Repair	\$10,000		Replace sagging ceilings	
\$16,000	96 apartments (LA115-1)	Smoke/CO Detectors			locate sewer cleanouts	
\$21,600	96 apartments (LA115-1)	Range Hoods	\$10,000		Replace sewer line/	
000,583	96 apartments (LA115-1)	Replace Windows/Trim	\$50,000		Wall insulation	
\$15,000	96 apartments (LA115-1)	Enamel Splash @ Stoves			Storage Buildings	
\$70,895	96 apartments (LA115-1)	Replace Kitchen Cabinets	\$65,099		Replace exterior doors	Statement
\$109,471	96 apartments (LA115-1)	Floor Tile Replacement	\$83,000		Replace windows/trim	Annual
		AMP LA11500010			AMP LA11500010	See
		Major Work Categories			Major Work Categories	
		General Description of			General Description of	
		Number/Name			Number/Name	
Estimated Cost	Quantity	Development	Estimated Cost	Quantity	Development	Year 1 FFY
	FFY 2013			FFY 2012		Statement for
	Work Statement for Year:	Work S		Work Statement for Year	Work S	Work
			ment(s)	cal Needs Work State	Part II: Supporting Pages – Physical Needs Work Statement(s)	Part II: Sup

																				Statement	Annual	See					Year 1 FFY	Work Statement for	Part II: Sup
J	C								Replace sagging ceilings	Window replacement	Roof Replacement	AMP LA11500020							Replace floor tile	Replace roof/roof jacks/ vents	Bathtub Replacement	AMP LA11500010	Major Work Categories	General Description of	Number/Name	Development			porting Pages – Physi
Subiolal of Estilliated Cost	total of Fetimated Cost								40 apts. (LA15-4)	40 apts. (LA15-4)	182 apts. (LA115-2 & -4)								80 apartments (LA115-7)	216 apts, (LA115-1, -3, 7)	96 apartments (LA115-1)					Quantity	~	Work Statement for Year FFY 2014	Part II: Supporting Pages – Physical Needs Work Statement(s)
	990 51 50			-					\$10,000	\$10,000	\$217,156								\$10,000	\$149,010	\$119,800					Estimated Cost			ment(s)
(In	C ₁₁	CONTINUED ON	Replace refrigerators	Enamel splash @ stove	Replace kitchen countertops	Replace kitchen cabinets	Extra parking	Peep Holes	Security Lights	Vent Hoods	Paint Interior/Ceiling Repair	Wall insulation	Replace bath cabinets	Replace ceramic tile surr.	Replace shoe moldling	Patch gypsum board-ceiling	Install addit. site lighting	Repair & paint fence	Additional parking	Patch sidewalks	Trim Trees/Landscaping	AMP LA11500010	Major Work Categories	General Description of	Number/Name	Development			
(Including attached list)	Subtotal of Ferimated Cost	ATTACHED LIST (page 7)	40 apartments (LA115-3)	40 apartments (LA115-3)	40 apartments (LA115-3)	40 apartments (LAI15-3)	40 apartments (LA115-3)	40 apartments (LAI 15-3)	40 apartments (LA115-3)	40 apartments (LA115-3)	40 apartments (LA115-3)	96 apartments (LA115-1)	96 apartments (LA115-1)	96 apartments (LA115-1)	96 apartments (LA115-1)	96 apartments (LA115-1)	96 apartments (LA115-1)	96 apartments (LA115-1)	96 apartments (LA115-1)	96 apartments (LA115-1)	96 apartments (LA115-1)					Quantity		Work Statement for Year: FFY 2015	
1 J.	330 2152	***	\$220	\$220	\$220	\$220	\$10,000	\$2,000	\$50,000	\$5,000	\$40,000	\$220	\$220	\$220	\$220	\$19,559	\$4,500	\$3,750	\$44,800	\$6,750	\$77,562					Estimated Cost			

							Total	A/E Fees	Adve	Mana	Administration	Statement	Annual Upgra	See Manage		Year 1 FFY	Statement for	Work	Part III: Supporting	
Subtotal of Estimated Cost							Total Administration:	iees	Advertisements	Management fee to Central Office Cost Center	tration		Upgrade computer system	Management Improvements:	General Description of Major Work Categories	Development Number/Name	FFY 2012	Work Statement for Year	Part III: Supporting Pages – Management Needs Work Statement(s)	
\$			-				\$117,662	<u>\$50,000</u>	\$500	\$67,162			\$13,000			Estimated Cost			statement(s)	
Subtotal of Estimated Cost							Total Administration:	A/E Fees	Advertisements	Management fee to Central Office Cost Center	Administration		Upgrade computer system	Management Improvements:	General Description of Major Work Categories	Development Number/Name	FFY 2013	Work Statement for Year:		
							\$117,662	\$50,000	\$500	\$67,162			\$13,000			Estimated Cost				TOD7/DC/4 CD HIVE

Part III: Supporting Pages – Management Noels Work Statement for Year: Work Statement for Year: FFY 2014 FFY 2014 Estimated Cost Development Number/Name Development Number/Name Estimated Cost Development Number/Name Estimated Cost Development Number/Name General Description of Major Work Categories Statement for Year: See Management Improvements: S13,000 Management Improvements: Management Improvements: Management Improvements: Management for Year: S13,000 Upgrade computer system Management for Year: S13,000 Management for Year: S13,000 Management Improvements: Management for Year: Management for Year: S13,000 Management for Year: S13,000 Management Improvements: Management for Year: Manage	8	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost		
morting Pages – Management Needs Work Statement(br Vear: Work Statement for Vear: Work Statement for Vear: FFY 2014 ErY 2015 ErY 2015 Development Number/Name Estimated Cost Development Number/Name Secretarian Cost Development Number/Name FFY 2015 Management Inprovements: Upgrade computer system S13,000 Management Inprovements: Improvements: Improvements: Management for Vear. S13,000 Management Inprovements: Improvements:						
mporting Pages – Management Nurk Statement for Year: Work Statement for Year: Energy Colspan="2">FPY 2014 Estimated Cost Development Number/Name General Description of Major Work Categories Estimated Cost General Description of Major Work Categories Management Improvements: Nork Categories Management Improvements: Nork Categories Management Improvements: Administration Advertisements						
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pporting Pages – Management Needs Work Statement(s) Work Statement for Year Work Statement for Year Work Statement for Year FFY 2014 FFY 2015 Development Number/Name Estimated Cost Development Number/Name General Description of Major Work Categories General Description of Major Work Categories Management Improvements: Upgrade computer system \$13,000 Upgrade computer system 4 Administration Administration Administration Administration		Management fee to Central Office Cost Center	\$67,162	Management fee to Central Office Cost Center		
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pporting Pages – Management Needs Work Statement(s) Work Statement for Year Work Statement for Year: Work Statement for Year Work Statement for Year: FFY 2014 FFY 2015 Development Number/Name Development Number/Name General Description of Major Work Categories Management Improvements: Management Improvements: Upgrade computer system \$13,000 Upgrade computer system 4						
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pporting Pages – Management Needs Work Statement (s) Work Statement for Year: Work Statement for Year FFY 2014 FFY 2014 FFY 2015 Development Number/Name Estimated Cost General Description of Major Work Categories General Description of Major Work Categories Management Improvements: Management Improvements:		Upgrade computer system	\$13,000	Upgrade computer system	Annual	
pporting Pages – Management Needs Work Statement(s) Work Statement for Year Work Statement for Year: Work Statement for Year FFY 2014 FFY 2015 Development Number/Name Estimated Cost Development Number/Name General Description of Major Work Categories General Description of Major Work Categories		Management Improvements:		Management Improvements:	See	
pporting Pages – Management Needs Work Statement(s) Work Statement for Year Work Statement for Year: FFY 2014 FFY 2014 FFY 2015 Development Number/Name Estimated Cost Development Number/Name		General Description of Major Work Categories		General Description of Major Work Categories		
pporting Pages – Management Needs Work Statement(s) Work Statement for Year FFY 2014	Estimated Cost	Development Number/Name	Estimated Cost	Development Number/Name	Year 1 FFY	
		FFY 2015		FFY 2014	Statement for	
Part III: Supporting Pages – Management Needs Work Statement(s)		Work Statement for Year:		Work Statement for Year	Work	
			Statement(s)	oporting Pages – Management Needs Worl	Part III: Sup	

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art II. Sunnarting Pages - Physical Needs Wark !	Capital
norting	Capital Fund Program—Five-Year Action Plan
Pages -	rogram—
Physical	-Five-Ye
Neede	ar Actio
Work !	n Plan

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

	Subtotal of Estimated Cost	Sul		Subtotal of Estimated Cost	Sub	
\$119,026	40 apartments (LA115-4)	Paint Interior				
\$4,789	136 apartment (LA115-2 & 4)	Smoke Detectors			-	
\$35,442	182 apartments	Termite Treatment				
\$220	LA115-2 (96 apartments)	Install enamel stove splash				
\$220	LA115-2 (96 apartments)	Replace kitchen counter tops	\$5,211	136 apartment (LA115-1 & 4)	Smoke Detectors	
\$220	LA115-2 (96 apartments)	Replace bath, counter tops	\$44,398	216 apartments	Termite Treatment	
\$220	LA115-2 (96 apartments)	Bathroom heater/vents	\$220	40 apartments (LA115-3)	Replace windows	
\$220	LA115-2 (96 apartments)	Replace light fixtures	\$220	40 apartments (LA115-3)	Smoke/CO detectors	
\$220	LA115-2 (96 apartments)	Replace ceramic tiles	\$220	40 apartments (LA115-3)	Replace bath. Counter tops	
\$220	LA115-2 (96 apartments)	Replace bathtubs	\$220	40 apartments (LA115-3)	Replace bath. cabinets	
\$220	LA115-2 (96 apartments)	Replace shoe molding	\$220	40 apartments (LA115-3)	Replace light fixtures	
\$220	LA115-2 (96 apartments)	Replace vinyl siding	\$220	40 apartments (LA115-3)	Replace shoe molding	
\$220	LA115-2 (96 apartments)	Patch gypsum board-ceiling	\$220	40 apartments (LA115-3)	Replace vinyl tile	
\$220	LA115-2 (96 apartments)	Install aluminum fascia	\$220	40 apartments (LA115-3)	Replace int. doors/frames	
\$220	LA115-2 (96 apartments)	Power clean bldg, Exterior	\$220	40 apartments (LA115-3)	Recaulk window interiors	
\$220	LAI15-2 (96 apartments)	Install additional lighting	\$220	40 apartments (LA115-3)	Replace win. Trim & stools	
\$220	LA115-2 (96 apartments)	Repair & paint fence	\$220	40 apartments (LA115-3)	Retexture & paint ceiling	
\$220	LA115-2 (96 apartments)	Plant low light ground cover	\$220	40 apartments (LA115-3)	Patch ceiling gypsum board	
\$15,039	LA115-2 (96 apartments)	Trim Trees	\$220	40 apartments (LA115-3)	Remove attic fans/grill	
\$20,000	LA115-2 (96 apartments)	Grind and/or replace sidewalk	\$220	40 apartments (LA115-3)	Replace range hoods	
		AMP LA11500020			AMP LA11500010	
		Major Work Categories			Major Work Categories	
		General Description of			General Description of	
		Number/Name			Number/Name	
Estimated Cost	Quantity	Development	Estimated Cost	Quantity	Development	
			********			Year I FFY
	FFY 2015			FFY 2015		Statement for
	Work Statement for Year:			Work Statement for Year		Work
			nent(s)	cal Needs Work State	Part II: Supporting Pages – Physical Needs Work Statement(s)	Part II: Sup
Expires 4/30/2001						

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, 9th 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 ϕ r require additional information, please advise.

Sincerely yours,

Monica H. M.Kenney

Monica H. McKinney

MM/s

Enclosures



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.

	woodunzanou Liolaer Mailmai:
Housing Authority of the City of Natchitoches, LA	LA48P11550107

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

1. 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

2. That all modernization work in connection with the Modernization Grant has been completed;

3. That the entire Actual Modernization Cost or liabilities therefor incurred by the HA have been fully paid;

4. 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

5. 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:

Monica H. McKinney Х

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	
	fame IUID FORDA (40/00)

form HUD-53001 (10/96) ref Handbooks 7485.1 & 3

form HUD-50075.1 (4/2008)

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	bummary				
PHA Nan City of Na	PHA Name: Housing Authority of the City of Natchitoches, LA Capital Fund Program Grant No: LA48P11550107 Replacement Housing Factor Grant No: Date of CFFP:	1550107			FFY of Grant: 2007 FFY of Grant Approval:
Type of Grant	nnual Statement		Revised Annual Statement (revision no: final	sion no: final)	
Line	Summary by Development Account	Total R.	stimated Cost		A stual Cast I
2,000		Original 101a1 II	10iai Estimated Cost	Ohlimstad 1018	Fernidad
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	\$ 203.85		\$ 203.85	\$ 203.85
ω	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$ 11,638.42		\$ 11,638.42	\$ 11,638.42
сл	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 48,915.00		\$ 48,915.00	\$ 48,915.00
8	1440 Site Acquisition				- F
6	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 *				

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

⁴ RHF funds shall be included here.

Capital Fund Financing Program	Capital Fund Program, Capital Fund Program Replacement Housing Factor and	Annual Statement/Performance and Evaluation Report
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U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

Date	Director	Signature of Public Housing Director	Date 10/05/2010 Sign	Signature of Executive Director Manie A. M. M. Kinney	Sig
				5 Amount of line 20 Related to Energy Conservation Measures	25
				4 Arnount of line 20 Related to Security - Hard Costs	24
		\$ 11,084.42	\$ 11,084.42	3 Amount of line 20 Related to Security - Soft Costs	23
				2 Amount of line 20 Related to Section 504 Activities	22
				Amount of line 20 Related to LBP Activities	21
\$635,549.00	\$635,549.00		\$635,549.00	Arnount of Annual Grant:: (sum of lines 2 - 19)	20
				1502 Contingency (may not exceed 8% of line 20)	61
				3ba 9000 Collateralization or Debt Service paid Via System of Direct Payment	18ba
				3a 1501 Collateralization or Debt Service paid by the PHA	18a
Expended	Obligated	Revised ²	Original		
Total Actual Cost ¹	1	Total Estimated Cost	Total	ine Summary by Development Account	Line
oit	I Final Performance and Evaluation Report	🛛 Final Perfi		Performance and Evaluation Report for Period Ending:	
final)	🗌 Revised Annual Statement (revision no: final	🗌 Revised Aı	ergencles	Original Annual Statement Reserve for Disasters/Emergencies	
				Type of Grant]IJ
	FFY of Grant.2007 FFY of Grant Approval:	FFY o		PHA. Name: Grant Type and Number Honsing Authority Grant Type and Number of the City of Capital Fund Program Grant No: LA48P11550107 Natchitoches, LA Replacement Housing Factor Grant No: Date of CFFP: Date of CFFP:	PH, of th Nat
				Part I: Summary	Par
Expires 4/30/2011					

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

⁴ RHF funds shall be included here.

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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	PHA Name: H.A. of the City of Natchitoches, LA	Grant Ty Capital Fu CFFP (Ye Replacem	Grant Type and Number Capital Fund Program Grant No: LA48P11550107 CFFP (Yes/ No): Replacement Housing Factor Grant No:	rant No:	107	Federal	Federal FFY of Grant: 2007	07	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	d Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
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		I	\$ 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	
LA115500010	Resident Relocation	•	1495.1		\$ 4,545.00		\$ 4,545.00	\$ 4,545.00	
	TOTALS:				\$635,549.00		\$635,549.00	\$635,549.00	
THE REPORT OF A DESCRIPTION OF A DESCRIP									
								:	

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

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

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

													Development Number Name/PHA-Wide Activities	Part II: Supporting Pages PHA Name: Housing Authority of the City of Natchitoches, LA
													General Description of Major Work Categories	
,											 			Grant Typ Dapital Fun DFFP (Yes Replacemen
										7			Development Account No.	Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-07 CFFP (Yes/ No): Replacement Housing Factor Grant No:
													Quantity	: LA48 P115 50 ant No:
												Original	Total Estimated Cost	11-07
					-		-	-				Revised ¹	ated Cost	Federal
												Funds Obligated ²	Total Actual Cost	Federal FFY of Grant: 2007
										-		Funds Expended ²	Cost	007
		¥											Status of Work	

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

Page4

PHA-Wide LA115000020 LA115000010 PHA Name: Housing Authority of the City of Natchitoches, LA Part III: Implementation Schedule for Capital Fund Financing Program Capital Fund Financing Program Development Number Name/PHA-Wide Activities Obligation End Date 12/30/2010 12/30/2010 12/30/2010 Original (Quarter Ending Date) All Fund Obligated 11/30/2009 11/30/2009 11/30/2009 Actual Obligation End Date 12/30/2010 12/30/2010 12/30/2010 Original Expenditure End Date (Quarter Ending Date) All Funds Expended 03/31/2010 03/31/2010 03/31/2010 Actual Expenditure End Date Federal FFY of Grant: 2007 Reasons for Revised Target Dates ' Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

U.S. Department of Housing and Urban Development

Annual Statement/Performance and Evaluation Report

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

Page5

form HUD-50075.1 (4/2008)

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	edule for Capital Fund	Financing Program			
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
		······································	******		
1999-1-2			-		

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

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

YEAR ENDED MARCH 31, 2010

	•	2006 Capital Fund		2007 Capital Fund
Funds approved	\$	678,433	\$	635,549
Funds expended		678,433	•	635,549
Excess of funds approved	\$	0	\$	0
Funds advanced	\$	678,433	\$	635,549
Funds expended		678,433	•	. 635,549
Excess of funds advanced	\$	* 0	\$	0

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.

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

Capital Fund Fir Part I: Summary	Capital Fund Financing Program Part I: Summary							OME	OMB No. 2577-0226 Expires 4/30/2011
PHA Nam City of Na	PHA Name: Housing Authority of the City of Natcihtoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48P115501-08 Replacement Housing Factor Grant No: Date of CFFP: 2008	5501-08					FFY of Grant: 2008 FFY of Grant Appr	FFY of Grant: 2008 FFY of Grant Approval: 2008
Type of Grant ☐ Original A ⊠ Performan	nnual Statement ce and Evaluation Report	Type of Grant Original Annual Statement Performance and Evaluation Report for Period Ending: 12/20/2010			Revised Annual Statement (revision no:) ☐ Final Performance and Evaluation Report	vision no:) valuation Repor	÷ .		
Line	Summary by Development Account	Account		Total Esti	Total Estimated Cost			Fotal Actual Cost ¹	
-	Total and OPD Paula		Original		Revised ²	Obligated		Expended	d
-	101al non-CFP Funds								
2	1406 Operations (may not exceed 20% of line 21) 3	seed 20% of line 21) ³							
ω	1408 Management Improvements	ents	\$	500.00		s	500.00	s	500.00
4	1410 Administration (may not exceed 10% of line 21)	t exceed 10% of line 21)	\$	69,174.00		Ś	69,174.00		69.174.00
C1	1411 Audit								
9	1415 Liquidated Damages								
7	1430 Fees and Costs		Ş	66,874.91		•	66.874.91	5	65.032.91
œ	1440 Site Acquisition								
6	1450 Site Improvement								
10	1460 Dwelling Structures		\$	440,337.94		\$	440,337.94	++ 69	440,337.94
	1465.1 Dwelling Equipment—Nonexpendable	-Nonexpendable	S	35,808.00		\$	35,808.00	<u>ی</u>	35,808.00
12	14 /0 Non-dwelling Structures		\$	29,493.35		\$	29,493.35	\$	29,493.35
11	1475 Non-dwelling Equipment	It	\$	48,804.80		÷	48,804.80	\$	48,804.80
14	1485 Demolition								
15	1492 Moving to Work Demonstration	Istration							
16	1495.1 Relocation Costs		÷	750.00		\$	750.00	\$	750.00
17	1499 Development Activities 4								

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

⁴ RHF funds shall be included here.

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

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

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Signature	C				3	_	¥۲ ۱۹	5		18ba	18a		Line	X Perfor	Origin	Type of Graat	Natchitoches, LA	rriA Name: Housing Authority of the City of	Fart I: Summary	B I. C
Signature of Executive Director Da	Amount of time 20 Related to Energy Conservation Measures	Autopuit of time 20 Kelated to Security - Hard Costs	Amount of the 20 Related to Security - Soft Costs		Amount of the 20 Deleted to Section 504 Amount of the	Amount of films 20 Belsted to T BD Asticities	Amount of Amount Grants, Grants Grants and Amount of Amo		Payment	9000 Collateralization or Debt Service paid Via System of Direct	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	X Performance and Evaluation Report for Period Ending: 12/20/2010	Original Annual Statement	uat	LA	tority		
Date 12/20/2010						\$691,743.00					· · · · · · · · · · · · · · · · · · ·	Original	1		encies					
Signature						43.00	-						Total Estimated Cost							
Signature of Public Housing Director												Revised ²	d Cost		🗌 Revis			E		
ing Director						\$691,743.00						Obligated	Tota	Final Performance and Evaluation Report	Revised Annual Statement (revision no:			FFY of Grant:2008 FFY of Grant Approval: 2008		
Date						\$689,901.00						Expended	Total Actual Cost ¹	port)					Expires 4/30/2011

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

Part II: Supporting Pages PHA Name: Housing Authority of the City of Natchitoches, LA	thority of the City of	Grant Type and Number Capital Fund Program Grant No: LA48P115501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:	o: LA48P11550 frant No:	1-08	Federal	Federal FFY of Grant: 2008	80	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	1 Cost	Total Actual Cost	Jost	Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	General Operations	1408	-	\$ 500.00		\$ 500.00	\$ 500.00	
PHA Wide	Management Fee	1410		\$ 69,174.00		\$ 69,174.00	69	
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 LAI 15000020	Asbestos Testing	1430		\$ 12,150.00			\$ 12,150.00	
AMP LAI 15000010	Conversion of efficiency apts.	1460		\$319,086.78			\$319,086.78	
AVD LAIIS00020	Renovations to 3-bedroom apartments:	1460		\$121,251.16			\$121,251.16	
AMP LATISONNOLO	Concert bakind work have	1465		\$ 35,808.00		1	\$ 35,808.00	
AMP LA115000010	Replace 2 maintenance trucks	1475		\$ 48 804 80		\$ 29,493.35	\$ 29,493.35	
AMP LA115000010	Relocation expense	1495		\$ 750.00			\$ 750.00	

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

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

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

Part II: Supporting Pages PHA Name: Housing Aut		rant Typ	e and Number			Bodern R	TV of Grant: 20	80	
PHA Name: Housing Aut	PHA Name: Housing Authority of the City of Natchitoches, City of Authority of Authori	rant Typ apital Fun FFP (Yes/ eplacemer	Grant Type and Number Capital Fund Program Grant No: LA48P115501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:	: LA48P115501 ant No:	80	Federal F	Federal FFY of Grant: 2008	8	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	ted Cost	Total Actual Cost	lost	Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
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77844									
					-				
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

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	edule for Capital Fund ity of the City of Natc	Financing Program hitoches, LA			Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-Wide	09/30/2009	06/01/2010	09/30/2011	12/31/2010	
	-				

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

form HUD-50075.1 (4/2008)

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

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			BLANK	LEFT	INTENTIONALLY
	Actual Expenditure End Date	Original Expenditure End Date	Actual Obligation End Date	Original Obligation End Date	
Reasons for Revised Target Dates ¹	All Funds Expended (Quarter Ending Date)	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Func (Quarter I	Development Number Name/PHA-Wide Activities
Federal FFY of Grant: 2008			hitoches, LA	ity of the City of Natc	PHA Name: Housing Authority of the City of Natchitoches, LA
			Financing Program	edule for Capital Fund	Part III: Implementation Schedule for 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	U	or and	port lacement Housing Fact	ice and Evaluation Re al Fund Program Rep gram	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Annual Capital 1 Capital 1	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	ictor and		U.S. Department of Hor Office	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Exnires 4/30/2011
Part I: S	Part I: Summary				
PHA Nan City of Na	PHA Name: Housing Authority of the Grant Type and Number City of Natchitoches, LA Capital Fund Program Grant No: LA48 P11550109 Replacement Housing Factor Grant No: Date of CFFP: 09/14/09	220109			FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant	Type of Grant Conception Content Conte	-	Revised Annual Statement (revision no:	0u no:	
Line	Summary by Development Account	Tota	Total Estimated Cost		Tatal Actual Cost ¹
		Original	Revised ²	Ohligated	Frendad
1	Total non-CFP Funds				
7	1406 Operations (may not exceed 20% of line 21) ³				
ñ	1408 Management Improvements	\$ 5,000		\$ 0.00	
4	1410 Administration (may not exceed 10% of line 21)			64.07	\$ 442.75
5	1411 Audit				
9	1415 Liquidated Damages	YV			
7	1430 Fees and Costs	\$ 37,000		\$ 41.950.00	\$ 23,874,43
8	1440 Site Acquisition				
6	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	1010070444444		5 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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
17	1499 Development Activities ⁴				

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

Annual Capital Capital	Statement Fund Prog Fund Fina	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	· and			U.S. Department of Hc Offic	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011
Part I: 5	Part I: Summary						
PHA Name: Housing Authorit of the City of Natchitoches, LA	PHA Name: Housing Authority of the City of Natchitoches, LA	Grunt Type and Number Capital Fund Program Grant No: LA48 P115 501-09 Replacement Housing Factor Grant No: Date of CFFP: 09/14/09			LEFY LFFY	FFY of Grant:2009 FFY of Grant Approval:	
Type of Grant	Grant						
	Original Annual Statement	Statement Reserve for Disasters/Emergencies	ics		🗌 Revised /	🗌 Revised Annual Statement (revision no:	~
X Perfi	ormance and	igmed Performance and Evaluation Report for Period Ending: 12/20/2010				Final Performance and Evaluation Report	hort
Line	Summary	Summary by Development Account		Total Estimated Cost		Total	Fotal Actual Cost ¹
			Original	I	Revised ²	Obligated	Expended
18a	1501 Coll	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Coll	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Con	1502 Contingency (may not exceed 8% of line 20)					
20	Amount o	Amount of Amnual Grant:: (sum of lines 2 - 19)	\$ 640,753			\$ 559.660.00	\$ 191 101 57
21	Amount o	Amount of line 20 Related to LBP Activities					
22	Amount o	Amount of line 20 Related to Section 504 Activities				e entre manifestation and a second	
23	Amount o	Amount of line 20 Related to Security - Soft Costs					
24	Amount o	Amount of line 20 Related to Security - Hard Costs					
25	Amount o	Amount of line 20 Related to Energy Conservation Measures			-		
Signatu.	The of Executive I	Director. Mr. Kiney Da	te 12/20/2010	Signature of	Signature of Public Housing Director	Director	Date

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

form HUD-50075.1 (4/2008)

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

PHA Name: H.A. of the C								
	City of Natchitoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:	o: LA48 P115 5(rant No:	01-09	Federal	Federal FFY of Grant: 2009	600	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Exnended ²	
PHA-Wide	Computer Upgrades	1408		\$ 5,000		\$ 0.00		
PHA-Wide	Management Fees to Central Office	1410		\$ 63.575		\$ 63.632.25	8 000	
PHA Wide	Advertisements	1410				\$ 442.75	4	
PHA-Wide	Accountant	1430		\$ 4,800				
PHA Wide	A/E	1430		\$ 25,000		33	16.67	
LA11500020	Asbestos Testing/Abatement Oversite	1430		\$ 7,200		\$ 7,200.00		
LA115000020	Asbestos Abatement/Removal	1460	*****	\$ 26,460		\$ 26,460.00	\$ 26.460.00	
LA11500020	Complete renovations to remaining	1460		\$426,300		\$426.300.00	+	
	3-bedroom apartments in Highland Park							
PHA-Wide	Cluster Mail Boxes	1460		\$ 10,000		\$ 0.00		
PHA-Wide	Stripe Parking Lots	1460						
PHA-Wide	Replace All Outside Faucets	1460						
LA11500020	Replace Maintenance Truck(s)	1475	2	1.4.1		\$ 0.00		
LA115000020	Relocation Expense	1495		\$ 5,000		\$ 875.00	\$ 875.00	-
	TOTAL:			\$640,753	***	\$559,660.00	\$191.101.57	

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

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PHA Name: Housing Authority of the City of Natchlicohes, LA PHA Name: Housing Authority of the City of Carefielt Name Phan Power Grant No: Carefielt Name Phan Power from Phan Power Grant No: Development Number Redent PPY of Grant: 2009 Development Number General Description of Major Work Development Number Partivication Partivication Stat Name/PHA-Wide General Description of Major Work Development Number Quantity Total Estimated Cost Total Actual Cost Stat Name/PHA-Wide General Description of Major Work Development Number Quantity Total Estimated Cost Total Actual Cost Stat Name/PHA-Wide General Description of Major Work Account No. Development Quantity Total Actual Cost Stat Name/PHA-Wide General Description of Major Work Account No. Pervelopment Quantity Total Estimated Cost Total Actual Cost Stat Name/PHA-Wide INTENTIONALLY LEFT BLANK Account No. Pervelopment Quantity Pervelopment Pervelop	Part II: Supporting Pages	S							-	
Obt General Description of Major Work Development Quantity Total Estimated Cost Total Actual Cost Image: Categories Account No. Account No. Original Revised ¹ Funds Image: Image: Categories Image: Categories Image: Categories Image: Categories Image: Categories Image: Categories Image: Image: Categories Image: Categories Image: Categories Image: Categories Image: Categories Image: Categories Image: Image: Categories Image: Image: Categories Image: Categories Image: Categories Image: Categories Image: Categories Image: Categories Image: Image: Categories Image: Image: Categories Image: Image: Categories Image: Categories Image: Categories Image: Categories Image: Categories Image: Categorie	PHA Name: Housing Au Natchitoches, LA		Grant Typ Capital Fur CFFP (Yes Replaceme	e and Number ud Program Grant No / No): Yes nt Housing Factor Gr	: LA48 P115 50 ant No:	60-1	Federal	FFY of Grant: 2(00	
IntENTIONALLY LEFT BLANK Original Revised ¹ Funds INTENTIONALLY LEFT BLANK INTENTIONALLY LEFT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK INTENTIONALLY LETT BLANK	Development Number Name/PHA-Wide Activities	General Description of Major V Categories	Work	Development Account No.	Quantity	Total Estim	ated Cost	Total Actual (Cost	Status of Work
						Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
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 1 To be completed for the Performance and Evaluation Report or a Revised Annual Statement. 2 To be completed for the Performance and Evaluation Report.

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nent sing 11								-	<u> </u>								
U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011		Federal FFY of Grant: 2009	Reasons for Revised Target Dates ¹				THE AND										
C			All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date													
or and			All Fund (Quarter F	Original Expenditure End Date	12/30/2012	12/30/2012	12/30/2012										
eport blacement Housing Fact	l Financing Program	iitoches, L.A	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date							-				-		
ice and Evaluation Ru al Fund Program Rej gram	edule for Capital Fund		All Fun (Quarter	Original Obligation End Date	12/30/2010	12/30/2010	12/30/2010			-				-			
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 DHA Name: Housing Authority of the City of Nartshiroches 1 A	Minny i Smonort Minny i H i i	Development Number Name/PHA-Wide Activities		PHA-Wide	LA115000010	LA115000020						**************************************				

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

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

	Federal FFY of Grant:	Reasons for Revised Target Dates ¹											
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date										
		All Fund (Quarter E	Original Expenditure End Date	- Antonio (1999)									
I Financing Program		All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date	BLANK	 								
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Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name:	Development Number Name/PHA-Wide Activities		INTENTIONALLY				 - PREVIAL AND A PREVIA	SHOUL	11 PAUL 2010	н 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

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

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Annual ! Capital I Capital 1	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	ictor and		U.S. Department of Hc Offic	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226
Part I: 5 PHA Nan City of Na	Part I: Summary Grant Type and Number PHA Name: Housing Authority of the Grant Type and Number City of Natchitoches, LA Capital Fund Program Grant No: LA48 S115 Replacement Housing Factor Grant No: Date of CFFP: 0718200	5 501-09			FFY of Grant: 2009 FFY of Grant: Approval:
Type of Grant	nual Statement		□ Revised Annual Statement (revision no:	ion no:	
Line	Summary by Development Account	Total 1	Total Estimated Cost		Tutal Actual Cast 1
		Original	Revised ²	Obligated	Exnended
-	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
£	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$ 81,845.41		\$ 81.845.41	\$ 81 845 41
S	1411 Audit	**************************************			
9	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 53,677.71		\$ 53.677.71	\$ 53.677.71
8	1440 Site Acquisition				
6	1450 Site Improvement				
10	1460 Dwelling Structures	\$739,621.88		\$739.621.88	\$739.621.88
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Non-dwelling Structures				1.1771-1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
- 13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	\$ 465.00		\$ 465.00	\$ 465.00
17	1499 Development Activities ⁴				

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

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Annual Capital I Capital I Capital I	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	or and			J.S. Department of Hot Office	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011	
Part I: Summary	ummary						_
PHA Name: Housing Authority of the City of Natchitoches, LA	e: uthority Grant Type and Number of Replacement Housing Factor Grant No: tes, LA Date of CFFP: 03/18/2009			FFY of Grant:2009 FFY of Grant Approval:	t:2009 t Approval:		1
Type of Grant	rant						-
Origi	Original Annual Statement	ncies		Revised Annual S	Revised Annual Statement (revision no: 02	~	
Perfo	Performance and Evaluation Report for Period Ending:			Final Performanc	S Final Performance and Evaluation Report		
Line	Summary by Development Account		Total Estimated Cost	-	Total	Total Actual Cost ¹	·
		Original	11 Revised ²	d 2	Obligated	Expended	_
18a	1501 Collateralization or Debt Service paid by the PHA						
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$875,610.00	0	\$8	\$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						- <u> </u> -
23	Amount of line 20 Related to Security - Soft Costs						-1
24	Amount of line 20 Related to Security - Hard Costs		· · · · · · · · · · · · · · · · · · ·				
25	Amount of line 20 Related to Energy Conservation Measures						
Signatur \mathcal{A}	Signature of Executive Directory C Dr MONUCA H. More	Date 12/20//2010	Signature of Public Housing Director	fousing Direct	lor -	Date	
-							-

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

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rart II: Supporting rages	2							
PHA Name: H.A. of the	City of Natchitoches, LA	Grant Type and Number Capital Fund Program Grant No: LA48 CFFP (Yes/No): Replacement Housing Factor Grant No:	and Number Program Grant No: LA48 S115 501-09 Vo): Housing Factor Grant No:	1-09	Federal	Federal FFY of Grant: 2009	600	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	k Development Account No.	Quantity	Total Estimated Cost	d Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Exnended ²	
PHA-Wide	Advertising	1410		\$ 101.00		\$ 101.00		
	Contract Administration Fee to COCC	C 1410		\$ 81,744.41		\$ 81.744.41	\$ 81	
PHA-Wide	Grant Accounting Fees	1430		\$ 686.00		\$ 686.00		
PHA Wide	A/E Fees	1430		\$ 52,991.71		12	2	
LA115000010	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)	s 1460		\$265,358.29		\$265,358.29	\$265,358.29	
LA115000020	Relocation Costs	1495		\$ 465.00		\$ 465.00	\$ 465.00	
	TOTALS:			\$875 610 00	-	\$275 610 00	0015 210 00	
			11 TTANYAA + -	00.010,010		00'010'0'00	\$01000	
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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:		Grant Tyl Capital Fur CFFP (Yes Replaceme	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	ant No:		Federal	Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Vork	Development Account No.	Quantity	Total Estimated Cost	lated Cost	Total Actual Cost	Cost	Status of Work
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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

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

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

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

Print I: Summary Construction for sign attraction Cly of Nuclei Under Cly of Nuclei Under Experiments Print in Print Program Final Program Claim Nuclei Repeating Final Program Claim Nuclei Repeating Final Program Claim Nuclei Repeating Final Program Claim Nuclei Repeating Final Nuclei Repeating Repeating Repeating Final Nuclei Repeating Final Nuclei Repeating Final Nuclei Repeating Final Nuclei Repeating Final Nuclei Repeating Repeati	Annual Capital Capital	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	ctor and		U.S. Department of H. Offic	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011	
VArmer: Housing Anthority of the PortNatioticobes, LA Capital Find Pergun Grant Not: LA88 P115 501-10 Regulati Find Pergun Grant Not: LA88 P115 501-10 Regulati Find Form Carat Not: LA88 P115 501-10 Regulati Find Form Carat Not: LA88 P115 501-10 Regulati Find Pergun Grant Not: LA88 P115 501-10 Regulati Find Pergun Carat Not Regulati Find Pergen Land Sequence Carat Set Not Regulation	Part I: 5	bumnary					
pro of Grant Proof Grant Configmation Report for Plansters/Encreated Encience Provide Report For Plansters/Encreated Encience Provide Report For Plansters/Encreated For Manual Statement (revision no. Provide Report For Plansters/Encreated Total non-CPP Funds Total non-CPP Funds <th c<="" td=""><td>PHA Nan City of Ni</td><td></td><td>61-10</td><td></td><td></td><td>FFY of Grant: 2010 FFY of Grant Approval:</td></th>	<td>PHA Nan City of Ni</td> <td></td> <td>61-10</td> <td></td> <td></td> <td>FFY of Grant: 2010 FFY of Grant Approval:</td>	PHA Nan City of Ni		61-10			FFY of Grant: 2010 FFY of Grant Approval:
netSummary by Development AcountTotal Estimated CastTotal Actual1 and non-CFP FundsOnlientedOnlientedTotal1 and non-CFP FundsIndenEvelocityOnliented1 and Orberations (may not exceed 20% of line 21)\$ 4,000\$ 0.001 and Management Inprovements\$ 4,000\$ 0.001 and Management Inprovements\$ 5,7,660\$ 0.001 and Management Inprovements\$ 4,000\$ 0.001 and Management\$ 5,000\$ 0.001 and Management\$ 2,000\$ 0.001 and Management\$ 0.00\$ 0.001 and Management\$ 0.00\$ 0.00 </td <td>Type of G</td> <td>irant nal Amund Statement 📃 Reserve for Disasters/Emergencies mance and Evaluation Report for Period Ending: 12/20/2010</td> <td></td> <td>Revised Annual Statement (revisit Terior Brain</td> <td>DA NO:) sation Renart</td> <td></td>	Type of G	irant nal Amund Statement 📃 Reserve for Disasters/Emergencies mance and Evaluation Report for Period Ending: 12/20/2010		Revised Annual Statement (revisit Terior Brain	DA NO:) sation Renart		
Induction <td>Line</td> <td>Summary by Development Account</td> <td>Total 1</td> <td>Estimated Cost</td> <td></td> <td>al Actual Cost¹</td>	Line	Summary by Development Account	Total 1	Estimated Cost		al Actual Cost ¹	
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1410 Administration (may not exceed 10% of line 21) \$ 67,660 \$ \$ 1411 Audit 1411 Audit \$	Ē	1408 Management Improvements					
1411 Audit 1411 Audit 1415 Liquidated Danages 140 Site and Costs 140 Site Acquisition 140 Site Improvement 1460 Elemprovement 1460 Dwelling Structures 1460 Dwelling Structures 1460 Dwelling Structures 1470 Non-dwelling Structures 1490 Dwelling to Work Demonstration 1490 Dwelling to Mork Demonstration <td>4</td> <td>1410 Administration (may not exceed 10% of line 21)</td> <td>(•</td> <td></td> <td></td> <td></td>	4	1410 Administration (may not exceed 10% of line 21)	(•				
1415 Liquidated Damages 1436 Tess and Costs $3 + 2\sqrt{400}$ 1430 Tess and Costs 1430 Site Arquisition $3 + 2\sqrt{400}$ $3 + 2\sqrt{400}$ $8 + 2\sqrt{400}$ 1430 Site Arquisition 1430 Site Improvement $8 + 2\sqrt{400}$ $8 + 2\sqrt{400}$ 1460 Dwelling Structures $3 + 2\sqrt{5}$ Site R $8 + 2\sqrt{5}$ Site R $8 + 2\sqrt{5}$ Site R 1460 Dwelling Structures $8 + 2\sqrt{5}$ Site R $8 + 2\sqrt{5}$ Site R $8 + 2\sqrt{5}$ Site R 1455 Non-dwelling Structures $8 + 2\sqrt{5}$ Site R $8 + 2\sqrt{5}$ Site R $8 + 2\sqrt{5}$ Site R 1475 Non-dwelling Equipment $8 + 2\sqrt{5}$ Site R $8 + 2\sqrt{5}$ Site R $8 + 2\sqrt{5}$ Site R 1492 Devolution $8 + 2\sqrt{5}$ Site R 1492 Devolution Costs $8 + 2\sqrt{5}$ Site R 1492 Devolution Activites ⁴ $8 + 2\sqrt{5}$ Site R	5	1411 Audit					
1430 Fees and Costs $$ 42,400$ $$ 8 42,400$ $$ $ 8 42,400$ $$ $ $ $ $ $ $ $ $ $ $ $ $ $ $ $ $ $ $$	6	1415 Liquidated Damages					
140 Site Acquisition 140 Site Improvement $8535,568$ 86 1450 Site Improvement $8535,568$ 86 86 1460 Dwelling Structures $8535,568$ 86 86 1460 Indext Mediang Structures $8535,568$ 86 86 1470 Non-dwelling Structures $8535,568$ $8535,568$ 86 1470 Non-dwelling Equipment—Nonexpendable $8535,568$ $8535,568$ 86 1470 Non-dwelling Equipment $8535,568$ $8535,568$ 86 1470 Non-dwelling Equipment $825,000$ $825,000$ 86 1475 Non-dwelling Equipment $825,000$ $825,000$ 8 1492 Mevoing to Work Demonstration $82,2000$ $8,20,000$ 8 1499 Development Activities ⁴ $8,20,000$ $8,20,000$ 8	7	1430 Pees and Costs	\$ 42,400				
1450 Site Improvement 1450 Site Improvement $$535,568$ $$1660$ 1460 Dwelling Structures $$535,568$ $$535,568$ $$$14651 Dwelling Equipment–Nonexpendable$$255,000$$$$1470 Non-dwelling Structures$$255,000$$$$1475 Non-dwelling Equipment$$255,000$$$$1475 Non-dwelling Equipment$$255,000$$$$1475 Non-dwelling Equipment$$255,000$$$$1475 Non-dwelling Equipment$$25,000$$$$1492 Devolution$$25,000$$$$$$1492 Noving to Work Demonstration$$$$$$$$$$1495 I Relocation Costs$$$$$$$$$$$$$1499 Development Activities4$$$$$$$$$$$1499 Development Activities4$$$$$$$$$$1499 Development Activities4$$$$$$$$$$1499 Development Activities4$$$$$$$$$$$$1499 Development Activities4$$$$$$$$$$$$$$$$1499 Development Activities4$$$$$$$$$$$$$$$$$$1499 Development Activities4$$$$$$$$$$$$$$$$$$$$$$$$$$$$$$$	∞	1440 Site Acquisition					
1460 Dwelling Structures $$535,568$ $$$$$1465.1 Dwelling Equipment—Nonexpendable$$	6	1450 Site Improvement					
1465.1 Dwelling Equipment—Nonexpendable 1465.1 Dwelling Equipment—Nonexpendable 1470 Non-dwelling Equipment 1470 Non-dwelling Structures $$ 25,000$ $$ 25,000$ 1475 Non-dwelling Equipment $$ 25,000$ $$ 3 2,000$ 1492 Moving to Work Demonstration $$ 2,000$ $$ 3 2,000$ 1495.1 Relocation Costs $$ 2,000$ $$ 3 2,000$ 1499 Development Activities ⁴ $$ 3 2,000$ $$ 3 2,000$	10	1460 Dwelling Structures	\$535,568				
1470 Non-dwelling Structures 1470 Non-dwelling Structures 1475 Non-dwelling Equipment $$ 25,000$ $$ 8$ 1475 Non-dwelling Equipment $$ 25,000$ $$ 8$ 1485 Demolition $$ 1492$ Moving to Work Demonstration $$ 1492$ Moving to Work Demonstration $$ 1495.1$ Relocation Costs 1495.1 Relocation Costs $$ 2,000$ $$ 2,000$ $$ 8$ 1499 Development Activities ⁴ $$ 1499$ Development Activities ⁴ $$ 1499$ Development Activities ⁴	Π	1465.1 Dwelling Equipment-Nonexpendable			1		
1475 Non-dwelling Equipment \$ 25,000 \$ \$ 1485 Demolition \$ \$ 25,000 \$ \$ \$ 1492 Moving to Work Demonstration \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	12	1470 Non-dwelling Structures					
1485 Demolition 1485 Demolition 1492 Moving to Work Demonstration 5 1495.1 Relocation Costs \$ 1499 Development Activities ⁴ \$	13	1475 Non-dwelling Equipment	\$ 25,000				
1492. Moving to Work Demonstration 1492. Moving to Work Demonstration 1495.1 Relocation Costs \$ 2,000 1499 Development Activities ⁴	14	1485 Demolition					
1495.1 Relocation Costs \$ 2,000 \$ 1499 Development Activities ⁴ \$	15	1492 Moving to Work Demonstration				And a second	
	16	1495.1 Relocation Costs					
	17	1499 Development Activities *					

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

Annual Capital I Capital I Capital I	Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	actor and			U.S. Department of Hou Office	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011	
Part I: S	Part I: Summary						
PHA Name: Housing Authority of the City of Natchitoches, LA	ne: Grant Type and Number Authority Capital Fund Program Grant No: LA48 P115 501-10 y of Replacement Housing Factor Grant No: hes, LA Date of CFFP: 09/14/09			FFY of G FITY of G	FFY of Grant:2010 FFY of Grant Approval:		
Type of Grant	irant			_			
Origi	Original Annual Statement	rgencies		Revised Annu	Revised Annual Statement (revision no:	(
X Perfo	$\overline{ imestyle X}$ Performance and Evaluation Report for Period Ending: 12/20/2010			🗌 Final Pe	☐ Final Performance and Evaluation Report		
Line	Summary by Development Account		Total Estimated Cost		Total	Total Actual Cost ¹	
		Original		Revised ²	Obligated	Expended	
18a	1501 Collaterulization 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 Arnual 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			\$		
24	Amount of line 20 Related to Security - Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						
Signatur	Signature of Executive Director	Date 12/20/2010	Signature of Public Housing Director	Housing Div	rector	Date	
	-			70000		1111111	

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

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

PHA Name: H.A. of the City of Natchitoches, LADevelopment NumberGeneral DescriptioName/PHA-WideGeneral DescriptioName/PHA-WideCategoActivitiesCategoPHA-WideCommunity Police OfPHA WideManagement Fees to OfPHA WideAdvertisementsPHA WideAdvertisementsPHA WideAdvertisementsPHA WideAdvertisementsPHA WideAdvertisementsPHA WideAdvertisementsPHA WideAccountantPHA WideA/ELA11500020Relocation Expense								
Number ide Ad Accol AKel		Grant Type and Number Capital Fund Program Grant No: LA48 P115 501-10 CFFP (Yes/No): Replacement Housing Factor Grant No:	: LA48 P115 50 rant No:	1-10	Federal	Federal FFY of Grant: 2010	10	
	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	ted Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Exnended ²	
	Community Police Officer	1408		\$ 4,000		0		
	Management Fees to Central Office	1410		\$ 67,160		0		
	ents	1410				0 \$		
		1430		\$ 2,400		0		
		1430		۲		0		
	Expense	1495		\$ 2,000		\$		
LA115000020 Interior Doors & Trim	ors & Trim	1460		\$ 48,000		0		
LA115000020 Replace Panel/Trim	tel/Trim	1460		\$ 48,600		0 \$.	
	ic Fans	1460		\$ 30,000		0		
LA11500020 Wall insullation	tion	1460		\$ 20,000		0		
LA115000020 Replace Kite	Replace Kitchen Cabinets & Sinks	1460		\$ 24,000		0 \$	-	
		1460		\$ 15,000		\$ 0		
	Light Fixtures-Outside Porch	1460		\$ 11,000		\$		
LA11500020 Dryer/Vents/Plugs	//Plugs	1460		ŧ .		0		
	Bathroom Medicine Cabinets/All Fixtures	1460		\$ 25,000		0		
LA115000020 Replace Floor Tiles	or Tiles	1460		\$ 57,605		\$		
LA115000020 Replace Wir	Replace Window Screens	1460				\$ 0		
LA115000020 Commodes/	Commodes/Heater-Vent Lights	1460		\$ 25,000		0		

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



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

Natchitoches, LA CEFP (Yes/No): Yes
Replacement Housing Factor Grant No:
Development Account No.
1460
1460
146
1460
147:

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

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	ice and Evaluation Re al Fund Program Rep gram	sport lacement Housing Fact	or and	Ð	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	edule for Capital Fund	l Financing Program		· · · · · · · · · · · · · · · · · · ·	
PHA Name: Housing Authority of the City of Natchitoches, LA	ity of the City of Nat	chitoches, LA			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter F	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-Wide	07/14/2012		07/14/2014		
LA115000010	07/14/2012		07/14/2014		
LA11500020	07/14/2012		07/14/2014		
99444 - 444					
		11 million - 1440 - 1			
				:	

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

form HUD-50075.1 (4/2008)

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	ee and Evaluation Re I Fund Program Repl ram	port acement Housing Facto	or and		U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011
Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financing Program		· · · · · · · · · · · · · · · · · · ·	
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Funds (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
- - - - - - - - - - - - - - - - - - -					

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

form HUD-50075.1 (4/2008)

Resident Advisory Board Comments -

- I. 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

PH	A 5-Year and		ment of Housing and	Urban	OMB No. 2577-0226
	nual Plan	Developmen			Expires 4/30/2011
A 111	PHA Information	Office of Pu	blic and Indian Housi	ng	
1.0	PHA Name: Housing Authority of the PHA Type: Small D PHA Fiscal Year Beginning: (MM/YY	High Performing YY): <u>04/01/2011</u>	x Standard	HCV (Sect	ion 8)
2.0	Inventory (based on ACC units at time Number of PH units: 398	e of FY beginning i	in 1.0 above) Number of HCV units: 4	149	
3.0	Submission Type X 5-Year and Annual Plan	🗌 Annual I	Plan Only	5-Year Plan Only	
4.0	PHA Consortia N/A	PHA Cons	ortia: (Check box if submitting	a joint Plan and com	
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in th Consortia	he No. of Units in Each Program PH HCV
	PHA 1:				
5.0	5-Year Plan. Complete items 5.1 and 5	5.2 only at 5-Year l	Plan update.		
5.1	Mission. State the PHA's Mission for jurisdiction for the next five years: Th Development: To promote adeq from discrimination.	ne mission of the uate and afforda	H.A.C.N. is the same as thable housing, economic opp	at of the Departm oortunity and a su	nent of Housing and Urban iitable living environment free
5.2	Goals and Objectives. Identify the Ph low-income, and extremely low-incom and objectives described in the previou The goals and objectives of the F	e families for the n is 5-Year Plan.	ext five years. Include a report of	on the progress the P	HA has made in meeting the goals
6.0	 PHA Plan Update (a) Identify all PHA Plan elen (b) Identify the specific location complete list of PHA Plan e In the administrative office of 71457; additionally, a copy in 	on(s) where the lements, see Se f the Housing A	public may obtain copies action 6.0 of the instruction uthority, located at 536 Cu	of the 5-Year an ns. lbertson Lane, Na	d Annual PHA Plan. For a
7.0	Hope VI, Mixed Finance Moo Housing, Homeownership Pr applicable. We finished conver bedroom apartments. Our Secti for the purchase of a home.	ograms, and P ting 36 very sma	roject-based Vouchers. Ill efficiency apartments int	Include statements re to (12) 1-bedroom	elated to these programs as 1 apartments and (12) 2-
8.0	 Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. Capital Fund Program Appual Statement/Performance and Evaluation Perpert. As part of the PHA 5 Year and 				
8.1	Annual Plan, annually complete Evaluation Report, form HUD-	e and submit t h -50075.1, for ea	e <i>Capital Fund Program</i> and open CFP	Annual Statemen grant and CFFP	nt/Performance and financing.
8.2	Capital Fund Program Five- and submit the <i>Capital Fund P</i> a rolling basis, e.g., drop currer in the Five-Year Action Plan.	<i>rogram Five-Ye</i> nt year, and add	ear Action Plan, form HU	D-50075.2, and s	subsequent annual updates (on
8.3	Capital Fund Financing Prog Check if the PHA proposes (RHF) to repay debt incurred to	to use any port finance capita	l improvements. N/A		
9.0	Housing Needs. Based on info and other generally available da low-income, and extremely low families, families with disabilit the public housing and Section address issues of affordability,	ata, make a reas v-income famili ies, and househ 8 tenant-based	sonable effort to identify t tes who reside in the jurisc olds of various races and assistance waiting lists. T	he housing needs diction served by ethnic groups, ar 'he identification	s of the low-income, very the PHA, including elderly nd other families who are on of housing needs must

9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.
	Our strategies for addressing the housing needs have not changed from those of our FYE 3/31/11 approved plan.
	Additional Information. Describe the following, as well as any additional information HUD has requested.
	 (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5- Year Plan.
	Statement of Progress in Meeting the 5-Year Plan Mission & Goals 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.
10.0	GOALS Increase the availability of decent, safe, and affordable housing – 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.
	Improve community quality of life and economic vitality 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 & Girls Club to benefit our resident youth in another of our subdivisions – LA115-3.
	Promote self-sufficiency and asset development of families and individuals 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.
	Ensure equal opportunity in housing for all Americans 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.
	(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
	<u>Significant amendment</u> – 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. <u>Substantial deviation/modification</u> – if any alteration did not ensure that the above goals could not be met
11.0	Required Submission for HUD Field Office Review . In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
	(a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
	 (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only) (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only) (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
	 (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements NONE
	 (b) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHA's receiving CFP grants only) (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)