

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

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief to certain PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated there under at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined 5-Year Plan for Fiscal Years 2011 - 2015 Streamlined Annual Plan for Fiscal Year 2011

MS REGIONAL HOUSING AUTHORITY NO. VII

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue. Full reporting for each component listed in the streamlined Annual Plan submitted with the 5-year plan is required.

Streamlined Annual PHA Plan
PHA Fiscal Year 2010
[24 CFR Part 903.12(b)]

Table of Contents

Provide the following table of contents for the streamlined Annual Plan submitted with the Five-Year Plan, including all streamlined plan components, and additional requirements, together with the list of supporting documents available for public inspection.

A. ANNUAL STREAMLINED PHA PLAN COMPONENTS

Attachment "A" MS057A01

Civil Rights Certifications (included with PHA Certifications of Compliance) and Significant Amendment

Attachment "B" MS057B01

Violence Against Women Act

Attachment "C" MS057C01

Resident Advisory Board and Comments

Attachment "D" MS057D01

Capital Fund Program Original Annual Statement FY2011

Attachment "E" MS057E01

Capital Fund Program Original Annual Statement FY2010

Attachment "F" MS057F01

P&E Statements for CFP FY 2009

Attachment "G" MS057G01

P&E Statements for CFP FY 2008

Attachment "H" MS057H01

P&E Statements for CFP FY 2007

Attachment "I" MS057I01

CFP Five Year Action Plan

MS057V01

PHA 5 Year and Annual Plan

1.0	PHA Information PHA Name: <u>Mississippi Regional Housing Authority No. VII</u> PHA Code: <u>MS26P057</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input checked="" type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/2011</u>					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>120</u> Number of HCV units: <u>1558</u>					
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
	PHA 1:					
	PHA 2:					
	PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
5.1	<p>Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:</p> <p>To provide, within the limits imposed by applicable laws, HUD rules, and regulations, adequate housing and related services for qualified citizens. Since Mississippi Regional Housing Authority No. VII (MRHA7) jurisdiction covers the ten county area of southwest Mississippi, it is the goal of MRHA7 to vary its approach to meeting the housing needs of the low to very low income families, based on the particular needs of that county and regional population.</p>					

5.2

Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

- PHA Goal: Expand the supply of assisted housing
Objectives:
 - Apply for additional rental vouchers:
 - Reduce public housing vacancies:
 - Leverage private or other public funds to create additional housing opportunities: Work with city and county government to produce affordable housing
 - Acquire or build units or developments
 - Other (list below)

- PHA Goal: Improve the quality of assisted housing
Objectives:
 - Improve public housing management: (PHAS score 84.0) and (MASS score 26.0) Increase PHAS score by 1% per plan year
 - Improve or maintain voucher management: (SEMAP score 100)
 - Increase customer satisfaction: By maintaining high standards.
 - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
 - Renovate or modernize public housing units: Continue plans to raise standards of public housing units to market level units in each development
 - Demolish or dispose of obsolete public housing:
 - Provide replacement public housing:
 - Provide replacement vouchers:
 - Other: (list below)

- PHA Goal: Increase assisted housing choices
Objectives:
 - Provide voucher mobility counseling: as part of briefing
 - Conduct outreach efforts to potential voucher landlords
 - Increase voucher payment standards, when necessary
 - Implement voucher homeownership program: if feasible
 - Implement public housing or other homeownership programs:
 - Implement public housing site-based waiting lists: (Community based)
 - Convert public housing to vouchers:
 - Other: (list below)

HUD Strategic Goal: Improve community quality of life and economic vitality

- PHA Goal: Provide an improved living environment
Objectives:
 - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
 - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
 - Implement public housing security improvements:
 - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
 - Other: (list below)

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

- PHA Goal: Promote self-sufficiency and asset development of assisted households
Objectives:
 - Increase the number and percentage of employed persons in assisted families: Refer clients to local area training programs
 - Provide or attract supportive services to improve assistance recipients' employability: Promote our FSS program.
 - Provide or attract supportive services to increase independence for the elderly or families with disabilities. Continue current programs
 - Other: (list below)

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:
 - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability: Manager training and owner briefings.
 - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
 - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
 - Other: (list below)

Other PHA Goals and Objectives: (list below)

PHA Goal: Provide necessary professional development for PHA staff.

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <p>1.</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. MS Regional Housing Authority No. VII 130 Commerce Street McComb, MS 39648</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>Mississippi Regional Housing Authority No. VII plans to apply to HUD to Demolish (3) buildings of Public Housing in its Monticello, Mississippi Development. The units have server foundation issues. There are two 4-bedroom single family units which we are finding it increasingly difficult to find families on our waiting list for units of this size. The other building is a 2-bedroom duplex which also has server structural problems. It is MRHA7's hope that we can find funding to rebuild these units in a small size and fully utilize the land they presently occupy.</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>Attached</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>Attached</p>
8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>

9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>MRHA7 continues to look for creative ways to increase its housing stock as our area received an influx of families with housing needs after the disaster of Hurricanes Katrina and Rita. MRHA7 has been impacted by a insufficient housing stock for use by families of its Housing Choice Voucher program. MRHA7 plans to conduct a study which will identify the extent of the housing needs and develop a plan to meet this need in the coming 5 years.</p>		
		Public Housing	Housing Choice Voucher
	Waiting list total	60	3034
	Extremely low income <=30% AMI	35	2759
	Very low income (>30% but <=50% AMI)	19	137
	Low income (>50% but <80% AMI)	6	138
	Families with children	25	2692
	Elderly families	2	96
	Families with Disabilities	8	246
	Race/ethnicity White	10	495
	Race/ethnicity Black	50	2496
	Race/ethnicity Hispanic	0	10
	Characteristics by Bedroom Size		
	1BR	37	915
	2 BR	14	1158
	3 BR	7	805
	4 BR	2	129
5 BR	0	28	
5+ BR	0	0	

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <ul style="list-style-type: none"> • MRHA7 will continue to apply for additional Section 8 Housing Choice Vouchers if funding becomes available by Congress through HUD. • MRHA7 will continue to conduct landlord outreach measures to increase the availability of affordable, safe and decent housing. • MRHA7 will look for methods to fund the development of more affordable housing stock in MRHA7's jurisdictional area of coverage. 	
-----	---	--

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.

The PHA has been very successful in its goal of increasing the number of vouchers available to assist families with housing needs in its jurisdictional 10 county area of coverage. MRHA7 was awarded 304 additional vouchers to assist disaster families meet their housing needs. MRHA7 designated these vouchers for families displaced from Hurricanes Katrina and Rita who were still in Temporary Housing Units (THU's). MRHA7 gave these families a preference as required by HUD for a one year period making any unused vouchers available to families already on MRHA7 2 year long waiting list. These additional vouchers have made a big impact in helping citizens in MRHA7's 10 county area of coverage.

The PHA continues to improve its public housing management and improve advisory score to a higher performer level.

The PHA goal to renovate or modernize our public housing units with Capital Fund program funds is being achieved and is on schedule. In 2009 MRHA7 completed a total renovation of its Osyka Apartment complex. Using ARRA funds, the Osyka development was equipped with energy saving heat pumps, front panels of units were insulated, new water heaters were installed, the kitchens received total renovation, and the bathrooms were fitted with water saving low flow shower heads and reduced water toilets. Also all units were converted to total electric energy and gas stoves were replaced with electric stoves. Asbestos floor tile was also removed and replaced. We continue to improve the units as needed to make them more marketable.

The PHA continues to partner with community agencies to provide domestic violence victims with safe housing.

The PHA continues its goal to ensure equal access to assisted housing.

The PHA continues to inspect all housing units on a regular basis.

The PHA continues to counseled with residents on homeownership and pledged our support if they choose to pursue homeownership. Additionally, we will be providing homeownership opportunities through our Section 8 program. We have partnered with one of the local universities to provide residents with homeownership training courses.

10.0

The PHA continues to ensure Equal Opportunity in housing for all applicants regardless of their needs.

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

Criteria for Substantial Deviations and Significant Amendments

(1) Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

The Housing Authority does recognize the need for public notification for items contained within the 5-Year and Annual Plans. This authority shall make proper notification for any Substantial Deviations from these plans as required under law. The exception to this definition is if the change has been made to meet regulatory compliance with The U.S. Department of Housing and Urban Development requirements. Substantial deviation or Significant amendment or Modification shall mean those of the mission statement, goals and objective, capital fund program or changes in significant expenditures. And changes in statutory requirement for administration of Public Housing requiring public comment and/or public hearing.

B. Significant Amendment or Modification to the Annual Plan

A Significant Amendment or Modification to the Annual Plan shall be construed to mean the following:

- Changes to rent or admissions policies or organization of the waiting list;
- Additions of non-emergency work items not currently included in the Annual Statement or the 5-Year Action Plan or changes in use of replacement reserve funds under the Capitol Fund;
- Any changes with regard to demolition or disposition, designation, homeownership programs or conversion activities.

These issues, if required, shall be raised with proper public notification. The Housing Authority acknowledges that an exception will be made by HUD to comply with the above changes that are adopted to reflect changes in HUD regulatory requirements: such changes will not be considered significant amendments by HUD.

11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
------	---

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

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

ATTACHMENT “A”

Civil Rights Certifications

[24 CFR Part 903.12 (b), 903.7 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations. It is the policy of the Housing Authority to comply with all Federal, State, and local nondiscrimination laws and with rules and regulations governing Fair Housing and Equal Opportunity in housing and employment. The Housing Authority will comply with all laws relating to Civil Rights, including: Title VI and VIII of the Civil Rights Act, Executive Order 11063, Section 504, Age Discrimination Act and American With Disabilities Act.

To further our commitment to fully comply with applicable Civil Rights laws, the Housing Authority will provide Federal/State/Local information to public housing residents regarding “discrimination” and any recourse available to them during resident orientation session, resident meetings and reexaminations.

Criteria for Substantial Deviations and Significant Amendments

(1) Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

The Housing Authority does recognize the need for public notification for items contained within the 5-Year and Annual Plans. This authority shall make proper notification for any Substantial Deviations from these plans as required under law. The exception to this definition is if the change has been made to meet regulatory compliance with The U.S. Department of Housing and Urban Development requirements. Substantial deviation or Significant amendment or Modification shall mean those of the mission statement, goals and objective, capital fund program or changes in significant expenditures. And changes in statutory requirement for administration of Public Housing requiring public comment and/or public hearing.

B. Significant Amendment or Modification to the Annual Plan

A Significant Amendment or Modification to the Annual Plan shall be construed to mean the following:

- Changes to rent or admissions policies or organization of the waiting list;

- Additions of non-emergency work items not currently included in the Annual Statement or the 5-Year Action Plan or changes in use of replacement reserve funds under the Capitol Fund;
- Any changes with regard to demolition or disposition, designation, homeownership programs or conversion activities.

These issues, if required, shall be raised with proper public notification. The Housing Authority acknowledges that an exception will be made by HUD to comply with the above changes that are adopted to reflect changes in HUD regulatory requirements: such changes will not be considered significant amendments by HUD.

ATTACHMENT “B”

MS REGION VII HOUSING AUTHORITY POLICY ON VIOLATION AGAINST WOMEN (VAWA) AND JUSTICE DEPARTMENT REAUTHORIZATION ACT OF 2005

The VAWA prohibits the MS Regional Housing Authority No. VII (MRHA) to evict or remove assistance from certain persons (including members of the victim’s immediate family) living in the MRHA developments if the asserted grounds for such action is an instance of domestic violence, dating violence, sexual assault, or stalking, as described in Section 3 of the U.S. Housing Act of 1937, and amended by the Violence Against Women Reauthorization Act (VAWA) of 2005.

The MRHA will accept certification from alleged victims in verifying this claim by a MRHA resident.

The VAWA provides “criminal activity directly relating to domestic violence, dating violence, or stalking, engaged in by a member of a tenant’s household or any guest or other person under the tenant’s control, shall not be cause for termination of the tenancy or occupancy rights, if the tenant or immediate family member of the tenant’s family is the victim or threatened victim of that abuse.” VAWA further provides that incidents of actual or threatened domestic violence, dating violence, or stalking may not be construed either as serious or repeated violations of the lease by the victim of such violence or as good cause for terminating the tenancy or occupancy rights of the victim of such violence.

VAWA does not limit the MRHA authority to terminate the tenancy of any tenant if the MRHA can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property.

When a tenant family is facing lease termination because of the actions of a tenant, household member, guest, or other person under the tenant’s control and a tenant or immediate family member of the tenant’s family claims that she or he is the victim of such actions and that the actions are related to domestic violence, dating violence, or stalking, the MRHA will require the individual to submit documentation affirming that claim.

The documentation must include two elements:

A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking

One of the following:

A police or court record documenting the actual or threatened abuse

A statement signed by an employee, agent, or volunteer of a victim service provider; an attorney; a medical professional; or another knowledgeable professional from whom the victim has sought assistance in addressing the actual or threatened abuse. The professional must attest under penalty of perjury that the incidents in question are bona fide incidents of abuse, and the victim must sign or attest to the statement.

The required certification and supporting documentation must be submitted to the MRHA within 14 business days after the individual claiming victim status receives a request for such certification. The MRHA, owner or manager will be aware that the delivery of the certification form to the tenant in response to an incident via mail may place the victim at risk, e.g., the abuser may monitor the mail. The MRHA may require that the tenant come into the office to pick up the certification form and will work with tenants to make delivery arrangements that do not place the tenant at risk. This 14-day deadline may be extended at the MRHA discretion. If the individual does not provide the required certification and supporting documentation within 14 business days, or the approved extension period, the MRHA may proceed with assistance termination.

The MRHA also reserves the right to waive these victim verification requirements and accept only a self-certification from the victim if the MRHA deems the victim's life to be in imminent danger.

In extreme circumstances when the MRHA can demonstrate an actual and imminent threat to other participants or those employed at or providing service to the property if the participant's (including the victim's) tenancy is not terminated, the MRHA will bypass the standard process and proceed with the immediate termination of the family's assistance. The MRHA will request that a victim of the domestic violence described in this policy to provide evidence or certify to the MRHA that the incident or incidents of abuse are bona fide. All information provided to the MRHA regarding domestic violence, dating violence, or stalking, including the fact that an individual is a victim of such violence or stalking, must be retained in confidence and may neither be entered into any shared data base nor provided to any related entity, except to the extent that the disclosure (a) is requested or consented to by the individual in writing, (b) is required for use in an eviction proceeding, or (c) is otherwise required by applicable law. The MRHA five-year and Annual Plan contains information regarding any goals, activities, objectives, policies, or programs of the MHA that are intended to support assist victims of domestic violence described above.

Required Attachment _C_: Mississippi Regional Housing Authority VII –
Resident Advisory Board

Public Housing RAB

Fayette RAB

Robbie Bailey - President
Ethel Lott - Vice President

Roxie RAB

Tonya Shell - President
Monica Porter - Vice President

Monticello RAB

Alisa Oaggins - President
Felicia Evans - Vice President

Osyka RAB

Tonny Pounds - President
James Brown - Vice President

Gloster RAB

Amanda Thompson - President
Precious Cox - Vice President

Section 8 RABS

Adams Co.

Shameka Seals
23 Jason Ct.
Natchez, MS 39120

Amite Co.

Shenita Selman
4456 Van Norman Road
Gloster, MS 39638

Franklin Co.

Pamela Doss
716 Hamburg Road NW
Roxie, MS 39661

Jefferson Co.

Kenisha Ellis
214 Southwest Lane # B-4
Fayette, MS 39069

Jeff Davis Co.

Pamela Dixon
P.O. Box 37
Prentiss, MS 39474

Lawrence Co.

Latina Arnold
P.O. Box 1221
Monticello, MS 39654

Lincoln Co.

Nydra Kelly
156 Jada Trail
Brookhaven, MS 39601

Pike Co.

Debra Catling
1302 Nelson Ave Apt B
McComb, MS 39648

Walthall Co.

Octavia James
53 Knoxo Lot 8
Tylertown, MS 39667

Wilkinson Co.

Zanthippia Augustine
P.O.Box293
Centreville, MS 39631

(1) Resident Advisory Board Recommendations

a. ___ Yes X No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

If yes, provide the comments below:

b. In what manner did the PHA address those comments? (select all that apply)

- Considered comments, but determined that no changes to the PHA Plan were necessary.
- The PHA changed portions of the PHA Plan in response to comments

c. List changes below:

None

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		Grant Type and Number		FFY of Grant:	
PHA Name:		Capital Fund Program Grant No. MS26P057501-11		1-2011	
Mississippi Regional Housing Authority No. VII		Replacement Housing Factor Grant No:		FFY of Grant Approval:	
Date of CFFP:				1-2011	
Type of Grant		Reserve for Disasters/Emergencies		Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Final Performance and Evaluation Report	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		Total Estimated Cost		Total Actual Cost ¹	
Line	Summary by Development Account	Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	27,000.00			
3	1408 Management Improvements	5,000.00			
4	1410 Administration (may not exceed 10% of line 21)	25,000.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	25,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	36,441.00			
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition	50,000.00			
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	1,000.00			
17	1499 Development Activities ⁴				
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)	8,000.00			
20	Amount of Annual Grant: (sum of lines 2 – 19)	176,441.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

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
 Expires 4/30/2011

Part I: Summary		FFY of Grant: 1-2011	
PHA Name: Mississippi Regional Housing Authority No. VII	Grant Type and Number Capital Fund Program Grant No. MS26P057501-11 Date of CFFP: _____	FFY of Grant Approval: 1-2011	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1) <input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	Obligated
Signature of Executive Director Lucious Cameron	Signature of Public Housing Director Alice Wells	Date 09/14/2010	Date 09/14/2010

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
 Expires 4/30/2011

Part II: Supporting Pages									
PHA Name: Mississippi Regional Housing Authority No. VII		Grant Type and Number Capital Fund Program Grant No: MS26P057501-11 Replacement Housing Factor Grant No:			Federal FFY of Grant: 1-2011			Status of Work	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
HA-WIDE	OPERATIONS	1406		27,000					
HA-WIDE	MANAGEMENT IMPROVEMENT- Staff Training	1408		5,000					
	Office Equipment & Software	1408							
	Gas Equipment for Maintenance	1408							
HA-WIDE	ADMINISTRATION	1410		25,000					
	CFP Coordinator's Salary & Benefits	1410							
HA-WIDE	FEEES AND COSTS: ARCHITECT AND CONSULTANTS SERVICES	1430		25,000					
MS057-003	SITE IMPROVEMENT	1450		36,441					
	Debris Removal in Osyka Site B	1450	1						
MS057-002	Install Handrails at Roxie	1450	2						
HA-WIDE	DWELLING EQUIPMENT	1465		585					
	Garbage Cans		15						
MS057-005	Demolition - 3 Buildings at Monticello Site B	1485	3	50,000					
HA-WIDE	RELOCATION COSTS	1495		1,000					
HA-WIDE	CONTINGENCY	1502		6,415					

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
 Expires 4/30/2011**

Part II: Supporting Pages

PHA Name: Mississippi Regional Housing Authority No. VII		Grant Type and Number Capital Fund Program Grant No: MS26P057501-11 CFFP (Yes/No):			Federal FFY of Grant: 1-2011			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised¹	Funds Obligated²	Funds Expended²	

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
 Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: Mississippi Regional Housing Authority No. VII					Federal FFY of Grant: 1-2011	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
PHA - WIDE	12/31/2012		09/30/2014			
MS057-003	12/31/2012		09/30/2014			
MS057-005	12/31/2012		09/30/2014			

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.

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
Expires 4/30/2011

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

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

Summary


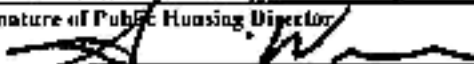
Grant Type and Number Capital Fund Program Grant No. <u>MS26PD57601 10</u> Replacement Housing Factor Grant No. Date of CFFP: _____	FFY of Grant: <u>2010</u> FFY of Grant Approval: <u>2010</u>
---	---

Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:1)
 Final Performance and Evaluation Report

Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
	Original	Revised ²	Obligated	Expended
Total non-CFF Funds				
1406 Operations (may not exceed 20% of line 21) ³	16,000.00	17,000.00		
1408 Management Improvements	7,000.00	5,000.00		
1410 Administration (may not exceed 10% of line 21)	20,400.00	14,000.00		
1411 Audit				
1412 Liquidated Damages				
1430 Fees and Costs	26,300.00	28,000.00		
1440 Site Acquisition				
1450 Site Improvement	0	5,000.00		
1460 Dwelling Structures	103,768.00	104,411.00		
1465.1 Dwelling Equipment—Nonexpendable	6,600.00	5,000.00		
1470 Non-dwelling Structures				
1475 Non-dwelling Equipment				
1485 Demolition				
1492 Moving to Work Demonstration				
1493.1 Relocation Costs				
1499 Development Activities ⁴				
1501 Capitalization or Debt Service paid by the PHA				
1503 Capitalization or Debt Service paid via System of Direct Payment				
1502 Contingency (may not exceed 8% of line 20)				
Amount of Annual Grant (sum of lines 1 – 19)	168,798.00	179,441.00		
Amount of line 20 Related to LBP Activities				
Amount of line 20 Related to Section 504 Activities				
Amount of line 20 Related to Security – Soft Costs				
Amount of line 20 Related to Security – Hard Costs				
Amount of line 20 Related to Fire or Conservation Measures				

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

Summary

Name: Mississippi Regional Housing Authority No. VII	Grant Type and Number Capital Fund Program Grant No. MS28P057501-10 Replacement Housing Factor Grant No. Date of CFFP: _____	FY of Grant: 1-2010 FY of Grant Approval: 1-2010
<input type="checkbox"/> Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision: not 1) <input type="checkbox"/> Final Performance and Evaluation Report Performance and Evaluation Report for Period Ending: 07/31/2010		
Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
Signature of Executive Director 	Original Date 07/14/2010	Revised ² Signature of Public Housing Director  Date 10-12-10

Supporting Pages

Agency: Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26P057501-10 CFFP (Yes/No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 1-2010		Status of
Development Number PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		
				Original	Revised	Funds Obligated ²	Funds Expended ²	
WIDE	OPERATIONS	1406		18,000	17,000			
WIDE	MANAGEMENT IMPROVEMENT- STAFF TRAINING & Office Equipment	1408		7,000	5,000			
WIDE	ADMINISTRATION	1410		20,400	14,000			
WIDE	FEES AND COSTS: ARCHITECT AND CONSULTANTS SERVICES	1450		28,000	28,000			
57-002	Roof Replacement & Repair	1480	12	73,796	104,441			
57-001	of Ceilings							
57-008	Install flooring where needed							
	Install Site Signage							
57-002	Repair of Retaining Wall	1450	1	0	5,000			
57-005	Repair Foundations - 3 Buildings	1480	3	30,000	0			
WIDE	REFRIGERATORS, STOVES & 5 GARBAGE CANS FOR APTS.	1485.1	15	9,600	8,000			

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

Implementation Schedule for Capital Fund Financing Program

Name: api Regional Housing Authority No. VII					Federal FFY of Grant: 1-2010
Component Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA - WIDE	12/31/2010		09/30/2011		

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

Implementation Schedule for Capital Fund Financing Program

Name:				Fiscal PFY of Grant:	
Component Number (e.g. PHA-Wide Activities)	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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

Summary

PHA Name: Capital Regional Housing Authority No. VII	Grant Type and Number Capital Fund Program Grant No: MS28P35750-4R Replacement Housing Factor Grant No:	FTY of Grant: 1-2009
	Date of CTFP: _____	FTY of Grant Approval: 1-2009

Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 1)
 Final Performance and Evaluation Report

Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
	Original	Revised ²	Obligated	Expended
Initial Non-CBP Funds:				
1405 Operations (may not exceed 30% of line 21) ⁴	25,000	29,337		
1408 Management Improvements	7,000	7,030		
1410 Acquisition (may not exceed 30% of line 21)	20,400	20,400		
1411 Acft:				
1415 Liquidated Damages				
1430 Fuel and Costs	28,000	28,000		
1440 Site Acquisition				
1450 Site Improvement				
1460 Dwelling Structures	92,450	92,450		
1465.1 Dwelling Equipment—Nonexpendable	9,600	9,600		
1470 Non-dwelling Structures				
1475 Non-dwelling Equipment				
1485 Demolition	22,500	0		
1492 Moving to Work Demonstration				
1495.1 Relocation Costs				
1499 Development Activities ⁵				
1501 Collateralization of Debt Service (inc. by the PHA)				
1500 Collateralization of Debt Service paid Via System of Direct Payment				
1502 Contingency (may not exceed 4% of line 20)				
Amount of Annual Grant: (sum of lines 2 - 19)	204,950	186,796		
Amount of line 20 Related to LBP Activities				
Amount of line 20 Related to Section 504 Activities				
Amount of line 20 Related to Security - Soft Costs				
Amount of line 20 Related to Security - Hard Costs				
Amount of line 20 Related to Energy Conservation Measures				

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

Summary		Grant Type and Number Capital Fund Program Grant No: MB26P057901-03 Replacement Housing Factor Grant No: Date of CFFP _____		FFY of Grant: 1-2008 FFY of Grant Approval: 1-2009	
Name: Capital Regional Housing Authority No. VII					
<input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)		<input type="checkbox"/> Final Performance and Evaluation Report			
Annual Statement Performance and Evaluation Report for Period Ending:					
Summary by Development Account		Total Estimated Cost		Total Actual Cost	
	Original	Revised	Obligated	Expended	
Signature of Executive Director Cameron	Date 08/31/2010	Signature of Public Housing Director Alice F. Wells		Date 08/31/2010	

Supporting Pages

Agency: Miami Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS2BP057501-09 CFFP (Year No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 1-2009		
Component Number HA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
WIDE	OPERATIONS	1406		25,000	29,337			
WIDE	MANAGEMENT IMPROVEMENT- STAFF TRAINING	1408		7,000	7,000			
WIDE	ADMINISTRATION	1410		20,400	20,400			
WIDE	FEEES AND COST: Architect Fees and Consultant Services	1490		28,000	28,000			
57-002	DWELLING STRUCTURES	1460		92,459	75,459			
57-005	Unit Renovations: Flooring, Electrical Upgrade, Patch and Repair & paint Ceilings, Mold Re-mediation							
57-001	Change Units to Tenant Furnished Gas and Water Utilities	1460	34	0	17,000			
WIDE	STOVES & REFRIGERATORS	1465.1	24	9,800	9,800			
57-005	DEMOLITION - 3 BUILDINGS	1465	3	22,500	0			
			TOTAL	204,959	186,796			

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

Supporting Pages

Project Name Capital Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26P05701-09 CFFP (Yes/No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 1-2009			Status of
Component Number IA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	

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

Implementation Schedule for Capital Fund Financing Program

Name: Opportunity Regional Housing Authority No. VII					Revised FFY of Grants: 1-2009
Component Number e/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-WIDE	06/30/2011	09/14/2011	08/30/2012	09/14/2013	

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.

Implementation Schedule for Capital Fund Financing Program

Name:					Federal FFY of Grants
Component Number (PHA-Wide Activities)	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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.

Summary

PI Regional Housing Authority No. VII	Grant Type and Number Capital Fund Program Grant No: MS26P157534-08 Replacement Housing Factor Grant No: Date of CFFP: _____	F.Y. of Grant: 1-2008 F.Y. of Grant Approval: 1-2008
---------------------------------------	--	---

Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision not 2)
 Final Performance and Evaluation Report

Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
	Original	Revised ²	Obligated	Expended
Total non-CFF Funds				
405 Operations (may not exceed 20% of line 21) ³	9,000	15,000	15,000	15,000
408 Management Improvements	36,000	14,408	14,408	10,703.08
410 Administration (may not exceed 10% of line 21)	19,000	19,000	19,000	0
411 Audit				
415 Adjusted Manager				
430 Fees and Costs	10,000	40,000	40,000	0
440 Site Acquisition				
450 Site Improvements	19,500	19,500	19,500	3,551.69
460 Dwelling Structures	25,000	45,591	45,591	0
465.J Dwelling Equipment—Nonexpendable				
470 Non-dwelling Structures	43,958	43,958	43,958	0
475 Non-dwelling Equipment	7,500	7,500	7,500	0
485 Demolition				
492 Moving to Work Demonstration				
495.1 Relocation Costs				
499 Development Activities ⁴				
501 Collateralization or Debt Service paid by the PHA				
503 Collateralization or Debt Service paid Via System of Direct Payments				
502 Contingency (may not exceed 8% of line 20)				
Amount of Annual Fund: (sum of lines 1 - 19)	204,968	204,958	204,958	26,754.77
Amount of line 20 Related to LBP Activities				
Amount of line 20 Related to System 504 Activities				
Amount of line 20 Related to Security - Soft Costs				
Amount of line 20 Related to Security - Hard Costs				
Amount of line 20 Related to Energy Conservation Measures				

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 CFF Grants for operations.
⁴ HUD funds shall be included here.

Summary

Grant Title and Number Capital Fund Program Grant No: MS26P067601-00 Date of CFFP: _____ Replacement Housing Pector Grant No: _____	FFY of Grant: 2009 FFY of Grant Approval: 2008
--	---

Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 2)
 Final Performance and Evaluation Report

Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Original	Revised	Obligated	Expended
Signature of Executive Director: Cameron	Date 08/31/2010	Signature of Public Housing Director Alico F. Wells		Date 08/31/2010

Reporting Pages

Name: Capital Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26P057501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FRY of Grant: 1-2008		
Development Number HA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
WIDE	OPERATIONS	1408		15,000	15,000	15,000	15,000	100%
WIDE	MANAGEMENT IMPROVEMENT: Staff & Commissioner Training CPA Consultant	1408		5,000	14,406	14,406	10,703.09	
07-001	SECURITY SERVICES-Fayette	1408		30,000	0	0	0	
WIDE	ADMINISTRATION	1410		19,000	19,000	19,000	0	
WIDE	FEES & COSTS: Architect & Consultant Services	1430		25,000	25,000	25,000	0	
WIDE	Land Survey or Services to Re- Establish Site Boundaries	1430	5 Sites	15,000	15,000	15,000	0	
WIDE	SITE IMPROVEMENTS Site Signage	1450	10 Sites	12,000	12,000	12,000	0	
005 & 008	Gas & Sewer Line Repair	1450	2 Site	7,500	7,500	7,500	3,551.69	47%
WIDE	DWELLING STRUCTURES Roof and Ceiling Repairs	1460	12 Units	25,000	45,594	45,594	0	
WIDE	NON-DWELLING STRUCTURES Maintenance Building Office Storage & Vehicle Locked Area	1470	1	43,959	43,959	43,959	0	
WIDE	NON-DWELLING EQUIPMENT Weed Trimmer	1475	1	7,500	7,500	7,500	7,500	100%

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

Supporting Pages

Name: Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS28P057501-08 (CFPP (Yes/No): Replacement Housing Factor Grant No:			Federal F/Y of Grant: 1-2008			
Development Number HA-Wide Utilities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of
				Original	Revised ¹	Funds Obligated ²	Funds Expended ¹	
HA-WIDE	1 - Maintenance Truck \$17,000							
	1 - Maintenance Lawn Mower \$10,837							
			TOTAL	204,959	204,959	204,959.00	38,754.77	

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.

Implementation Schedule for Capital Fund Financing Programs

Name: Capital Regional Housing Authority No. VII					Federal FY of Grant: 1-2008
Project Number (e/PHA-Wide Activities)	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-WIDE	12/31/2009		09/30/2011		

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

Implementation Schedule for Capital Fund Financing Program

Name: [Redacted] Regional Housing Authority No. VII				Federal FTY of Grant: 1-2008	
Project Number (PHA-Wide Activities)	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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.

Summary

Grant Type and Number Capital Fund Program (Grant No: MB26PD57501-07) Replacement Housing Factor Grant No: Date of CFFP: _____	FFY of Grant: 1-2007 FFY of Grant Approval: 1-2007
--	---

Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 2)
 Final Performance and Evaluation Report

Performance and Evaluation Report for Period Ending: 08/31/2010

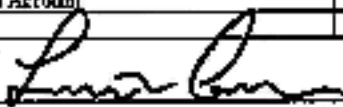
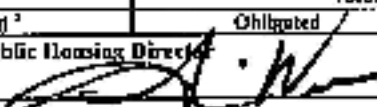
Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
	Original	Revised ²	Obligated	Expended
Total non-CFF Funds				
1406 Operations (may not exceed 20% of line 21) ³	25,000	34,444	34,444	31,111
1408 Management Improvements	5,000	5,000	5,000	2,203.98
1410 Administration (may not exceed 17% of line 21)	18,000	18,487	18,487	18,487
1411 Audit				
1415 Liquidated Damages				
1430 Fees and Costs	35,000	35,000	35,003	7,187.10
1440 Site Acquisition				
1450 Site Improvement				
1460 Dwelling Structures	81,821	82,334	82,334	5,000
1465.1 Dwelling Equipment—Nonexpendable	9,800	9,800	9,800	9,455.88
1470 Non-dwelling Structures				
1475 Non-dwelling Equipment				
1485 Demolition				
1492 Moving to Work Demonstration				
1495.1 Relocation Costs				
1499 Development Activities ⁴				
1501 Collateralization of Debt Service paid by the PHA				
1500 Collateralization of Debt Service paid Via System of Direct Payment				
1502 Contingency (may not exceed 8% of line 20)				
Amount of Annual Total (sum of lines 2 – 19)	75,421	104,065	104,665	76,774.34
Amount of line 20 Related to CFFP Activities				
Amount of line 20 Related to Section 504 Activities				
Amount of line 20 Related to Security—Silt Costs				
Amount of line 20 Related to Security—Flood Costs				
Amount of line 20 Related to Energy Conservation Measures				

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

Summary

Agency: Op Regional Housing Authority no. VII	Grant Type and Number Capital Fund Program Grant No: MS26P067601-07 Replacement Housing Factor Grant No: Date of CFFP: _____	FY of Grant: 1-2007 FY of Grant Approval: 1-2007
--	---	---

Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no. 1)
 Final Performance and Evaluation Report

Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
	Original	Revised ²	Obligated	Expended
Signature of Executive Director Cameron				
Date	08/31/2010		Date	08/31/2010
		Signature of Public Housing Director Alice F. Wells		

Supporting Pages

Agency: OPI Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26P057501-07 CFFP (Yes/No): Replacement Housing Factor Grant No:				Federal FY of Grant: 1-2007		Status of
Development Number OIA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		
				Original	Revised ¹	Funds Obligated ²	Funds Expended ³	
WIDE	OPERATIONS	1408		25,000	34,444	34,444	34,444	100%
WIDE	MANAGEMENT IMPROVEMENT Staff & Commission Training	1408		5,000	5,000	5,000	2,200.55	
WIDE	ADMINISTRATIVE Part of Two Employees Salary & Benefits	1410		19,000	18,487	18,487	18,487	100%
WIDE	FEES & COSTS: Architect and Consultant Service	1430		35,000	35,000	35,000	7,187.10	21%
57-002	DWELLING STRUCTURES	1460	10 UNITS	81,821	0	0	0	
OXIE	Comprehensive Unit Renovation: Bath/Kitchen, Flooring, Electrical Upgrade, Patch & Paint Interior Interior Doors/Hardware Window Screens							
001 & 005	Repair Burned Unit In Fayette and Sewer Line Repairs in Monticello Site A	1460	15 UNITS	0	82,334	82,334	6,000	8%
WIDE	Stoves, Refrigerators & Water Heaters	1465.1	24	0,600	9,600	9,600	9,455.66	98%
			TOTAL	176,421	184,865	184,865	76,774.34	

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

Supporting Pages

Component Number HA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	

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

Implementation Schedule for Capital Fund Financing Program

Name: Mississippi Regional Housing Authority No. VII					Federal FPY of Grant: 1-2007
Component Number e/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-WIDE	03/31/2008	09/12/2009	03/31/2011	09/12/2011	

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

Implementation Schedule for Capital Fund Financing Program

Name: Mississippi Regional Housing Authority No. VII					Federal FFY of Grant: 1-2007
Department Number and PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

Obligation and expenditure end dates can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1997, as amended.

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary						
PHA Name/Number MS Regional Housing Authority No. VII		Locality (City/County & State) McComb, Pike County, MS			<input checked="" type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 1	
A.	Development Number and Name	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015
B.	Physical Improvements Subtotal	Annual Statement	119,441	119,441	119,441	119,441
C.	Management Improvements		5,000	5,000	5,000	5,000
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		25,000	19,000	19,000	19,000
F.	Other		35,000	35,000	20,000	35,000
G.	Operations		27,000	25,000	25,000	25,000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		176,441	176,441	176,441	176,441
L.	Total Non-CFP Funds					
M.	Grand Total		176,441	176,441	176,441	176,441

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary (Continuation)

PHA Name/Number MS Regional Housing Authority No. VII		Locality: McComb, Pike County, MS			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name Number	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
		Annual Statement				

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012			Work Statement for Year: 3 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA-WIDE	OPERATIONS	25,000	HA-WIDE	OPERATIONS	25,000
	HA-WIDE	MGMT. IMPROV.	5,000	HA-WIDE	MGMT. IMPROV.	5,000
	HA-WIDE	ADMINISTRATION	19,000	HA-WIDE	ADMINISTRATION	19,000
	HA-WIDE	ARCHITECT FEES	20,000	HA-WIDE	ARCHITECT FEES	35,000
	MS-002 ROXIE	COMPREHENSIVE UNIT RENOVATION: BATH/KITCHEN, FLOORING, ELECTRICAL UPGRADE, PATCH AND PAINT INTERIOR, INTERIOR DOORS/HARDWARE, WINDOW SCREENS – 22 UNITS	107,441	MS-002 ROXIE	COMPREHENSIVE UNIT RENOVATION: BATH/KITCHEN, FLOORING, ELECTRICAL UPGRADE, PATCH AND PAINT INTERIOR, INTERIOR DOORS/HARDWARE, WINDOW SCREENS - 22 ROXIE UNITS	92,441
	Subtotal of Estimated Cost		176,441	Subtotal of Estimated Cost		176,441

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2011	Work Statement for Year 4 FFY 2014			Work Statement for Year: 5 FFY 2015		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	HA-WIDE	OPERATIONS	25,000	HA-WIDE	OPERATIONS	25,000
Annual	HA-WIDE	MGMT. IMPROV.	5,000	HA-WIDE	MGMT. IMPROV.	5,000
Statement	HA-WIDE	ADMINISTRATION	19,000	HA-WIDE	ADMINISTRATION	19,000
	HA-WIDE	ARCHITECT FEES	20,000	HA-WIDE	ARCHITECT FEES	35,000
	MS-008 GLOSTER	COMPREHENSIVE UNIT RENOVATION: BATH/KITCHEN, FLOORING, ELECTRICAL UPGRADE, PATCH AND PAINT INTERIOR, INTERIOR DOORS/HARDWARE, WINDOW SCREENS – 34 UNITS	107,441	MS-008 GLOSTER	COMPREHENSIVE UNIT RENOVATION: BATH/KITCHEN, FLOORING, ELECTRICAL UPGRADE, PATCH AND PAINT INTERIOR, INTERIOR DOORS/HARDWARE, WINDOW SCREENS – 34 UNITS	92,441
	Subtotal of Estimated Cost		176,441	Subtotal of Estimated Cost		176,441

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012		Work Statement for Year: 3 FFY 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	N/A		N/A	
Annual Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2009	Work Statement for Year <u>4</u> FFY <u>2014</u>		Work Statement for Year: <u>5</u> FFY <u>2015</u>	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	N/A		N/A	
Annual Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$