

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Graham Housing Authority</u> PHA Code: <u>NC05900001</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>1/2011</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>170</u> Number of HCV units: <u>1005</u>				
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
					PH HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.				
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The Graham Housing Authority Mission Statement is to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.				
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. .				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: Amendment to Procurement Policy to include AARG Stimulus Funds (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. PHA Plan and all policies can be viewed at the office of the Graham Housing Authority, 109 East Hill Street, Graham, NC 27253				
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable. N/A				
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.				
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <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. See Attachments				
8.2	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. See Attachments				
8.3	Capital Fund Financing Program (CFFP). <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. N/A				
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. Demographics for the City of Graham based on 2000 census were 12,833 people, 5,231 households and 3,385 families residing in the city. There were 5,685 housing units at an average density of 699.6/sq mi. The per capita income for the City was \$17,865. About 11.9% of families and 14.9% of the population were below the poverty line, including 19.8% of those under the age 18 and 14.9% of those age 65 or over. Occupied housing units was 5,241 (92.19%) Vacant housing units 2,897 (55.28%) Renter – occupied housing units 2,344 (44.72%)				

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. The Graham Housing Authority will recycle units in a timely manner and maintain open communications with local agencies that provide assistance to families in an effort to make our service available.</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan. We are currently meeting or exceeding our previous goals. Our current goals reflect a continuation of previous goals to continually improve the quality of living for our residents.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification.” Substantial deviation are defined as discretionary in the plans or policies of the HA that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners or as may be required by HUD. Significant amendments or modifications are defined as discretionary in the plans or policies of the HA that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners or as may be required by HUD.</p>
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> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

A - Low Rent Waiting List

Graham Housing Authority

Effective Date : 12/13/2010

Bedroom Size: ALL

County	Section/Tract	Local Points	D-Rate	Region	Locality	EDHS				HC Access		
1	10743-ROCKFR	CARRAN 61A II	100	10	000910/1104 A V	3300	VeryLow	2	2	0	0	R
			100	10								H

Waiting List Recap by Bedroom Size

Size	0BR	1BR	2BR	3BR	4BR	5BR	6+BR	TOTAL
Eligible	0	0	0	0	0	0	0	0
Non-Eligible	0	0	0	0	0	0	0	0
Handicapped	0	0	1	0	0	0	0	1
Single Fam Disp	0	0	0	0	0	0	0	0
Family	0	272	159	43	5	0	2	479
Hispanic	0	4	3	0	1	0	0	8
White	0	104	55	15	2	0	0	176
Black	0	178	102	28	1	0	2	310
Latino/Abaker	0	1	0	0	0	0	0	1
Asian	0	0	1	0	0	0	0	1
Pacific Islands	0	0	0	0	0	0	0	0
Mixed	0	0	2	2	0	0	0	4

B - Section 8 Waiting List
 Graham Housing Authority
 Section 8

Effective Date : 12/13/2010

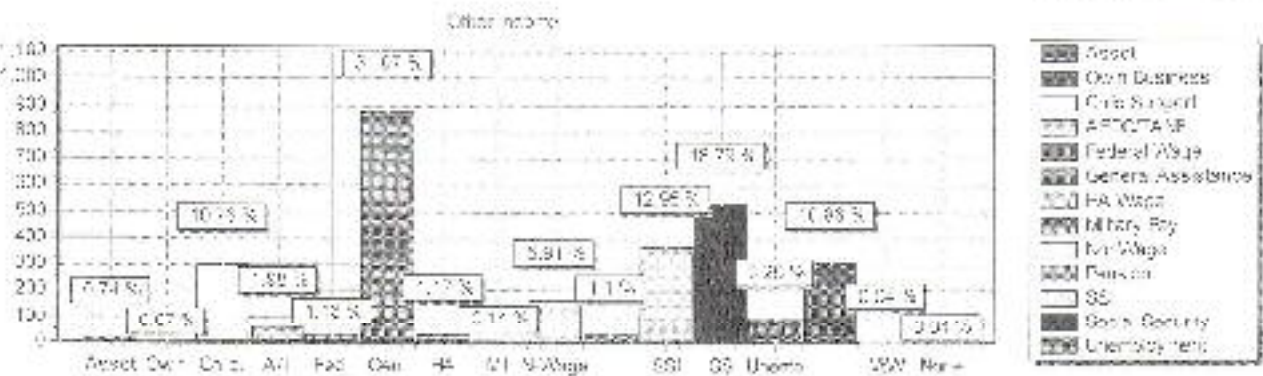
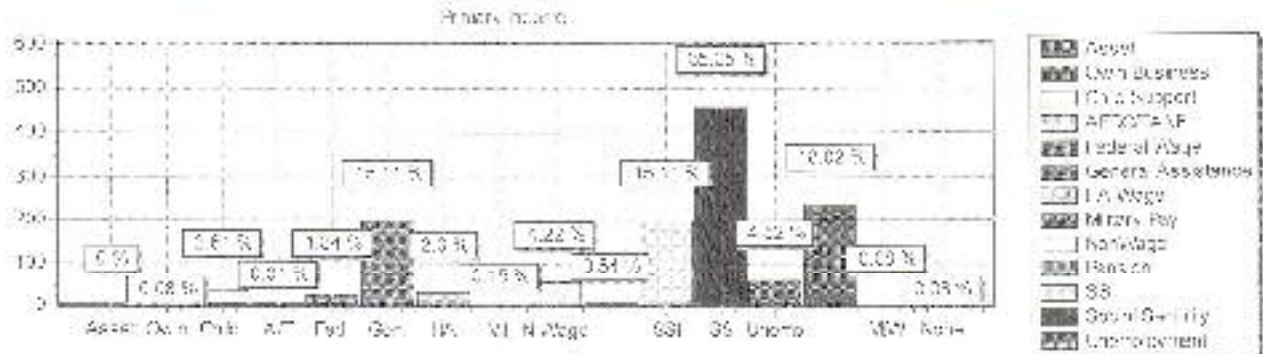
Applicant #	Applicant Name		VS	WT	Points	Waiting List		Eligibility	Gross	Income	Rosa	Ethn	Sex	Fam	Hsg				
	County	Census Tract				Date	Time									YN Date	Income	Code	Code
						Local Points	B Range	Region	Locality	ECNRS					HAC				
577	10200	MOREHEAD	SHARON	V	2	1	0		12/29/10	4:37:35	N		C	Ext Low	2	2	F	2	B
						0	NA												No
578	18600	DUGDINE	ELIZABETH	I	2	1	0		12/16/10	18:15:49	N		660	Ext Low	1	2	F	2	B
						0	NA												No
579	13000	DATTERSON	A-100	N	2	1	0		12/29/10	18:29:00	N		1700	Ext Low	2	2	F	2	F
						0	NA												No
580	13600	SIMMONS	WARREN	M	2	1	0		12/29/10	18:27:56	N		7144	Ext Low	1	2	F	2	F
						0	NA												No
581	10000	WARREN	ASHLEY	D	2	1	0		12/13/10	16:03:10	N		8900	Ext Low	2	2	F	2	B
						0	NA												No

Waiting List Recap by Voucher Size

Size	0BR	1BR	2BR	3BR	4BR	5BR	5+BR	TOTAL
Priority	0	6	2	0	0	0	0	7
Non-Elderly	0	0	0	0	0	0	0	0
Handicapped	1	8	11	4	0	0	0	24
Single-Paid Dep	0	0	0	0	0	0	0	0
Family	2	72	291	166	28	0	0	560
Hispanic	0	0	0	1	0	0	0	1
White	0	27	84	40	0	0	0	167
Black	3	58	213	110	20	0	0	414
Indian/Alaskan	0	0	1	0	0	0	0	1
Asian	0	0	2	0	0	0	0	2
Pacific Islander	0	0	0	0	0	0	0	0
Mixed	0	0	2	0	0	0	0	2



Graham Housing Authority Demographic Data Report



Graham Housing Authority
Demographic Data Report

000	White	32,479
001	Black	11,471
002	Indian/Alaskan	0
003	Asian	2,429
004	Hispanic/Latino	1
005	Other	1,155
Total Population : 51,535		
Total Employment : 1,703		
Total Unemployed : 39,832		
Number of Family Members : 656		
Number of Single : 1,041		
Average number of members per family : 2.21		
Number of Male Family Members : 234,112		
Number of Female Family Members : 214,854		
Number of Children : 27		
01	Children with primary source from family	
02	Children with primary source from other family	
03	Children with primary source from other family	
04	Children with primary source from other family	
05	Children with primary source from other family	
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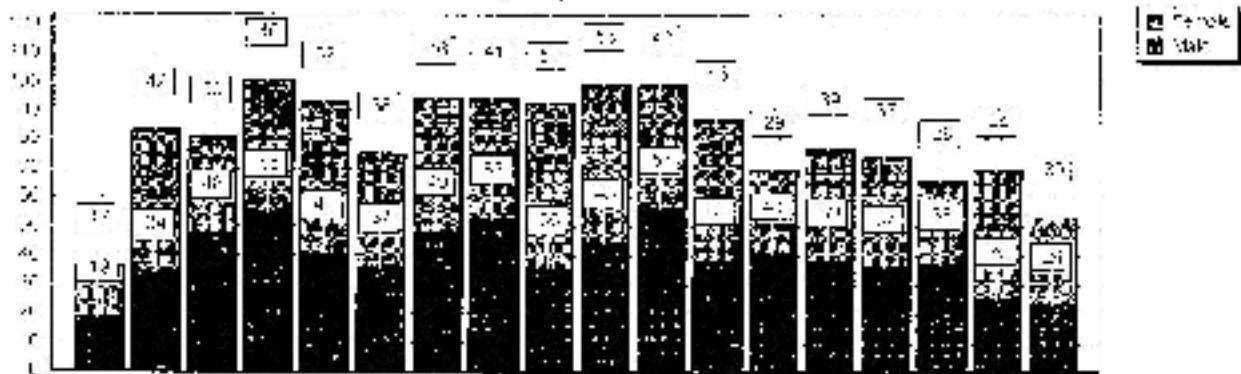


Graham Housing Authority
Demographic Data Report

Age	Total	Males	Females
Number of Children 0-5 years old	39	23	16
Number of Children 6-12 years old	47	24	23
Number of Children 13-17 years old	6	3	3
Number of Children 18-24 years old	37	14	23
Number of Children 25-34 years old	45	20	25
Number of Children 35-44 years old	50	23	27
Number of Children 45-54 years old	34	17	17
Number of Children 55-64 years old	32	16	16
Number of Children 65-74 years old	61	30	31
Number of Children 75-84 years old	33	17	16
Number of Children 85+ years old	17	8	9
Total	547	267	280

Average Age: 47

Age Group



Age Group: 0-5, 6-12, 13-17, 18-24, 25-34, 35-44, 45-54, 55-64, 65-74, 75-84, 85+

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Graham Housing Authority
Demographic Data Report

Map of the area covered by the report. The map shows the geographic boundaries of the housing authority's jurisdiction. The map is titled "Map of the area covered by the report" and includes a legend for "Housing Units" and "Total Population".

Housing Units

270 Units
124 Units

Total Population

28,000
121,000

Page 55 of 61



2008-2009

Page 56 of 61



2009-2010

Table with multiple columns and rows, containing demographic data. The table is mostly illegible due to low resolution and blurring. It appears to have columns for various demographic categories and rows for different data points or time periods.

*THE GRAHAM HOUSING AUTHORITY
(GHA)
Violence Against Women Act*

The Graham Housing authority in accordance with the Violence Against Women Act passed by Congress and signed by President Bush on January 5, 2006 has adopted in our Admission and Occupancy Policy and the Administrative plan the following:

"Terminations Protected by VAWA"

Criminal Activity directly relating to domestic violence, dating or stalking engaged in by a member of 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 an immediate member of the tenant's family is the victim or threatened victim of that domestic violence, or stalking.

The residents have been and will be advised of the policy.

The Housing Authority is in the process of working with the law enforcement agencies as well as the local agencies for women and children to provide assistance for the following areas.

- a. Law Enforcement: Investigation & Court activity*
- b. Social Services Agencies: Assistance with Counseling, Health Care, Child Care assistance and other activities that would be required.*
- c. The housing assistance payments contract has been revised to incorporate the Violence Against Women Act.*

As the program grows it will be revised and enlarged as required.

PHA Certifications of Compliance with PHA Plans and Related Regulations	U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011
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**PHA Certifications of Compliance with the PHA Plans and Related Regulations:
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the "5-Year and/or Annual PHA Plan for the PHA (Year) year beginning 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 58058 PIGIMS Module in an accurate, complete and timely manner (as specified in PHH 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.

11.0 Attachments – (a)

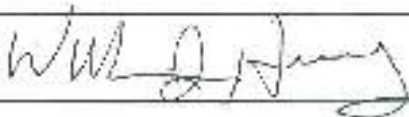
12. The PHA will comply with acquisition and consent requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and 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 1991, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 24 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 allowable 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 makes assurance as part of his certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Graham Housing Authority
PHA Name

NC059
PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 20__ - 20__
 Annual PHA Plan for Fiscal Years 20__ - 20__

The PHA certifies that all the information stated herein, as well as any information provided in the accompanying documents, is true and accurate. Waiving HUD will accept the accuracy of statements. Government.org, public information and distribution. (2011) 10/15/10 10:15:10 AM EDT

Name (Authorized Official) William Huey	Title Chairman, Board of Commissioners
Signature 	Date 10-15-10

11.0 Attachments – (a)

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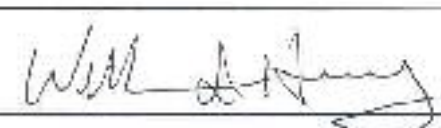
Civil Rights Certification

Annual Certification and Board Resolution

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

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

Graham Housing Authority	NC058
PHA Name	PHA Number/HA Code

The signatory certifies the information stated herein, as well as any information provided in the accompanying narrative, to be true and accurate. Warning: HUD will prosecute false claims and misstatements. Government may seek criminal and/or civil penalties (18 U.S.C. 1001, 1010; 42 U.S.C. 3529, 3570).	
Name of Authorized Official: William Huey	Title: Chairman, Board of Commissioners
Signature: 	Date: 10-15-10

**Certification for
a Drug-Free Workplace**

U.S. Department of Housing
and Urban Development

Applicant Name:

Graham Housing Authority

Program/Activity Receiving Federal Grant/Funding:

Capital Fund Program

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Check here if there are workplaces or sites 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 accompanying 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

Carlton Black

Title

Executive Director

Signature



Date

10-13-10

X

Certification of Payments to Influence Federal Transactions

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

Applicant:

Graham Housing Authority

Program/Activity Receiving Federal Grant Funding:

Capital Fund Program

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

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

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-L.L.L. 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 accompanying documents, 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. 3298, 3302)

Name of Public Law Officer

Carlton Black

Title

Executive Director

Signature



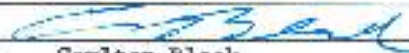
Date (mm/dd/yyyy)

10-13-10

DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB
0348-0046

1. Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input checked="" type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Graham Housing Authority P.O. Box 88 Graham, NC 27523 Congressional District, if known: 4 th		5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:
6. Federal Department/Agency: US Dept of Housing & Urban Dev	7. Federal Program Name/Description: Capital Fund Program C-DA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI)</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
11. Information available through the form is submitted by 31 U.S.C. section 1352. It is designed to disclose information about expenditures of tax dollars which relate to lobbying activities. Information which is submitted on this form is available to the public. The disclosure is required by 31 U.S.C. 1352. It is a violation of law to provide false information. A person who knowingly provides false information shall be subject to the penalties provided in 31 U.S.C. 1352 and 18 U.S.C. 1001.	Signature:  Print Name: <u>Carlton Black</u> Title: <u>Executive Director</u> Telephone No.: <u>336-229-7041</u> Date: <u>10-13-10</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form 298 (Rev. 7-97)

October 18, 2010

*Graham Housing Authority
Public Hearing*

A Public Hearing was conducted for the Annual and 5-year plan at 7:30 pm at the offices of the Housing Authority, Graham, NC.

The hearing was called to order by Chairman William Huey. A roll call showed a quorum present with Commissioners Charles Jeffries, Carol DiLella, Suzanne Moser and Robert Sykes present. Also present were Carlton Black, Executive Director, Tom Lloyd, Associate Director, Barry Adams, Director of Technical Services, Tina Norris, Director of Finance and Administration and Anthony Yellock, GHA Resident Services Advisor.

Tom Lloyd presented the 5 year summary and Barry Adams reviewed how work items are planned. Tina Norris commented on rolling years budgets.

Resident Anthony Yellock requested GHA consider naming each community and identify with signs. GHA will consider Mr. Yellock's suggestions.

Commissioner Sykes motioned to approve the 5 year plan (Certifications of compliance with PHA plans and regulated regulations). Commissioner Dillio seconded and motion carried.

They're being no further business; the hearing was adjourned.

** William Huey, Chairman*

Carlton Black, Executive Director

Date

Minutes will be signed at the November 2010 meeting.

THERE WERE NO CHALLENGED ELEMENTS OF THE PLAN

11.0 Attachments – (h)

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. 2537-0225
 Expires 4/30/2011

Part I: Summary					
PHA Name: Graham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P05950111 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2011
					FFY of Grant Approval:
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: _____) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____ <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised ²	Obligated	Expended
1	Total non-CFF Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	3,000.00			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	0			
5	1411 Audit				
6	1413 Liquidated Damages				
7	1430 Fees and Costs	22,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	35,778.00			
10	1460 Dwelling Structures	185,852.00			
11	1465.1 Dwelling Equipment—Nonexpendable	10,000.00			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	5000 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)	256,630.00		0	0
21	Amount of line 20 Related to LRP Activities				
22	Amount of line 20 Related to Section 504 compliance				
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 10% of CFFP Grants for operations.

⁴ RHF Funds shall be included here.

11.0 Attachments – (h)

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

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

Part I: Summary

PHA Name:
 Graham Housing Authority

Grant Type and Number:
 Capital Fund Program Grant No: NC19P05950110
 Replacement Housing Factor Grant No:
 Date of CFFP: _____

FFY of Grant:
2011
 FFY of Grant Appros

Type of Grant

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ¹	Obligated	Expended

Signature of Executive Director

Date

[Handwritten Signature] 10/20/10

Signature of Public Housing Director

Date

11.0 Attachments – (h)

Annual Statement of 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 6/30/2011

Part II: Supporting Pages								
PHA Name: Graham Housing Authority			Grant Type and Number: Capital Fund Program Grant No: NC19P045950110 CFEP (Yes/No): Replacement Housing Factor Grant No:				Federal FTY of Grant: 2011	
Development Number Name/HA-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	
PHA Wide	Operations	1406		3,000.00				
PHA Wide	Administration	1410						
	Clerk of Works			20,000.00				
	Subtotal			20,000.00				
NC 59-1	a. Architect Fees	1430		13,400.00				
NC 59-2	Prepare bid & contract documents			6,000.00				
	Drawings, specs. & assist the PHA							
	At bid opening. Awarding the							
	Contract & to supervise the const.							
	b. Consultant Fees							
NC 59-1	Hire Consultant to prepare agency			1,300.00				
NC 59-2	Plan			1,300.00				
	Subtotal			22,000.00				

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

11.0 Attachments – (h)

Annual Statement of Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing (onor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2579-0276
 Expires 4/30/2011

Part II: Supporting Pages

PHA Name: Graham Housing Authority		Grant Type and Number: Capital Fund Program Grant No: NC19P05550110 CFEP (Yes/No): Replacement Housing (onor Grant No:		Federal FY of Grant: 2011				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated ²	Funds Expended ²	
	Sire Improvements	1450						
NC 59-1	Replace Sewer lines as needed, Begin Individual Water meters			25,788.00				
	And Sewer Cleanouts as needed							
NC 59-2	Continue sidewalk repair/paving As needed			10,000.00				
	Total 1450			35,788.00				
	Dwelling Structures	1460						
NC 59-1	Install Dryer Connection & Upgrade		100 units	57,000.00				
NC 59-2	Flooring Panels		70 units	47,000.00				
NC 59-1	Replace Kitchen Cabinets		12 units	50,000.00				
NC 59-2	Bath Renovations		10 units	31,852.00				
	Total 1460			163,000.00				

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

11.0 Attachments – (h)

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. 2577-0276
 Expires 4/30/2011

Part II: Supporting Pages								
PIA Name: Graham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P05950110 CFEP (Yes/No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2011		
Development Number (Name/HA-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	
PIA-Wide	Dwelling Equipment: Purchase Appliances 110 Ranges and (10) Refrigerators Total 1465	1465	10 each	10,000.00				
				10,000.00				

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

11.0 Attachments – (h)

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

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

Part I: Summary					
PHA Name: Graham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19P05950110 Replacement Housing Factor Grant No Date of CFFP: _____			FFY of Grant: 2010
					FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 41) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised ¹	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ²	3,000.00	3,000.00		
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	20,000.00	20,000.00		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	22,000.00	22,000.00		
8	1440 Site Acquisition				
9	1450 Site Improvement	10,000.00	25,000.00		
10	1460 Dwelling Structures	196,630.00	181,630.00		
11	1465.1 Dwelling Equipment—Nonexpendable	5,000.00	5,000.00		
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ³				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1503 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	256,630.00	256,630.00	0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
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 for a Revised Annual Statement
³ PHAs with under 200 units in management may use 100% of LBP Grants for operations
⁴ RHP funds shall be included here

11.0 Attachments – (h)

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. 2577-0225
 Expires 4/30/11

Part I: Summary

FHA Name:
 Graham Housing Authority

Grant Type and Number
 Capital Fund Program Grant No. NC19PC8950110
 Replacement Housing Factor Grant No.
 Date of CRFP:

FFY of Grant:
 2010

FFY of Grant Approval:

Type of Grant

- Original Annual Statement Reserve for Disaster Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 6/30/10 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised ²	Obligated	Expended

Signature of Executive Director

Date

Signature of Public Housing Director

Date

 10/20/10

11.0 Attachments – (h)

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: Graham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19105950110 CFFP (Yes/No): Replacement Housing Factor Grant No:			Federal FY of Grant: 2010			
Development Number Name/HA-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	
PHA Wide	Operations	1406		3,000.00	3,000.00			
PHA Wide	Administration	1410						
	Clerk of Works			20,000.00	20,000.00			
	Subtotal			20,000.00	20,000.00			
	Fees & Costs	1430						
NC 59-1	a. Architect Fees			13,400.00	13,400.00			
NC 59-2	Prepare bid & contract documents Drawings, specs & assist the PHA At bid opening - Awarding the Contract & to supervise the const.			6,000.00	6,000.00			
	b. Consultant Fees							
NC 59-1	Hire Consultant to prepare agency			1,300.00	1,300.00			
NC 59-2	Plan			1,300.00	1,300.00			
	Subtotal			22,000.00	22,000.00			

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

² To be completed for the Performance and Evaluation Report

11.0 Attachments – (h)

Annual Statement Performance and Evaluation Report
 Capital Fund Programs, 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. 2577-0225
 Expires 4-30-2011

Part II: Supporting Pages								
PHA Name: Graham Housing Authority		Grant Type and Number: Capital Fund Program Grant No: NC19P05950110 CIPF FYs/No: Replacement Housing Factor Grant No:			Federal FY of Grant: 2010			
Development Number Name/HA-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 ³	
	Site Improvements	1450						
NC 59-1&2	Playground improvements			10,000	10,000			
NC 59-2	Repair Sidewalks, etc				15,000			
	Subtotal			10,000.00	25,000			
	Dwelling Structures	1460						
NC 59-2	Barb Renovations		70 apts	196,630.00	0			Move to 2011
NC 59-1	Begin Kitchen Cabinet Replacement		10 apts		46,630.00			
NC 59-1 & 59-2	Hardware replacements		100 apts		50,000.00			
	Carbon Monoxide Detectors		170 apts		10,000.00			
	Handicap Conversion		1 unit		25,000.00			
	Continue Resting		14 apts		50,000.00			
	Subtotal			196,630.00	181,630.00			

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

11.0 Attachments – (h)

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
 ONID No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: Graham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC19S05950109 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2009
					FFY of Grant Approval:
Type of Grant: <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFF Funds				
2	1436 Operations (may not exceed 20% of line 21) ³				
3	1438 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1420 Fees and Costs	30,000		30,000	29,814.00
8	1440 Site Acquisition				
9	1450 Site Improvement	301,993		301,993	301,198.18
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment – Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1392 Moving to Work Demonstration				
16	1495.1 Renovation Costs				
17	1599 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9001 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)	331,993		331,993	330,012.18
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 compliance				
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 CFFP Grants for operations
⁴ RHP Funds shall be included here

11.0 Attachments – (h)

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. 2577-0225
 Expires 4/30/2011

Part I: Summary

PIA Name:
 Graham Housing Authority

Grant Type and Number
 Capital Fund Program Grant No: NC1986595-0109
 Replacement Housing Factor Grant No
 Date of CFEP: _____

FFY of Grant:
 2009
 FFY of Grant Approval:

Type of Grant

- Original Annual Statement
 Reserve for Disasters' Emergencies
 Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: 6/30/10
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended

Signature of Executive Director

Date

 10/20/10

Signature of Public Housing Director

Date

11.0 Attachments – (h)

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 6/30/2011

Part II: Supporting Pages								
PILA Name: Graham Housing Authority			Grant Type and Number Capital Fund Program Grant No: NC19805950109 CFPP (Yes/No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/HA-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	
NC05900001	Fees & Cost	1430						
NC 59-1	A/E			17,400	30,000.00	30,000.00	20,814.00	Obligated
NC 59-2	A/E			12,600	0			
	Total 1430			30,000	30,000	30,000.00	20,814.00	
	Site Improvements:	1450						
NC 59-1	Grading and drainage & Demolition			50,093	80,761.04	80,761.04	27,099.00	Continued
	Paving parking areas			70,000	109,051.96	109,051.96	7,099.18	CFP 2009
	Upgrade Utilities			12,500	0			
	Sidewalks and porches			32,000	69,950.00	69,950.00		
	Landscaping			12,000	20,000.00	20,000.00		
	Remove/replace unsuitable soil				22,230.00	22,230.00		
	Total NC 59-1			176,593	301,993.00	310,993.00	34,198.18	Obligated
								M&M
								Builders

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

11.0 Attachments – (h)

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

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

Part I: Summary					
PHA Name: The Graham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC 59-50109 Replacement Housing Factor Grant No: Date of CFFP: _____		FFY of Grant: 2009 FFY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) 6/30/10 <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFF Funds				
2	1406 Operations (may not exceed 20% of line 21)	0	0		
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	0	20,000.00		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	22,000.00	22,000.00	22,000	
8	1440 Site Acquisition				
9	1450 Site Improvement	100,000.00	100,000.00	27,804	
10	1460 Dwelling Structures	109,000.00	111,852.00		
11	1465.1 Dwelling Equipment – Nonexpendable	5,000.00	5,000.00	4,196	4,196
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	22,852.00	0		
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18 ba	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)	258,852.00	258,852.00	54,000.00	4,196
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 compliance	26,000.00	26,000.00		
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 CFF Grants for operations.


⁴ R-FP Funds shall be included here.

11.0 Attachments – (h)

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

PIA Name: The Graham Housing Authority		Grant Type and Number: Capital Fund Program Grant No: NC 59-50109 Replacement Housing Factor Grant No: Date of CFP: _____		FY of Grant: 2009 <hr/> FY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters' Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date: 10/22/10		Signature of Public Housing Director Date	

11.0 Attachments – (h)

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: The Graham Housing Authority		Grant Type and Number: Capital Fund Program Grant No: NC 5950109 Replacement Housing Factor Grant No:		CFPP (Yes/No):		Federal FFY of Grant: 2009		
Development Number Name/HA-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		0	0			
	Subtotal			0	0			
	Administration	1410						
	Clock of Works			0	20,000			
	Subtotal			0	20,000			
	Fees & Costs	1430.1						
NC 59-1	a. Architect's fee to prepare bid and contract documents,		100	12,000.00	12,000.00	12,000		
NC 59-2	Drawings, specifications and Assist the PHA at bid opening		70	8,000.00	8,000.00	8,000		
	Awarding the contract & to Supervise the construction.							
	Work on a periodic bases, fee To be negotiated							
NC 59-1	b. Consultant Fees	1430.2		1,000.00	1,000.00	1,000		
NC 59-2	Hire Consultant to assist in agency Plan			1,000.00	1,000.00	1,000		
	Subtotal			22,000	22,000	22,000		

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

11.0 Attachments – (h)

Annual 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: The Graham Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC 5950108 Replacement Housing Factor Grant No.		CFPP (Yes/No):		Federal FFY of Grant: 2009		
Development Number Name/HA-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	
	Site Improvements	1450						Obligated
NC 59-1	Paving, Grading & Landscape		100	52,500.00	52,500.00	27,804		M&M
	Utilities, Drainage							
NC 59-2	Paving, Grading & Landscape		70	47,500.00	47,500.00			
	Utilities, Drainage							
	Subtotal			100,000	100,000	27,804		
	Dwelling Structures	1460						
NC 59-1	Reconfigure Bedroom Sizes		4	0	0			
NC 59-2	Reconfigure Bedroom Sizes		2	0	0			
NC 59-1	Entry doors/hardware		100	35,573	31,852			
NC 59-2	Entry doors/hardware		70	32,889	30,000			
NC 59-1	Patch/paint units		6	7,269	0			
NC 59-2	Patch/paint units		6	7,269	0			
PHA-Wide	Convert 1 Unit to HC		1	26,000	0			
PHA Wide	Roofing		20		50,000			
	Subtotal			109,000	111,852			
	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

11.0 Attachments – (h)

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. 2507-0226
 Expires 4/30/2011

Part II: Supporting Pages								
PBA Name: The Greater Housing Authority		Grant Type and Number Capital Fund Program Grant No: NC 5920109 Replacement Housing Factor Grant No:		CFPP (Year) No:		Federal FFY of Grant: 2009		
Development Number Name/PBA-Wide Activities	General Description of Major Work Category	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	Dwelling Equipment	1465						
PBA Wide	Ranges & Refrigerators		5 ea	5,000	5,000	4196	4196	Obligated
	Subtotal			5,000	5,000	4196	4196	
	Non-Dwelling Equipment	1473						
PBA Wide	Furniture & Security System		LS	0	0			
	Purchase Vehicle			22,852	0			
	Subtotal			22,852	0			
	Grand Total			258,852	258,852			

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

11.0 Attachments – (h)

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PIIA Name: The Housing Authority of the City of Graham, NC		Grant Type and Number Capital Fund Program Grant No: NC19PJ05950108 Replacement Housing Factor Grant No:		Federal FY of Grant: 2008	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 03) 06/30/10 <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	100 Iron-CFP Funds				
2	406 Operations	3,452.00	0		
3	405 Management Improvements				
4	410 Administration	20,000.00	20,000.00	20,000.00	
5	411 Audit				
6	415 Unplanned Damages				
7	430 Fees and Costs	22,000.00	22,000.00	22,000.00	
8	440 Site Acquisition				
9	450 Site Improvement				
10	460 Dwelling Structures	196,827.00	196,827.00	196,827.00	53,473.57
11	465.1 Dwelling Equipment—Nonexpendable	8,000.00	8,779.00	8,779.00	8,779.00
12	470 Nondwelling Structures				
13	475 Nondwelling Equipment	15,000.00	14,722.91	14,722.91	10,901.23
14	485 Demolition				
15	490 Replacement Reserve				
16	492 Moving is Work Demonstration				
17	495.1 Relocation Costs				
18	496 Development Activities				
19	150 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	262,279.00	262,279.00	262,279.00	103,103.78
22	Amount of line 21 Related to LDP Activities				
23	Amount of line 21 Related to Section 504 compliance	40,000.00			
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

11.0 Attachments – (h)

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Graham, NC		Grant Type and Number Capital Fund Program Grant No: NC19P05950108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Aect No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PIA- Wide	Operations	1406		3,452.00	0			Move To 1465
	Subtotal			3,452.00	0			
PIA-Wide	Administration	1410						
	Clerk of Works			20,000.00	20,000	20,000.00		Obligated
	Subtotal			20,000.00	20,000	20,000.00		

11.0 Attachments – (h)

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. 2577-0526
 Expires 4/30/2011

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PIA Name: The Housing Authority of the City of Graham, NC		Grant Type and Number Capital Fund Program Grant No. NC1905950108 Replacement Housing Factor Grant No.			Federal FY of Grant: 2008			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
NC 59-1	Fees & Costs:	1430.1	100 units	12,000.00	12,000	12,000.00		Obligated
NC 59-2	a. Architects fee to		70 units	8,000.00	8,000	8,000.00		Obligated
	Prepare bid and contract							
	Documents, drawings,							
	Specifications and assist							
	The PIA at bid opening							
	Awarding the contract &							
	To supervise the const.							
	Work on a periodic basis							
	Fee to be negotiated							
NC 59-1	b. Consultant Fees	1430.2		1,000.00	1,000	1,000		Obligated
NC 59-2	Hire Consultant to prepare			1,000.00	1,000	1,000		Obligated
	Agency plan							
	Subtotal			22,000.00	22,000	22,000		

11.0 Attachments – (h)

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Graham, NC		Grant Type and Number: Capital Fund Program Grant No. NC19P05950105 Replacement Housing Factor Grant No.			Federal FY of Grant: 2008			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Dwelling Structures	1460						Move to
NC 59-1	Replace Floor Tile Phase I		27 units	32,415.00	0			
NC 59-2			27 units	32,412.00	0			
NC 59-1	Replace Electrical Systems		30 units	36,000.00	0			
NC 59-2	Phase I		30 units	36,000.00	0			
NC 59-1	Enclose Water Heaters		30 units	10,000.00	0			
NC 59-2	Phase I		30 units	10,000.00	0			Roofing
	Roofing		14 bldgs		96,827.00	196,827.00	83,473.47	Moved
PHA-Wide	Convert 1 Unit to HC		1 unit	40,000.00	0	0		FRM 012
	Subtotal			196,827.00	196,827	196,827	83,473.47	Obligated
	Dwelling Equipment	1465						
PHA-Wide	Ranges & Refrigerators		5 each	5,000.00	8,729.09	8,729.09	8,729.09	Complete
	Subtotal			5,000.00	8,729.09	8,729.09	8,729.09	
PHA-Wide	Non-Dwelling Equip	1475						Moved
	Computer Hardware		1 S	15,000.00	14,722.91	14,722.91	10,901.22	FRM 2012
	Subtotal			15,000.00	14,722.91	14,722.91	10,901.22	Complete
	Grand Total			262,279.00	262,279.00	23,452.00	19,630.31	

11.0 Attachments – (h)

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: The Housing Authority of the City of Graham, NC		Grant Type and Number Capital Fund Program No: NC19P05950108 Replacement Housing Factor No:			Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA-Wide	06/12/10			06/12/12			
NC 59-1	06/12/10			06/12/12			
NC 59-2	06/12/10			06/12/12			

11.0 Attachments – (h)

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
FHA Name: The Housing Authority of the City of Graham, NC		Grant Type and Number Capital Fund Program Grant No: NC19P050107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no.) #4	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/10		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	22,000.00	10,791.00	10,791.00	2428.00
8	1440 Site Acquisition				
9	1450 Site Improvement	53,880.00	98,262.99	98,262.99	3,115.00
10	1450 Dwelling Structures	162,501.07	121,338.48	121,338.48	121,258.48
11	1455.1 Dwelling Equipment—Nonexpendable	6,008.93	6,008.93	6,008.93	6,008.93
12	1470 Nondwelling Structures				
12	1475 Nondwelling Equipment	20,000.00	17,988.60	17,988.60	17,988.60
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	264,590.00	264,590.00	264,590.00	161,279.01
22	Amount of line 21 Related to LDP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

11.0 Attachments – (h)

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

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRIIF)
Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Graham, NC		Grant Type and Number Capital Fund Program Grant No. N0P050107 Replacement Housing Factor Grant No.				Federal FY of Grant: 2007	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
	Fees & Costs						
NC 59-1	a. Architects fee to	1430.1	100 units	14,7500	8963.00	8963.00	1,000.00
NC 59-2	Prepare bid and contract Documents, drawings, specs & assist the PHA in bid opening		70 units	6,0000	578.00	578.00	578.00
	Awarding the contract & To supervise the const. Work on a periodic basis. Fee to be negotiated						
	b. Consultant Fees						
NC 59-1	Hire Consultant to prepare Agency Plan	1430.2	100 units	62.90	625.00	625.00	625.00
NC 59-2			70 units	62.90	625.00	625.00	625.00
	Subtotal			22,00.00	10,791.00	10,791.00	2828.00
	Site Improvements	1450					
PHA Wide	Drainage and erosion control			53,81.00	98,262.99	98,262.99	3,115.00
	Subtotal			53,81.00	98,262.99	98,262.99	3,115.00

11.0 Attachments – (h)

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

Office of Public Housing Administration
OMB No. 2577-0226
Expires 4/30/2011

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Graham, NC		Grant Type and Number Capital Fund Program Grant No. NC19P050107 Replacement Housing Factor Grant No.				Federal FY of Grant: 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Dwelling Structures							Moved to
NC 59-1	a. Attic Insulation Phase II	1460	60 units	0	0	0	0	1450
	b. Finish Roofing			39,201.07	41,212.47	41,212.47	41,212.47	Complete 08
NC 59-2	a. Kitchen Cabinets Phase II		70 units	0	0	0	0	
	Continue Windows & Screens			83,300.00	83,300.00	83,300.00	83,300.00	Moved from 2010
PHA Wide (Not sure Which unit)	a. Convert 1 unit to HC		1 unit	40,000.00	6,826.01	6,826.01	6,826.01	Moved to 2008
	Subtotal			162,501.07	131,338.48	131,338.48	131,338.48	
	Dwelling Equipment	1465						
	Non Expendable							
PHA-Wide	Ranges & Refrigerators		5 each	6,008.93	6,008.93	6,008.93	6,008.93	Complete
	Subtotal			6,008.93	6,008.93	6,008.93	6,008.93	
PHA-Wide	Non Dwelling Equip.							Moved from
	Purchase Vehicle			20,000.00	17,988.60	17,988.60	17,988.60	Year 2012
	Subtotal			20,000.00	17,988.60	17,988.60	17,988.60	Complete
	Grand Totals			264,390.00	264,390.00	264,390.00	161,279.01	

11.0 Attachments – (h)

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: The Housing Authority of the City of Graham, NC		Grant Type and Number Capital Fund Program No: NC19P05950107 Replacement Housing Factor No:			Federal FY of Grant: 2007		
Development Number Name/TIA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PIA-Wide	09/12/09			09/12/2011			
NC 59-1	09/12/09			09/12/2011			
NC 59-2	09/12/09			09/12/2011			

11.0 Attachments – (h)

11.0 Attachments – (i)

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 Graham Housing Authority		Locality (City/County & State) Graham/Alamance/NC				
		<input checked="" type="checkbox"/> Original 5-Year Plan			<input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015
	NC 59-1		160,852	208,852	120,000	0
	NC 59-2		18,000	0	88,852	224,128
	PHA Wide		77,778	47,778	47,778	32,502
	Total		256,630	256,630	256,630	256,630
B.	Physical Improvements Subtotal		188,852	213,852	213,852	225,128
C.	Management Improvements		10,000	0	0	0
D.	PHA-Wide Non-dwelling Structures and Equipment		15,000	0	0	0
E.	Administration		17,778	17,778	17,778	0
F.	Other		22,000	22,000	22,000	32,000
G.	Operations		3,000	3,000	3,000	5,502
H.	Demolition					
I.	Development					
J.	Capital Fund Financing - Debt Service					
K.	Total CFP Funds		256,630.00	256,630.00	256,630.00	256,630.00
L.	Total Non-CFP Funds					
M.	Grand Total		256,630.00	256,630.00	256,630.00	256,630.00

Capital Fund Program—Five-Year Action Plan

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 2012			Work Statement for Year 2012		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Special Statement	PHA – Wide					
	Fees & Costs		22,000	PHA Wide		
	NC 59-1			Dwelling Equipment		
	Site Improvements			Ranges & Refrigerators	10 each	10,000
	As needed		5,000			
	Dwelling Structures			NonDwelling Equip		
	Replace Wall Furnaces	As needed	20,000			
	Repair A/C	As needed	13,000	Purchase Computer		15,000
	Start Kitchen Cabinet Replacement & flooring	25 units	122,852	Hardware		
	Subtotal NC 59-1		160,852	Subtotal		15,000
	NC 59-2					
	Site Improvements					
	As needed		5,000			
	Dwelling Structures					
	Repair A/C	As needed	13,000			
Subtotal NC 59-2		18,000				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$ 225,852		

Capital Fund Program—Five-Year Action Plan

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

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year: F.Y. 2011	Work Statement for Year: 2013 F.Y. 2012			Work Statement for Year: 2014 F.Y. 2011		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	PHA – Wide Fees & Costs		22,000	PHA – Wide Fees & Costs		22,000
	NC 59-1			NC 59-2		
	Site Improvements Playground Equipment	1 set	13,000	Site Improvements Playground Equipment	set	13,000
	Dwelling Structures Complete Kitchen Cabinet Replacement & flooring	45	195,852	Dwelling Structures Sleek kitchen Cabinet Replacement And flooring Subtotal NC 59-2	18	75,852
	Subtotal NC 59-1		208,852			80,852
	PHA-Wide Dwelling Equipment Ranges & Refrigerators	5 each	5,000	NC 59-1 Complete Cabinets & Flooring Subtotal NC 59-1	30	120,000
				PHA-Wide Dwelling Equipment Ranges & Refrigerators	5 each	5,000
	Subtotal of Estimated Cost		\$238,852	Subtotal of Estimated Cost		\$ 135,852

11.0 Attachments – (i)

Capital Fund Program—Five-Year Action Plan

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

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2011	Work Statement for Year 2015			Work Statement for Year 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
Sec School Subelement	PHA – Wide Fees & Costs		22,000			
	NC 59-2					
	Site Improvements As Needed		5,000			
	Dwelling Structures					
	Continue Kitchen Cabinet Replacement And Flooring	52 units	219,128			
	Subtotal NC 59-2		224,128			
	PHA Wide Dwelling Equipment Ranges & Refrigerators	5 each	5,000			
	Subtotal of Estimated Cost	\$251,128		Subtotal of Estimated Cost	\$	

11.0 Attachments – (i)

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 III: Supporting Pages Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2011	Work Statement for Year 2014 FFY 2014		Work Statement for Year 2015 FFY 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See attached Statement	Operations	3,500	Operations	3,500
	Administration	17,778		
		Subtotal of Estimated Cost	\$ 20,778	Subtotal of Estimated Cost