

<b>PHA 5-Year and Annual Plan</b>	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 8/30/2011
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Ocala Housing Authority</u> PHA Code: <u>FL032</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>10-01-2012</u>												
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>186</u> Number of HCV units: <u>1288</u>												
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only												
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)												
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program <table border="1"> <thead> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> </tr> </tbody> </table>	PH	HCV	PHA 1:		PHA 2:		PHA 3:	
PH	HCV												
PHA 1:													
PHA 2:													
PHA 3:													
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.												
<b>5.1</b>	<b>Mission.</b> 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:												
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.												

	<p><b>PHA Plan Update</b></p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <ul style="list-style-type: none"> <li>*Secured 23 enhanced vouchers from a sold multi-family S8 project based development</li> <li>*Successfully leased 25 VASH vouchers</li> <li>*Leased 4 Neighborhood Stabilization Program (NSP) Homes under our agreement with Marion County’s Lease Option to Purchase Program, for Very Low Income Families</li> <li>* Sold one (1) home in OHA’s Paradise Trails Home Ownership housing development</li> <li>*Accepted a deed from the City of Ocala for the transfer of 10 single family homes under the NSP rental program, for families 50% - 120% of area medium income.</li> <li>*Completed major renovations in Pine Gardens community, to include Structural repairs ,exterior siding replacement, kitchen and bathroom renovations.</li> <li>* Road resurfacing and speed bumps were installed in Deer Run</li> <li>* Secured competitive grants to provide Rent, Utility and Mortgage assistance to eligible families</li> </ul> <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.  Ocala Housing Authority Administrative Office, 1629 NW 4<sup>th</sup> Street, Ocala, FL 34475 and <a href="http://WWW.Ocalahousing.org">WWW.Ocalahousing.org</a></p>
<p>7.0</p>	<p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i></p> <p>The OHA has a two (2) remaining homes in its Paradise Trails single family home sub-division, to be sold. Paradise Trails, at a future date, will build out the sub-division to its platted 28 homes, currently 18 homes are built.</p>
<p>8.0</p>	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>

8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>
8.3	<p><b>Capital Fund Financing Program (CFFP).</b>  <input checked="" 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><b>Housing Needs.</b> 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>The Consortium (City of Ocala and Marion County) has determined that, as it relates to low-income housing, the priority is to increase the supply of supportive housing, which includes structural features and services, to enable persons with special needs (including persons with HIV/AIDS) to live in dignity and independence, as outlined in the Marion County consolidated Plan 2009-2014.</p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p>

**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.

- Increased participation in our Section 8 FSS Program by fourteen participants in FY2011
- We currently have Quarterly Resident Council Meetings for each Public Housing community
- We have formed a Program Coordinating Committee (PCC) Board for the Family Self-Sufficiency Program (FSS) program in 2011
- Entered into a contract with Florida Housing Finance Corporation for the Florida Hardest Hit Program , with a total of 35 Loan closings up to date
- As of 7/1/11 we have administered the United Way Rent, Mortgage and Utility Assistance program, and have assisted 67 families up to date
- The United Way Rent, Mortgage and Utility Assistance program conducted five Budgeting classes, which is mandatory for the applicant, prior to receiving funding
- Through OHA's contractual agreement with the Oasis Corporation we were able to assist 123 families with FL Mandated Mediation Housing Counseling
- We have conducted 16 workshops for Foreclosure Prevention and the Home Buyers Club
- One -on -One Foreclosure Prevention Assistance was provided for 224 families
- We are currently in the election process for the Resident Council Officers

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

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- 11** **Required Submission for HUD Field Office Review.** In addition to the PHA Plan  
**.0** template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. **Note:** Faxed copies of these documents will not be accepted by the Field Office.
- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights)
  - (b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (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, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only)
  - (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (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 thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

## Instructions form HUD-50075

**Applicability.** This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

### 1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

### 2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

### 3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

### 4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

### 5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

**5.1 Mission.** A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

**5.2 Goals and Objectives.** Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

**6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

#### PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

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

- (a) **Hope VI or Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: [http://www.hud.gov/offices/pih/centers/sac/demo\\_dispo/index.cfm](http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm)  
**Note:** This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

**8.0 Capital Improvements.** This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

**8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report.** PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

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

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

**8.3 Capital Fund Financing Program (CFFP).** Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

**9.0 Housing Needs.** Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

**9.1 Strategy for Addressing Housing Needs.** Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

**10.0 Additional Information.** Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

**11.0 Required Submission for HUD Field Office Review.** In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.



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

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 8/31/2011

<b>Part I: Summary</b>		
<b>PHA Name: Ocala Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P03250112 Replacement Housing Factor Grant No: Date of CFFP: 2012	<b>FFY of Grant: 2012</b> <b>FFY of Grant Approval: 2012</b>

**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 <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	185,784.00			
3	1408 Management Improvements	5,000.00			
4	1410 Administration (may not exceed 10% of line 21)	23,114.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	2,500.00			
10	1460 Dwelling Structures	14,750.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.



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

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 08/31/2011**

<b>Part I: Summary</b>						
<b>PHA Name:</b> Ocala Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P03250112 Replacement Housing Factor Grant No: Date of CFFP: 2012			<b>FFY of Grant:2012</b> <b>FFY of Grant Approval: 2012</b>	
<b>Type of Grant</b> <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 <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	231,148.00				
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	7500.00				
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

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





<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Ocala Housing Authority				<b>Federal FFY of Grant: 2012</b>	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
FL032 – PHA Wide	9-30-2014		9-30-16		
FL032- PHA Wide	9-30-2014		9-30-16		
FL032- PHA Wide	9-30-2014		9-30-16		
FL032-001 Deer Run	9-30-2014		9-30-16		
FL032-001 PHA Wide	9-30-2014		9-30-16		
FL032-001 Shady Hollow	9-30-2014		9-30-16		
FL032-001 PHA Wide	9-30-2014		9-30-16		

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



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

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

<b>Part I: Summary</b>						
PHA Name/Number <b>Ocala Housing Authority / FL032</b>		Locality : <b>Ocala/Marion County Florida</b>			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: <b>3</b>	
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2012</u>	Work Statement for Year 2 FFY <u>2013</u>	Work Statement for Year 3 FFY <u>2014</u>	Work Statement for Year 4 FFY <u>2015</u>	Work Statement for Year 5 FFY <u>2016</u>
B.	Physical Improvements Subtotal	Annual Statement	188,900.00	158,000.00	240,800.00	254,079.00
C.	Management Improvements		6,000.00	6,000.00	8,000.00	8,000.00
D.	PHA-Wide Non-dwelling Structures and Equipment		10,000.00	101,000.00	10,000.00	45,000.00
E.	Administration		26,000.00	26,000.00	26,000.00	26,000.00
F.	Other					
G.	Operations		150,000.00	150,000.00	150,000.00	150,000.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		380,900.00	441,000.00	434,800.00	483,079.00





<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2012	Work Statement for Year <u>2013-2014</u> FFY <u>2013</u>			Work Statement for Year: <u>2014-2015</u> FFY <u>2014</u>		
	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	FL032-001 Bathroom Renovations –PO (Exhaust fans, toilets, and shower heads) \$1500 per (1460)	30	45,000.00	FL032-001 Bathroom Renovations – SH (Exhaust fans, toilets, and shower heads) \$1500 per (1460)	20	\$30,000.00
Annual	FL032-001 H2O Shut Off Valve Replacement - DR (1460) \$150 per	90	\$13,500.00	FL032-001 H2O Shut Off Valve Replacement – PO & SH \$150 per (1460)		
Statement	FL032-001 Kitchen Faucet Handle Replacement \$150 per			FL032-001 Kitchen Faucet Handle Replacement \$150		
	FL032-001 Building Structure Repairs			FL032-001 Building Structure Repairs - DR		
	FL032-001 Exterior Door Replacement \$400 per	20	\$8,000.00	FL032-001 Exterior Door Replacement	20	\$8,000.00

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

	FL032-001 Replace Hot Water Heaters – Tankless \$1200 per (1465)	25	\$30,000.00	FL032-001 Replace Hot Water Tanks (1465)	50	\$60,000.00
	FL032-001 Erosion Infill	1 site	\$5,000.00	FL032-001 Erosion Infill – DR Family CC	1 site	
	FL032-001 ADA Unit Renovation	2	\$50,000.00	FL032-001 ADA Unit Renovation	2	\$50,000.00
	FL032-001 Ramp Installation (20)	4	\$25,000.00	FL032-001 Ramp Installation (20)		
	FL032-001 Entrance Lighting and Landscaping (1450)	2	\$2,400.00	FL032-001 Entrance Lighting and Landscaping (1450)		
	FL032-001 Water Line Repair (DR Back & SH 800) (1450)	3 Communities		FL032-001 Water Line Repair (DR Back & SH 800) (1450)	3 Communities	
	FL032-001 Mailbox Replacement - DR (1475)	41	\$5,000.00	FL032-001 Mailbox Replacement (1475)		
	FL032-001 Laundry Renovations (1470)	4 communities		FL032-001 Laundry Renovations (1470)	4 Communities	\$25,000.00
	FL032-001 Playground Equipment (upgrades/repair/replace) (1475)	3 communities		FL032-001 Playground Equipment (upgrades/repair/replace ) (1475)	3 communities	

**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**

	FL032-001 Elevator (Repair/Replacement) (1475)	1	\$5,000.00	FL032-001 Elevator (Repair/Replacement) (1475)	1	
	FL032-011 Screen Door Replacement			FL032-011 Screen Door Replacement		
	FL032-001 Fence Replacement/Repair	4 Communities		FL032-001 Fence Replacement/Repair	4 Communities	
	FL032-001 Roof Repair/Replacement			FL032-001 Roof Repair/Replacement		
	FL032-001 Gutter & Down Spout Repair/Replacement			FL032-001 Gutter & Down Spout Repair/Replacement		
	FL032-001 Road Paving	4 Communities		FL032-001 Road Paving	4 Communities	\$76,000.00
	FL032-001 Engineering Work Plan for DR Water Line	Deer Run Community		FL032-001 Engineering Work Plan for DR Water Line	Deer Run Community	\$10,000.00
	Subtotal of Estimated Cost		\$188,900.00	Subtotal of Estimated Cost		\$158,000.00

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY <u>2012</u>	Work Statement for Year <u>2015-2016</u>			Work Statement for Year: <u>2016-2017</u>		
	FFY <u>2015</u>			FFY <u>2016</u>		
	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	FL032-001 Bathroom Renovations –SH (Exhaust fans, toilets, and shower heads) (1460)	40	\$60,000.00	FL032-001 Bathroom Renovations – PO (Exhaust fans, toilets, and shower heads) (1460)	18	30,000.00
Annual	FL032-001 H2O Shut Off Valve Replacement - DR (1460)			FL032-001 H2O Shut Off Valve Replacement – PO & SH (1460)		
Statement	FL032-001 Kitchen Faucet Handle Replacement			FL032-001 Kitchen Faucet Handle Replacement		
	FL032-001 Building Structure Repairs	4Communities	\$25,000.00	FL032-001 Building Structure Repairs		
	FL032-001 Exterior Door Replacement \$400 per	40	\$16,000.00	FL032-001 Exterior Door Replacement		

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

	FL032-001 Replace Hot Water Tankless Tanks (1465)	50	\$60,000.00	FL032-001 Replace Hot Water Tankless Tanks (1465)		
	FL032-001 ADA Unit Renovation	2	\$50,000.00	FL032-001 ADA Unit Renovation	1	50,000.00
	FL032-001 Ramp Installation (20)	5	\$25,000.00	FL032-001 Ramp Installation (20)	3	10,000.00
	FL032-001 Entrance Lighting and Landscaping (1450)	4	\$4,800.00	FL032-001 Entrance Lighting and Landscaping (1450)		
	FL032-001 Water Line Repair (DR Back & SH 800) (1450)	3 Communities		FL032-001 Water Line Repair (DR Back & SH 800) (1450)		
	FL032-001 Mailbox Replacement - DR (1475)	41	\$5,000.00	FL032-001 Mailbox Replacement (1475)		
	FL032-001 Laundry Renovations (1470)	4 communities		FL032-001 Laundry Renovations (1470)		
	FL032-001 Playground Equipment (upgrades/repair/replace) (1475)	3 communities		FL032-001 Playground Equipment (upgrades/repair/replace ) (1475)	3 communities	45,000.00
	FL032-001 Elevator (Repair/Replacement) (1475)	1	\$5,000.00	FL032-001 Elevator (Repair/Replacement) (1475)		

**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**

	FL032-011 Screen Door Replacement			FL032-011 Screen Door Replacement		
	FL032-001 Fence Replacement/Repair	4 Communities		FL032-001 Fence Replacement/Repair	4 Communities	
	FL032-001 Roof Repair/Replacement			FL032-001 Roof Repair/Replacement	PO Community	50,000.00
	FL032-001 Gutter & Down Spout Repair/Replacement			FL032-001 Gutter & Down Spout Repair/Replacement	3 communities	28,679.00
	FL032-001 Road Paving			FL032-001 Road Paving	4 Communities	
	FL032-001 Engineering Work Plan for DR Water Line			FL032-001 Engineering Work Plan for DR Water Line	Deer Run Community	
				CO2 Detectors	DR, SH & PO	9,400.00
				Kitchen Cabinets	DR, SH & PO	76,000.00
	Subtotal of Estimated Cost		240,800.00	Subtotal of Estimated Cost		254,079.00







## READ

This Excel book consist of 5 different working sheets.  
Sheets Name: Part I, II, III, Obligation and LOCCS

Part I, II and III are the different sections of the capital improvement budget.  
Part I sheet allows some information be put directly into the form. The rest of the information will come from Part II sheet. Part I sheet is protected to prevent formula corruption.  
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# U.S Department of Housing and Urban Development Office of Public Housing

## Part I: Summary

### Annual Statement/Performance and Evaluation Report Capital Fund Program

PHA Name:

**OCALA HOUSING AUTHORITY**

Modernization Project Number:

**FL29P032501-11**

FFY of Grant Approval

2011

Original Annual Statement    Reserved for Disasters/Emergencies.    Revised Annual Statement/Revision No. # 1

Final Performance and Evaluation Report

Performance and Evaluation Report for Period Ending - 9-30-2012

LINE NO.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		ORIGINAL	REVISED	OBLIGATED	EXPENDED
1	Total none-CIAP/CGP Funds				
2	1406 Operations (Not to exceed 10% of line 19)	\$141,503.00	\$207,467.68	\$141,503.00	\$70,752.00
3	1408 Management Improvements	\$12,000.00	\$12,000.00	\$4,000.00	\$0.00
4	1410 Administration	\$25,444.00	\$25,444.00	\$25,444.00	\$12,721.98
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs	\$5,000.00		\$0.00	\$0.00
8	1440 Site Acquisition				
9	1450 Site Improvements	\$40,500.00	\$4,413.32	\$2,243.32	\$0.00
10	1460 Dwelling Structures	\$30,000.00			\$0.00
11	1465.1 Dwelling Equipment-Noneexpendable		\$5,122.00	\$5,122.00	\$0.00
12	1470 Nondwelling Structure				\$0.00
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1495.1 Relocation Cost				
17	1498 MOD Used for Development				
18	1502 Contingency (Not to exceed 8% of line 19)				
19	<b>Amount of Annual Grant (Sum of lines 2-18)</b>	<b>\$254,447.00</b>	<b>\$254,447.00</b>	<b>\$178,312.32</b>	<b>\$83,473.98</b>
20	Amount of line 19 Related to LBP Activities				
21	Amount of line 19 Related to Sec 504 Comp.				
22	Amount of line 19 Related to Security				
23	Amount of line 19 Related to Energy Conservation				

Signature of Executive Director & Date:

Gwendolyn B. Dawson, Executive Director

Signature of Public Housing Director/

Office of Native American Programs Administrator & Date:

Victoria A. Main, Director Office of Public Housing

1 To be completed for Performance & 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 and Capital Fund Program Replacement Housing Facotr (CFP/CFPRHF)**

**PART II: Suporting Pages**

PHA Name: Ocala Housing Authority			Grant Type and Number Capital Fund Program: FL29PO32501-11 Capital Fund Program: Replacement Housing Factor #:			Federal FY of Grant: 2011		Status of Proposed Work
Development Number	Description of Work Items	Development Account Number	Funds Approved			Funds Obligated	Funds Expended	Status of Proposed Work
			Original	Revised	Difference			
PHA Wide	<b>OPERATIONS</b>							
	Operating Sidsidy	1406	141,503.00	207,467.68	-65,964.68	141503.00	\$70,752.00	17288.97 monthly
	<b>TOTAL</b>	1406	<b>141,503.00</b>	<b>207,467.68</b>	-65,964.68	141503.00	\$70,752.00	
PHA Wide	<b>MANAGEMENT IMPROVEMENTS</b>							
	Staff Training	1408	6,000.00	6,000.00	0.00	4,000.00	0.00	Lindsey Trainin
	MIS TechSupport	1408	6,000.00	6,000.00	0.00		0.00	Cornwell
		1408					0.00	
	<b>TOTAL</b>	1408	<b>12,000.00</b>	<b>12,000.00</b>	0.00	4,000.00	<b>0.00</b>	
PHA Wide	<b>ADMINISTRATION</b>							
	MOD Cordinator Salary	1410	20,000.00	20,000.00	0.00	10,120.33	12,120.33	1666.67 monthl
	Benefits	1410	5,444.00	5,444.00	0.00	481.32	601.65	453.67 monthly
	<b>TOTAL</b>	1410	<b>25,444.00</b>	<b>25,444.00</b>	0.00	10,601.65	<b>12,721.98</b>	
PHA Wide	<b>FEES AND COSTS</b>							
	A & E Fees and Costs	1430						
	Energy Audit	1430						
	Physical Assessment	1430						
	Property Survey	1430						
	UPCS Inspections	1430	5,000.00	0.00	5,000.00	0.00	0.00	
	<b>TOTAL</b>	1430	<b>5,000.00</b>	<b>0.00</b>	5,000.00	0.00	<b>0.00</b>	

FL32-01								
	<b>Site Improvement</b>		36,086.68					
	Sidewalk Repair/Replacement	1450	2,170.00	2,170.00	0.00			Waiting on Pro
	Road Repaving	1450	2,243.32	2,243.32	0.00	2,243.32		Contract in Proc
	Sub-Total	1450	<b>40,500.00</b>	<b>4,413.32</b>	0.00	2,243.32	<b>0.00</b>	
	<b>Dwelling Structure</b>							
		1460			0.00	0.00	0.00	
		1460	30,000.00	0.00	30,000.00			
		1460	0.00		0.00			
	Sub-Total	1460	<b>30,000.00</b>	<b>0.00</b>	30,000.00	<b>0.00</b>	<b>0.00</b>	
	<b>Dwelling Equipment</b>							
	Kitchen Appliances	1465	0.00	5,122.00	-5,122.00	5,122.00		Carry over from
	Sub-Total		<b>0.00</b>	<b>5,122.00</b>	-5,122.00	5,122.00	<b>0.00</b>	
	<b>Non Dwelling Equipment</b>	<b>1475</b>						
	<b>TOTAL</b>		<b>254,447.00</b>	<b>254,447.00</b>			<b>0.00</b>	
	<b>TOTAL GRANT</b>		<b>\$ 254,447.00</b>	<b>\$ 254,447.00</b>	<b>\$ (36,086.68)</b>	<b>163,469.97</b>	<b>83,473.98</b>	






### Obligated Contracts

<b>Contractor Name</b>	<b>Scope of Service</b>	<b>Community Name</b>	<b>Contract \$</b>
Lindsey computer	On site Training	Admin	\$4,000
Pro Way Paving	DR Road repaving	Deer Run	\$2,243.32
GE Appliances	Kitchen Appliances- bal from 501-09	PHAWide	\$5,122

AS OF 10-14-11



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Contractor Name	Scope of Service	Community Name	Contract \$
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# U.S Department of Housing and Urban Development Office of Public Housing

## Part I: Summary

### Annual Statement/Performance and Evaluation Report Capital Fund Program

PHA Name:

**OCALA HOUSING AUTHORITY**

Modernization Project Number:

**FL29P032501-10**

FFY of Grant Approval

2010

Original Annual Statement  Reserved for Disasters/Emergencies.  Revised Annual Statement/Revision No. # 1

Final Performance and Evaluation Report  Performance and Evaluation Report for Period Ending - 9-30-2012

LINE NO.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		ORIGINAL	REVISED	OBLIGATED	EXPENDED
1	Total none-CIAP/CGP Funds				
2	1406 Operations (Not to exceed 10% of line 19)	\$50,000.00	\$169,000.00	\$169,000.00	\$168,999.99
3	1408 Management Improvements	\$6,000.00	\$12,000.00	\$12,000.00	\$11,495.01
4	1410 Administration	\$27,270.00	\$27,270.00	\$27,270.00	\$29,154.00
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs	\$6,500.00	\$4,350.00	\$4,350.00	\$0.00
8	1440 Site Acquisition				
9	1450 Site Improvements	\$0.00	\$36,000.00	\$36,000.00	\$35,859.32
10	1460 Dwelling Structures	\$182,929.00	\$22,429.00	\$22,429.00	\$22,429.00
11	1465.1 Dwelling Equipment-Noneexpendable				
12	1470 Nondwelling Structure		\$1,650.00	\$1,650.00	\$1,650.00
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1495.1 Relocation Cost				
17	1498 MOD Used for Development				
18	1502 Contingency (Not to exceed 8% of line 19)				
19	<b>Amount of Annual Grant (Sum of lines 2-18)</b>	\$272,699.00	\$272,699.00	\$272,699.00	\$269,587.32
20	Amount of line 19 Related to LBP Activities				
21	Amount of line 19 Related to Sec 504 Comp.	\$213,972.00	\$22,430.00		
22	Amount of line 19 Related to Security				
23	Amount of line 19 Related to Energy Conservation				

Signature of Executive Director & Date:

Gwendolyn B. Dawson, Executive Director

Signature of Public Housing Director/

Office of Native American Programs Administrator & Date:

Victoria A. Main, Director Office of Public Housing

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**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Facotr (CFP/CFPRHF)**

**PART II: Suporting Pages**

PHA Name: Ocala Housing Authority			Grant Type and Number Capital Fund Program: FL29PO32501-10 Capital Fund Program: Replacement Housing Factor #:			Federal FY of Grant: 2010		
Development Number	Description of Work Items	Development Account Number	Funds Approved			Funds Obligated	Funds Expended	Status of Proposed Work
			Original	Revised	Difference			
PHA Wide	OPERATIONS							
	Operating Sidsidy	1406	50,000.00	169,000.00	-119,000.00	169000.00	\$168,999.99	9/30/2010
	<b>TOTAL</b>	1406	<b>50,000.00</b>	<b>169,000.00</b>	<b>-119,000.00</b>	169000.00	\$168,999.99	
PHA Wide	MANAGEMENT IMPROVEMENTS							
	Staff Training	1408	6,000.00	6,000.00	0.00	6,000.00	6,000.00	
	MIS TechSupport	1408	0.00	6,000.00	-6,000.00	6,000.00	5,495.01	
		1408					0.00	
	<b>TOTAL</b>	1408	<b>6,000.00</b>	<b>12,000.00</b>	<b>-6,000.00</b>	12,000.00	<b>11,495.01</b>	
PHA Wide	ADMINISTRATION							
	MOD Cordinator Salary	1410	25,332.09	25,332.09	0.00	25,332.09	25,332.09	9/30/2011
	Benefits	1410	1,937.91	1,937.91	0.00	1,937.91	3,821.91	9/30/2011
	<b>TOTAL</b>	1410	<b>27,270.00</b>	<b>27,270.00</b>	<b>0.00</b>	27,270.00	<b>29,154.00</b>	
PHA Wide	FEES AND COSTS							
	A & E Fees and Costs	1430						
	Energy Audit	1430						
	Physical Assessment	1430						
	Property Survey	1430						
	UPCS Inspections	1430	6,500.00	4,350.00	2,150.00	4,350.00	0.00	
	<b>TOTAL</b>	1430	<b>6,500.00</b>	<b>4,350.00</b>	<b>2,150.00</b>	4,350.00	<b>0.00</b>	

FL32-01								
	<b>Site Improvement</b>							
	Road Repaving	1450	0.00	26,998.32	-26,998.32	26,998.32	26,998.32	
	Fence Repairs	1450	0.00	9,001.68	-9,001.68	9,001.68	8,861.00	\$4860 -\$50 Left
	Sub-Total	1450	0.00	36,000.00	-36,000.00	36,000.00	35,859.32	
	<b>Dwelling Structure</b>							
	HVAC Replacement	1460	182,929.00	0.00	182,929.00	0.00	0.00	
	504 Porch	1460	0.00	750.00	-750.00	750.00	750.00	Aug-11
	504 Unit & Porch	1460	0.00	21,679.00	-21,679.00	21,679.00	21,679.00	need to draw 3
	Sub-Total	1460	182,929.00	22,429.00	160,500.00	22,429.00	22,429.00	
	<b>Non Dwelling Structure</b>							
	Community Center Roof Repairs	1470	0.00	1,650.00	-1,650.00	1,650.00	1,650.00	completed 8-11
	Sub-Total	1470	0.00	1,650.00	-1,650.00	1,650.00	1,650.00	
	<b>Non Dwelling Equipment</b>							
	<b>TOTAL</b>							
	<b>TOTAL GRANT</b>		<b>\$ 272,699.00</b>	<b>\$ 272,699.00</b>	<b>\$ -</b>	<b>272,699.00</b>	<b>269,587.32</b>	







Contractor Name	Scope of Service	Community Name	Contract \$
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# U.S Department of Housing and Urban Development Office of Public Housing

## Part I: Summary

### Annual Statement/Performance and Evaluation Report Capital Fund Program

PHA Name:

**OCALA HOUSING AUTHORITY**

Modernization Project Number:

**FL29P032501-09**

FFY of Grant Approval

2009

Original Annual Statement    Reserved for Disasters/Emergencies.    Revised Annual Statement/Revision No. #

Final Performance and Evaluation Report    Performance and Evaluation Report for Period Ending -

LINE NO.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		ORIGINAL	REVISED	OBLIGATED	EXPENDED
1	Total none-CIAP/CGP Funds				
2	1406 Operations (Not to exceed 10% of line 19)	\$49,186.00	\$168,968.00	\$168,968.00	\$168,968.00
3	1408 Management Improvements	\$5,000.00	\$15,665.00	\$15,665.00	\$15,665.00
4	1410 Administration	\$26,000.00	\$30,218.00	\$30,218.00	\$30,218.00
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs	\$0.00	\$5,100.00	\$5,100.00	\$5,100.00
8	1440 Site Acquisition				
9	1450 Site Improvements	\$100,000.00	\$22,211.68	\$22,211.68	\$22,211.68
10	1460 Dwelling Structures	\$83,000.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Noneexpendable	\$39,000.00	\$13,353.32	\$13,353.32	\$13,353.32
12	1470 Nondwelling Structure				
13	1475 Nondwelling Equipment	\$0.00	\$46,670.00	\$46,670.00	\$46,670.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1495.1 Relocation Cost				
17	1498 MOD Used for Development				
18	1502 Contingency (Not to exceed 8% of line 19)				
19	<b>Amount of Annual Grant (Sum of lines 2-18)</b>	<b>\$302,186.00</b>	<b>\$302,186.00</b>	<b>\$302,186.00</b>	<b>\$302,186.00</b>
20	Amount of line 19 Related to LBP Activities				
21	Amount of line 19 Related to Sec 504 Comp.				
22	Amount of line 19 Related to Security				
23	Amount of line 19 Related to Energy Conservation	\$15,353.32			

Signature of Executive Director & Date:

Gwendolyn B. Dawson, Executive Director

Signature of Public Housing Director/

Office of Native American Programs Administrator & Date:

Victoria A. Main, Director Office of Public Housing

1 To be completed for Performance & 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 and Capital Fund Program Replacement Housing Facotr (CFP/CFPRHF)**

**PART II: Suporting Pages**

PHA Name: Ocala Housing Authority			Grant Type and Number Capital Fund Program: FL29PO32501-09 Capital Fund Program: Replacement Housing Factor #:			Federal FY of Grant: 2009		
Development Number	Description of Work Items	Development Account Number	Funds Approved			Funds Obligated	Funds Expended	Status of Proposed Work
			Original	Revised	Difference			
PHA Wide	<b>OPERATIONS</b>							
	Operating Sidsidy	1406	49,186.00	168,968.00	119,782.00	168968.00	\$168,968.00	completed
	<b>TOTAL</b>	1406	<b>49,186.00</b>	<b>168,968.00</b>	119,782.00	168968.00	\$168,968.00	
PHA Wide	<b>MANAGEMENT IMPROVEMENTS</b>							
	Staff Training	1408	5,000.00	5,000.00	0.00	4,731.81	4,731.81	Completed
	Computer Equip& Randall phone and computer	1408	0.00	10,665.00	10,665.00	10,933.19	10,933.19	Completed
	<b>TOTAL</b>	1408	<b>5,000.00</b>	<b>15,665.00</b>	10,665.00	15,665.00	<b>15,665.00</b>	
PHA Wide	<b>ADMINISTRATION</b>							
	MOD Cordinator Salary	1410	26,000.00	30,218.00	4,218.00	30,218.00	30,218.00	Completed
	Sundry	1410						
	<b>TOTAL</b>	1410	<b>26,000.00</b>	<b>30,218.00</b>	4,218.00	30,218.00	<b>30,218.00</b>	
PHA Wide	<b>FEES AND COSTS</b>							
	A & E Fees and Costs	1430						
	Energy Audit	1430						
	Physical Assessment	1430						
	Property Survey	1430	0.00	5,100.00	5,100.00	5,100.00	5,100.00	Completed
	UPCS Inspections	1430						
	<b>TOTAL</b>	1430	<b>0.00</b>	<b>5,100.00</b>	5,100.00	5,100.00	<b>5,100.00</b>	

FL32-01	<b>PHA Wide</b>							
	<b>Site Improvement</b>							
	Road Repaving	1450	0.00	20,211.68	20,211.68	20,211.68	20,211.68	complted Augu
	Water Line Repair/Replacement	1450	100,000.00	2,000.00	-98,000.00	2,000.00	2,000.00	completed
	<b>Sub-Total</b>	1450	<b>100,000.00</b>	<b>22,211.68</b>	<b>-77,788.32</b>	<b>22,211.68</b>	<b>22,211.68</b>	
	<b>Dwelling Structure</b>							
	Bathroom Renovations	1460	54,000.00	0.00	-54,000.00			moved to ARRA
	Bathroom Exhaust Fan Replacement	1460	12,000.00	0.00	-12,000.00			moved to ARRA
	Toilet Replacements	1460	5,000.00	0.00	-5,000.00			moved to ARRA
	Showerhead Replacements	1460	12,000.00	0.00	-12,000.00			moved to ARRA
	<b>Sub-Total</b>	1460	<b>83,000.00</b>	<b>0.00</b>	<b>-83,000.00</b>	<b>0.00</b>	<b>0.00</b>	
	<b>Dwelling Equipment - Non Expendable</b>							
	Appliances (Refrigerators & Gas Ranges)	1465.1	39,000.00	13,353.32	-25,646.68	13,353.32	13,353.32	completed
	<b>Sub-Total</b>	1465.1	<b>39,000.00</b>	<b>13,353.32</b>	<b>-25,646.68</b>	<b>13,353.32</b>	<b>13,353.32</b>	
	<b>Non Dwelling Equipment</b>							
	Trucks	1475	0.00	46,670.00	46,670.00	46,670.00	46,670.00	completed
					46,670.00	46,670.00	<b>46,670.00</b>	
	<b>TOTAL</b>		<b>302,186.00</b>	<b>302,186.00</b>			<b>82,235.00</b>	
	<b>TOTAL GRANT</b>		<b>\$ 302,186.00</b>	<b>\$ 302,186.00</b>	<b>\$ (0.00)</b>	<b>302,186.00</b>	<b>302,186.00</b>	







Contractor Name	Scope of Service	Community Name	Contract \$
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## READ

This Excel book consist of 5 different working sheets.  
Sheets Name: Part I, II, III, Obligation and LOCCS

Part I, II and III are the different sections of the capital improvement budget.  
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# U.S Department of Housing and Urban Development Office of Public Housing

## Part I: Summary

### Annual Statement/Performance and Evaluation Report Capital Fund Program

PHA Name: \_\_\_\_\_ Modernization Project Number: \_\_\_\_\_ FFY of Grant Approval

**OCALA HOUSING AUTHORITY**

**FL29P032501-08**

**2008**

Original Annual Statement  Reserved for Disasters/Emergencies.  Revised Annual Statement/Revision No.  
 Final Performance and Evaluation Report  Performance and Evaluation Report for Period Ending

LINE NO.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		ORIGINAL	REVISED	OBLIGATED	EXPENDED
1	Total none-CIAP/CGP Funds				
2	1406 Operations (Not to exceed 10% of line 19)	\$50,027.00	\$80,039.26	\$80,039.26	\$80,039.26
3	1408 Management Improvements	\$3,000.00	\$6,028.67	\$6,028.67	\$6,028.67
4	1410 Administration	\$26,447.00	\$26,447.00	\$26,447.00	\$26,447.00
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs	\$5,000.00	\$4,544.40	\$4,544.40	\$4,544.40
8	1440 Site Acquisition				
9	1450 Site Improvements	\$8,000.00	\$2,515.00	\$2,515.00	\$2,515.00
10	1460 Dwelling Structures	\$172,000.00	\$125,357.67	\$125,357.67	\$125,357.67
11	1465.1 Dwelling Equipment-Noneexpendable		\$19,542.00	\$19,542.00	\$19,542.00
12	1470 Nondwelling Structure				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1495.1 Relocation Cost				
17	1498 MOD Used for Development				
18	1502 Contingency (Not to exceed 8% of line 19)				
<b>19</b>	<b>Amount of Annual Grant (Sum of lines 2-18)</b>	<b>\$264,474.00</b>	<b>\$264,474.00</b>	<b>\$264,474.00</b>	<b>\$264,474.00</b>
20	Amount of line 19 Related to LBP Activities				
21	Amount of line 19 Related to Sec 504 Comp.				
22	Amount of line 19 Related to Security	\$154,000.00			
23	Amount of line 19 Related to Energy Conservation	\$154,000.00			

Signature of Executive Director & Date:

Signature of Public Housing Director/

Office of Native American Programs Administrator & Date:

Gwendolyn B. Dawson, Executiver Director

Victoria Main, Director of Office of Public Housing

1 To be completed for Performance & Evaluation Report Or a Revised Annual Statement.

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**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Facotr (CFP/CFPRHF)**

**PART II: Suporting Pages**

PHA Name: Ocala Housing Authority			Grant Type and Number Capital Fund Program: FL29PO32501-08 Capital Fund Program: Replacement Housing Factor #:			Federal FY of Grant: 2008		
Development Number	Description of Work Items	Development Account Number	Funds Approved			Funds Obligated	Funds Expended	Status of Proposed Work
			Original	Revised	Difference			
PHA Wide	OPERATIONS							
	Operating Sidsidy	1406	50,027.00	80,039.26	-30,012.26	80039.26	\$80,039.26	completed
	<b>TOTAL</b>	1406	<b>50,027.00</b>	<b>80,039.26</b>	<b>-30,012.26</b>	80039.26	\$80,039.26	
PHA Wide	MANAGEMENT IMPROVEMENTS							
	Staff Training	1408	0.00	3,028.67	-3,028.67	3,028.67	3,028.67	completed
	MIS Tech Support	1408	3,000.00	3,000.00	0.00	3,000.00	3,000.00	completed
		1408						
	<b>TOTAL</b>	1408	<b>3,000.00</b>	<b>6,028.67</b>	<b>-3,028.67</b>	6,028.67	<b>6,028.67</b>	
PHA Wide	ADMINISTRATION							
	MOD Cordinator Salary	1410	26,447.00	26,447.00	0.00	26,447.00	26,447.00	completed
	Sundry	1410						
	<b>TOTAL</b>	1410	<b>26,447.00</b>	<b>26,447.00</b>	0.00	26,447.00	<b>26,447.00</b>	
PHA Wide	FEES AND COSTS							
	A & E Fees and Costs	1430	2,000.00	2,712.90	-712.90	2,712.90	2,712.90	completed
	Energy Audit	1430						
	Physical Assessment	1430						
	UPCS Inspections	1430	3,000.00	1,831.50	1,168.50	1,831.50	1,831.50	completed
	<b>TOTAL</b>	1430	<b>5,000.00</b>	<b>4,544.40</b>	455.60	4,544.40	<b>4,544.40</b>	

FL32-02	<b>PAVILION OAKS</b>							
	<b>Site Improvement</b>	1450						
	Tree Removal and Trim	1450						
	Fence Repair and Reconfiguration	1450						
	Sub-Total	1450	0.00	0.00	0.00	0.00	0.00	
	<b>Dwelling Structure</b>							
	Window Replacementq	1460	54,000.00	33,041.67	20,958.33	33,041.67	33,041.67	completed
	Roof Replacement Units	1460						
	Install Siding on Storage Sheds (39)	1460						
	Install Water Meters & Hose Bibs (39)	1460						
	HVAC Replacement (1)	1460	5,000.00	5,000.00	0.00	5,000.00	5,000.00	completed
	Sub-Total	1460	59,000.00	38,041.67	20,958.33	38,041.67	38,041.67	
	<b>Dwelling Equipment - Non Expendable</b>	1465.1						
	Appliances (Refrigerators & Gas Ranges)	1465.1	0.00	2,747.00	-2,747.00	2,747.00	2,747.00	completed
	Window Treatments (343)	1465.1						
	Sub-Total	1465.1	0.00	2,747.00	-2,747.00	2,747.00	2,747.00	
	<b>NON DWELLING EQUIPMENT</b>							
	Community Center Roof Repair	1470						
	Sub-Total		0.00	0.00	0.00		0.00	
	<b>TOTAL</b>		59,000.00	40,788.67	18,211.33	40,788.67	40,788.67	
FL32-03	<b>DEER RUN</b>							
	<b>Site Improvements</b>							
	Security Lighting entry way	1450	1,265.00	240.00	1,025.00	240.00	240.00	completed
	Tree Removal and Trimming	1450	1,735.00	1,735.00	0.00	1,735.00	1,735.00	completed
	Westside Divider	1450						
	Sub-Total	1450	3,000.00	1,975.00	1,025.00	1,975.00	1,975.00	
	<b>Dwelling Structure</b>							
	Install Water Meters and Hose Bibs (76)	1460						
	Window replacement (316)	1460						
	Repalce Back Door (10)	1460						
	HVAC Replacement (10)	1460	5,000.00	5,000.00	0.00	5,000.00	5,000.00	completed
	Sub-Total	1460	5,000.00	5,000.00	0.00	5,000.00	5,000.00	
	<b>Dwelling Equipment - Non Expendable</b>	1465.1						
	Window Treatments (371)	1465.1						
	Appliances (Refrigerators & Gas Ranges)(18)	1465.1	0.00	7,795.00	-7,795.00	7,795.00	7,795.00	completed
	Sub-Total	1465.1	0.00	7,795.00	-7,795.00	7,795.00	7,795.00	
	<b>Non Dwelling Equipment</b>	1475						
	HVAC Replacement - Family	1475	0.00	0.00	0.00			
	Sub-Total		0.00	0.00	0.00			
	<b>TOTAL</b>		8,000.00	14,770.00	-6,770.00	14,770.00	14,770.00	

FL32-04	<b>SHADY HOLLOW</b>							
	<b>Site Improvements</b>							
	Security Lighting	1450	5,000.00	540.00	4,460.00	540.00	540.00	completed
	Tree Removal and Trimming	1450						
	Replace & Install Dumpster Fence (PVC) (3)	1450						
	Sub-Total	1450	<b>5,000.00</b>	<b>540.00</b>	4,460.00	540.00	540.00	
	<b>Dwelling Structure</b>							
	Window Replacement	1460	80,000.00	57,316.00	22,684.00	57,316.00	57,316.00	completed
	concrete sidewalk	1460		18,776.00	-18,776.00	18,776.00	18,776.00	completed
	Install Water Meters & Hose Bibs (50)	1460			0.00			
	HVAC Replacement (9)	1460	5,000.00	6,224.00	-1,224.00	6,224.00	6,224.00	completed
	Sub-Total	1460	<b>85,000.00</b>	<b>82,316.00</b>	2,684.00	<b>82,316.00</b>	<b>82,316.00</b>	
	<b>Dwelling Structure - Non Expendable</b>	1465.1						
	Window Treatment(240)	1465.1						
	Appliances (Refrigerators & Gas Ranges)(13)	1465.1	0.00	6,500.00	-6,500.00	6,500.00	6,500.00	completed
	Sub-Total	1465.1	<b>0.00</b>	<b>6,500.00</b>	-6,500.00	6,500.00	<b>6,500.00</b>	
	<b>Non Dwelling Structure</b>	1470						
	Install interior wall	1470						
	Replace Rear Door	1470						
	Sub-Total	1470	<b>0.00</b>	0.00	0.00			
	<b>Non Dwelling Equipment</b>	1475						
	<b>TOTAL</b>		<b>90,000.00</b>	<b>89,356.00</b>	<b>644.00</b>	89,356.00	89,356.00	
FL32-08	<b>PINE GARDENS</b>							
	<b>Site Improvements</b>							
	Security Lighting	1450						
	Sub-Total	1450	<b>0.00</b>	<b>0.00</b>		0	0	
	<b>Dwelling Structure</b>	1460						
	Sliding Repairs/Replacement	1460	3,000.00	0.00	3,000.00	-		ARRA
	Window Replacement	1460	20,000.00	0.00	20,000.00			PD other grant
	HVAC Replacement	1460						
	Sub-Total	1460	<b>23,000.00</b>	<b>0.00</b>	23,000.00	-	-	
	<b>Dwelling Equipment - Non Expendable</b>	1465.1						
	Window Treatment (40)	1465.1						
	Appliances (Refrigerators & Gas Ranges)(4)	1465.1	0.00	2,500.00	-2,500.00	2500	2500	completed
	Sub-total	1465.1	<b>0.00</b>	<b>2,500.00</b>	-2,500.00	2500	<b>2500</b>	
	<b>Non Dwelling Equipment</b>	1475						
	Replace Elevator (1)	1475						
	Sub-Total	1475	<b>0.00</b>	<b>0.00</b>				
	<b>TOTAL</b>		<b>23,000.00</b>	<b>2,500.00</b>	<b>20,500.00</b>	2,500.00	2,500.00	
	<b>TOTAL GRANT</b>		<b>\$ 264,474.00</b>	<b>\$264,474.00</b>	<b>\$0.00</b>	<b>264,474.00</b>	<b>264,474.00</b>	

**Annual Statement/Performance and Evaluation Report  
 Capital Fund Program and Capital Fund Program Replacement Housing Facotr (CFP/CFPRHF)  
 PART III: Implementation Schedule**

Development Number	All Funds Obligated			All Funds Expended			Reason for revised Target Date			
	ORIGINAL	REVISED	ACTUAL	ORIGINAL	REVISED	ACTUAL				
PHA Name: Grant Type and Number: Federal FY of Grant: Capital Fund Program: FI29PO32501-07 2007 Capital Fund Program: Replacement Housing Factor #:										
	(ATTACH EXPLANATION)			(ATTACH EXPLANATION)						
PHA-Wide										
#1406	9/30/2010		6/30/2010	9/30/2012		6/30/2010				
#1408	9/30/2010		6/30/2010	9/30/2012		3/31/2010				
#1410	9/30/2010		6/30/2010	9/30/2012		3/31/2010				
#1430	9/30/2010		6/30/2010	9/30/2012						
FL32-02										
#1450										
#1460	9/30/2010		6/30/2010	9/30/2012		3/31/2010				
#1465										
#1475										
FL32-03										
#1450	9/30/2010		6/30/2010	9/30/2012		6/30/2010				
#1460	9/30/2010		6/30/2010	9/30/2012		6/30/2010				
#1465										
#1475										
FL32-04										
#1450	9/30/2010		6/30/2010	9/30/2012		6/30/2010				
#1460	9/30/2010		6/30/2010	9/30/2012		6/30/2010				
#1465										
#1470										
FL32-08										
#1450										
#1460	9/30/2010		6/30/2010	9/30/2012		6/30/2010				
#1465										
#1475										









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

## Part I: Summary

### Annual Statement/Performance and Evaluation Report Capital Fund Program

PHA Name:

**OCALA HOUSING AUTHORITY**

Modernization Project Number:

**FL29P032501-07**

FFY of Grant Approval

**2007**

Original Annual Statement  Reserved for Disasters/Emergencies.

Revised Annual Statement/Revision No. # 1

Final Performance and Evaluation Report

Performance and Evaluation Report for Period Ending -

LINE NO.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		ORIGINAL	REVISED	OBLIGATED	EXPENDED
1	Total none-CIAP/CGP Funds				
2	1406 Operations (Not to exceed 10% of line 19)	\$50,097.00	\$50,097.00	\$50,097.00	\$50,097.00
3	1408 Management Improvements	\$5,000.00	\$3,382.90	\$3,382.90	\$3,382.90
4	1410 Administration	\$25,697.00	\$25,697.00	\$25,697.00	\$25,697.00
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs	\$5,000.00	\$2,191.67	\$2,191.67	\$2,191.67
8	1440 Site Acquisition				
9	1450 Site Improvements	\$10,000.00	\$11,600.00	\$11,600.00	\$11,600.00
10	1460 Dwelling Structures	\$140,770.00	\$146,848.19	\$146,848.19	\$146,848.19
11	1465.1 Dwelling Equipment-Noneexpendable	\$10,000.00	\$15,500.00	\$15,500.00	\$15,500.00
12	1470 Nondwelling Structure	\$10,500.00	\$0.00		
13	1475 Nondwelling Equipment		\$1,747.24	\$1,747.24	\$1,747.24
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1495.1 Relocation Cost				
17	1498 MOD Used for Development				
18	1502 Contingency (Not to exceed 8% of line 19)				
19	<b>Amount of Annual Grant (Sum of lines 2-18)</b>	<b>\$257,064.00</b>	<b>\$257,064.00</b>	<b>\$257,064.00</b>	<b>\$257,064.00</b>
20	Amount of line 19 Related to LBP Activities				
21	Amount of line 19 Related to Sec 504 Comp.				
22	Amount of line 19 Related to Security	\$150,000.00			
23	Amount of line 19 Related to Energy Conservation	\$150,000.00			

Signature of Executive Director & Date:

Gwendolyn B. Dawson

Signature of Public Housing Director/

Office of Native American Programs Administrator & Date:

Victoria Main, Public Housing Director

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**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Facotr (CFP/CFPRHF)**

**PART II: Suporting Pages**

PHA Name: Ocala Housing Authority			Grant Type and Number Capital Fund Program: FL29PO32501-07 Capital Fund Program: Replacement Housing Factor #:			Federal FY of Grant: 2007		
Development Number	Description of Work Items	Development Account Number	Funds Approved			Funds Obligated	Funds Expended	Status of Proposed Work
			Original	Revised	Difference			
PHA Wide	<b>OPERATIONS</b>							
	Operating Sidsidy	1406	50,097.00	50,097.00		50097.00	\$50,097.00	Completed
	<b>TOTAL</b>	1406	<b>50,097.00</b>	<b>50,097.00</b>		50097.00	\$50,097.00	
PHA Wide	<b>MANAGEMENT IMPROVEMENTS</b>							
	Staff Training	1408	2,000.00	2,686.70		2,686.70	2,686.70	Completed
	MIS Tech Support	1408	3,000.00	696.20		696.20	696.20	Completed
		1408						
	<b>TOTAL</b>	1408	<b>5,000.00</b>	<b>3,382.90</b>		3,382.90	<b>3,382.90</b>	
PHA Wide	<b>ADMINISTRATION</b>							
	MOD Cordinator Salary	1410	25,697.00	25,697.00		25,697.00	25,697.00	Completed
	Sundry	1410						
	<b>TOTAL</b>	1410	<b>25,697.00</b>	<b>25,697.00</b>		25,697.00	<b>25,697.00</b>	
PHA Wide	<b>FEES AND COSTS</b>							
	A & E Fees and Costs	1430	2,000.00					
	Energy Audit	1430		741.67		741.67	741.67	Completed
	Noise Study	1430		1,450.00		1,450.00	1,450.00	Completed
	UPCS Inspections	1430	3,000.00					
	<b>TOTAL</b>	1430	<b>5,000.00</b>	<b>2,191.67</b>		2,191.67	<b>2,191.67</b>	

FL32-02	<b>PAVILION OAKS</b>							
	<b>Site Improvement</b>	1450						
	Tree Removal and Trim	1450	1,000.00	1,000.00	1,000.00	1,000.00	Completed	
	Fence Repair and Reconfiguration	1450	2,000.00	0.00				
	Sub-Total	1450	<b>3,000.00</b>	<b>1,000.00</b>	1,000.00	<b>1,000.00</b>		
	<b>Dwelling Structure</b>							
	Roof Replacement Units	1460						
	Install Siding on Storage Sheds (39)	1460						
	Install Water Meters & Hose Bibs (39)	1460						
	Conversion of CC to Dwelling Unit	1460						
	HVAC Replacement (1)	1460						
	Sub-Total	1460	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>		
	<b>Dwelling Equipment - Non Expendable</b>	1465.1						
	Appliances (Refrigerators & Gas Ranges)	1465.1	1,500.00	3,000.00	3,000.00	3,000.00	Completed	
	Window Treatments (343)	1465.1						
	Sub-Total	1465.1	<b>1,500.00</b>	<b>3,000.00</b>	3,000.00	<b>3,000.00</b>		
	<b>NON DWELLING EQUIPMENT</b>							
	Community Center Roof Repair	1470	10,000.00	0.00				
	Sub-Total		<b>10,000.00</b>	0.00			<b>0.00</b>	
	<b>TOTAL</b>		<b>14,500.00</b>	<b>4,000.00</b>	4,000.00	<b>4,000.00</b>		
FL32-03	<b>DEER RUN</b>							
	<b>Site Improvements</b>							
	Security Lighting entry way, 3000 & 3100 sections	1450						
	Tree Removal and Trimming	1450	3,000.00	8,600.00	8,600.00	8,600.00	Completed	
	Westside Divider	1450	2,000.00	0.00				
	Sub-Total	1450	<b>5,000.00</b>	<b>8,600.00</b>	8,600.00	8,600.00		
	<b>Dwelling Structure</b>							
	Install Water Meters and Hose Bibs (76)	1460						
	Window replacement (316)	1460	140,770.00	105,491.49	105,491.49	105,491.49	Completed	
	Repalce Back Door (10)	1460						
	HVAC Replacement (10)	1460		41,356.70	41,356.70	41,356.70	Completed	
	Sub-Total	1460	<b>140,770.00</b>	<b>146,848.19</b>	146,848.19	<b>146,848.19</b>		
	<b>Dwelling Equipment - Non Expendable</b>	1465.1						
	Window Treatments (371)	1465.1						
	Appliances (Refrigerators & Gas Ranges)(18)	1465.1	4,000.00	6,000.00	6,000.00	6,000.00	Completed	
	Sub-Total	1465.1	<b>4,000.00</b>	<b>6,000.00</b>	6,000.00	<b>6,000.00</b>	Completed	
	<b>Non Dwelling Equipment</b>	1475						
	HVAC Replacement - Family	1475	0.00	0.00				
	Sub-Total		0.00	0.00				
	<b>TOTAL</b>		<b>149,770.00</b>	<b>161,448.19</b>	161,448.19	<b>161,448.19</b>		

FL32-04	<b>SHADY HOLLOW</b>							
	<b>Site Improvements</b>							
	Security Lighting	1450						
	Tree Removal and Trimming	1450	2,000.00	2,000.00		2,000.00	2,000.00	Completed
	Replace & Install Dumpster Fence (PVC) (3)	1450						
	Sub-Total	1450	<b>2,000.00</b>	<b>2,000.00</b>		2,000.00	2,000.00	
	<b>Dwelling Structure</b>							
		1460						
	Install Water Meters & Hose Bibs (50)	1460						
	HVAC Replacement (9)	1460						
	Sub-Total	1460	<b>0.00</b>	<b>0.00</b>		<b>0.00</b>	<b>0.00</b>	
	<b>Dwelling Structure - Non Expendable</b>	1465.1						
	Window Treatment(240)	1465.1						
	Appliances (Refrigerators & Gas Ranges)(13)	1465.1	3,000.00	4,500.00		4,500.00	4,500.00	Completed
	Sub-Total	1465.1	<b>3,000.00</b>	<b>4,500.00</b>		4,500.00	<b>4,500.00</b>	
	<b>Non Dwelling Structure</b>	1470						
	Install interior wall	1470						
	Replace Rear Door	1470	500.00	0.00				
	Sub-Total	1470	<b>500.00</b>	<b>0.00</b>				
	<b>Non Dwelling Equipment</b>	<b>1475</b>						
	<b>TOTAL</b>		<b>5,500.00</b>	<b>6,500.00</b>		6,500.00	6,500.00	
FL32-08	<b>PINE GARDENS</b>							
	<b>Site Improvements</b>							
	Security Lighting	1450						
	Sub-Total	1450	<b>0.00</b>	<b>0.00</b>		0	0	
	<b>Dwelling Structure</b>	1460						
	Sliding Repairs/Replacement	1460						
	HVAC Replacement	1460						
	Sub-Total	1460	<b>0.00</b>	<b>0.00</b>		-	-	
	<b>Dwelling Equipment - Non Expendable</b>	1465.1						
	Window Treatment (40)	1465.1						
	Appliances (Refrigerators & Gas Ranges)(4)	1465.1	1,500.00	2,000.00		2000	2000	Completed
	Sub-total	1465.1	<b>1,500.00</b>	<b>2,000.00</b>		2000	<b>2000</b>	
	<b>Non Dwelling Equipment</b>	1475						
	Replace Elevator (1)	1475		1,747.24		1747.24	<b>1747.24</b>	Completed
	Sub-Total	1475	<b>0.00</b>	<b>1,747.24</b>		1747.24	<b>1747.24</b>	
	<b>TOTAL</b>		<b>1,500.00</b>	<b>3,747.24</b>		3,747.24	3,747.24	
	<b>TOTAL GRANT</b>		<b>\$ 257,064.00</b>	<b>\$ 257,064.00</b>		<b>257,064.00</b>	<b>257,064.00</b>	

**Annual Statement/Performance and Evaluation Report  
 Capital Fund Program and Capital Fund Program Replacement Housing Facotr (CFP/CFPRHF)  
 PART III: Implementation Schedule**

Development Number	All Funds Obligated			All Funds Expended			Reason for revised Target Date			
	ORIGINAL	REVISED	ACTUAL	ORIGINAL	REVISED	ACTUAL				
PHA Name: <b>Grant Type and Number</b> Federal FY of Grant: Capital Fund Program: FL29PO32501-07 2007 Capital Fund Program: Replacement Housing Factor #:										
	(ATTACH EXPLANATION)			(ATTACH EXPLANATION)						
PHA-Wide										
#1406	9/30/2009		12/31/2007	9/30/2011		9/30/2009				
#1408	9/30/2009		3/31/2009	9/30/2011		3/31/2009				
#1410	9/30/2009		12/31/2007	9/30/2011		6/30/2008				
#1430	9/30/2009		12/31/2008	9/30/2011		12/31/2008				
FL32-02										
#1450	9/30/2009		12/31/2008	9/30/2011		3/31/2009				
#1460										
#1465	9/30/2009		12/31/2008	9/30/2011		3/31/2009				
#1475										
FL32-03										
#1450	9/30/2009		12/31/2008	9/30/2011		3/31/2009				
#1460	9/30/2009		3/31/2009	9/30/2011		9/30/2009				
#1465	9/30/2009		12/31/2008	9/30/2011		3/31/2009				
#1475										
FL32-04										
#1450	9/30/2009		12/31/2008	9/30/2011		3/31/2009				
#1460	9/30/2009		3/31/2009	9/30/2011		9/30/2009				
#1465	9/30/2009		12/31/2008	9/30/2011		3/31/2009				
#1470	9/30/2009			9/30/2011						
FL32-08										
#1450	9/30/2009		12/31/2008	9/30/2011		3/31/2009				
#1460	9/30/2009		3/31/2009	9/30/2011		9/30/2009				
#1465	9/30/2009		12/31/2008	9/30/2011		3/31/2009				
#1475										





Ocala Housing Authority  
Capital Fund Grant 501-07

Total Funded

Development Ac		1406	1408	1410	1430	1450	1460	1465	1470	1475	Total			
Date	#	50,097.00	3,382.90	25,697.00	2,191.67	11,600.00	146,848.19	15,500.00	0.00	1,747.24	\$257,064.00			
4-Oct	1	4,174.75									4,174.75			
31-Oct	2	4,174.75									4,174.75			
6-Nov	3			2,359.26				8,750.00			11,109.26			
11/29	4	4,174.75		2,831.65							7,006.40			
1/3	5	4,174.75		3,830.45							8,005.20			
5-Feb	6	4,174.75		3,067.91			53,030.00				60,272.66			
2/29/2008	7.00	4,174.75		4,072.73			53,350.00				61,597.48			
3/31/2008	8.00	4,174.75		2,714.86			8,625.00	1,250.00			16,764.61			
4/30/2008	9.00	4,174.75		2,714.86						1,747.24	8,636.85			
5/31/2008	10.00	4,174.75		2,041.36							6,216.11			
6/30/2008	11.00	4,174.75		2,063.92							6,238.67			
7/18/2008	12.00					2,750.00	6,645.00				9,395.00			
8/13/2008	13.00	4,174.75			741.67			3,615.00			8,531.42			
8/30/2008	14.00	4,174.75									4,174.75			
9/30/2008	15.00							1,164.00			1,164.00			
10/31/2008	16.00				1,450.00	3,150.00					4,600.00			
1/9/2009	####					5,700.00					5,700.00			
11/30/2008			2,686.70								2,686.70			
1/30/2009								721.00			721.00			
2/28/2009			696.20				5,614.80				6,311.00			
3/31/2009							13,226.69				13,226.69			
5/30/2009							1,450.00				1,450.00			
6/30/2009							360.01				360.01			
9/9/2009							3,425.00				3,425.00			
10/7/2009							1,121.69				1,121.69			
											0.00			
											0.00			
Total		50,097.00	3,382.90	25,697.00	2,191.67	11,600.00	146,848.19	15,500.00	-	1,747.24	257,064.00			
Balance		\$0.00	\$0.00	0.00	-	0.00	0.00	0.00	0.00	0.00	0.00			
Approved											0.00			

Obligation End Date is: September 30, 2009



## READ

This Excel book consist of 5 different working sheets.  
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# U.S Department of Housing and Urban Development Office of Public Housing

## Part I: Summary

### Annual Statement/Performance and Evaluation Report Capital Fund Program

PHA Name: **OCALA HOUSING AUTHORITY** Modernization Project Number: **FL29S032501-09** FFY of Grant Approval: **2009**

Original Annual Statement  Reserved for Disasters/Emergencies.  Revised Annual Statement/Revision No. #  
 Final Performance and Evaluation Report  Performance and Evaluation Report for Period Ending -

LINE NO.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		ORIGINAL	REVISED	OBLIGATED	EXPENDED
1	Total none-CIAP/CGP Funds				
2	1406 Operations (Not to exceed 10% of line 19)				
3	1408 Management Improvements		\$2,838.66	\$2,838.66	\$2,838.66
4	1410 Administration		\$60,736.71	\$60,736.71	\$60,736.71
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvements	\$189,261.54	\$130,207.95	\$130,207.95	\$130,207.95
10	1460 Dwelling Structures	\$310,264.46	\$300,863.50	\$300,863.50	\$300,863.50
11	1465.1 Dwelling Equipment-Noneexpendable	\$170,700.00	\$91,981.00	\$91,981.00	\$91,981.00
12	1470 Nondwelling Structure	\$50,760.00	\$129,672.18	\$129,672.18	\$129,672.18
13	1475 Nondwelling Equipment	\$6,755.00	\$11,441.00	\$11,441.00	\$11,441.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1495.1 Relocation Cost				
17	1498 MOD Used for Development				
18	1502 Contingency (Not to exceed 8% of line 19)				
19	<b>Amount of Annual Grant (Sum of lines 2-18)</b>	<b>\$727,741.00</b>	<b>\$727,741.00</b>	<b>\$727,741.00</b>	<b>\$727,741.00</b>
20	Amount of line 19 Related to LBP Activities				
21	Amount of line 19 Related to Sec 504 Comp.				
22	Amount of line 19 Related to Security				
23	Amount of line 19 Related to Energy Conservation	\$333,700.00			

Signature of Executive Director & Date:

Signature of Public Housing Director/

Office of Native American Programs Administrator & Date:

Gwendolyn B. Dawson, Executive Director

Victoria A. Main, Director Office of Public Housing

1 To be completed for Performance & 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 and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

**PART II: Supporting Pages**

PHA Name: Ocala Housing Authority			Grant Type and Number Capital Fund Program: Capital Fund Program: Replacement Housing Factor #:			Federal FY of Grant: 2009		
Development Number	Description of Work Items	Development Account Number	Funds Approved			Funds Obligated	Funds Expended	Status of Proposed Work
			Original	Revised	Difference			
PHA Wide	OPERATIONS	1406						
	<b>TOTAL</b>	1406	<b>0.00</b>			0.00		
PHA Wide	MANAGEMENT IMPROVEMENTS	1408						
	Management Training		0.00					
	Equipment- Server		0.00	2,838.66		2,838.66	2,838.66	completed
	<b>Sub-TOTAL</b>	1408	<b>0.00</b>	<b>2,838.66</b>		<b>2,838.66</b>	<b>2,838.66</b>	
PHA Wide	ADMINISTRATION							
	Salary	1410	0.00	60,736.71		60,736.71	60,736.71	completed
	<b>Sub-TOTAL</b>	1410	<b>0.00</b>	<b>60,736.71</b>		<b>60,736.71</b>	<b>60,736.71</b>	
PHA Wide	FEES AND COSTS							
	<b>Sub-TOTAL</b>	1430	<b>0.00</b>			0.00	<b>0.00</b>	

FL32-02	<b>FLO32-01</b>						
	<b>Site Improvement</b>	1450					
	Resurface Parking Lot	1450	159,800.00	98,407.95	98,407.95	98,407.95	completed
	Landscaping Infill- donley	1450	0.00	5,200.00	5,200.00	5,200.00	completed
	Tree Trimming PG			2,750.00	2,750.00	2,750.00	completed
	Landscaping - Tree Trimming & Removal	1450	29,461.54	23,850.00	23,850.00	23,850.00	completed
	Sub-Total	1450	<b>189,261.54</b>	<b>130,207.95</b>	<b>130,207.95</b>	<b>130,207.95</b>	
	<b>Dwelling Structure</b>	1460					
	Exterior Painting	1460	93,407.31	70,150.00	70,150.00	70,150.00	completed
	Exterior doors	1460	40,000.00	38,467.88	38,467.88	38,467.88	completed
	Exterior Doors	1460					
	Roofing	1460	102,000.00	0.00			
	Exterior Storage Closets Repairs/Replacement	1460	3,000.00	0.00			
	Exterior Siding Replacement/Repair	1460	10,857.15	0.00			
	Window Replacement at SH	1460	61,000.00	0.00			
	Bathroom Renovations (Vanity, sink, toilet, exhaust)	1460	0.00	189,544.07	189,544.07	189,544.07	completed
	Hose Bibs	1460	0.00	2,701.55	2,701.55	2,701.55	completed
	Sub-Total	1460	<b>310,264.46</b>	<b>300,863.50</b>	<b>300,863.50</b>	<b>300,863.50</b>	
	<b>Dwelling Equipment - Non Expendable</b>	1465.1					
	HVAC	1465	150,000.00	61,831.00	61,831.00	61,831.00	completed
	Hot Water Heaters	1465	20,700.00	30,150.00	30,150.00	30,150.00	completed
	Sub-Total	1465.1	<b>170,700.00</b>	<b>91,981.00</b>	<b>91,981.00</b>	<b>91,981.00</b>	
	<b>Non Dwelling Structure</b>	1470					
	Community Room Conversion PO*	1470	30,000.00	71,454.53	71,454.53	71,454.53	completed
	Community Center Upgrades DR Family	1470	0.00	58,217.65	58,217.65	58,217.65	completed
	Community Center Upgrades DR Senior	1470	0.00				
	Community Center Upgrades SH	1470	18,510.00				
	Sub-Total	1470	<b>48,510.00</b>	<b>129,672.18</b>	<b>129,672.18</b>	<b>129,672.18</b>	
	<b>Non Dwelling Equipment</b>	1475					
	Playground Equipment Repair/Replacement	1475	1,755.00	4,700.00	4,700.00	4,700.00	completed
	Repair/Upgrade Basketball Court	1475	2,250.00	4,176.00	4,176.00	4,176.00	completed
	Repair/upgrade BB court Scott	1475		2,565.00	2,565.00	2,565.00	completed
	Elevator Repair/Replacement	1475	5,000.00	0.00			
	Sub-Total	1475	<b>9,005.00</b>	<b>11,441.00</b>	<b>11,441.00</b>	<b>11,441.00</b>	
	<b>TOTAL</b>		<b>727,741.00</b>	<b>727,741.00</b>	<b>0.00</b>	<b>727,741.00</b>	<b>727,741.00</b>

over obligate by \$12,364.41, which will be paid out of 09 regular CF  
Reduced PO Conversion









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Annual Statement/Performance and Evaluation Report  
Capital Fund Program **Part I: Summary**

U. S. Department of Housing  
and Urban Development

OMB Approval No. 2577-0157  
(exp. 06/30/2005)

Office of Public and Indian Housing

PHA Name:

**OCALA HOUSING AUTHORITY**

Capital Fund Program Project Number:

**FL29RO32502-08**

FFY of Grant Approval

2008

Original Annual Statement  Reserved for Disasters/Emergencies.  Revised Annual Statement/Revision No. #  
 Final Performance and Evaluation Report  Performance and Evaluation Report for Period Ending -

LINE NO.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		ORIGINAL	REVISED (1)	OBLIGATED	EXPENDED
1	Total none-CIAP/CGP Funds				
2	1406 Operations (Not to exceed 10% of line 19)				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment-Noneexpendable				
12	1470 Nondwelling Structure				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Cost				
18	1499 MOD Used for Development	\$310,451.00		\$310,451.00	\$310,451.00
19	1501 Debt Service Payment				
20	1502 Contingency (Not to exceed 8% of line 20)				
21	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	<b>\$310,451.00</b>		<b>\$310,451.00</b>	<b>\$310,451.00</b>
22	Amount of line 20 Related to LBP Activities				
23	Amount of line 20 Related to Sec 504 Comp.				
24	Amount of line 20 Related to Security				
25	Amount of line 20 Related to Energy Conservation				

Signature of Executive Director & Date:

Gwendolyn B. Dawson, Executive Director

Signature of Public Housing Director/

Office of Native American Programs Administrator & Date:

Victoria Main, Director

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**Annual Statement/Performance and Evaluation Report  
Capital Fund Program (CFP) Part II: Supporting Pages**

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

FL29RO32502-08

Development Number	Description of Work Items	Development Account Number	Quantity	All Funds Obligated (Quarter Ending)		All Funds Expended (Quarter Ending)		Status of Proposed Work
				Original	Revised 1	Funds Obligated	Funds Expended	
FL032-010	Mod Used for Work Development	1499		310,451.00		310,451.00	310,451.00	complete
FL032-010	<b>Management Improvement</b>	1408						
	Marketing			0.00		0.00	\$0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Administration</b>	1410						
	Salary			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Fees and Costs</b>	1430						
	Architects and Engineer			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Site Improvement</b>	1450						
	Infrastructure Improvements			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Dwelling Structure</b>	1460						
	Construction			\$0.00		0	0	
	Total			0		0	0	
FL032-010	<b>Dwelling Equipment</b>	1475						
	Appliances & Amenties			0				
	Total			0				
FL032-010	<b>Debt Service Payment</b>	1501						
	<b>TOTAL</b>			\$310,451.00		\$310,451.00	\$310,451.00	

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





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Annual Statement/Performance and Evaluation Report  
Capital Fund Program **Part I: Summary**

U. S. Department of Housing  
and Urban Development

OMB Approval No. 2577-0157  
(exp. 06/30/2005)

Office of Public and Indian Housing

PHA Name:

**OCALA HOUSING AUTHORITY**

Capital Fund Program Project Number:

**FL29RO32502-08**

FFY of Grant Approval

2008

Original Annual Statement  Reserved for Disasters/Emergencies.  Revised Annual Statement/Revision No. #  
 Final Performance and Evaluation Report  Performance and Evaluation Report for Period Ending -

LINE NO.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		ORIGINAL	REVISED (1)	OBLIGATED	EXPENDED
1	Total none-CIAP/CGP Funds				
2	1406 Operations (Not to exceed 10% of line 19)				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment-Noneexpendable				
12	1470 Nondwelling Structure				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Cost				
18	1499 MOD Used for Development	\$310,451.00		\$310,451.00	\$310,451.00
19	1501 Debt Service Payment				
20	1502 Contingency (Not to exceed 8% of line 20)				
21	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	<b>\$310,451.00</b>		<b>\$310,451.00</b>	<b>\$310,451.00</b>
22	Amount of line 20 Related to LBP Activities				
23	Amount of line 20 Related to Sec 504 Comp.				
24	Amount of line 20 Related to Security				
25	Amount of line 20 Related to Energy Conservation				

Signature of Executive Director & Date:

Gwendolyn B. Dawson, Executive Director

Signature of Public Housing Director/

Office of Native American Programs Administrator & Date:

Victoria Main, Director

1 To be completed for Performance & 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 (CFP) Part II: Supporting Pages**

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

FL29RO32502-08

Development Number	Description of Work Items	Development Account Number	Quantity	All Funds Obligated (Quarter Ending)		All Funds Expended (Quarter Ending)		Status of Proposed Work
				Original	Revised 1	Obligated	Expended	
FL032-010	Mod Used for Work Development	1499			310,451.00	310,451.00	310,451.00	complete
FL032-010	<b>Management Improvement</b>	1408						
	Marketing			0.00		0.00	\$0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Administration</b>	1410						
	Salary			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Fees and Costs</b>	1430						
	Architects and Engineer			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Site Improvement</b>	1450						
	Infrastructure Improvements			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Dwelling Structure</b>	1460						
	Construction			\$0.00		0	0	
	Total			0		0	0	
FL032-010	<b>Dwelling Equipment</b>	1475						
	Appliances & Amenties			0				
	Total			0				
FL032-010	<b>Debt Service Payment</b>	1501						
	<b>TOTAL</b>			\$310,451.00		\$310,451.00	\$310,451.00	

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Annual Statement/Performance and Evaluation Report  
Capital Fund Program **Part I: Summary**

U. S. Department of Housing  
and Urban Development

OMB Approval No. 2577-0157  
(exp. 06/30/2005)

Office of Public and Indian Housing

PHA Name:

**OCALA HOUSING AUTHORITY**

Capital Fund Program Project Number:

**FL29RO32502-09**

FFY of Grant Approval

2009

Original Annual Statement  Reserved for Disasters/Emergencies.  Revised Annual Statement/Revision No. #

Final Performance and Evaluation Report  Performance and Evaluation Report for Period Ending - 9-30-2012

LINE NO.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		ORIGINAL	REVISED (1)	OBLIGATED	EXPENDED
1	Total none-CIAP/CGP Funds				
2	1406 Operations (Not to exceed 10% of line 19)				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment-Noneexpendable				
12	1470 Nondwelling Structure				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Cost				
18	1499 MOD Used for Development	\$163,412.00		\$0.00	\$0.00
19	1501 Debt Service Payment				
20	1502 Contingency (Not to exceed 8% of line 20)				
21	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	<b>\$163,412.00</b>		<b>\$0.00</b>	<b>\$0.00</b>
22	Amount of line 20 Related to LBP Activities				
23	Amount of line 20 Related to Sec 504 Comp.				
24	Amount of line 20 Related to Security				
25	Amount of line 20 Related to Energy Conservation				

Signature of Executive Director & Date:

Gwendolyn B. Dawson

Signature of Public Housing Director/

Office of Native American Programs Administrator & Date:

Mary Trepasso, Acting Public Housing Director

1 To be completed for Performance & Evaluation Report Or a Revised Annual Statement.

2 To be completed for the Performance and Evaluation Report.

form HUD-52837 (9/98)

ref Handbook 7485.3

**Annual Statement/Performance and Evaluation Report  
Capital Fund Program (CFP) Part II: Supporting Pages**

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

FL29RO32502-09

Development Number	Description of Work Items	Development Account Number	Quantity	All Funds Obligated (Quarter Ending)		All Funds Expended (Quarter Ending)		Status of Proposed Work
				Original	Revised 1	Funds Obligated	Funds Expended	
FL032-010	Mod Used for Work Development	1499		310,451.00		\$76,815.81	\$76,815.81	
FL032-010	<b>Management Improvement</b>	1408						
	Marketing			0.00		0.00	\$0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Administration</b>	1410						
	Salary			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Fees and Costs</b>	1430						
	Architects and Engineer			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Site Improvement</b>	1450						
	Infrastructure Improvements			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Dwelling Structure</b>	1460						
	Construction			\$0.00		0	0	
	Total			0		0	0	
FL032-010	<b>Dwelling Equipment</b>	1475						
	Appliances & Amenties			0				
	Total			0				
FL032-010	<b>Debt Service Payment</b>	1501						
	<b>TOTAL</b>			\$310,451.00		\$76,815.81	\$76,815.81	

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Annual Statement/Performance and Evaluation Report  
Capital Fund Program **Part I: Summary**

U. S. Department of Housing  
and Urban Development

OMB Approval No. 2577-0157  
(exp. 06/30/2005)

Office of Public and Indian Housing

PHA Name:

**OCALA HOUSING AUTHORITY**

Capital Fund Program Project Number:

**FL29RO32502-10**

FFY of Grant Approval

2010

Original Annual Statement  Reserved for Disasters/Emergencies.  Revised Annual Statement/Revision No. #

Final Performance and Evaluation Report  Performance and Evaluation Report for Period Ending - 9-30-2012

LINE NO.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		ORIGINAL	REVISED (1)	OBLIGATED	EXPENDED
1	Total none-CIAP/CGP Funds				
2	1406 Operations (Not to exceed 10% of line 19)				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment-Noneexpendable				
12	1470 Nondwelling Structure				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Cost				
18	1499 MOD Used for Development	\$7,360.00		\$0.00	\$0.00
19	1501 Debt Service Payment				
20	1502 Contingency (Not to exceed 8% of line 20)				
21	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	<b>\$7,360.00</b>		<b>\$0.00</b>	<b>\$0.00</b>
22	Amount of line 20 Related to LBP Activities				
23	Amount of line 20 Related to Sec 504 Comp.				
24	Amount of line 20 Related to Security				
25	Amount of line 20 Related to Energy Conservation				

Signature of Executive Director & Date:

Gwendolyn B. Dawson

Signature of Public Housing Director/

Office of Native American Programs Administrator & Date:

Mary Trepasso, Acting Public Housing Director

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**Annual Statement/Performance and Evaluation Report  
Capital Fund Program (CFP) Part II: Supporting Pages**

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

FL29RO32502-10

Development Number	Description of Work Items	Development Account Number	Quantity	All Funds Obligated (Quarter Ending)		All Funds Expended (Quarter Ending)		Status of Proposed Work
				Original	Revised 1	Funds Obligated	Funds Expended	
FL032-010	Mod Used for Work Development	1499		7,360.00		\$0.00	\$0.00	Not Started
FL032-010	<b>Management Improvement</b>	1408						
	Marketing			0.00		0.00	\$0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Administration</b>	1410						
	Salary			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Fees and Costs</b>	1430						
	Architects and Engineer			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Site Improvement</b>	1450						
	Infrastructure Improvements			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Dwelling Structure</b>	1460						
	Construction			\$0.00		0	0	
	Total			0		0	0	
FL032-010	<b>Dwelling Equipment</b>	1475						
	Appliances & Amenties			0				
	Total			0				
FL032-010	<b>Debt Service Payment</b>	1501						
	<b>TOTAL</b>			\$7,360.00		\$0.00	\$0.00	

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Annual Statement/Performance and Evaluation Report  
Capital Fund Program **Part I: Summary**

U. S. Department of Housing  
and Urban Development

OMB Approval No. 2577-0157  
(exp. 06/30/2005)

Office of Public and Indian Housing

PHA Name:

**OCALA HOUSING AUTHORITY**

Capital Fund Program Project Number:

**FL29RO32502-11**

FFY of Grant Approval

2011

Original Annual Statement  Reserved for Disasters/Emergencies.

Revised Annual Statement/Revision No. #

Final Performance and Evaluation Report

Performance and Evaluation Report for Period Ending - 9-30--2012

LINE NO.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		ORIGINAL	REVISED (1)	OBLIGATED	EXPENDED
1	Total none-CIAP/CGP Funds				
2	1406 Operations (Not to exceed 10% of line 19)				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment-Noneexpendable				
12	1470 Nondwelling Structure				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Cost				
18	1499 MOD Used for Development	\$3,407.00		\$0.00	\$0.00
19	1501 Debt Service Payment				
20	1502 Contingency (Not to exceed 8% of line 20)				
21	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	<b>\$3,407.00</b>		<b>\$0.00</b>	<b>\$0.00</b>
22	Amount of line 20 Related to LBP Activities				
23	Amount of line 20 Related to Sec 504 Comp.				
24	Amount of line 20 Related to Security				
25	Amount of line 20 Related to Energy Conservation				

Signature of Executive Director & Date:

Gwendolyn B. Dawson

Signature of Public Housing Director/

Office of Native American Programs Administrator & Date:

Mary Trepasso, Acting Public Housing Director

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2 To be completed for the Performance and Evaluation Report.

**Annual Statement/Performance and Evaluation Report  
Capital Fund Program (CFP) Part II: Supporting Pages**

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

FL29RO32502-11

Development Number	Description of Work Items	Development Account Number	Quantity	All Funds Obligated (Quarter Ending)		All Funds Expended (Quarter Ending)		Status of Proposed Work
				Original	Revised 1	Funds Obligated	Funds Expended	
FL032-010	Mod Used for Work Development	1499		3,407.00		\$0.00	\$0.00	Not Started
FL032-010	<b>Management Improvement</b>	1408						
	Marketing			0.00		0.00	\$0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Administration</b>	1410						
	Salary			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Fees and Costs</b>	1430						
	Architects and Engineer			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Site Improvement</b>	1450						
	Infrastructure Improvements			0.00		0.00	0.00	
	Total			0.00		0.00	0.00	
FL032-010	<b>Dwelling Structure</b>	1460						
	Construction			\$0.00		0	0	
	Total			0		0	0	
FL032-010	<b>Dwelling Equipment</b>	1475						
	Appliances & Amenties			0				
	Total			0				
FL032-010	<b>Debt Service Payment</b>	1501						
	<b>TOTAL</b>			\$3,407.00		\$0.00	\$0.00	

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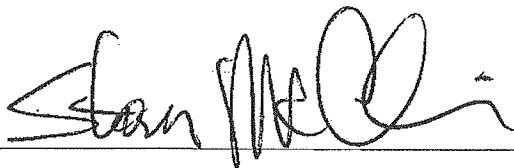


**Certification by State or Local  
Official of PHA Plans Consistency  
with the Consolidated Plan**

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

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

I, Stan McClain the Chair, Board of County Commissioners certify that the Five Year and  
Annual PHA Plan of the Ocala Housing Authority is consistent with the Consolidated Plan of  
Marion County, Fl. prepared pursuant to 24 CFR Part 91.



Signed / Dated by Appropriate State or Local Official

**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 fiscal year beginning October 1, 2011, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.



13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
  - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
  - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
  - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Ocala Housing Authority

FL032

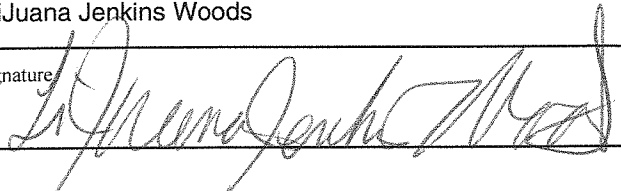
PHA Name

PHA Number/HA Code

\_\_\_\_\_ 5-Year PHA Plan for Fiscal Years 20\_\_\_\_ - 20\_\_\_\_

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

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

Name of Authorized Official	Title
TiJuana Jenkins Woods	Deputy Director
Signature 	Date July 15, 2011

**Civil Rights Certification**

**U.S. Department of Housing and Urban Development**  
Office of Public and Indian Housing  
Expires 06/30/2011

**Civil Rights Certification**

**Annual Certification and Board Resolution**

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

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

Ocala Housing Authority

FL032

PHA Name

PHA Number/HA Code

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

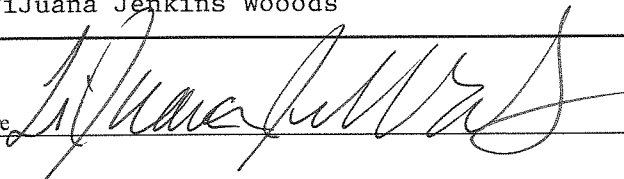
Name of Authorized Official

TiJuana Jenkins Woods

Title

Deputy Director

Signature



Date July 15, 2011

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name  
Ocala Housing Authority

Program/Activity Receiving Federal Grant Funding  
Public Housing Agency Plan - Annual Plan submission FL032

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

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

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

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

- (1) The dangers of drug abuse in the workplace;
- (2) The Applicant's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

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

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

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

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

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

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

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

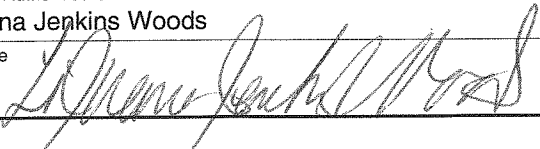
g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

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 on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official TiJuana Jenkins Woods	Title Deputy Director
Signature 	Date 7-15-2011

X

# Certification of Payments to Influence Federal Transactions

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

Applicant Name

OCALA HOUSING AUTHORITY

Program/Activity Receiving Federal Grant Funding

ANNUAL PLAN

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

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

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

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

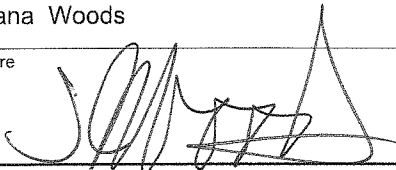
Name of Authorized Official

TiJuana Woods

Title

Deputy Director

Signature



Date (mm/dd/yyyy)

7-15-11



**OCALA HOUSING AUTHORITY  
OCALA, FLORIDA  
RESOLUTION 2012-12**

**Annual Update  
for  
The Ocala Housing Authority Agency Plan**

**WHEREAS**, HUD requires for the submission of an Agency Plan, as one of the most significant provisions of the 1998 Quality Housing and Work Responsibility Act (QHWRA). This provision has been in effect since 2000; so housing authorities must submit plans at least seventy-five (75) days before the beginning of their next fiscal year. The Ocala Housing Authority's Agency Plan is due July 9, 2012; and

**WHEREAS**, the Agency Plan provides the Ocala Housing Authority with a way to examine its long-term and short term needs, and develop strategies to meet those needs. We have the opportunity to articulate the housing needs of the community and prescribe the goals and objectives the authority has set to meet these needs in a single document; and

**WHEREAS**, the Ocala Housing Authority staff keeps all lines of communication open with the residents, local government and the community at large, to ensure that it addresses any needs and concerns; and


**WHEREAS**, the Ocala Housing Authority has an established Five Year Agency Plan that addresses the need to increase the availability of decent, safe and affordable housing in Marion County, to ensure equal opportunity in housing and to promote self-sufficiency and asset development of families and individuals, and to improve the community's quality of life and economic vitality; and

**WHEREAS**, the Board Chairperson conducted a public hearing on June 21, 2012 to review and receive comments on the Annual Plan Update and incorporate them, should that be necessary.

**THEREFORE BE IT RESOLVED**, by the Board of Commissioners of the Ocala Housing Authority, that said Board of Commissioners does hereby approve and authorize the Executive Director to submit the Annual Plan Update to the U.S. Department of Housing and Urban Development, contingent upon any revisions the Ocala Housing Authority's Legal Counsel may have as to form, and legality, and any funding changes as provided by HUD.

The above Resolution 2012-12 was introduced by Secretary Dawson, whereupon Commissioner     Rudniansky     moved that the Resolution be adopted as introduced. The motion was seconded by Commissioner     Gunn     and upon a roll call vote the Ayes and Nays were as follows:

AYES

  
 \_\_\_\_\_  
~~\_\_\_\_\_~~  
 Elnora Mitchell  
 \_\_\_\_\_  
 \_\_\_\_\_

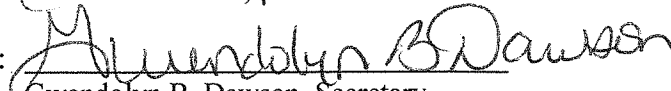
NAYS

\_\_\_\_\_  
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The Chairperson then declared Resolution 2012-12 passed as introduced and read on the 21st day of June 2012.

(SEAL)

By:   
 Elnora J. Mitchell, Chairwoman

Attest:   
 Gwendolyn B. Dawson, Secretary

## Uploaded File Listing

FL03201	The Plan
FL03202	CF 2012 Annual Plan
FL03203	5 Year Plan
FL03204	CF 2011 Annual Plan
FL03205	CF 2010 Annual Plan
FL03206	CF 2009 Annual Plan
FL03207	CF 2008 Annual Plan
FL03208	CF 2007 Annual Plan
FL03209	ARRA Grant
FL03210	RHCF 501-2009 Annual Plan
FL03211	RHCF 502-2008 Annual Plan
FL03212	RHCF 502-2009 ANNUAL PLAN
FL03213	RHCP 502-2010 ANNUAL PLAN
FL03214	RHCP 502-2011 Annual Plan
FL03215	Certification of Consistency with Consolidated Plan
FL03216	Certification of Compliance with PHA Plans & Regs
FL03217	Civil Right Certification
FL03218	Drug Free Workplace
FL03219	Certification of Payments to Influence Transactions
FL03220	Disclosure of Lobbying Activities
FL03221	Resolution for Annual Update
FL03222	Names of Files Uploaded