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

Small PHA Plan Update Annual Plan for Fiscal Year: 2001

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan Agency Identification

PHA Name: The Housing Authority of the City of Thorp, WI

PHA Number: 49077001

PHA Fiscal Year Beginning: (mm/yyyy) 10/2001

PHA Plan Contact Information:

Name: Debra Gwiazdon, Executive Director Phone: (715) 669-5599 TDD: Email (if available): thampa@discover-net.net

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

X Main administrative office of the PHA PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

Main administrative office of the PHA
PHA development management offices
Main administrative office of the local, county or State government
Public library
PHA website
Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

X Main business office of the PHA PHA development management offices Other (list below)

PHA Programs Administered:

Χ

Public Housing and Section 8 Section 8 Only X Public Housing Only

Annual PHA Plan Fiscal Year 2001 [24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply the the # attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a SEPARATE file submission from the PHA Plans file, provide the file name in parentheses in the space to the right by the cuttive Summary (optional)

Annual Plan Information

Table of Contents

Description of Policy and Program Changes for the Upcoming Fiscal Year

Capital Improvement Needs

Demolition and Disposition

Homeownership: Voucher Homeownership Program

Crime and Safety: PHDEP Plan

Other Information:

- A. .Resident Advisory Board Consultation Process
- B. Statement of Consistency with Consolidated Plan
- C. Criteria for Substantial Deviations and Significant Amendments

Attachments

- Х Attachment A : Supporting Documents Available for Review
- Attachment : Capital Fund Program Annual Statement Х
- Х Attachment : Capital Fund Program 5 Year Action Plan
 - Attachment : Capital Fund Program Replacement Housing Factor Annual Statement
 - Attachment : Public Housing Drug Elimination Program (PHDEP) Plan
- Attachment : Resident Membership on PHA Board or Governing Body Х
- Х Attachment : Membership of Resident Advisory Board or Boards Attachment : Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text) Other (List below, providing each attachment name)

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update. Community Service Agreement (6/19/2000)

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

- A. X Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 91,815.00_____
- C. X Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.
- D. Capital Fund Program Grant Submissions <u>The Capital Fund Program - S-Weak Aiotion Plan</u> provided as Attachment

(2) Capital Fund Program Annual Statement The Capital Fund Program Annual Statement is provided as Attachment

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)] Applicability: Section 8 only PHAs are not required to complete this section.

Yes X No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component ; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities) 1a. Development name: 1b. Development (project) number:

2. Activity type: Demolition

Disposition
3. Application status (select one)
Approved
Submitted, pending approval
Planned application
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one)
Part of the development
Total development
7. Relocation resources (select all that apply)
Section 8 for units
Public housing for units
Preference for admission to other public housing or section 8
Other housing for units (describe below)
8. Timeline for activity:
a. Actual or projected start date of activity:
b. Actual or projected start date of relocation activities:
c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

A. Yes X No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources

Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

A. X	Yes	No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered
		by this PHA Plan?

- B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$_____00____
- C. Yes X No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D. Yes No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

Resident Advisory Board (RAB) Recommendations and PHA Response

- 1. Yes X No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
- 2. If yes, the comments are Attached at Attachment (File name)
- 3. In what manner did the PHA address those comments? (select all that apply)

The PHA changed portions of the PHA Plan in response to comments

A list of these changes is included

Yes No: below or

Yes No: at the end of the RAB Comments in Attachment _____. Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment _____.

Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary). 1. Consolidated Plan jurisdiction: (provide name here) State of Wisconsin

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the

Consolidated Plan for the jurisdiction: (select all that apply)

- Х The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s. The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below) Other: (list below)
- 3. .PHA Requests for support from the Consolidated Plan Agency
 - Yes X No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
- 4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) To provide decent, safe and affordable housing

C. Criteria for Substantial Deviation and Significant Amendments

Amendment and Deviation Definitions

24 CFR Part 903.7(r)

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

and HUD review before implementation. A. Substantial Deviation from the 5-year Plan:

Hud mandated change

B. Significant Amendment or Modification to the Annual Plan:

Only as required by Federal Regulation change

<u>Attachment A</u> Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review						
Applicable & On Display	Supporting Document	Related Plan Component				
Х	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans				
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans				
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans				
Х	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs				
Х	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources				
Х	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies				
N/A	Any policy governing occupancy of Police Officers in Public Housing check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies				
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies				
Х	Public housing rent determination policies, including the method for setting public housing flat rents X check here if included in the public housing	Annual Plan: Rent Determination				

Applicable &	Supporting Document	Related Plan Component
On Display		<u>-</u>
	A & O Policy	
Х	Schedule of flat rents offered at each public housing development X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
N/A	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
Х	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
Х	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
Х	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any required policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
Х	Public housing grievance procedures check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
N/A	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
Х	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
Х	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans	Annual Plan: Conversion of Public

Applicable &	Supporting Document	Related Plan Component
On Display		
	prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (section of the Section 8 Administrative Plan)	Annual Plan: Homeownership
N/A	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
N/A	 PHDEP-related documentation: Baseline law enforcement services for public housing developments assisted under the PHDEP plan; Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
Х	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) check here if included in the public housing A & O Policy	Pet Policy
Х	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit

Applicable & On Display	Supporting Document	Related Plan Component
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Small PHA Plan Update Page 5 Table Library

PHA Name: Thorp Housing Authority X Original Annual Statement Parformance and Evaluation Depart for Devied Endings		Grant Type and Number WI	Grant Type and Number WI39P07750101				
		Reserve for Dis	on no:)				
Line No.	Summary by Development Account		nated Cost	Total A	Total Actual Cost		
		Original	Revised	Obligated	Expended		
1	Total non-CFP Funds						
2	1406 Operations	31,215					
3	1408 Management Improvements						
4	1410 Administration						
5	1411 Audit						
6	1415 liquidated Damages						
7	1430 Fees and Costs	5,600					
8	1440 Site Acquisition						
9	1450 Site Improvement	40,000					
10	1460 Dwelling Structures	10,000					
11	1465.1 Dwelling Equipment-Nonexpendable	5,390					
12	1470 Nondwelling Structures						
13	1475 Nondwelling Equipment						
14	1485 Demolition						
15	1490 Replacement Reserve						
16	1492 Moving to Work Demonstration						
17	1495.1 Relocation Costs						
18	1498 Mod Used for Development						
19	1502 Contingency						
20	Amount of Annual Grant: (sum of lines 2-19)	91,815					
21	Amount of line 20 Related to LBP Activities	0					

22	Amount of line 20 Related to Section 504 Compliance	0		
23	Amount of line 20 Related to Security	0		
24	Amount of line 20 Related to Energy Conservation Measures	0		

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

PHA Name: Thorp Housing Authority		Iousing Authority Grant Type and Number Capital Fund Program #: WI39P07750101 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001			
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estir	mated Cost	Total Ac	ctual Cost	Status Propo
Name/HA-Wide Activities				Original	Revised	Funds Obligated	Funds Expended	Wo
WI0771,2	Operations	1406	ſ <u></u> ′	30,825	[1		
WI0771,2	Fees & Costs	1430	<u> </u>	5,600				
WI0771,2	Site Improvements	1450	ſ <u> </u>	40,000				
WI0771,2	Dwelling Structures	1460	· '	10,000				
W10771,2	Dwelling Equipment	1465.1		5,390	<u> </u>	+	' 	<u> </u>
		'						
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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

PHA Name: Thorp Housing Authority		Cap	Grant Type and Number Capital Fund Program #: WI39P0775101 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2001
Development Number Name/HA-Wide Activities		l Fund Obliga uart Ending D			All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
WI0771,2	91,815						

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

X Original statem	CFP 5-Year Action Plan ent Revised statement		
Development Number			
WI0771,2	PHA Wide		
Description of Need Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)	
Repair Two Scatte Purchase ten (10) I Reside three (3) sca Recarpet Morgan I Reside three (3) sca Reside three (3) sca	Refrigerators attered site homes & garages	40,000 10,000 5,390 18,000 25,000 18,000 18,000 18,000	2002 2003 2003 2004 2005 2006
Total estimated cos	st over next 5 years	152,390	

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History

- A. Amount of PHDEP Grant \$
- B. Eligibility type (Indicate with an "x") N1_____ N2____ R____
- C. FFY in which funding is requested
- D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

1	PHDEP Target Areas	Portotal # of Units within E	1 otal Population to
	(Name of development(s) or site)	the PHDEP Target	be Served within the
		Area(s)	PHDEP Target
			Area(s)

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the #Months. 18 Months 24 Months

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs have not previously funded the time of this submission, indicate the fund buttle and unterplated completion date. The Fund Buttles should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place "GE" in column or "W" for waivers.

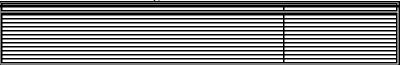
Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.



C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. The many be compared by the many be compared by the many be inserted in the tables). PHAs are not required to provide information in shaded boxes. The many be compared by the many be compared by the many be compared by the many be deleted.

Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators	
1.								
2.								
3.								

9116 - Gun Buyback TA Match	Total PHDEP Funding: \$				
Goal(s)					
Objectives					

Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9120 - Security Personnel					Total PHDEP Funding: \$			
Goal(s) Objectives								
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2. 3.								

9130 – Employment of Investigators					Total PHDEP Funding: \$			
Goal(s) Objectives								
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9140 – Voluntary Tenant Patrol	Total PHDEP Funding: \$

Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9160 - Drug Prevention					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Person	Target Population	Start Date	Expected Complete	PHEDEP Funding	Other Funding (Amount	Performance Indicators	

	s Served		Date	/Source)	
1.	Scived				
2.					
3.					

9170 - Drug Intervention					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9180 - Drug Treatment					Total PHDEP Funding: \$			
Goal(s) Objectives								
Proposed Activities	# of Person s	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	

	Served			
1.				
2.				
3.				

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Required Attachment ____: Resident Member on the PHA Governing Board

- 1. X Yes No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)
- A. .Name of resident member(s) on the governing board: Erna Ruff
- B. How was the resident board member selected: (select one)? Elected
 - X Appointed
- C. The term of appointment is (include the date term expires): April, 2006
- 2. A. If the PHA governing board does not have at least one member who is directly the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain):
- B. Date of next term expiration of a governing board member:
- C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

assisted by

Required Attachment _____: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)