Voucher for Payment of Annual Contributions and Operating Statement

US Department of Housing and Urban Development
Office of Public and Indian Housing

Housing Assistance Payments Program Supplemental Reporting Form

Public reporting burden for this collection of information is estimated to average 1.50 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. This agency may not conduct or sponsor, and you are not required to respond to, a collection of information unless that collection displays a valid OMB control number. Authority for this collection of information is the Housing and Community Development Act of 1987. Housing Agencies (HAs) required to maintain financial reports in accordance with accepted accounting standards to permit timely and effective audits. The financial records identify the amount of annual contributions that are received and disbursed by HAs. 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.

HA Number:	HA Name:			HA FYE:				
Submission Type:								
Housing Choice Voucher Program – Utilization and Administrative Fee and Expense Reporting Administrative Fee Reserve (Operating Reserves) Balance as of January 31, 2003 (01/31/03) n/a								
Administrative Fee Neserve	(Operating Neserves) Balance as	Of January 31, 2003 (0	1731703)					
Unit Months Leased:								
Litigation								
Mainstream 1 – year								
Mainstream 5 – year								
Homeownership								
Moving to Work								
All Other Voucher	rs							
Total Vouchers	Manakana							
Hope VI Section 8 Vouchers								
Tenant Protection								
	n – New this Month							
Enhanced Vouche		(1)						
	rs – this Month (Identify the number er issued for the specified month)	r of New						
HAP Fynenses: (Housing or	ssistance payments to landlord, utility reir	mhursement FSS Ecorow	Home Purchase Er	scrow) Exclude: Portability				
payments due from another Hous		ilbursement, F33 Esciow,	Tiorne Furchase La	scrow) Exclude. Fortability				
Litigation								
Mainstream 1 – Ye	ear							
Mainstream 5 – Yo	ear							
Homeownership								
Moving to Work								
All Other HAP Ex	penses							
Hope VI Section 8 Vouchers								
Total HAP	Expenses							
Admin Fees Earned								
	440 4400 4450 4400 7500 7540 4400) 4540 I						
4540) Exclude FSS Coordinator,	110, 4130, 4150, 4180, 7520, 7540, 4190 Special Fee, Mobility Counseling, ROC C	Costs,						
Preliminary Expenses, and Portal	pility payments due from another Housing	Authority.						
Audit: (Enter the audit cost for	the entire period. Do not breakdown by r	month)						
11 14 11								
Hard to House								
FSS Coordinator								
LBP Risk Assessment								
LBP Risk Assessment								
Mobility Counseling								
Preliminary Fees (New HA's								
Housing Conversion Fee	S							
ROC	O41	Defet Described (A)						
	Otner (E	Brief Description)						
Additional HAD Forman								
Additional HAP Expenses Fraud Recover – Amount booked this month								
FSS Escrow Forfe	eitures							
Regular Portable (Units)								
Port In								
Port Out								

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Operating Statement
Housing Assistance Payments Program
Supplemental Reporting Form

US Department of Housing and Urban Development

Office of Public and Indian Housing

Regular Portable (HAP)								
Port In								
Port Out								
Disaster Relief - Non KDHAP (Units)								
Port In								
Port Out								
Disaster Relief – Non KDHAP (HAP)								
Port In								
Port Out								
KDHAP Disaster Relief (Units)								
Disaster Relief Families Assisted (Exclude Ports)								
New KDHAP Families Assisted – This month								
KDHAP Disaster Relief (HAP)								
Actual KDHAP Rental Assistance Provided								
Actual Security Deposit								
KDHAP Security Deposit Refunds								
Actual Utility Deposit								
KDHAP Utility Deposit Refunds								
Comments:								
Outmone.								
Name of PHA Point of Contact POC Phone Number Ext:								
	Date Submitted			Official HA E-mail Address:				
				·				