## Estimate of Total Required Annual Contributions

## Section 8 Housing Assistance Payments Program

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 collecton 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 too 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.

1. Public Housing Agency (Name and A	\ddress)			3. Sut	ject No.	vision No.		
4. Annual Contributions Contract No.	6. HUD Regional Office		7. No. Dwelling Units 8. No. Units Months					
9. Housing Program Type (Mark One) (a) New Construction (b) Set	ubstantial Rehabilita	tion 🗌 (c) Mode	erate Rehabilitation	] (d) Existing Housir	ng Certificates	(e) Housing	Vouchers	
10. PHA Fiscal Year Ending Date (Mark one and complete year)         (a) March 31,       (b) June 30,         (c) September 30,       (d) December 31,								
I. Maximum Annual Contributions	PHA Estimate (Housin Housing Payments	g Vouchers Only) PHA Fee	PHA Estimate Total	HUD Approved (Hous Housing Payments	sing Vouchers Only) PHA Fee		proved Total	
11. Maximum Annual Contributions Commitment								
12. Prorata Maximum Annual Contributions Applicable to a Period in Excess of 12 Months	;							
13. Maximum Annual Contributions for Fiscal Year (Line 11 plus Line 12)								
14. Project Account-Estimated or Actual Balance at Beginning of Requested Fiscal Year								
15. Total Annual Contributions Available—Estimated or Actual (Line 13 plus Line 14)								

	Maximum Annual	PHA Estimate (Housing Vouchers Only)			HUD Approved (Housing Vouchers Only)		
	Contributions	Housing Payments	PHA Fee	PHA Estimate Total	Housing Payments	PHA Fee	HUD Approved Total
16.	Estimated Annual Housing Assistance Payments (form HUD-52672, Line 15)						
17.	Estimated Ongoing Administrative Fee (form HUD-52672, Line 18)						
18.	Estimated Hard-to-House Fee (form HUD-52672, Line 19)						
19.	Estimated Independent Public Accountant Audit Costs						
	Estimated Preliminary Administrative and General Expense (form HUD-52672, Lines 27 and 36)						
21.	Carryover of Preliminary Administrative and General Expense not Expended in the Previous FY Ending ()						
22.	Estimated Non-Expendable Equipment Expense (form HUD-52672, Line 32)						
23.	Carryover of Non-Expendable Equipment Expense not Expended in the Previous FY Ending ( )				_		
24.	Total Annual Contributions Required—Requested Fiscal Year (Lines 16 through 23)						
25.	Deficit at End of Current Fiscal Year—Estimated or Actual						
26.	Total Annual Contributions Required (Line 24 plus Line 25)						
27.	Estimated Project Account Balance at End of Requested Fiscal Year (Line 15 minus Line 26)						
	Provision for Project Account Requested Fiscal Year Increase (decrease) (Line 27 minus Line 14)						
-	Annual Contributions Appro	ved					
29.	Total Annual Contributions Approved/Requested Fiscal Year (Line 26 plus increase, if any, on Line 28)						
30.	Source of Total Contributions Approved/Requested Fiscal Year:						
	(a) Requested Fiscal Year Maximum Annual Contribu- tions Commitment (Line 13 or Line 29, whichever is smaller)						
	<b>(b)</b> Project Account (Line 29 minus Line 30(a))						

Name of PHA Approving Official		Name of Approving HUD Field Office Official	
Signature		Signature	
Title	Date (mm/dd/yyyy)	Title	Date (mm/dd/yyyy)