

**LOCCS /eLOCCS
Comprehensive Grant**

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

OMB Approval No. 2577-0166 (exp. 08/31/2017)

Public reporting burden for this collection of information is estimated to average 15 minutes 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 collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

HUD implemented the Line of Credit Control System/Voice Response System (LOCCS/eLOCC) to process requests for payments to grantees. The Line of Credit Control

The grantee will be prompted for entering the inform Sy This information is required to obtain benefits under the U.S. Housing Act of 1937, as amended. The information requested does not lend itself to confidentiality.

1. Voucher Number 028	2. LOCCS Pgrm. Area CFP	3. Period Covered by this Request (mm/yyyy) from: to:	4. 1 = Partial Disbursement 2 = Final Disbursement
5. Voice Response No. (5 digits, hyphen, 5 more)	6. Grantee Organization's Name	7. Payee Organization's Name	
8. Grant or Project No.	6a. Grantee Organization's TIN	7a. Payee Organization's TIN	

9. Line Item No.	Type of Funds Requested	Amount (dollars)	* (cents)
1406	Operations		
1408	Management Improvements		
1410	Administration		
1411	Audit Costs (CGP)		
1430	Fees & Costs		
1440	Site Acquisition		
1450	Site Improvement		
1460	Dwelling Structures		
1465	Dwelling Equipment - Non-Expendable		
1470	Non-Dwelling Structures		
1475	Non-Dwelling Equipment		
1485	Demolition		
1492	Moving to Work Demonstration		
1495	Relocation Costs		
1499	Develop Activity		
1501	PHA Paid debt service		
10. Voucher Total		\$	

I certify the data reported and funds requested on this voucher are correct and the amount requested is not in excess of immediate disbursement needs for this program. In the event the funds provided become more than necessary, such excess will be promptly returned, as directed by HUD.

11. Name & Phone Number (including area code) of the Person who Completed this form	12. Name & Title of Authorized Signatory (type or print clearly)
	13. Signature X
	14. Date of Request

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)
Privacy Statement: This statement is provided pursuant to the Privacy Act of 1974, 5 USC § 552a. The authority for collecting personally identifiable information (PII) in the Regulatory Consistency Communication Board (RCCB) Electronic Feedback Form is based in Section 313 of Public Law 112-95. The purpose of the data is to safeguard the Line of Credit Control System (LOCCS) from unauthorized access. The data are used to ensure that individuals who no longer require access to LOCCS have their access capability promptly deleted. Failure to provide the information requested on the form may delay the processing of your approval for access to LOCCS.