1 LOCCS / eLOCCS

RESIDENT OPPORTUNITIES AND SELF SUFFICIENCY (ROSS) PROGRAM

Payment Voucher (All Grantees)

Family Self Sufficiency

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

OMB Approval No. 2577-0166 (exp. 01/31/2021)

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. The Line of Credit Control System (LOCCS) is HUD's primary grant and subsidy disbursement system for most HUD programs. Organizations and individuals have access to these grants through an Internet version of LOCCS called eLOCCS, where authorized Business Partners can access, manage, and drawdown grant funds. LOCCS is accessed through the Internet portal, Secure Systems. The combination of the two systems is eLOCCS.

1. Voucher Number	2. LOCCS Pgrm. Area	3. Period Covered by this Request (mm/yyyy)	4
09	ROSS	from: to:	☐ 1= Partial Disbursement 2 = Final Disbursement

. Not applicable	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)
1168	Service Coordinator (Salary + Fringe)		
1268	Training Costs		
1868	Administrative Costs		
	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: I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 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.