

CHART B -- LEVERAGING

Chart B: Leveraged Resources

Instructions: Only include the amount of funds that are exclusively allocated for the housing counseling program and that are available during the grant period.

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Lind Contributions and Point of Contact (with phone number and/or email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
1	ABC Intermediary	ABC Intermediary	Program Income	Pre-purchase Counseling	\$100,000.00
3	Housing Affiliate	Jane Dough Foundation/ John Dough 213-555-1212 Jane.Dough@janedoughfoundation.com	Cash	Mortgage Delinquency and Default Resolution Counseling	\$10,000.00
4	Housing Affiliate	Chase Bank Foundation/ Sally Clams 213-555-1213 Sally.Clams@chasebankfoundation.com	Cash	Pre-purchase Counseling	\$7,500.00
5	Housing Resources	City of Siever/ Pat Culver 213-555-1214 Pat.culver@Sievercity.gov	Cash	Pre-purchase Counseling	\$12,000.00
6	Housing Resources	ABC Legal Services/Suzy Council 213-555-1215 Suzy.Council@abclegal.com	In-kind	Legal services for housing counseling	\$5,000.00
7	EXAMPLE				
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12					
TOTAL					\$134,500.00

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	TOTAL				\$0.00
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	TOTAL				\$0.00
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	TOTAL				\$0.00
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	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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	A	B	C	D	E
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	TOTAL				\$0.00
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	TOTAL				\$0.00
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	A	B	C	D	E
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	TOTAL				\$0.00
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	A	B	C	D	E
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	TOTAL				\$0.00
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	A	B	C	D	E
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	TOTAL				\$0.00
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	A	B	C	D	E
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	TOTAL				\$0.00
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	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
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CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
613					
614					
615					
616					
617					
618					
619					
620					
621					
622					
623					
624					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
625					
626					
627					
628					
629					
630					
631					
632					
633					
634					
635					
636					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
637					
638					
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640					
641					
642					
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644					
645					
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648					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
649					
650					
651					
652					
653					
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660					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
661					
662					
663					
664					
665					
666					
667					
668					
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671					
672					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
673					
674					
675					
676					
677					
678					
679					
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682					
683					
684					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
685					
686					
687					
688					
689					
690					
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692					
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694					
695					
696					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
697					
698					
699					
700					
701					
702					
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704					
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707					
708					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
709					
710					
711					
712					
713					
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719					
720					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
721					
722					
723					
724					
725					
726					
727					
728					
729					
730					
731					
732					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
733					
734					
735					
736					
737					
738					
739					
740					
741					
742					
743					
744					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
745					
746					
747					
748					
749					
750					
751					
752					
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754					
755					
756					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
757					
758					
759					
760					
761					
762					
763					
764					
765					
766					
767					
768					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
769					
770					
771					
772					
773					
774					
775					
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779					
780					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
781					
782					
783					
784					
785					
786					
787					
788					
789					
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791					
792					

CHART B -- LEVERAGING

	A	B	C	D	E
	Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
	TOTAL				\$0.00
793					
794					
795					
796					
797					
798					
799					
800					
801					
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803					
804					

CHART B -- LEVERAGING

A	B	C	D	E
Names of Applicant, Sub-Grantees/Branch Offices Proposed to be Funded	Organization Providing Leveraged Funds/In-Kind Contributions and Point of Contact (with phone number/ email)	Type of Contribution	Use of Funds - Describe In-Kind Contributions	Amount of Funds from this Resource
TOTAL				\$0.00

OMB Number: 2502-NEW

Expiration Date:

Burden Statement:

Public reporting burden for this collection of information is estimated to average 40 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. The information is being collected for a housing counseling agency to participate in HUD's Housing Counseling program and is required to obtain or retain benefits. No confidentiality is assured. The information will be used by HUD to ensure that Counselors provide guidance and advice to help families and individuals improve their housing conditions and meet the responsibilities of tenancy and homeownership. Counselors also help borrowers avoid predatory lending practices, such as inflated appraisals, unreasonably high interest rates, unaffordable repayment terms, and other conditions that can result in a loss of equity, increased debt, default, and foreclosure. This agency may not collect this information, and you are not required to complete this form, unless it displays a valid OMB control number.