OMB Approval No. 2577–0169
exp. xx/xx/xxxx

Tribal HUD-VASH Leasing Performance Report

Grantee Name (Tribe/TDHE): _____

Unique Identifier	Lease Start Date	Lease End Date	Rental Assistance Type	Property Type	Months Leased	Family Size	Bedroom Size	Total Rent Amount	Tenant Rent Contribution Payment	Contributing Funds	Monthly RAP	Total RAP

OMB Burden Statement. The public reporting burden for this information collection is estimated to be 0.5 hours, including the time for reviewing, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Collection of information about leasing is required for program management and funding. Assurances of confidentiality are not provided under this collection. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to the Office of Public and Indian Housing, US. Department of Housing and Urban Development, Washington, DC 20410. HUD may not conduct and sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid control number.