Part I: Su	mmary					
PHA Nam Sanford H	ne: ousing Authority). rant No.		FFY of Grant: FFY of Grant Approval:		
Type of G	rant					
X Origin	nal Annual Statement	rve for Disasters/Emergencies		evised Annual Statement (Revision No:)	
Perfor	mance and Evaluation Report for Period Endin	g:	🔲 Fi	nal Performance and Eval	uation Report	
Line	Summary by Development Acco	ount	Total Estim	ated Cost	Total Actual Cost ⁽¹⁾	
Line			Original	Revised ⁽²⁾	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations		\$168,632.00			
3	1408 Management Improvement					
4	1410 Administration		\$84,316.00			
5	1480 General Capital Activity		\$590,213.00			
6	1492 MovingToWorkDemonstration					
7	1501 Collater Exp / Debt Srvc					
8	1503 RAD-CFP					
9	1504 Rad Investment Activity					
10	1505 RAD-CPT					
11	1509 Preparing for, Preventing and Responding to Cor-	onavirus (1509)				

(1) To be completed for the Performance and Evaluation Report

(2) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(3) PHAs with under 250 units in management may use 100% of CFP Grants for operations

(4) RHF funds shall be include here

Part I: Su	immary					
PHA Nan Sanford H	ne: Tousing Authority	Grant Type and Number Capital Fund Program Grant No Replacement Housing Factor G Date of CFFP:		FFY of Grant: FFY of Grant Approv		
Type of G	Frant					
Crigir Origin	nal Annual Statement 🔲 Res	serve for Disasters/Emergencies	🗌 R	evised Annual Statement (Revision No:)	
Perfor	rmance and Evaluation Report for Period End	ing:	E Fi	inal Performance and Eval	luation Report	
Line Summary by Development Account		ccount	Total Estim	ated Cost	Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended	
12	9000 Debt Reserves					
13	9001 Bond Debt Obligation					
14	9002 Loan Debt Obligation					
15	RESERVED					
16	RESERVED					
17	RESERVED					
18a	RESERVED					
18ba	RESERVED					
19	RESERVED					
20	RESERVED					
21	Amount of Annual Grant: (sum of lines 2-20)		\$843,161.00			

(1) To be completed for the Performance and Evaluation Report

(2) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(3) PHAs with under 250 units in management may use 100% of CFP Grants for operations

(4) RHF funds shall be include here

Fart I. Su	mmary							
PHA Nam Sanford He	ne: ousing Authority	o. FFY of Grant: FFY of Grant Approval: Grant No.						
		rve for Disasters/Emergencies g:	 Revised Annual Statement (Revision No:) Final Performance and Evaluation Report 					
Line	Summary by Development Account		Total Estim	ated Cost	Total Actual Cost (1)			
Line			Original	Revised ⁽²⁾	Obligated	Expended		
			0					
22	Amount of line 21 Related to LBP Activities							
22 23	Amount of line 21 Related to LBP Activities Amount of line 21 Related to Section 504 Activities							
23	Amount of line 21 Related to Section 504 Activities							

Signature of Executive Director	Date	Signature of Public Housing Director	Date
(1) To be completed for the Derformence and Evolution Depart			

(1) To be completed for the Performance and Evaluation Report

(2) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(3) PHAs with under 250 units in management may use 100% of CFP Grants for operations

(4) RHF funds shall be include here

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PHA Name: Sanford Housing Authority		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFFP(Yes/No):					Federal FI	Federal FFY of Grant:	
Development Number	General Description of Major		Development		Total Estimated Cost		Total Actual Cost ⁽²⁾		
Name/PHA-Wide Activities	Work Categories	Account No			Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	 Status of Work
Not associated with any specific development	Development Activities (Dv Exterior (1480),Dwelling U (1480),Non-Dwelling Interi Description : Development	nit-Site Work or (1480))	1480		\$590,213.00				
Not associated with any specific development	Administration (Administra Description : Administratio		1410		\$84,316.00				
Not associated with any specific development	Operations (Operations (14) Description : Operations	06))	1406		\$168,632.00				

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance and Evaluation Report

Part II: Supporting Pages										
PHA Name: Capital Sanford Housing Authority Replace		Capital Fund P Replacement F	Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FF	Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities General Description of Work Categories		of Major	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾			
		Ĵ			Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	Status of Work	
	Total:				\$843,161.00					

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance and Evaluation Report

Part III: Implementation Schedule for Capital Fund Financing Program										
PHA Name:	Federal FFY of Grant:									
Sanford Housing Authority										
Development Number	All Fund Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates					
Name/PHA-Wide Activities	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	Reasons for Revised Target Dates					

(1) Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S, Housing Act of 1937, as amended.