## Estimate of Total Required Annual Contributions

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

OMB Approval No. 2577-0169 (Exp.05/31/2004)

Section 8 Housing Assistance Payments Program

Public reporting burden for this collection of information is estimated to average 1.50 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. This agency may not conduct or sponsor, and you are not required to respond to, a collection of information unless that collecton displays a valid OMB control number. Authority for this collection of information is the Housing and Community Development Act of 1987. Housing Agencies (HAs) required to maintain financial reports in accordance with accepted accounting standards too permit timely and effective audits. The financial records identify the amount of annual contributions that are received and disbursed by HAs. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality.

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1. Public Housing Agency (Name and A	2	2. Project No.							
							<b>l</b>		
				3	. Submission				
					Original Re	evision No.			
4. Annual Contributions Contract No. 5. HUD Field Office			6. HUD Regional Office		7. No. Dwelling Units 8. No. Units Months				
9. Housing Program Type (Mark One)									
, ,	ubstantial Rehabilitat	tion (c) Mode	erate Rehabilitation	(d) Existing He	ousing Certificates	(e) Housing	Vouchers		
10. PHA Fiscal Year Ending Date (Mark	one and complete yea	r)		_					
(a) March 31, (b) June 3	30, (c) Septen	mber 30, 🔲 (d	d) December 31, YY	YY					
I. Maximum Annual	PHA Estimate (Housin	g Vouchers Only)		HUD Approved	ed (Housing Vouchers Only)				
Contributions	Housing Payments	PHA Fee	PHA Estimate Total	Housing Payme	ents PHA Fee	HUD App	proved Total		
11. Maximum Annual Contributions Commitment									
12. Prorata Maximum Annual Contributions Applicable to a Period in Excess of 12 Months									
13. Maximum Annual Contributions for Fiscal Year (Line 11 plus Line 12)									
14. Project Account-Estimated or Actual Balance at Beginning of Requested Fiscal Year									
15. Total Annual Contributions Available—Estimated or Actual (Line 13 plus Line 14)									

II.		PHA Estimate (Housing Vouchers Only)				HUD Approved (Housing Vouchers Only)			
	Contributions	Housing Payments	PHA Fee	PHA	Estimate Total	Housing Payments	PHA Fee		HUD Approved Total
16.	Estimated Annual Housing Assistance Payments (form HUD-52672, Line 15)								
17.	Estimated Ongoing Administrative Fee (form HUD-52672, Line 18)								
18.	Estimated Hard-to-House Fee (form HUD-52672, Line 19)								
19.	Estimated Independent Public Accountant Audit Costs								
	Estimated Preliminary Administrative and General Expense (form HUD-52672, Lines 27 and 36) Carryover of Preliminary								
	Administrative and General Expense not Expended in the Previous FY Ending (								
22.	Estimated Non-Expendable Equipment Expense (form HUD-52672, Line 32)								
23.	Carryover of Non-Expendable Equipment Expense not Expended in the Previous FY Ending ( )								
24.	Total Annual Contributions Required—Requested Fiscal Year (Lines 16 through 23)								
25.	Deficit at End of Current Fiscal Year—Estimated or Actual								
26.	Total Annual Contributions Required (Line 24 plus Line 25)								
27.	Estimated Project Account Balance at End of Requested Fiscal Year (Line 15 minus Line 26)								
28.	Provision for Project Account Requested Fiscal Year Increase (decrease) (Line 27 minus Line 14)								
III.	<b>Annual Contributions Appro</b>	ved							
29.	Total Annual Contributions Approved/Requested Fiscal Year (Line 26 plus increase, if any, on Line 28)								
30.	Source of Total Contributions Approved/Requested Fiscal Year:								
	(a) Requested Fiscal Year Maximum Annual Contribu- tions Commitment (Line 13 or Line 29, whichever is smaller)								
	(b) Project Account (Line 29 minus Line 30(a))								
Name of PHA Approving Official				Name of Approving HUD Field Office Official					
Signature					Signature				
Title	3		Date (mm/dd/yyyy)		Title				Date (mm/dd/yyyy)