

Date Printed: 12/15/15

OHIO HOUSING TRUST FUND
STATUS REPORT
PERIOD ENDED 12/31/15
GRANT PERIOD: 1/1/14 TO 12/31/15

CITY OF WONDERLAND

A-C-15-OXY-1

OCD REPRESENTATIVE: John Doe

GRANT AMOUNT: \$ 250,000

I certify that to the best of my knowledge the data in this report has been verified to be true and correct as of the date of this report. Providing false or misleading information in this document will result in sanctions against the above named grantee and, as outlines by the OCD Progressive Corrective Action Policy, may lead to termination of the grantee eligibility for OCD programs.

Name and Title of Chief Executive Officer

Signature of Chief Executive Officer Date

Report completed by Phone Number

I. PROGRAM BUDGET - AWARDED FUNDS

ACTIVITY NUMBER	ACTIVITY	ACTIVITY/PROJECT LOCATION	OHTF FUNDS		
			APPROVED BUDGET	FUNDS DRAWN TO DATE	FUNDS DISBURSED TO DATE
1	Private Rehabilitation	Countywide	200,000	193,640	193,640
2	Home/Building Repair	Countywide	25,000	31,360	31,360
3	Fair Housing Program	Countywide	4,000	4,000	4,000
4	Administration	Countywide	21,000	21,000	21,000
TOTALS			250,000	250,000	250,000

Please explain the reasons for any differences greater than plus or minus 10% between budgeted and actual expenditures for each activity (at final reporting). Explain ANY difference between total funds expended and total funds received (at final reporting). Describe your "best efforts" to achieve the proposed levels.

