Additional Supporting Documents:

- Financial Resources
 - o All PHA Funding Notices for 2020 Received through 1/22/2020
- Business Associates Agreement (BAA) Memorandum of Understanding (MOU) between the PHA and the Cabinet for Health and Family Services
- PHA Budget for Fiscal Year 2019-2020
- Section 8 Management Assessment score for FYE 6/30/19



Pinancial Management Center 2380 McGee Street, Suite 400 Kansas City, MO 64108-2605

OFFICE OF PUBLIC AND INDIAN HOUSING

January 22, 2020

KY136
CAMPBELL COUNTY DEPARTMENT OF HOUSING
1098 MONMOUTH STREET ROOM 235
NEWPORT, KY 41071-1071

Dear Executive Director:

SUBJECT: Renewal of Housing Choice Voucher Program Increments
Expiring February 29, 2020

This letter is to notify you that funds have been obligated to renew expiring Housing Choice Voucher (HCV) Program Housing Assistance Payments (HAP) increment(s).

March 2020 HAP Funding

The HAP funding is provided to renew increment(s) expiring February 29, 2020. A monthly advance amount was calculated using the September 2019 VMS data adjusted for inflation and prorated at 99.5%.

The monthly HAP is disbursed in accordance with PIH Notices 2011-67 and 2017-06, utilizing cash management procedures and will continue being reconciled periodically to ensure compliance with Treasury Financial Manual at Vol. 1, Part 6, Section 2025.

VASHRenewals

If your agency is administering HUD Veterans Affairs Supportive Housing (VASH) vouchers, the renewal of these vouchers is included in the overall renewal calculations. These vouchers are not renewed separately. PHAs must comply with the statutory requirement that VASH vouchers may only be used to assist VASH-eligible participants, both initially and upon turnover.

Separate tracking of the VASH units from the regular voucher units is required for SEMAP purposes, since VASH units are not included, and will also allow for the utilization monitoring of these special purpose vouchers. A new increment will be established for the VASH renewal units and assigned one dollar (\$1.00) of budget authority. These units will continue to be renewed separately upon expiration.

Rental Assistance Demonstration (RAD) Renewals

If your agency is administering Rental Assistance Demonstration (RAD) vouchers, the renewal of these vouchers is included in the overall renewal calculations. These vouchers are not renewed separately.

Separate tracking of the RAD units from the regular voucher units is required by the Department. A new increment will be established for the RAD renewal units and assigned one dollar (\$1.00) of budget authority. These units will continue to be renewed separately upon expiration.

RAD leasing and expenses are to be reported in the VMS in the appropriate RAD field (RAD 1 or RAD 2). In addition, RAD units should also be reported in the VMS as Project-Based Vouchers (PBV). Please refer to the VMS User's Manual for specific guidance on RAD and PBV reporting.

March 2020 Administrative Fee Funding

The administrative fees provided for March 2020 were obligated as established in the letter dated December 26, 2019.

Specific information concerning the renewal(s) for your public housing agency (PHA) is identified in the enclosed table.

Enclosed is your Notice to Amend the Consolidated Annual Contributions Contract (CACC) with revised funding exhibits reflecting the change(s) described above. The amendment notice and revised funding exhibits should be filed with your most recent CACC. No execution by HUD or your PHA is required.

Public housing agencies receiving an increment in excess of \$100,000 in Budget Authority (BA) are required to submit Form HUD-50071, Certification of Payments to Influence Federal Transactions, and if applicable, Form SF-LLL, Disclosure of Lobbying Activities. If this letter notifies you of a renewal in excess of \$100,000, and your PHA has not submitted the Form(s) HUD-50071 (and SF-LLL where applicable) for your current fiscal year; the documents must be submitted to your local field office and Financial Analyst at the Financial Management Center (FMC) within 30 days of the date of this letter. These forms are located on the Internet at the following addresses:

Form HUD-50071

https://www.hud.gov/sites/documents/50071.PDF

Form SF-LLL

https://www.hudexchange.info/resources/documents/HUD-Form-Sflli.pdf

Please contact your Financial Analyst at the FMC if you have any questions.

Sincerely

June E. Burnes

Digitally signed by June E. Burnes DN: CM = June E. Burnes. C = US O = Financial Management Center. OU = Division Director.

Reason: I am approving his document

Division Director

Enclosure(s)

Memo Reference: 20-012

Increment Number Table

U. S. Department of Housing and Urban Developmoffice of Public and Indian Housing

Housing Choice Voucher Program

Section 8

January 22, 2020

Expiring HAP Funding Increment Number	Replacement HAP Funding Increment Number	Units	HAP Budget Authority	Effective Date	Term
KY136VO0152	KY136VO0154	741	\$361,637	3/1/2020	1

Consolidated Annual Contributions Contract

U.S. Department of Housing and Urban DevelopmenOffice of Public and Indian Housing

Housing Choice Voucher Program

Section 8

HUD NOTICE TO HOUSING AGENCY AMENDING CONSOLIDATED ANNUAL CONTRIBUTIONS CONTRACT

Housing Agency:

KY136

CAMPBELL COUNTY DEPARTMENT OF HOUSING

In accordance with Paragraph 2.c. of the Consolidated Annual Contributions Contract between HUD and the HA, you are notified that the funding exhibits of the Consolidated Annual Contributions Contract is hereby revised to add a new funding increment as provided in the attached revised funding exhibit. (This notice adds one or more funding increments listed on the attached funding exhibit.)

The revised funding exhibit is attached to this HUD notice. This revised funding exhibit replaces and revises the prior funding exhibit.

In accordance with Paragraph 2.d. of the Consolidated Annual Contributions Contract, this HUD notice and the attached funding exhibit constitutes an amendment to the Consolidated Annual Contributions Contract.

United States of America

Secretary of Housing and Urban Development Authorized Representative

Date of Document:

Robert H. Boepple, Director Financial Management Center

1/22/2020

U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT PIH SECTION 8 - FUNDING EXHIBIT PROGRAM-BASED

ACC NUMBER: KY136

FIELD OFFICE:

4IPH

KY136

CAMPBELL COUNTY DEPARTMENT OF HOUSING

1098 MONMOUTH STREET ROOM 235

NEWPORT, KY 41071

HA FISCAL YEAR-END:

06/30

PROGRAM TYPE: Voucher Program

FUNDING INCREMENT NUMBER	FIRST DAY OF TERM	LAST DAY OF TERM	CONTRACT TERM	BUDGET AUTHORITY	UNITS
KY136AF0112	1/1/2018	2/28/2018	2	64,521	N/A
KY136AFR317	2/1/2018	2/28/2018	1	3,299	N/A
KY136VO0130	1/1/2018	2/28/2018	2	672,335	741
KY136AF0113	3/1/2018	3/31/2018	1	32,337	N/A
KY136VO0131	3/1/2018	3/31/2018	1	333,785	741
KY136AF0114	4/1/2018	4/30/2018	1	32,337	N/A
KY136VO0132	4/1/2018	4/30/2018	1	333,785	741
KY136AF0115	5/1/2018	5/31/2018	1	33,086	N/A
KY136VO0135	5/1/2018	5/31/2018	1	337,191	741
KY136AF0116	6/1/2018	6/30/2018	1	33,087	N/A
KY136AFR417	6/1/2018	6/30/2018	1	17,753	N/A
KY136VO0137	6/1/2018	6/30/2018	1	346,342	741
KY136VOPR17	6/1/2018	6/30/2018	1	3,209	N/A
KY136AF0117	7/1/2018	7/31/2018	1	33,087	N/A
KY136VO0138	7/1/2018	7/31/2018	1	346,342	741
KY136AFR118	8/1/2018	8/31/2018	1	3,335	N/A
KY136AF0118	8/1/2018	9/30/2018	2	66,174	N/A
KY136VO0139	8/1/2018	9/30/2018	2	754,974	741
KY136AF0119	10/1/2018	10/31/2018	1	33,087	N/A
KY136VO0140	10/1/2018	10/31/2018	1	347,195	741
KY136AFR218	11/1/2018	11/30/2018	1	16,082	N/A
KY136AF0120	11/1/2018	12/31/2018	2	71,580	N/A
KY136VO0133	1/1/2018	12/31/2018	12	1	15
KY136VO0134	1/1/2018	12/31/2018	12	1	17
KY136VO0141	11/1/2018	12/31/2018	2	694,391	741
KY136AF0121	1/1/2019	2/28/2019	2	71,580	N/A
KY136AFR318	2/1/2019	2/28/2019	1	3,379	N/A
KY136VO0142	1/1/2019	2/28/2019	2	693,642	741
KY136VO0136	4/1/2018	3/31/2019	12	29,356	5
KY136VO0143	3/1/2019	3/31/2019	1	346,821	741

FUNDING INCREMENT NUMBER	FIRST DAY OF TERM	LAST DAY OF TERM	CONTRACT TERM	BUDGET AUTHORITY	UNITS
KY136AF0122	3/1/2019	4/30/2019	2	71,252	N/A
KY136VO0144	4/1/2019	4/30/2019	1	346,821	741
KY136AF0123	5/1/2019	5/31/2019	1	35,626	N/A
KY136VO0148	5/1/2019	5/31/2019	1	346,821	741
KY136AFR418	7/1/2019	7/31/2019	1	5,245	N/A
KY136AF0124	6/1/2019	9/30/2019	4	143,957	N/A
KY136VO0149	6/1/2019	9/30/2019	4	1,495,556	741
KY136AF0125	10/1/2019	10/31/2019	· 1	35,989	N/A
KY136VO0150	10/1/2019	10/31/2019	1	358,851	741
KY136AF0126	11/1/2019	12/31/2019	2	70,822	N/A
KY136VO0145	1/1/2019	12/31/2019	12	1	15
KY136VO0146	1/1/2019	12/31/2019	12	1	17
KY136VO0147	4/1/2019	12/31/2019	9	1	5
KY136VO0151	11/1/2019	12/31/2019	2	717,701	741
KY136AF0127	1/1/2020	2/29/2020	2	70,822	N/A
KY136VO0152	1/1/2020	2/29/2020	2	547,470	741
KY136VO0153	2/1/2020	2/29/2020	1	182,490	N/A
KY136AF0128	3/1/2020	3/31/2020	1	35,250	N/A
KY136VO0154	3/1/2020	3/31/2020	1	361,637	741



Financial Management Center 2380 McGee Street, Suite 400 Kansas City, MO 64108-2605

OFFICE OF PUBLIC AND INDIAN HOUSING

January 16, 2020

KY136 CAMPBELL COUNTY DEPARTMENT OF HOUSING 1098 MONMOUTH STREET ROOM 235 NEWPORT, KY 41071-1071

Dear Executive Director:

SUBJECT: Section 8 Housing Choice Voucher Program - Award of Additional Funding

This letter is to notify you that HUD will be providing your agency additional Housing Voucher program funds. The amount of funds being obligated and the purpose of such funds are reflected in the table below.

Program Funding	Budget Authority Assigned	Purpose of Funding
VO	\$361,637	HAP Advance

Your executed copy of the notice to amend the Consolidated Annual Contributions Contract (CACC) with revised funding exhibits reflecting the changes described above will be transmitted under separate cover. That letter will contain all information related to this funding including increment number, effective/expiration dates and units, if applicable.

If you have any questions, please contact your Financial Analyst.

Sincerely,

June E. Burnes

Digitally signed by June E. Burnes
DN: CN = June E. Burnes. C = US
O = Financial Management Center.
OU = Division Director.

Reason: I am approving this document

Division Director

Memo Reference: 20-010

Financial Management Center 2380 McGee Street, Suite 400 Kansas City, MO 64108-2605

OFFICE OF PUBLIC AND INDIAN HOUSING

January 08, 2020

KY136 CAMPBELL COUNTY DEPARTMENT OF HOUSING 1098 MONMOUTH STREET ROOM 235 NEWPORT, KY 41071-1071

Dear Executive Director:

Subject: Notification of Monthly Disbursement Schedule for Housing Assistance Payments and Administrative Fees

This email serves as HUD's notification that funding will be disbursed for your agency's Housing Choice Voucher (HCV) program. Attached you will find the current disbursement schedule reflecting the monthly HAP and/or Administrative Fee amounts. A separate notification will be provided to your agency for new units and funding received or program specific reductions.

If you have any questions regarding how the monthly disbursement amounts were derived, please contact your Financial Analyst at the FMC.

Sincerely,

June E. Burnes

Digitally signed by June E. Burnes
DN: CN = June E. Burnes. C = US
O = Financial Management Center.
OU = Division Oroclor.
Reason: Lam approving this document

Division Director

Enclosure

Memo Reference: 20-006

Housing Choice Voucher Program

Disbursement Schedule

FO Code:

4IPH

HA Name:

CAMPBELL COUNTY DEPARTMENT OF HOUSING

HA Number:

KY136

FYE:

06/30

Month	HAP Disbursement	AF Disbursement
February 2019	\$358,181	\$35,790
February 2019	\$2,446	
February 2019		\$3,379
March 2019	\$364,947	\$35,626
March 2019	\$2,446	. , , , , , , , , , , , , , , , , , , ,
April 2019	\$364,947	\$35,626
May 2019	\$377,132	\$35,626
June 2019	\$350,781	\$35,989
July 2019	\$366,235	\$35,990
July 2019		\$5,245
August 2019	\$366,235	\$35,989
September 2019	\$354,233	\$35,989
October 2019	\$354,233	\$35,989
November 2019	\$289,087	\$35,411
December 2019	\$361,195	\$35,411
January 2020	\$364,413	\$35,411
February 2020	\$364,413	\$35,411
March 2020		\$35,250



Financial Management Center 2380 McGee Street, Suite 400 Kansas City, MO 64108-2605

December 30, 2019

KY136 CAMPBELL COUNTY DEPARTMENT OF HOUSING 1098 MONMOUTH STREET ROOM 235 NEWPORT, KY 41071-1071

Dear Executive Director:

Subject: Notification of Monthly Disbursement Schedule for Housing Assistance Payments and Administrative Fees

This email serves as HUD's notification that funding will be disbursed for your agency's Housing Choice Voucher (HCV) program. Attached you will find the current disbursement schedule reflecting the monthly HAP and/or Administrative Fee amounts. A separate notification will be provided to your agency for new units and funding received or program specific reductions.

If you have any questions regarding how the monthly disbursement amounts were derived, please contact your Financial Analyst at the FMC.

Sincerely,

June E. Burnes

Digitally signed by June E. Burnes DN: CN = June E. Burnes. C = US O = Financial Management Center. OU = Division Director.

Reason: I am approving this document

Division Director

Enclosure

Memo Reference: 19-243

Housing Choice Voucher Program

Disbursement Schedule

FO Code:

4IPH

HA Name:

CAMPBELL COUNTY DEPARTMENT OF HOUSING

HA Number:

KY136

FYE:

06/30

Month	HAP Disbursement	AF Disbursement
January 2019	\$358,181	\$35,790
January 2019	\$2,446	
February 2019	\$358,181	\$35,790
February 2019	\$2,446	,
February 2019		\$3,379
March 2019	\$364,947	\$35,626
March 2019	\$2,446	
April 2019	\$364,947	\$35,626
May 2019	\$377,132	\$35,626
June 2019	\$350,781	\$35,989
July 2019	\$366,235	\$35,990
July 2019		\$5,245
August 2019	\$366,235	\$35,989
September 2019	\$354,233	\$35,989
October 2019	\$354,233	\$35,989
November 2019	\$289,087	\$35,411
December 2019	\$361,195	\$35,411
January 2020	\$364,413	\$35,411
February 2020	\$364,413	\$35,411
March 2020		\$35,250



Financial Management Center 2380 McGee Street, Suite 400 Kansas City, MO 64108-2605

OFFICE OF PUBLIC AND INDIAN HOUSING

December 26, 2019

KY136
CAMPBELL COUNTY DEPARTMENT OF HOUSING
1098 MONMOUTH STREET ROOM 235
NEWPORT, KY 41071-1071

Dear Executive Director:

SUBJECT: Housing Choice Voucher Program (HCV) Administrative Fee Funding

This letter is to notify you that funds have been obligated for HCV Program Administrative Fees.

March 2020 Administrative Fee Funding

The administrative fees provided for March 2020 are an estimated amount based on the leasing data reported in the Voucher Management System (VMS) for September 2019. The amount was capped to the number of available units; prorated to 79% of eligibility; and calculated using the 2019 administrative fee rate.

The Department will continue to use the VMS to calculate administrative fees based on first of the month leasing, and to reconcile the estimated fees advanced with the actual earnings for each month.

Specific information concerning the funding for your public housing agency (PHA) is identified in the enclosed table.

Enclosed is your Notice to Amend the Consolidated Annual Contributions Contract (CACC) with revised funding exhibits reflecting the change(s) described above. The amendment notice and revised funding exhibits should be filed with your most recent CACC. No execution by HUD or your PHA is required.

Public housing agencies receiving an increment in excess of \$100,000 in Budget Authority (BA) are required to submit Form HUD-50071, Certification of Payments to Influence Federal Transactions, and if applicable, Form SF-LLL, Disclosure of Lobbying Activities. If this letter notifies you of a renewal in excess of \$100,000, and your PHA has not submitted the Form(s) HUD-50071 (and SF-LLL where applicable) for your current fiscal year; the documents must be submitted to your local field office and Financial Analyst at the Financial Management Center (FMC) within 30 days of the date of this letter. These forms are located on the Internet at the following addresses:

Form HUD-50071 https://www.hud.gov/sites/documents/50071.PDF

Form SF-LLL

https://www.hudexchange.info/resources/documents/HUD-Form-Sflll.pdf

Please contact your Financial Analyst at the FMC if you have any questions.

Sincerely

June E. Burnes

Oligitally signed by June E. Burnes

ON: CN = June E. Burnes. C = US

O = Financial Management Certier.

OU = Obtain of Orestor.

Reason: I am approxing this document

Division Director

Enclosure(s)

Memo Reference: 19-240

Increment Number Table

U. S. Department of Housing and Urban DevelopmentOffice of Public and Indian Housing

Housing Choice Voucher Program

Section 8

December 26, 2019

Admin Fee Funding Increment Number	Admin Fee Budget Authority	Eff Date	Term (Mos.)
KY136AF0128	\$35,250	3/1/2020	1

(NOTE: The expiring funding increment number(s) listed above with blank fields across are renewed by the first listed replacement funding increment number that follows.)

Consolidated Annual Contributions Contract

U.S. Department of Housing and Urban DevelopmentOffice of Public and Indian Housing

Housing Choice Voucher Program

Section 8

HUD NOTICE TO HOUSING AGENCY AMENDING CONSOLIDATED ANNUAL CONTRIBUTIONS CONTRACT

Housing Agency:

KY136

CAMPBELL COUNTY DEPARTMENT OF HOUSING

In accordance with Paragraph 2.c. of the Consolidated Annual Contributions Contract between HUD and the HA, you are notified that the funding exhibits of the Consolidated Annual Contributions Contract is hereby revised to add a new funding increment as provided in the attached revised funding exhibit. (This notice adds one or more funding increments listed on the attached funding exhibit.)

The revised funding exhibit is attached to this HUD notice. This revised funding exhibit replaces and revises the prior funding exhibit.

In accordance with Paragraph 2.d. of the Consolidated Annual Contributions Contract, this HUD notice and the attached funding exhibit constitutes an amendment to the Consolidated Annual Contributions Contract.

United States of America

Secretary of Housing and Urban Development Authorized Representative Date of Document:

Robert H. Boepple, Director Financial Management Center

12/26/2019

U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT PIH SECTION 8 - FUNDING EXHIBIT PROGRAM-BASED

ACC NUMBER:

KY136

FIELD OFFICE:

4IPH

KY136 CAMPBELL COUNTY DEPARTMENT OF HOUSING 1098 MONMOUTH STREET ROOM 235 NEWPORT, KY 41071

HA FISCAL YEAR-END:

06/30

PROGRAM TYPE:

Voucher Program

FUNDING INCREMENT NUMBER	FIRST DAY OF TERM	LAST DAY OF TERM	CONTRACT TERM	BUDGET AUTHORITY	UNITS
KY136AF0111	11/1/2017	12/31/2017	2	63,742	N/A
KY136VO0121	1/1/2017	12/31/2017	12	1	15
KY136VO0122	1/1/2017	12/31/2017	12	1	17
KY136VO0129	11/1/2017	12/31/2017	2	616,885	741
KY136AF0112	1/1/2018	2/28/2018	2	64,521	N/A
KY136AFR317	2/1/2018	2/28/2018	1	3,299	N/A
KY136VO0130	1/1/2018	2/28/2018	2	672,335	741
KY136AF0113	3/1/2018	3/31/2018	1	32,337	N/A
KY136VO0131	3/1/2018	3/31/2018	1	333,785	741
KY136AF0114	4/1/2018	4/30/2018	1	32,337	N/A
KY136VO0132	4/1/2018	4/30/2018	1	333,785	741
KY136AF0115	5/1/2018	5/31/2018	1	33,086	N/A
KY136VO0135	5/1/2018	5/31/2018	1	337,191	741
KY136AF0116	6/1/2018	6/30/2018	1	33,087	N/A
KY136AFR417	6/1/2018	6/30/2018	1	17,753	N/A
KY136VO0137	6/1/2018	6/30/2018	1	346,342	741
KY136VOPR17	6/1/2018	6/30/2018	1	3,209	N/A
KY136AF0117	7/1/2018	7/31/2018	1	33,087	N/A
KY136VO0138	7/1/2018	7/31/2018	1	346,342	741
KY136AFR118	8/1/2018	8/31/2018	1	3,335	N/A
KY136AF0118	8/1/2018	9/30/2018	2	66,174	N/A
KY136VO0139	8/1/2018	9/30/2018	2 .	754,974	741
KY136AF0119	10/1/2018	10/31/2018	1	33,087	N/A
KY136VO0140	10/1/2018	10/31/2018	1	347,195	741
KY136AFR218	11/1/2018	11/30/2018	1	16,082	N/A
KY136AF0120	11/1/2018	12/31/2018	2	71,580	N/A
KY136VO0133	1/1/2018	12/31/2018	12	1	15
KY136VO0134	1/1/2018	12/31/2018	12	1	17
KY136VO0141	11/1/2018	12/31/2018	2	694,391	741
KY136AF0121	1/1/2019	2/28/2019	2	71,580	N/A

FUNDING INCREMENT NUMBER	FIRST DAY OF TERM	LAST DAY OF TERM	CONTRACT TERM	BUDGET AUTHORITY	UNITS
KY136AFR318	2/1/2019	2/28/2019	1	3,379	N/A
KY136VO0142	1/1/2019	2/28/2019	2	693,642	7 4 1
KY136VO0136	4/1/2018	3/31/2019	12	29,356	5
KY136VO0143	3/1/2019	3/31/2019	1	346,821	741
KY136AF0122	3/1/2019	4/30/2019	2	71,252	N/A
KY136VO0144	4/1/2019	4/30/2019	1	346,821	741
KY136AF0123	5/1/2019	5/31/2019	1	35,626	N/A
KY136VO0148	5/1/2019	5/31/2019	1	346,821	741
KY136AFR418	7/1/2019	7/31/2019	1	5,245	N/A
KY136AF0124	6/1/2019	9/30/2019	4	143,957	N/A
KY136VO0149	6/1/2019	9/30/2019	4	1,495,556	741
KY136AF0125	10/1/2019	10/31/2019	1	35,989	N/A
KY136VO0150	10/1/2019	10/31/2019	1	358,851	741
KY136AF0126	11/1/2019	12/31/2019	2	70,822	N/A
KY136VO0145	1/1/2019	12/31/2019	12	1	15
KY136VO0146	1/1/2019	12/31/2019	12	1	17
KY136VO0147	4/1/2019	12/31/2019	9	1	5
KY136VO0151	11/1/2019	12/31/2019	2	717,701	741
KY136AF0127	1/1/2020	2/29/2020	2	70,822	N/A
KY136VO0152	1/1/2020	2/29/2020	2	547,470	741
KY136VO0153	2/1/2020	2/29/2020	1	182,490	N/A
KY136AF0128	3/1/2020	3/31/2020	1	35,250	N/A



Financial Management Center 2380 McGee Street, Suite 400 Kansas City, MO 64108-2605

OFFICE OF PUBLIC AND INDIAN HOUSING

December 20, 2019

KY136 CAMPBELL COUNTY DEPARTMENT OF HOUSING 1098 MONMOUTH STREET ROOM 235 NEWPORT, KY 41071-1071

Dear Executive Director:

SUBJECT: Budget Authority for Housing Assistance Payments (HAP)

This letter is to notify you that CY2020 funding has been obligated for your PHA. These funds are provided to meet the full January through February advance calculation as described in the ACC letter dated November 26th, 2019. The funding details are shown in the enclosed table. There are no additional units assigned with this funding.

Also enclosed is your executed copy of the notice to amend the Consolidated Annual Contributions Contract (CACC) with revised funding exhibits reflecting the changes described above. The amendment notice and revised funding exhibits should be filed with your most recent executed CACC.

Public housing agencies receiving an increment in excess of \$100,000 in Budget Authority (BA) are required to submit Form HUD-50071, Certification of Payments to Influence Federal Transactions, and if applicable, Form SF-LLL, Disclosure of Lobbying Activities. If this letter notifies you of a renewal in excess of \$100,000, and your PHA has not submitted the Form(s) HUD-50071 (and SF-LLL where applicable) for your current fiscal year; the documents must be submitted to your local field office and Financial Analyst at the Financial Management Center (FMC) within 30 days of the date of this letter. These forms are located on the Internet at the following addresses:

Form HUD-50071

https://www.hud.gov/sites/documents/50071.PDF

Form SF-LLL

https://www.hudexchange.info/resources/documents/HUD-Form-Sflll.pdf

Please contact your Financial Analyst at the FMC if you have any questions.

www.hud.gov

espanol.hud.gov

Sincerely

June E. Burnes

Digitally signed by June E. Burnes
ON: CN = June E. Rumes. C = US
O = Financial Management Center.
OU = Division Orector.
Reason: I am approving this document

Division Director

Enclosure(s)

Memo Reference: 19-234

Increment Number Table

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

Housing Choice Voucher Program

Section 8

December 20, 2019

HAP Funding Increment Number	Budget Authority	Eff Date	Term (Mos.)
KY136VO0153	\$182,490	2/1/2020	1

(NOTE: The expiring funding increment number(s) listed above with blank fields across are renewed by the first listed replacement funding increment number that follows.)

Consolidated Annual Contributions Contract

U.S. Department of Housing and Urban DevelopmentOffice of Public and Indian Housing

Housing Choice Voucher Program

Section 8

HUD NOTICE TO HOUSING AGENCY AMENDING CONSOLIDATED ANNUAL CONTRIBUTIONS CONTRACT

Housing Agency:

KY136

CAMPBELL COUNTY DEPARTMENT OF HOUSING

In accordance with Paragraph 2.c. of the Consolidated Annual Contributions Contract between HUD and the HA, you are notified that the funding exhibits of the Consolidated Annual Contributions Contract is hereby revised to add a new funding increment as provided in the attached revised funding exhibit. (This notice adds one or more funding increments listed on the attached funding exhibit.)

The revised funding exhibit is attached to this HUD notice. This revised funding exhibit replaces and revises the prior funding exhibit.

In accordance with Paragraph 2.d. of the Consolidated Annual Contributions Contract, this HUD notice and the attached funding exhibit constitutes an amendment to the Consolidated Annual Contributions Contract.

United States of America

Secretary of Housing and Urban Development Authorized Representative

Date of Document:

Robert H. Boepple, Director Financial Management Center

12/20/2019

U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT PIH SECTION 8 - FUNDING EXHIBIT PROGRAM-BASED

ACC NUMBER: KY136

FIELD OFFICE:

4IPH

KY136 CAMPBELL COUNTY DEPARTMENT OF HOUSING 1098 MONMOUTH STREET ROOM 235 NEWPORT, KY 41071

HA FISCAL YEAR-END:

06/30

PROGRAM TYPE:

Voucher Program

FUNDING INCREMENT NUMBER	FIRST DAY OF TERM	LAST DAY OF TERM	CONTRÁCT TERM	BUDGET AUTHORITY	UNITS
KY136AF0111	11/1/2017	12/31/2017	2	63,742	N/A
KY136VO0121	1/1/2017	12/31/2017	12	1	15
KY136VO0122	1/1/2017	12/31/2017	12	1	17
KY136VO0129	11/1/2017	12/31/2017	2	616,885	741
KY136AF0112	1/1/2018	2/28/2018	2	64,521	N/A
KY136AFR317	2/1/2018	2/28/2018	1	3,299	N/A
KY136VO0130	1/1/2018	2/28/2018	2	672,335	741
KY136AF0113	3/1/2018	3/31/2018	1	32,337	N/A
KY136VO0131	3/1/2018	3/31/2018	1	333,785	741
KY136AF0114	4/1/2018	4/30/2018	1	32,337	N/A
KY136VO0132	4/1/2018	4/30/2018	1	333,785	7 4 1
KY136AF0115	5/1/2018	5/31/2018	1	33,086	N/A
KY136VO0135	5/1/2018	5/31/2018	1	337,191	74 1
KY136AF0116	6/1/2018	6/30/2018	1	33,087	N/A
KY136AFR417	6/1/2018	6/30/2018	1	17,753	N/A
KY136VO0137	6/1/2018	6/30/2018	1	346,342	741
KY136VOPR17	6/1/2018	6/30/2018	1	3,209	N/A
KY136AF0117	7/1/2018	7/31/2018	1	33,087	N/A
KY136VO0138	7/1/2018	7/31/2018	1	346,342	741
KY136AFR118	8/1/2018	8/31/2018	1	3,335	N/A
KY136AF0118	8/1/2018	9/30/2018	2	66,174	N/A
KY136VO0139	8/1/2018	9/30/2018	2	754,974	741
KY136AF0119	10/1/2018	10/31/2018	1	33,087	N/A
KY136VO0140	10/1/2018	10/31/2018	1	347,195	741
KY136AFR218	11/1/2018	11/30/2018	1	16,082	N/A
KY136AF0120	11/1/2018	12/31/2018	2	71,580	N/A
KY136VO0133	1/1/2018	12/31/2018	12	1	15
KY136VO0134	1/1/2018	12/31/2018	12	1	17
KY136VO0141	11/1/2018	12/31/2018	2	694,391	741
KY136AF0121	1/1/2019	2/28/2019	2	71,580	N/A

FUNDING INCREMENT NUMBER	FIRST DAY OF TERM	LAST DAY OF TERM	CONTRACT TERM	BUDGET AUTHORITY	UNITS
KY136AFR318	2/1/2019	2/28/2019	1	3,379	N/A
KY136VO0142	1/1/2019	2/28/2019	2	693,642	741
KY136VO0136	4/1/2018	3/31/2019	12	29,356	5
KY136VO0143	3/1/2019	3/31/2019	1	346,821	741
KY136AF0122	3/1/2019	4/30/2019	2	71,252	N/A
KY136VO0144	4/1/2019	4/30/2019	1	346,821	741
KY136AF0123	5/1/2019	5/31/2019	1	35,626	N/A
KY136VO0148	5/1/2019	5/31/2019	1	346,821	741
KY136AFR418	7/1/2019	7/31/2019	1	5,245	N/A
KY136AF0124	6/1/2019	9/30/2019	4	143,957	N/A
KY136VO0149	6/1/2019	9/30/2019	4	1,495,556	741
KY136AF0125	10/1/2019	10/31/2019	1	35,989	N/A
KY136VO0150	10/1/2019	10/31/2019	1	358,851	741
KY136AF0126	11/1/2019	12/31/2019	2	70,822	N/A
KY136VO0145	1/1/2019	12/31/2019	12	1	15
KY136VO0146	1/1/2019	12/31/2019	12	1	17
KY136VO0147	4/1/2019	12/31/2019	9	1	5
KY136VO0151	11/1/2019	12/31/2019	2	717,701	741
KY136AF0127	1/1/2020	2/29/2020	2	70,822	N/A
KY136VO0152	1/1/2020	2/29/2020	2	547,470	741
KY136VO0153	2/1/2020	2/29/2020	1	182,490	N/A
KY136AF0128	3/1/2020	3/31/2020	1	35,250	N/A



Financial Management Center 2380 McGee Street, Suite 400 Kansas City, MO 64108-2605

OFFICE OF PUBLIC AND INDIAN HOUSING

December 16, 2019

KY136 CAMPBELL COUNTY DEPARTMENT OF HOUSING 1098 MONMOUTH STREET ROOM 235 NEWPORT, KY 41071-1071

Dear Executive Director:

SUBJECT: Section 8 Housing Choice Voucher Program - Award of Additional Funding

This letter is to notify you that HUD will be providing your agency additional Housing Voucher program funds. The amount of funds being obligated and the purpose of such funds are reflected in the table below.

Program Funding	Budget Authority Assigned	Purpose of Funding
AF	\$35,250	March AF Funding
VO	\$182,490	2nd half of February 2020 HAP

Your executed copy of the notice to amend the Consolidated Annual Contributions Contract (CACC) with revised funding exhibits reflecting the changes described above will be transmitted under separate cover. That letter will contain all information related to this funding including increment number, effective/expiration dates and units, if applicable.

If you have any questions, please contact your Financial Analyst.

Sincerely,

June E. Burnes

Division Director

Digitally signed by June E. Bennes
DN: CN = June E. Burnes. C = US
. D = Financial Management Canter.
DU = Division Director.
Reason: I am approving this document

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Memo Reference: 19-222



Financial Management Center 2380 McGee Street, Suite 400 Kansas City, MO 64108-2605

OFFICE OF PUBLIC AND INDIAN HOUSING

November 26, 2019

KY136 CAMPBELL COUNTY HOUSING AUTHORITY POST OFFICE BOX 72424 NEWPORT, KY 41072-1072

Dear Executive Director:

SUBJECT: Renewal of Housing Choice Voucher Program Increments
Expiring December 31, 2019 through January 31, 2020

This letter is to notify you that funds have been obligated to renew expiring Housing Choice Voucher (HCV) Program Housing Assistance Payments (HAP) and Administrative Fee increment(s).

January and February 2020 HAP Funding

The HAP funding is provided to renew increment(s) expiring December 31, 2019 through January 31, 2020. A monthly advance amount was calculated using the January through July 2019 VMS data, extrapolating the July data to calculate August through December. The missing months were inflated at five-twelfths of the national inflation factor of 1.043 and multiplied by the 2020 inflation factor of 1.038. That total was prorated at 99.5%.

The final advance amount for January through February is roughly one and half times the monthly amount calculated. Funds for all HCV agencies in total were capped at the funds available under the Department's current Continuing Resolution (CR). An additional advance will be provided to meet the full two-month advance calculation upon enactment of subsequent CR or an Appropriations Act.

The monthly HAP is disbursed in accordance with PIH Notices 2011-67 and 2017-06, utilizing cash management procedures and will continue being reconciled periodically to ensure compliance with Treasury Financial Manual at Vol. 1, Part 6, Section 2025.

VASH Renewals

If your agency is administering HUD Veterans Affairs Supportive Housing (VASH) vouchers, the renewal of these vouchers is included in the overall renewal calculations. These vouchers are not renewed separately. PHAs must comply with the statutory requirement that VASH vouchers may only be used to assist VASH-eligible participants, both initially and upon turnover.

Separate tracking of the VASH units from the regular voucher units is required for SEMAP purposes, since VASH units are not included, and will also allow for the utilization monitoring of these special purpose vouchers. A new increment will be established for the VASH renewal units and assigned one dollar (\$1.00) of budget authority. These units will continue to be renewed separately upon expiration.

Rental Assistance Demonstration (RAD) Renewals

If your agency is administering Rental Assistance Demonstration (RAD) vouchers, the renewal of these vouchers is included in the overall renewal calculations. These vouchers are not renewed separately.

Separate tracking of the RAD units from the regular voucher units is required by the Department. A new increment will be established for the RAD renewal units and assigned one dollar (\$1.00) of budget authority. These units will continue to be renewed separately upon expiration.

RAD leasing and expenses are to be reported in the VMS in the appropriate RAD field (RAD 1 or RAD 2). In addition, RAD units should also be reported in the VMS as Project-Based Vouchers (PBV). Please refer to the VMS User's Manual for specific guidance on RAD and PBV reporting.

January and February 2020 Administrative Fee Funding

The administrative fees provided for January and February 2020 are an estimated amount based on the leasing data reported in the Voucher Management System (VMS) for January through June 2019. The amount was capped to the number of available units; prorated to 79% of eligibility; and calculated using the 2019 administrative fee rate.

The Department will continue to use the VMS to calculate administrative fees based on first of the month leasing, and to reconcile the estimated fees advanced with the actual earnings for each month.

Specific information concerning the renewal(s) for your public housing agency (PHA) is identified in the enclosed table.

Enclosed is your Notice to Amend the Consolidated Annual Contributions Contract (CACC) with revised funding exhibits reflecting the change(s) described above. The amendment notice and revised funding exhibits should be filed with your most recent CACC. No execution by HUD or your PHA is required.

Public housing agencies receiving an increment in excess of \$100,000 in Budget Authority (BA) are required to submit Form HUD-50071, Certification of Payments to Influence Federal Transactions, and if applicable, Form SF-LLL, Disclosure of Lobbying Activities. If this letter notifies you of a renewal in excess of \$100,000, and your PHA has not submitted the Form(s) HUD-50071 (and SF-LLL where applicable) for your current fiscal year; the documents must be submitted to your local field office and Financial Analyst at the Financial Management Center (FMC) within 30 days of the date of this letter. These forms are located on the Internet at the following addresses:

Form HUD-50071

https://www.hud.gov/sites/documents/50071.PDF

Form SF-LLL

https://www.hudexchange.info/resources/documents/HUD-Form-Sflli.pdf

Please contact your Financial Analyst at the FMC if you have any questions.

Sincerely

June E. Burnes Or Finance (Nº 0) Or Finance (N° 0) Or Finance (N°

Digitally signed by June E. Burnes
ON: CN = June E. Burnes. C = US
O = Financial Management Center.
OU = Orbiton Director.

Division Director

Enclosure(s)

Memo Reference: 19-212

Increment Number Table

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

Housing Choice Voucher Program

Section 8

November 26, 2019

Expiring HAP Funding Increment Number	Replacement HAP Funding Increment Number	Units	HAP Budget Authority	Admin Fee Funding Increment Number	Admin Fee Budget Authority	Eff Date	Term (Mos.)
				KY136AF0127	\$70,822	1/1/2020	2
KY136VO0151	KY136VO0152	741	\$547,470			1/1/2020	2

(NOTE: The expiring funding increment number(s) listed above with blank fields across are renewed by the first listed replacement funding increment number that follows.)

Consolidated Annual Contributions Contract

U.S. Department of Housing and Urban DevelopmentOffice of Public and Indian Housing

Housing Choice Voucher Program

Section 8

HUD NOTICE TO HOUSING AGENCY AMENDING CONSOLIDATED ANNUAL CONTRIBUTIONS CONTRACT

Housing Agency:

KY136

CAMPBELL COUNTY HOUSING AUTHORITY

In accordance with Paragraph 2.c. of the Consolidated Annual Contributions Contract between HUD and the HA, you are notified that the funding exhibits of the Consolidated Annual Contributions Contract is hereby revised to add a new funding increment as provided in the attached revised funding exhibit. (This notice adds one or more funding increments listed on the attached funding exhibit.)

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In accordance with Paragraph 2.d. of the Consolidated Annual Contributions Contract, this HUD notice and the attached funding exhibit constitutes an amendment to the Consolidated Annual Contributions Contract.

United States of America

Secretary of Housing and Urban Development Authorized Representative

Date of Document:

Robert H. Boepple, Director Financial Management Center

11/26/2019

U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT PIH SECTION 8 - FUNDING EXHIBIT PROGRAM-BASED

ACC NUMBER: KY136

FIELD OFFICE:

4IPH

KY136

CAMPBELL COUNTY HOUSING AUTHORITY

POST OFFICE BOX 72424 NEWPORT, KY 41072

HA FISCAL YEAR-END:

06/30

PROGRAM TYPE:

Voucher Program

FUNDING INCREMENT NUMBER	FIRST DAY OF TERM	LAST DAY OF TERM	CONTRACT TERM	BUDGET AUTHORITY	UNITS
KY136AF0111	11/1/2017	12/31/2017	2	63,742	N/A
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KY136VO0131	3/1/2018	3/31/2018	1	333,785	741
KY136AF0114	4/1/2018	4/30/2018	1	32,337	N/A
KY136VO0132	4/1/2018	4/30/2018	1	333,785	741
KY136AF0115	5/1/2018	5/31/2018	1	33,086	N/A
KY136VO0135	5/1/2018	5/31/2018	1	337,191	741
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KY136AFR417	6/1/2018	6/30/2018	1	17,753	N/A
KY136VO0137	6/1/2018	6/30/2018	1	346,342	741
KY136VOPR17	6/1/2018	6/30/2018	1	3,209	N/A
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KY136VO0138	7/1/2018	7/31/2018	1	346,342	741
KY136AFR118	8/1/2018	8/31/2018	1	3,335	N/A
KY136AF0118	8/1/2018	9/30/2018	2	66,174	N/A
KY136VO0139	8/1/2018	9/30/2018	2	754,974	741
KY136AF0119	10/1/2018	10/31/2018	1	33,087	N/A
KY136VO0140	10/1/2018	10/31/2018	1	347,195	741
KY136AFR218	11/1/2018	11/30/2018	1	16,082	N/A
KY136AF0120	11/1/2018	12/31/2018	2	71,580	N/A
KY136VO0133	1/1/2018	12/31/2018	12	1	15
KY136VO0134	1/1/2018	12/31/2018	.12	1	17
KY136VO0141	11/1/2018	12/31/2018	2	694,391	741
KY136AF0121	1/1/2019	2/28/2019	2	71,580	N/A

KY136AFR318 2/1/2019 2/28/2019 1	3,379 N/A 693,642 741
	•
KY136VO0142 1/1/2019 2/28/2019 2	
KY136VO0136 4/1/2018 3/31/2019 12	29,356 5
KY136VO0143 3/1/2019 3/31/2019 1	346,821 741
KY136AF0122 3/1/2019 4/30/2019 2	71,252 N/A
KY136VO0144 4/1/2019 4/30/2019 1	346,821 741
KY136AF0123 5/1/2019 5/31/2019 1	35,626 N/A
KY136VO0148 5/1/2019 5/31/2019 1	346,821 741
KY136AFR418 7/1/2019 7/31/2019 1	5,245 N/A
KY136AF0124 6/1/2019 9/30/2019 4	143,957 N/A
KY136VO0149 6/1/2019 9/30/2019 4	1,495,556 741
KY136AF0125 10/1/2019 10/31/2019 1	35,989 N/A
KY136VO0150 10/1/2019 10/31/2019 1	358,851 7 4 1
KY136AF0126 11/1/2019 12/31/2019 2	70,822 N/A
KY136VO0145 1/1/2019 12/31/2019 12	1 15
KY136VO0146 1/1/2019 12/31/2019 12	1 17
KY136VO0147 4/1/2019 12/31/2019 9	1 5
KY136VO0151 11/1/2019 12/31/2019 2	717,701 741
KY136AF0127 1/1/2020 2/29/2020 2	70,822 N/A
KY136VO0152 1/1/2020 2/29/2020 2	547,470 741

WASHINGTON, DC 20410-5000



OFFICE OF PUBLIC AND INDIAN HOUSING

November 27, 2019

Dear Executive Director,

CY 2020 Housing Choice Voucher Program (HCVP) Renewal Awards:

The Department is currently operating under the Continuing Resolution (CR) H.R.3055 – Further Continuing Appropriations Act, 2020, and Further Health Extenders Act of 2019, which is effective until December 20, 2019. The purpose of this letter is to communicate to public housing agencies (PHAs) administering the Housing Choice Voucher (HCV) Program, their current status and projections of their calendar year (CY) 2020 renewal funding, and steps PHAs must take to support the funding process. This letter provides important information about the PHAs' monthly Housing Assistance Payments (HAP), Administrative Fee (AF) disbursements, and projected HAP and AF prorations based on the Fiscal Year (FY) 2020 Senate and House of Representatives Appropriations Bills.

HUD has obligated funding to the PHAs as follows:

- December 2019 and January 2020 HAP obligations at 99.5% proration of estimated CY 2020 eligibility; additionally,
- December 2019, January and February 2020 AF obligations have been allocated at 79% proration of estimated CY 2020 eligibility; and,
- If the PHAs also administer the Mainstream Program, both HAP and AF for January and February 2020 have been allocated at 100% and 79% proration, respectively.

Consequently, PHAs should expect the timely disbursement of HCV Program HAP and AF payments for December 2019 and January 2020. A second notification regarding the February 2020 HAP and AF payments will be provided to PHAs in January 2020. For PHAs administering the Mainstream Program, they should expect timely HAP and AF payments for December 2019, January and February 2020.

CY 2020 Estimated HAP and Administrative Fee Prorations:

The Department has evaluated two CY 2020 funding possibilities that result in a range of HAP and AF proration levels. For instance, HUD could receive an Appropriations Act, whereby Congress implements HCV funding based on either the Senate Appropriations Committee bill or the appropriations bill passed by the House of Representatives. The Department has evaluated these funding scenarios based on both the Tenant Based Rental Assistance (TBRA) Senate Bill, passed by the Committee on September 19, 2019, and the TBRA House Bill, introduced in House of Representatives on June 3, 2019. The estimated HAP prorations are 99.2% and 98.8%, respectively. The AF prorations are anticipated at 81% for the Senate Bill and 78% for the House of Representatives Bill. PHAs can click on the following links to view the aforementioned bills: Senate Bill and House Bill.

As always, the proration levels described above are at the national level, and they were calculated by estimating the full HCV program renewal need for CY 2020 and comparing the program renewal need to the available funding as proposed by the Senate and House of Representative Bills. To estimate the program renewal need, HUD considered HAP costs reported in the Voucher Management System (VMS) through August 2019 extrapolated through December 2019, made adjustments for first time renewals and

applied a national average inflation factor (4.51%). However, a PHA's individual inflation factor may significantly differ from the national average. It is very important that PHAs take individual inflation factors into consideration while assessing desired leasing levels in CY 2020.

Accordingly, HUD is recommending that the PHAs consider its preliminary individual inflation factor in its assessment. Individual PHA inflation factors have already been uploaded in the PIH Two-Year Forecasting Tool (TYT). The TYT can be accessed directly by downloading a spreadsheet from this forecasting tool link, entering the PHA number and launching a forecasting populated with VMS data and funding information. As mentioned before, and for the PHAs' benefit, their CY 2020 preliminary inflation factors are already set in the TYT, and the HAP proration factor set is to 99%. However, the defaults can be changed by the user, for example, PHAs could estimate the impact at 98.8% scenario, assuming the House of Representatives Bill. PHAs should plan for CY 2020 by also looking at the impact in CY 2021 of where they project to end CY 2020. In doing so, PHAs can model differing CY 2021 funding proration level possibilities.

HUD staff will be evaluating budget and leasing utilization considering the above proration assumptions. Consequently, some PHAs may hear from HUD staff in particular if, given those assumptions, a shortfall or significant leasing potential is projected.

VMS Costs and Leasing Review Period:

The Department anticipates that the CY 2020 renewal eligibility for non-Moving to Work (non-MTW) PHAs will continue to be based on actual and eligible HAP costs incurred and reported in VMS during CY 2019. Therefore, all PHAs should begin reviewing the completeness and accuracy of their CY 2019 costs and leasing reported in VMS at this time. The deadline to submit CY 2019 costs and leasing adjustments in VMS, if needed, is **January 22, 2020**. As for MTW PHAS, their HAP renewal eligibilities will continue to be in accordance with the terms of their individual MTW agreements.

Should you have any questions about the TYT, please do not hesitate to contact your Field Office representative. Otherwise, please reach out to your FMC Financial Analyst for any HCV Program funding related inquiries.

Sincerely,

Danielle L. Bastarache

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Ok. Ol = Opinide L. Bastarach

Danielle Bastarache
Deputy Assistant Secretary
Office of Public Housing and Voucher
Programs

Financial Management Center 2380 McGee Street, Suite 400 Kansas City, MO 64108-2605

OFFICE OF PUBLIC AND INDIAN HOUSING

November 27, 2019

KY136 CAMPBELL COUNTY HOUSING AUTHORITY POST OFFICE BOX 72424 NEWPORT, KY 41072-1072

Dear Executive Director:

Subject: Notification of Monthly Disbursement Schedule for Housing Assistance Payments and Administrative Fees

This email serves as HUD's notification that funding will be disbursed for your agency's Housing Choice Voucher (HCV) program. Attached you will find the current disbursement schedule reflecting the monthly HAP and/or Administrative Fee amounts. A separate notification will be provided to your agency for new units and funding received or program specific reductions.

If you have any questions regarding how the monthly disbursement amounts were derived, please contact your Financial Analyst at the FMC.

Sincerely,

June E. Burne

Digitally signed by June E. Burnes DN: CN = June E. Burnes, C = US O = Financial Management Center. OU = Division Director. Reason: I am approving this document

Division Director

Enclosure

Memo Reference: 19-216

Housing Choice Voucher Program

Disbursement Schedule

FO Code:

4IPH

HA Name:

CAMPBELL COUNTY HOUSING AUTHORITY

HA Number:

KY136

FYE:

06/30

Month	HAP Disbursement	AF Disbursement	
December 2018	\$364,269	\$35,790	
December 2018	\$2,446		
January 2019	\$358,181	\$35,790	
January 2019	\$2,446		
February 2019	\$358,181	\$35,790	
February 2019	\$2,446		
February 2019		\$3,379	
March 2019	\$364,947	\$35,626	
March 2019	\$2,446		
April 2019	\$364,947	\$35,626	
May 2019	\$377,132	\$35,626	
June 2019	\$350,781	\$35,989	
July 2019	\$366,235	\$35,990	
July 2019		\$5,245	
August 2019	\$366,235	\$35,989	
September 2019	\$354,233	\$35,989	
October 2019	\$354,233	\$35,989	
November 2019	\$289,087	\$35,411	
December 2019	\$361,195	\$35,411	
January 2020	\$364,413	\$35,411	
February 2020	\$364,413	\$35,411	

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT



Financial Management Center 2380 McGee Street, Suite 400 Kansas City, MO 64108-2605

OFFICE OF PUBLIC AND INDIAN HOUSING

November 26, 2019

KY136
CAMPBELL COUNTY HOUSING AUTHORITY
POST OFFICE BOX 72424
NEWPORT, KY 41072-1072

Dear Executive Director:

SUBJECT: Renewal of Housing Choice Voucher Program Increments
Expiring December 31, 2019 through January 31, 2020

This letter is to notify you that funds have been obligated to renew expiring Housing Choice Voucher (HCV) Program Housing Assistance Payments (HAP) and Administrative Fee increment(s).

January and February 2020 HAP Funding

The HAP funding is provided to renew increment(s) expiring December 31, 2019 through January 31, 2020. A monthly advance amount was calculated using the January through July 2019 VMS data, extrapolating the July data to calculate August through December. The missing months were inflated at five-twelfths of the national inflation factor of 1.043 and multiplied by the 2020 inflation factor of 1.038. That total was prorated at 99.5%.

The final advance amount for January through February is roughly one and half times the monthly amount calculated. Funds for all HCV agencies in total were capped at the funds available under the Department's current Continuing Resolution (CR). An additional advance will be provided to meet the full two-month advance calculation upon enactment of subsequent CR or an Appropriations Act.

The monthly HAP is disbursed in accordance with PIH Notices 2011-67 and 2017-06, utilizing cash management procedures and will continue being reconciled periodically to ensure compliance with Treasury Financial Manual at Vol. 1, Part 6, Section 2025.

VASH Renewals

If your agency is administering HUD Veterans Affairs Supportive Housing (VASH) vouchers, the renewal of these vouchers is included in the overall renewal calculations. These vouchers are not renewed separately. PHAs must comply with the statutory requirement that VASH vouchers may only be used to assist VASH-eligible participants, both initially and upon turnover.

Separate tracking of the VASH units from the regular voucher units is required for SEMAP purposes, since VASH units are not included, and will also allow for the utilization monitoring of these special purpose vouchers. A new increment will be established for the VASH renewal units and assigned one dollar (\$1.00) of budget authority. These units will continue to be renewed separately upon expiration.

Rental Assistance Demonstration (RAD) Renewals

If your agency is administering Rental Assistance Demonstration (RAD) vouchers, the renewal of these vouchers is included in the overall renewal calculations. These vouchers are not renewed separately.

Separate tracking of the RAD units from the regular voucher units is required by the Department. A new increment will be established for the RAD renewal units and assigned one dollar (\$1.00) of budget authority. These units will continue to be renewed separately upon expiration.

RAD leasing and expenses are to be reported in the VMS in the appropriate RAD field (RAD 1 or RAD 2). In addition, RAD units should also be reported in the VMS as Project-Based Vouchers (PBV). Please refer to the VMS User's Manual for specific guidance on RAD and PBV reporting.

January and February 2020 Administrative Fee Funding

The administrative fees provided for January and February 2020 are an estimated amount based on the leasing data reported in the Voucher Management System (VMS) for January through June 2019. The amount was capped to the number of available units; prorated to 79% of eligibility; and calculated using the 2019 administrative fee rate.

The Department will continue to use the VMS to calculate administrative fees based on first of the month leasing, and to reconcile the estimated fees advanced with the actual earnings for each month.

Specific information concerning the renewal(s) for your public housing agency (PHA) is identified in the enclosed table.

Enclosed is your Notice to Amend the Consolidated Annual Contributions Contract (CACC) with revised funding exhibits reflecting the change(s) described above. The amendment notice and revised funding exhibits should be filed with your most recent CACC. No execution by HUD or your PHA is required.

Public housing agencies receiving an increment in excess of \$100,000 in Budget Authority (BA) are required to submit Form HUD-50071, Certification of Payments to Influence Federal Transactions, and if applicable, Form SF-LLL, Disclosure of Lobbying Activities. If this letter notifies you of a renewal in excess of \$100,000, and your PHA has not submitted the Form(s) HUD-50071 (and SF-LLL where applicable) for your current fiscal year; the documents must be submitted to your local field office and Financial Analyst at the Financial Management Center (FMC) within 30 days of the date of this letter. These forms are located on the Internet at the following addresses:

Form HUD-50071

https://www.hud.gov/sites/documents/50071.PDF

Form SF-LLL

https://www.hudexchange.info/resources/documents/HUD-Form-Sflll.pdf

Please contact your Financial Analyst at the FMC if you have any questions.

Sincerely

June E. Burnes

Digitally signed by June E. Burnes

DN: CN = June E. Burnes. C = US

O = Financial Managament Comber.

OU = Division Ornollor.

Reason: Lars approximate the document

Division Director

Enclosure(s)

Memo Reference: 19-212

Increment Number Table

U. S. Department of Housing and Urban DevelopmentOffice of Public and Indian Housing

Housing Choice Voucher Program

Section 8

November 26, 2019

Expiring HAP Funding Increment Number	Replacement HAP Funding Increment Number	Units	HAP Budget Authority	Admin Fee Funding Increment Number	Admin Fee Budget Authority	Eff Date	Term (Mos.)
				KY136AF0127	\$70,822	1/1/2020	2
KY136VO0151	KY136VO0152	741	\$547,470			1/1/2020	2

(NOTE: The expiring funding increment number(s) listed above with blank fields across are renewed by the first listed replacement funding increment number that follows.)

Consolidated Annual Contributions Contract

U.S. Department of Housing and Urban DevelopmentOffice of Public and Indian Housing

Housing Choice Voucher Program

Section 8

HUD NOTICE TO HOUSING AGENCY AMENDING CONSOLIDATED ANNUAL CONTRIBUTIONS CONTRACT

Housing Agency:

KY136

CAMPBELL COUNTY HOUSING AUTHORITY

In accordance with Paragraph 2.c. of the Consolidated Annual Contributions Contract between HUD and the HA, you are notified that the funding exhibits of the Consolidated Annual Contributions Contract is hereby revised to add a new funding increment as provided in the attached revised funding exhibit. (This notice adds one or more funding increments listed on the attached funding exhibit.)

The revised funding exhibit is attached to this HUD notice. This revised funding exhibit replaces and revises the prior funding exhibit.

In accordance with Paragraph 2.d. of the Consolidated Annual Contributions Contract, this HUD notice and the attached funding exhibit constitutes an amendment to the Consolidated Annual Contributions Contract.

United States of America

Secretary of Housing and Urban Development Authorized Representative Date of Document:

Robert H. Boepple, Director Financial Management Center

11/26/2019

U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT PIH SECTION 8 - FUNDING EXHIBIT PROGRAM-BASED

ACC NUMBER:

KY136

FIELD OFFICE:

4IPH

KY136

CAMPBELL COUNTY HOUSING AUTHORITY

POST OFFICE BOX 72424 NEWPORT, KY 41072

HA FISCAL YEAR-END:

06/30

PROGRAM TYPE:

Voucher Program

FUNDING INCREMENT NUMBER	FIRST DAY OF TERM	LAST DAY OF TERM	CONTRACT TERM	BUDGET AUTHORITY	UNITS
KY136AF0111	11/1/2017	12/31/2017	2	63,742	N/A
KY136VO0121	1/1/2017	12/31/2017	12	1	15
KY136VO0122	1/1/2017	12/31/2017	12	1	17
KY136VO0129	11/1/2017	12/31/2017	2	616,885	74 1
KY136AF0112	1/1/2018	2/28/2018	2	64,521	N/A
KY136AFR317	2/1/2018	2/28/2018	1	3,299	N/A
KY136VO0130	1/1/2018	2/28/2018	2	672,335	741
KY136AF0113	3/1/2018	3/31/2018	1	32,337	N/A
KY136VO0131	3/1/2018	3/31/2018	1	333,785	74 1
KY136AF0114	4/1/2018	4/30/2018	1	32,337	N/A
KY136VO0132	4/1/2018	4/30/2018	1	333,785	741
KY136AF0115	5/1/2018	5/31/2018	1	33,086	N/A
KY136VO0135	5/1/2018	5/31/2018	1	337,191	741
KY136AF0116	6/1/2018	6/30/2018	1	33,087	N/A
KY136AFR417	6/1/2018	6/30/2018	1	17,753	N/A
KY136VO0137	6/1/2018	6/30/2018	1	346,342	741
KY136VOPR17	6/1/2018	6/30/2018	1	3,209	N/A
KY136AF0117	7/1/2018	7/31/2018	1	33,087	N/A
KY136VO0138	7/1/2018	7/31/2018	1	346,342	741
KY136AFR118	8/1/2018	8/31/2018	1	3,335	N/A
KY136AF0118	8/1/2018	9/30/2018	2	66,174	N/A
KY136VO0139	8/1/2018	9/30/2018	2	754,974	741
KY136AF0119	10/1/2018	10/31/2018	1	33,087	N/A
KY136VO0140	10/1/2018	10/31/2018	1	347,195	741
KY136AFR218	11/1/2018	11/30/2018	1	16,082	N/A
KY136AF0120	11/1/2018	12/31/2018	2	71,580	N/A
KY136VO0133	1/1/2018	12/31/2018	12	1	15
KY136VO0134	1/1/2018	12/31/2018	12	1	17 .
KY136VO0141	11/1/2018	12/31/2018	2	694,391	741
KY136AF0121	1/1/2019	2/28/2019	2	71,580	N/A

FUNDING INCREMENT NUMBER	FIRST DAY OF TERM	LAST DAY OF TERM	CONTRACT TERM	BUDGET AUTHORITY	UNITS
KY136AFR318	2/1/2019	2/28/2019	1	3,379	N/A
KY136VO0142	1/1/2019	2/28/2019	2	693,642	741
KY136VO0136	4/1/2018	3/31/2019	12	29,356	5
KY136VO0143	3/1/2019	3/31/2019	1	346,821	741
KY136AF0122	3/1/2019	4/30/2019	2	71,252	N/A
KY136VO0144	4/1/2019	4/30/2019	1	346,821	7 4 1
KY136AF0123	5/1/2019	5/31/2019	1	35,626	N/A
KY136VO0148	5/1/2019	5/31/2019	1	346,821	741
KY136AFR418	7/1/2019	7/31/2019	1	5,245	N/A
KY136AF0124	6/1/2019	9/30/2019	4	143,957	N/A
KY136VO0149	6/1/2019	9/30/2019	4	1,495,556	741
KY136AF0125	10/1/2019	10/31/2019	1	35,989	N/A
KY136VO0150	10/1/2019	10/31/2019	1	358,851	741
KY136AF0126	11/1/2019	12/31/2019	2	70,822	N/A
KY136VO0145	1/1/2019	12/31/2019	12	1	15
KY136VO0146	1/1/2019	12/31/2019	12	1	17
KY136VO0147	4/1/2019	12/31/2019	9	1	5
KY136VO0151	11/1/2019	12/31/2019	2	717,701	741
KY136AF0127	1/1/2020	2/29/2020	2	70,822	N/A
KY136VO0152	1/1/2020	2/29/2020	2	547,470	741



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT WASHINGTON, DC 20410-5000

OFFICE OF PUBLIC AND INDIAN HOUSING

11/21/2019

Dear Executive Director:

Subject: Housing Choice Voucher Program (HCVP) Housing Assistance Payment (HAP)
Renewal Disbursements – January and February 2020

This letter concerns the disbursement of HCVP renewal funds to your public housing agency (PHA) for the months of January and February 2020, under the cash management procedures. It is important that you review this letter and the Enclosure A included concerning the process by which HUD has calculated the disbursement of renewal housing assistance payments (HAP) funds to your PHA for these months.

January and February 2020 Disbursements

HUD has determined the funds needed for disbursements for January and February 2020 on the basis of PHA-reported HAP expenses in VMS for the month of August 2020, the most recent month for which we have validated VMS data. The date of the VMS download was October 10, 2019. The most recent month is used in lieu of the most recent three months as that is considered more accurate at this time, due to national leasing trends.

Enclosed are the calculation and data used to establish the January and February 2020 renewal disbursements for your PHA. PHAs are advised that the monthly disbursement is the calculated need plus a 2% margin.

Transition of Excess Cash

The Department continues to transition PHA-held restricted net position (RNP) to HUD-held funds until needed by the PHA, in order to comply with cash management requirements. Based on the completion of the June 30, 2019 HAP Cash Reconciliation, Excess Cash (from Line 19b (Line 26 for Moving to Work (MTW) agencies) of the CY 2019 HAP Reconciliation Enclosure will be transitioned to HUD-held funds until all excess has been transitioned.

In closing, it is critical that participants are not placed at risk or payments delayed as a result of your PHA having insufficient funds to support HAP payments due to the cash management methodology or the transition of RNP-funds to HUD-held reserves. If your PHA does not have sufficient funds, please contact your FMC FA and your local Field Office representative.

Thank you for your attention to this matter. If you have any questions concerning this letter, please contact your FA at the FMC.

Sincerely,

Miguel A. Fontánez

Digital signed by Miguel A. Fortishez
DN: CN = Miguel A. Fortishez C = US.
D = Housing Vouder Financial Management
Division, CU = Discorr
Division, CU = Discorr

Miguel A. Fontanez Director Housing Voucher Financial Management Division

	ENCLOSURE A			
	CY 2020 January and February HAP Dis	bursemen	t Enclosure	
1	PHA Name	CANA	PBELL COUNTY HOUSI	NC AUTHODITY
2	PHA Number	KY136	PBELL COUNTY HOUSE	NG AUTHORITY
2	FIA Number	K1130	1	
	Total VMS HAP Costs Reported:			
3	August 2019		\$357,268	
4	2% Margin		\$7,145	
5	Total Calculated Monthly Need (Line 3 + Line 4)			\$364,413
_	Available Funds for CY 2020 Monthly Disbursement			
6	Net HAP Renewal Obligations through February 2020		\$547,470	
7	HUD-HELD Funds as of November 15, 2019		\$346,749	4004.040
8	Funds Available to Disburse (Line 6 + Line 7)			\$894,219
	Disbursements			
9	Calculated Monthly Need (Line 5)		•	\$364,413
	Cash on Hand as of 6/30/2019 to be transitioned to HUD-Held Funds		\$0	400 i) timb
	Net January 2020 Disbursement (Line 9 - Line 10, Minimum \$0, Limited to		L	
	Funds Available Line 8)			\$364,413
12	Remaining to Offset for Remaining Months		\$0	
	Net February 2020 Disbursement (Line 9 - Line 12, Minimum \$0, Limited to			
13	Funds Available Line 8)			\$364,413
14	Remaining to Offset for Remaining Months		\$0	
	PHA Reported Data per VMS, August 2019			44.4-4
	Restricted Net Position			\$94,859
16	Unrestricted Net Position Cash and Investments			\$149,804
17	Cash and investments			\$248,899
18				
19				
TJ		1		

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT



Financial Management Center 2380 McGee Street, Suite 400 Kansas City, MO 64108-2605

OFFICE OF PUBLIC AND INDIAN HOUSING

November 20, 2019

KY136 CAMPBELL COUNTY HOUSING AUTHORITY POST OFFICE BOX 72424 NEWPORT, KY 41072-1072

Dear Executive Director:

SUBJECT: Section 8 Housing Choice Voucher Program - Award of Additional Funding

This letter is to notify you that HUD will be providing your agency additional Housing Voucher program funds. The amount of funds being obligated and the purpose of such funds are reflected in the table below.

Program Funding	Budget Authority Assigned	Purpose of Funding
AF	\$70,822	AF Advance
VO	\$547,470	HAP Advance

Your executed copy of the notice to amend the Consolidated Annual Contributions Contract (CACC) with revised funding exhibits reflecting the changes described above will be transmitted under separate cover. That letter will contain all information related to this funding including increment number, effective/expiration dates and units, if applicable.

If you have any questions, please contact your Financial Analyst.

Sincerely,

June E. Burnes

Digitally signed by June E. Burnes
DN: CN = June E. Burnes. C = US
O = Financial Menagement Center.
OU = Division Director.
Reason: Larn approxing this document

Division Director

Memo Reference:

19-201

-		



CABINET FOR HEALTH AND FAMILY SERVICES DEPARTMENT FOR COMMUNITY BASED SERVICES

Steven L. Beshear Governor Division of Family Support 275 East Main Street. 3E-I Frankfort, KY 40621 Phone (502)564-3440 Fax (502)564-0405 www.chfs.ky.gov Janie Miller Secretary

February 27, 2012

To Whom It May Concern:

Enclosed please find a Business Associates Agreement (BAA) Memorandum of Understanding (MOU) between the Cabinet for Health and Family Services and your agency. This agreement allows our agencies to share eligibility information and establishes procedures for safeguarding information in our public assistance programs.

This BAA is different than those in previous years, as it now has automatic renewals for ten additional years. This allows us to stabilize the agreements and streamline the review process here at the Cabinet. The only requirement is that if personnel or organizations change, you must notify us so that we can amend and update your agreement.

you need to establish a process to transmit and receive information electronically, please contact me directly. I will provide forms for you to gain access to FTP protocols and allow network security access. These forms should be completed for the user who will actually be accessing the data.

Upon your review, please complete the contact information, sign and return to the following address as soon as possible. Please also provide the phone number and email of a point of contact for future information..

Division of Family Support Attention: Julia Gustafson Policy Development Branch 275 East Main Street 3E-1 Frankfort, KY 40621

If you have any questions, please feel free to contact me at (502) 564-3440, Ext 4160 or via email at julia.gustafson@ky.gov.

Sincerely,

Julia M. Gustafson

Contract Liaison

DFS/PDB/JMG

iclosures



AGREEMENT SAFEGUARDING INFORMATION IN PUBLIC ASSISTANCE PROGRAMS

WHEREAS, 42 USC 602 (a)(1)(A)(iv), 45 CFR 205.50 (a), and 7 CFR 272.1 (c) permit the use or disclosure of information in the administration of programs which are federally assisted and which provide assistance or services directly to individuals on the basis of need, as it applies to the Food Stamp Program; and

WHEREAS, pursuant to KRS 194A.060 (2), that Cabinet may share pertinent information from within its records on clients, current or former clients, recipients, and patients, as may be permitted by federal and state confidentiality statutes and regulations, with other public, quasi-public, and private agencies involved in providing services to such persons, if those agencies demonstrate a direct, tangible and legitimate interest in the records; and

WHEREAS, pursuant to KRS 205.175 (3), information regarding a public assistance applicant or recipient may be released to qualifying individuals or agencies who are supplying or cooperating in securing services, employment, or training for the applicant or recipient of public assistance; and

WHEREAS, pursuant to KRS 205.177 (1), any pertinent information concerning individual clients, patients, or applicants in the possession of the Cabinet may be shared with any authorized representative of any other state or local governmental agency if that agency has a direct, tangible and legitimate interest in the individual concerned or their immediate family; and

WHEREAS, pursuant to 45 CFR 205.50 (a)(2)(ii) and 7 CFR 272.1 (c)(2), the release of information concerning individuals applying for or receiving financial assistance is restricted to persons or agency representatives who are subject to standards of confidentiality which are comparable to those of the agency administering the financial assistance programs and recipients of such information must adequately protect the information against unauthorized disclosure to persons or for unauthorized purposes; and

WHEREAS, pursuant to KRS 194A.060 (1) and KRS 205.175, information regarding a public assistance applicant or recipient must be kept confidential and may not be released, except as authorized by law; and

WHEREAS, pursuant to KRS 205.990 (1), any person who violates the confidentiality provisions of KRS 205.175 is subject to criminal penalties, including a fine and/or imprisonment; and

WHEREAS, the Second Party is a public, quasi-public, or private agency supplying or cooperating in securing services, employment, or training for applicants or recipients of federally funded public assistance; and

WHEREAS, the Second Party, desires to recruit, verify eligibility or serve eligible applicants and/or recipients and their families by arranging for their local programs to receive certain information and the Cabinet wishes to facilitate this by providing certain information to the local programs; and

WHEREAS, the Cabinet has determined that the Second Party provides services to eligible adults and/or children and that the Second Party administers federally funded programs, based on need, and that the Second Party has a direct, tangible, and legitimate interest in having such information.

NOW THEREFORE, in consideration of the mutual promises contained herein, the parties hereby agree to as follows:

1. The Second Party shall:

- a. Ensure that the information received from the Cabinet will be for the purpose of administering federally assisted programs, as required by 42 USC 602 (a)(1)(A)(iv), 45 CFR 205.50 (a)(1), and 7 CFR 272.1(c);
- b. Ensure that information received from the Cabinet regarding public assistance applicants and/or recipients will be maintained as confidential and will not be copied, disclosed, released or given to any other governmental agency, individual, or private concern, without the written permission of the Cabinet or the applicant/recipient;

- c. Take all precautions to ensure that the information received from the Cabinet is safeguarded and to maintain security over such information, to ensure that it does not become available to unauthorized individuals;
- d. Ensure that the information received from the Cabinet regarding Food Stamp recipients will only be used for purposes of recruitment or verifying eligibility into federally-funded public assistance programs administered by the Second Party;
- Ensure that only employees of the Second Party who are subject to the same standards of confidentiality as the Cabinet's employees will have access to information provided under this Agreement;
- f. Only request from the Cabinet, in writing, information on individuals or their immediate families in which the Second Party has a direct, tangible and legitimate interest.
- g. Agree to abide by all terms of the Business Associate Agreement attached hereto as Exhibit "A".
- 2. This Agreement shall not authorize the Second Party to request or receive confidential information regarding individuals who receive or have applied for Medicaid benefits.
- 3. The Cabinet shall provide the Second Party a written response or a listing of clients who are receiving public assistance, in whom the Second Party has a direct and legitimate interest. As applicable the listing shall be provided via an encrypted FTP file in the file layout designated by the Cabinet.
- The Parties expressly agree that the Cabinet is not responsible for the accuracy of information or data that was
 provided to the Cabinet by third-parties.
- Both Parties agree to comply with all state and federal laws with regard to the use, disclosure, distribution, or release
 of social security numbers of public assistance recipients.
- 6. The Cabinet shall have access to any and all records of the Second Party pertaining to the use of information obtained through this agreement for the purpose of monitoring and audit. Nothing in this agreement shall be construed as limiting that access.
- 7. The Cabinet shall have access to any information the Second Party has if deemed necessary to provide services to clients.
- 8. Either party may terminate and cancel this Agreement, at any time, on thirty (30) days written notice served upon the other party by registered mail with return receipt requested, or immediately for cause. In the event that cause for termination is given with thirty (30) days notice, and any cause is defective, the termination shall be considered with notice.
- The terms and conditions of this Agreement may only be amended by mutual written consent of both parties and no
 party may assign its respective rights or obligations under this Agreement without prior written consent of the other
 party.
- 10. All questions as to the execution, validity, interpretation, and performance of this Agreement shall be governed by the laws of the Commonwealth of Kentucky and the parties further agree that any legal action, which is brought on the basis of the Agreement, shall be filed in the Circuit Court of Franklin County, Kentucky. No change, waiver, or discharge of any liability or obligation hereunder on any one or more occasions shall be deemed a waiver of performance of any continuing or other obligation, or shall prohibit enforcement of any obligation, on any other occasion.
- 11. The Business Associate Agreement attached hereto as Exhibit "A" is specifically incorporated into this Agreement and the parties shall abide by all terms of the Business Associate Agreement.
- 12. This Agreement shall be effective on March 1, 2012 and shall remain in effect until July 1, 2014, unless terminated or canceled by one of the parties, pursuant to the terms herein. This Agreement shall automatically renew for five

- (5) successive two (2) year periods unless notice of non-renewal is given by the parties thirty (30) days prior to the expiry of the then current term.
- 13. This Agreement may be signed in counterparts. The original "master" agreement, with the signature of the Commissioner of the Department for Community Based Services, shall be maintained on file at Division of Family Support, 275 E. Main, Street, 3E-I, Frankfort, KY 40621. A copy of the "master" agreement with the signature of the Commissioner of the Department for Community Based Services shall suffice for an original signature. The "master" agreement shall be controlling and any changes made to any counterparts beyond insertion of the name and address of the second party shall nullify the entire agreement.

IN WITNESS HEREOF, the Parties have executed this Memorandum of Understanding Safeguarding Information in the Public Assistance Programs as of the day and year written above and the Parties represent and warrant that the individual signing on its behalf is duly authorized to bind such party to all terms and conditions herein.

SECOND PARTY / BUSINESS ASSOCIATE

CABINET FOR HEALTH AND FAMILY SERVICES,
DEPARTMENT FOR COMMUNITY BASED SERVICES
(CABINET / COVERED ENTITY)

By: North Collins

Title: Sarah Collins, Executive Director

Date: 3.1.2012

1010M C. James

Title: TEREST C. JAMES - Acting Commission

Date: Z-15-12

EXAMINED AS TO FORM AND LEGALITY:

Attorney

Cabinet for Health and Family Services

Original Signature of the First Party and its Attorney shall be on file in the Department's Division of Family Support and shall serve as the Master; whereas copied signatures will be on the individual agreements for distribution to Second Party.

MEMORANDUM OF UNDERSTANDING SAFEGUARDING INFORMATION IN PUBLIC ASSISTANCE PROGRAMS AND BUSINESS ASSOCIATE AGREEMENT

This Memorandum of Understanding Safeguarding information in Public Assistance Programs and Business Associate Agreement (hereinafter the "Agreement"), is entered into on the 1st day of March, 2012 by and between the Cabinet for Health and Family Services, Department for Community Based Services, Division of Family Support (hereinafter the "Cabinet" and/or "Covered Entity") and

Campbell County Department of Housing PO Box 424, Newport, KY, 41072-0424

(hereinafter the "Second Party" and/or "Business Associate"), collectively referred to as the "Parties," and establishes the procedures relating to an exchange of information and the security of such information.

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BUDGET OF CAMPBELL COUNTY HOUSING DEPARTMENT **FOR** FISCAL YEAR 2019 - 2020

LOCAL FINANCE FORM 1001

BUDGET OF CAMPBELL COUNTY FISCAL YEAR ENDING JUNE 30, 2020

ESTIMATED RECEIPTS

-	,	25	
	CODE	HOUSING	
SOURCE	NUMBER		TOTAL
1 HUD-Prepaid Contrib/HAP	4558-00	4,306,216	4,306,216
2 HUD-Prepaid Contrib/Admin Fees	4680-00	451,801	451,801
3 HUD-Prepaid Contrib/FSS Coord	4680-01	-	_
4 Fraud Recovery - Admin	4780-00	1,440	1,440
5 Fraud Recovery - HAP	4780-02	1,440	1,440
6 Income-Interest Checking	4801-00	180	180
TOTAL REVENUES		4,761,077	4,761,077
SURPLUS/PRIOR YEAR	4901		-
TRANSFERRED IN	4910		
TRANSFER TO EQUITY	4909		-
BORROWED MONEY	4911		<u>-</u>
TOTAL AVAIL FOR YEAR		4,761,077	4,761,077

LOCAL FINANCE FORM 1001

CAMPBELL COUNTY

HOUSING CHOICE VOUCHER 2019 - 2020

BUDGET APPROPRIATIONS

	BUDGET APPROPRIATIONS	
		THIS
CODE NUMBER	DESCRIPTION	YEAR
25-5350-0106	Salary Office Staff	118,300
25-5350-0106-01	Salary/Inspector	30,252
25-5350-0107	Salary/Director	84,330
25-5350-0165	Salary/Secretary	
25-5350-0333	Maintenance Agree	21,000
25-5350-0340	Repairs/Vehicle	1,500
25-5350-0348	Assistance Paymt	4,271,216
25-5350-0348-02	Assistance Paymt - Port Out	35,000
25-5350-0364	Rent/Office	6,000
25-5350-0398	Operating Expense	14,500
25-5350-0398-01	Port Out Admin Fee	3,000
25-5350-0398-02	Criminal Hstry Records	
25-5350-0398-03	Bank Charges	4,275
25-5350-0429	Gasoline	1,583
25-5350-0445	Supplies/Office	5,110
25-5350-0551	Membership/Dues	400
25-5350-0563	Postal Charge	5,816
25-5350-0565	Printing/Copies	1,110
25-5350-0573	Telephone	3,064
25-5350-0576	Travel	1,600
25-5350-0576-01	Training/Conferences	3,300
20 000 00,0 01	Training Conferences	5,500
	TOTAL HOUSING SERVICES	4,611,356
	TOTAL STOUDING BENT TODA	1,011,330
25-9100-0307	Audit	8,500
25-9100-0521	Property/Liability Insurance	4,600
		1,000
	TOTAL GENERAL SERVICES	13,100
25-9200-0999	Contingency	27,611
25-9200-0999-01	Contingency - Pay Adjustments	8,200
		····
	TOTAL CONTINGENCY	35,811
25-9400-0201	FICA Expense	18,000
25-9400-0202	Retirement	48,800
25-9400-0205	Health Insurance	30,200
25-9400-0208	Unemployment	1,000
25-9400-0209	Workman's Comp	- 2,810
	, same series	2,010
	TOTAL FRINGE BENEFITS	100,810
	TOTAL TAMOUR DESIGNATION	100,010
	TOTAL HOUSING FUND	4,761,077



U. S. Department of Housing and Urban Development Louisville Field Office, Region IV 601 West Broadway, Room 110 Louisville, Kentucky 40202

October 7, 2019

Ms. Sarah Collins Executive Director Housing Authority of Campbell County 1098 Monmouth Street, Room 235 Newport, KY 41071

Dear Ms. Collins,

Thank you for completing your Section 8 Management Assessment Program (SEMAP) certification for the H.A. of Campbell County. We appreciate your time and the attention to the SEMAP assessment process. SEMAP enables HUD to better manage the Section 8 tenant-based rental assistance program by identifying PHA capabilities and deficiencies related to the administration of the Section 8 program. As a result, HUD will be able to provide more effective program assistance to PHAs.

The Housing Authority of Campbell County has a final score for the fiscal year ended (06/30/2019) of 100% (135 points earned of a maximum 135 points). This designates your housing authority a HIGH PERFORMER. Enclosed for your information is a worksheet which provides the calculation of the PHA scoring and rating. Please review Enclosure A which depicts how your rating was derived based on your MTCS data extract details as well as your self-certified indicators.

According to 24 CFR 985.106, when the PHA receives the HUD notification of its SEMAP rating, the PHA must correct any SEMAP deficiency (indicator rating of zero) within 45 calendars days from the date of HUD notice. Attached you will find the appropriate document in which to provide a written description as to action taken to correct any identified SEMAP deficiencies. Please take the necessary corrective actions to ensure compliance with program regulations.

Your PHA may appeal the SEMAP rating if said outcome could result in an adjustment made to your certified performance rating resulting in a change of designation, i.e. High, Standard, or Troubled. All appeals must be submitted within the IMS-PIC SEMAP Sub-Module and in writing, to the Public Housing Director, within 30 days from the receipt of this letter. Once your appeal is submitted in the IMS-PIC Sub-Module, you must e-mail the Public Housing Director when the appeal has been submitted.

The SEMAP rating is subject to change with the receipt of conflicting information from the IPA audit due 9 months after the end of the PHA fiscal year and when there has been a confirmatory review, and the results have conflicting information.

We appreciate your cooperation with the SEMAP process. If you have any questions regarding any information in the rating process you may contact me at 502-618-8182 or tammy.m.dunn@hud.gov or Barbara Finch, SEMAP Coordinator, at 502-618-8118 Barbara.Finch@hud.gov.

Best regards,

10/9/2019

X J. Carol Spencer

J. Carol Spencer
Director, Public Housing
Signed by: JAYNA SPENCER

Enclosure

ce: M

Mr. Steve Pendery, Board Chairperson Campbell Co. Housing Agency spendery@campbellcountyky.org

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	PHA	APP H	PHA	MAX	
INDICATOR	CERT	VERIF.	SCORE	SCORE	DEFINITION
1 WAITING LIST	λ	Y	15	15	15 = 98%+
2 REAS. RENT	Ϋ́	У	20	20	20 = 98%+
3ADJ INCOME	Y	γ	20	20	20 = 90%+
4 UTIL ALLOW	Y	٨	ည	જ	5 = min size
5 HQS QC	Y	λ	5	5	5 = min size
6 HQS ENFORCE	Y	¥	10	10	10 = 98%+
7 EXP HSG OPP	Υ	>	5	5	5 (metro)
8 PYMT STAND	Y	λ	5	5	5 = 98%+
9 ANNUAL REEX		Y-MTCS	10	10	10 = >5%
10 CORRECT RENT		Y-MTCS	ß	5	5 = <= 2%
11 PRE HQS	N/A	Y-MTCS	5	જ	5 = 98%- 99%
12 ANNUAL INSP	N/A	Y-MTCS	10	10	10 = < 95%
13 LEASE-UP		FMD RPT	20	20	20 = < 95%
14 FSS	>	Ϋ́	A'N	AN	5 = 80%+
15 D- BONUS	N/A	N/A	N/A	Α'n	N/A
			135	135	
EVE DIC Reporting Date	400%				

100% 7536 FYE PIC Reporting Rate LEASE-UP UNITS MO LEASED

\$3,996,990 \$4,058,525

AVAILABLE

ABA

EXPENDED PERCENT

8892 **85%** UMA-YES PERCENT

RATING

HIGH PMS:Tammy Dunn

Enclosure A