STATE OF NEW JERSEY DEPARTMENT OF COMMUNITY AFFAIRS DIVISION OF LOCAL GOVERNMENT SERVICES BUREAU OF AUTHORITY REGULATION TRENTON, N.J.

CERTIFICATION OF AMENDED (PRIOR TO ADOPTION) 2017-2018 BUDGET

Perth Amboy Housing Authority <u>Resolution ---</u>Adopted April 11, 2017 to Amend the Introduced Budget

It is hereby certified that the amendment attached hereto complies with the requirements of law, and approval is given pursuant to N.J.A.C. 5:31-2.8.*-

Department of Community Affairs
Division of Local Government Services
Paul D. Ewert, Supervising Municipal Finance Auditor

For: Timothy J. Cunningham, Director

Date May 1, 2017

Attachment

BUDGET AMENDMENT

Housing Authority of the City of Perth Amboy

Resolution to Amend the March 31st, 2018 Approved Budget

WHEREAS, the Housing Authority of the City of Perth Amboy has approved the March 31st, 2018 Authority Budget on February 14th, 2017 and

WHEREAS, the Housing Authority of the City of Perth Amboy finds it necessary to amend the March 31st, 2018 approved Authority Budget, as follows:

Less: Retained Earnings Utilized \$ 624,470
To balance Budget

PR 2 8 2017

NOW, THEREFORE BE IT RESOLVED, by the Commissioners of the Housing Authority of the City of Perth Amboy the March 31st, 2018 Authority's Budget is hereby amended as detailed above, and

BE IT FURTHER RESOLVED, that the Board's Executive Director is hereby directed to submit a copy of this resolution to the Director of Local Government Services for approval as part of the Authority's March 31st, 2018 budget.

Adopted April 11th, 2017

Executive Director - Douglas G. Dzema

Commissioners:	<u>Aye</u>	<u>Nay</u>	Abstain	<u>Absent</u>
Edna Dorothy Carty-Daniel, Chairperson Gregory Pabon, Vice-Chairperson Miguel A. Arocho	X			×
Shirley Jones	X			
Reverend H. Wayne Brady Pastor Bernadette Falcon-Lopez	X			
David Benyola	X			

ADOPTED COPY

State Filing Year

Fiscal Year

2017

Note: This Budget document is for Fiscal Years Beginning Jan. 1, 2017 to Dec. 31. 2017

Start Year

End Year

2017

2018

Authority Budget of:

Perth Amboy Housing Authority

For the Period:

April 1, 2017

to

March 31, 2018

www.perthamboyha.org Authority Web Address

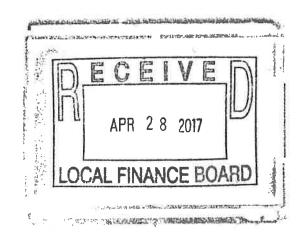




Division of Local Government Services

2017 HOUSING AUTHORITY BUDGET

Certification Section



STATE OF NEW JERSEY DEPARTMENT OF COMMUNITY AFFAIRS DIVISION OF LOCAL GOVERNMENT SERVICES BUREAU OF AUTHORITY REGULATION TRENTON, N.J.

CONDITIONAL CERTIFICATION OF APPROVED BUDGET

It is hereby certified that the approved budget of the Perth Amboy Housing Authority for the fiscal year ending March 31, 2018 made a part hereof complies with the requirements of law and regulation except for the conditions noted below, and approval is given pursuant to N.J.S.A. 40A:5A-11 subject to the correction of such conditions.

Date

By Paul D. Curb

Paul Ewert, Supervising Municipal Finance Auditor

Division of Local Government Services

CONDITIONS

Pursuant to N.J.S.A. 40A:5A-10 and 11 of the Local Authorities Fiscal Control Law and N.J.A.C. 5:31-2.1 et seq., each Authority in the State of New Jersey is required to submit a budget for each fiscal year to the Director of the Division of Local Government Services for review and approval. In accordance with these statutory and regulatory requirements, the Perth Amboy Housing Authority submitted its introduced budget for the fiscal year ending March 31, 2018 to the Director for review and approval. During the review of the 2017 budget for the Authority, it was concluded that the Authority will need to adopt the 2017 Amendment Resolution.

The 2017 budget is approved pending the adoption of the 2017 Amendment Resolution.

When the 2017 Amendment Resolution has been adopted, the Authority should proceed as follows:

LUCAL HINANGE

Upon the adoption of the 2017 Budget Amendment for the Perth Amboy Housing Authority, the Authority may adopt the 2017 budget and submit the 2017 Budget Amendment and the 2017 Adopted Budget, including pages C-6 and C-7 (which refer to the adoption), to the Division for the Director's approval.

PERTH AMBOY

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM <u>04-01-2017</u> TO <u>03-31-2018</u>

For Division Use Only

CERTIFICATION OF APPROVED BUDGET

It is hereby certified that the approved Budget made a part hereof complies with the requirements of law and the rules and regulations of the Local Finance Board, and approval is given pursuant to N.J.S.A. 40A:5A-I1.

State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services

0	1	4/, 1
By Cor	1d.tional	Date: 1102017

CERTIFICATION OF ADOPTED BUDGET

It is hereby certified that the adopted Budget made a part hereof has been compared with the approved Budget previously certified by the Division, and any amendments made thereto. This adopted Budget is certified with respect to such amendments and comparisons only.

State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services

By: Paul D Gwest CPA RAA Date: 5/1/2017

2017 PREPARER'S CERTIFICATION

PERTH AMBOY

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

04-01-2017

TO:

03-31-2018

It is hereby certified that the Housing Authority Budget, including both the Annual Budget and the Capital Budget/Program annexed hereto, represents the members of the governing body's resolve with respect to statute in that: all estimates of revenue are reasonable, accurate and correctly stated; all items of appropriation are properly set forth; and in itemization, form and content, the budget will permit the exercise of the comptroller function within the Housing Authority.

It is further certified that all proposed budgeted amounts and totals are correct. Also, I hereby provide reasonable assurance that all assertions contained herein are accurate and all required schedules are completed and attached.

Preparer's Signature:	I M I		
Name:	THOMAS FURLO	NG	
Title:	DIRECTOR OF FI	NANCIAL OPERAT	TIONS
Address:	881 AMBOY AVE PERTH AMBOY, I		
Phone Number:	732-826-3118	Fax Number:	732-826-3111
E-mail address	tfurlong@perthamb	oyha.org	

2017 APPROVAL CERTIFICATION

PERTH AMBOY

(Name)

HOUSING AUTHORITY BUDGET

04-01-2017

TO:

03-31-2018

FROM:

FISCAL YEAR:

E-mail address

true copy of the Annual Bud body of the <u>PERTH AMBO</u> N.J.A.C. 5:31-2.3, on the	get and Capital Budget/P DY Housing Authority 14 th day of FEBRU. ne recorded vote appeari	rogram approved y, at an open put ARY,2 and in the resolut	by resolution by the governing blic meeting held pursuant to 2017.	g o
Officer's Signature:				
Name:	DOUGLAS DEMA			
Title:	EXECUTIVE DIRECT	OR		
Address:	881 AMBOY AVE., P	O BOX 390		
	PERTH AMBOY, NJ ()8862		
Phone Number:	732-826-3114	Fax Number:	732-826-3111	

ddzema@perthamboyha.org

INTERNET WEBSITE CERTIFICATION

AND ADDRESS OF THE PARTY OF THE PARTY.			
	Web Address:	www.perthamboyha.org	
			age on the municipality's or county's Internet
			vide increased public access to the authority's
			wing items to be included on the Authority's
website at a r	ninimum for public	disclosure. Check the boxes belo	ow to certify the Authority's compliance with
N.J.S.A. 40A:	5A-17.1.		
X	-	Authority's mission and responsi	
x	Commencing with 2	.013, the budgets for the current f	iscal year and immediately preceding two
	prior years		
		1 1 A 1 Pinancial De	and (The and its d) and in flow Group in 1
X		nprenensive Annual Financial Re	eport (Unaudited) or similar financial
	information		
[2]	Commonging with ?	012, the complete annual audits of	of the most recent fiscal year and immediately
X	two prior years	12, mo complete amidal addition	
	two prior years		
x	The Authority's rule	es, regulations and official policy	statements deemed relevant by the governing
==1			within the authority's service area or
	jurisdiction		
x			Act" for each meeting of the Authority,
	setting forth the time	e, date, location and agenda of ea	ch meeting
		0012 4	
x			each meeting of the Authority including all
	resolutions of the bo	ard and their committees, for at I	east three consecutive fiscal years
x	The name mailing a	ddress, electronic mail address a	nd phone number of every person who
<u>~</u>			r some or all of the operations of the
	Authority	supervision of management sites	. <u> </u>
	Authority		
区	A list of attorneys, a	dvisors, consultants and any othe	r person, firm, business, partnership,
	corporation or other	organization which received any	remuneration of \$17,500 or more during the
	preceding fiscal year	r for any service whatsoever rend	ered to the Authority.
To the least to the	•		he Authority that the Authority's website or
it is nereby of	dentified by the below	plies with the minimum statuto	ry requirements of N.J.S.A. 40A:5A-17.1 as
		e above boxes signifies complian	
usted above.	W CHeck III each of th	e acove boxes signifies compilati	
Name of Off.	cer Certifying compli	ance	DOUGLAS DZEMA
TARILLE OF CHIL	ooi compile	unio v	365
Title of Office	er Certifying complia	nce	EXECUTIVE DIRECTOR

Page C-4

Signature

2017 HOUSING AUTHORITY BUDGET RESOLUTION PERTH AMBOY

(Name)

FISCAL YEAR:	FROM:	04-01-201	7 TO :	03-31-201	8
WHEREAS, the Annual Budget and Capital beginning, <u>APRIL 1, 2017</u> and ending, <u>MAPERTH AMBOY</u> Housing Authority at its control of the second s	ARCH 31, 2018	has been pres	ented before the	ng Authority fo governing body	or the fiscal year of the
WHEREAS, the Annual Budget as introduction including any Accumulated Deficit if any, of \$	ed reflects Total 5 <u>16.646.030</u> To	Revenues of otal Unrestrict	\$ 16,675,11 ed Net Position	0 , Tota utilized of <u>6</u>	l Appropriations, 24,470; and
WHEREAS, the Capital Budget as introduce Unrestricted Net Position planned to be utilize	d reflects Total C d as funding there	Capital Appro	priations of \$; ar	0 nd	and Total
WHEREAS, the schedule of rents, fees and canticipated revenues to satisfy all obligations outlays, debt service requirements, and to precontracts and agreements; and	to the holders of	f bonds of the	Authority, to	meet operating	expenses, capital
WHEREAS, the Capital Budget/Program, pur funds; rather it is a document to be used as authorization to expend funds for the purpose resolution, by a project financing agreement, or other means provided by law.	s part of the said es described in th	Authority's p is section of t	planning and m he budget, mus	anagement obje t be granted eis	ectives. Specific ewhere; by bond
NOW, THEREFORE BE IT RESOLVED, by public meeting held on2-14-2017 Budget/Program of thePERTH AMBOY1 MARCH 31, 2018 is hereby approved; and	that the A	nnual Budget,	including all re	elated schedules	, and the Capital
BE IT FURTHER RESOLVED, that the anti meet all proposed expenditures/expenses and a outstanding debt obligations, capital lease arra	all covenants, tern	ns and provisi	ons as stipulated	I in the said Ho	using Authority's
BE IT FURTHER RESOLVED, that the gov Annual Budget and Capital Budget/Program for (Secretary Signature)	rerning body of the or adoption on	ne <u>PERTH</u> / 4-11-2017	AMBOY Hou ——: ——: (Date)		will consider the
Governing Body Member:	Recorded Vote Aye	Nay	Abstain	Absent	
EDNA DOROTHY CARTY-DANIEL GREGORY PABON MIGUEL AROCHO SHIRLEY JONES H WAYNE BRADY BERNADETTE FALCON-LOPEZ DAVID BENYOLA	,			Χ	

2017 ADOPTION CERTIFICATION

PERTH AMBOY (Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

04-01-2017

TO:

03-31-2018

It is hereby certified that the Housing Authority Budget and Capital Budget/Program annexed hereto is a true copy of the Budget adopted by the governing body of the PERTH AMBOY Housing Authority, pursuant to N.J.A.C. 5:31-2.3, on the __kl^TH __ day of, __APRIL _____, __2017 _____.

Officer's Signature:	Chot		
Name:	DOUGLAS DZEM	Α	
Title:	EXECUTIVE DIRI	ECTOR	
Address:	881 AMBOY AVE PERTH AMBOY, I		5W
Phone Number:	732-826-3114	Fax Number:	732-826-3111
E-mail address	ddzema@perthamb	oyha.org	

2017 ADOPTED BUDGET RESOLUTION

PERTH AMBOY (Name)

HOUSING AUTHORITY

FISCAL YEAR:	FROM:	04-01-2	2017	ro:	03-31-2018	
WHEREAS, the Annual Budget and Capital Eyear beginning <u>APRIL 1</u> , <u>2017</u> and exgoverning body of the <u>PERTH AMBOY</u> How 4-11-2017; and	nding, MARO	CH 31 ,	<u>2018</u> has b	een prese	using Authority in the state of	for the fiscal n before the
WHEREAS, the Annual Budget and Capit appropriation in the same amount and title as thereto, if any, which have been approved by the	set forth in the	e introduce	d and appro	ved budg	et, including all	evenue and amendments
WHEREAS, the Annual Budget as presente Appropriations, including any Accumulated Dutilized of \$ 299,210; and	ed for adoption reficit, if any, or	reflects T f \$16.6	otal Revenu 46,030	es of \$ and To	16,675,110 otal Unrestricted	, Total Net Position
WHEREAS, the Capital Budget as presented to Total Unrestricted Net Position planned to be u	for adoption ref	lects Total	Capital Appl ; and	ropriation	s of \$0	and
NOW, THEREFORE BE IT RESOLVED, by public meeting held on 4-11-2017 PERTH AMBOY Housing Authority for the MARCH 31, 2018 is hereby adopted and sh	that the Annua fiscal year beg	al Budget ar inning, <u>AP</u>	id Capital Bi RIL 1, 2017	.aget/Pro _ and, end	gram of the ding,	y, at an oper
BE IT FURTHER RESOLVED, that the Annuitem of revenue and appropriation in the same all amendments thereto, if any, which have bee	amount and titl	le as set for	th in the intr	oduced ai	nd approved budg	get, incidallig
(Secretary's Signature)			(Dat	418.1 e)	7	
Governing Body Member:	Recorded Vote Aye	: Nay	Abstain	Abse	ent	
EDNA DOROTHY CARTY-DANIEL GREGORY PABON MIGUEL AROCHO	X			×		
SHIRLEY JONES	×					
H WAYNE BRADY	×					
BERNADETTE FALCON-LOPEZ	×					
DAVID BENYOLA	X					

2017 HOUSING AUTHORITY BUDGET

Narrative and Information Section

2017 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS PERTH AMBOY

(Name)

AUTHORITY BUDGET

FISCAL YEAR:

FROM:

04-01-2017

TO:

03-31-2018

Answer all questions below. Attach additional pages and schedules as needed.

- 1. Complete a brief statement on the 2017 proposed Annual Budget and make comparison to the 2016 adopted budget for each operation. Explain any variances over +/-10% (As shown on budget page F-4 explain the reason for changes for each appropriation changing more than 10%) for each line item by operation. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. For example, if anticipated service charges have increased 15% due to an increase in rates, provide documentation of how the increase occurred (Example Rate Increase authorized by resolution or by HUD).
- 2. Complete a brief statement on the impact the proposed Annual Budget will have on Anticipated Revenues, especially service charges and on the general purpose/component unit financial statements. Explain significant increases or decreases, if any. An increase or decrease is considered significant if it is over +/-10% (As shown on budget page F-2 explain reason for change for each revenue changing more than 10%) from the current year adopted budget.

 Rents are fixed by law so this budget will have no impact on the charges to residents.
- 3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. NONE
- 4. Describe the reasons for utilizing Unrestricted Net Position in the proposed Annual Budget, i.e. rate stabilization, debt service reduction, to balance the budget, etc. If the Authority's budget anticipates a use of Unrestricted Net Position, this question must be answered.

 PHA is converting to RAD and will be incurring expenses to do so. Once conversion is complete, budget will be balanced and no further use of unrestricted net position is expected.
- 5. Identify any sources of funds transferred to the County/Municipality as a budget subsidy or a shared service and explain the reason for the transfer (i.e.: to balance the County/Municipality budget, etc.). NONE
- 6. The proposed budget must not reflect an anticipated deficit from 2017 operations. If there exists an accumulated deficit from prior years' budgets (and funding is included in the proposed budget as a result of a prior deficit) explain the funding plan to eliminate said deficit (N.J.S.A. 40A;5A-12). If the Authority has a net deficit reported in its most recent audit, it must provide a deficit reduction plan in response to this question. (Prepare a response to deficits caused by the implementation of GASB 68) PHA plans to use sources obtained in its RAD conversion to reduce future GASB 68 costs.

PERTH AMBOY HOUSING AUTHORITY EXPLANATION OF BUDGET VARIANCES OVER 10% MARCH 31ST, 2018

Operating Revenues:

Dwelling Rent-(-75.6%) Housing Authority is converting 360 public housing units to the RAD Program. The PHA has secured 4% tax credits and as a result the units will be transferred to a limited partnership and removed from the PHA's inventory. The PHA will continue to manage the properties. The transfer is expected to occur by July 1st, 2017.

Excess utilities-(-77.5%)-Due to RAD Conversion

Operating subsidy-(-66%)-Due to RAD Conversion

Voucher-Acc-(+27.1%) RAD conversion will be subsidized through the Section 8 project based voucher program adding 360 units to its portfolio.

Cell Towers Revenue-(-76.0%)-Revenue from antennas will be transferred to the limited partnership.

Capital Fund-Mgt. Fees/Operations-(-100%)-PHA will no longer be receiving capital fund fees under the RAD program

Nonfederal Funds-(+563%)-The PHA will receive management fees and salary reimbursements from the limited partnership under the RAD conversion.

Middlesex County-(-96%)-Due to a reduction in federal funding for it homeownership counseling program the Authority will not be seeking sources of revenue to supplement this program.

Investments-(-76.6%)-PHA has reduced equity as a result of monies used to fund the RAD conversion.

Appropriations:

Administration salary & wages- (+10.5%) Budget increased for overtime expected to be needed for the RAD conversion.

The following line items will decrease as a result of the RAD Conversion:

Legal-(-34.2%)

Staff Training-(-16.6%)

Travel-(-25.4%)

Auditing-(-26.7%)

Miscellaneous Administration-(-23.2%)

Tenant Services-(-79.2%)

Utilities-(-77.8%)

Maintenance-(-77.1%)

Insurance-(-36.1%)

PILOT-(-72.9%)

Collection Losses-(-75%)

Fringe Benefits-(+11.7%)-Increase in retiree benefit costs

Other General Expenses-(+24.7%) — increase due to subsidy payments for a new mixed finance project that closed 1/1/17.

Rents-(+23.4%) Increase in HAP payments for 360 project based vouchers as a result of the RAD Conversion

HOUSING AUTHORITY CONTACT INFORMATION 2017

Please complete the following information regarding this Housing Authority. <u>All</u> information requested below must be completed.

Name of Authority:	PERTH AMBOY HOUS	SING	AUTHOR	RITY			
Federal ID Number:							
Address:	881 AMBOY AVE., PO) ВОХ	390				
City, State, Zip:	PERTH AMBOY			NJ	08862		
Phone: (ext.)	732-826-3110		Fax:	732-8	26-3111		
Preparer's Name:	THOMAS FURLONG						
Preparer's Address:	881 AMBOY AVE., PO	ВОХ	390				
City, State, Zip:	PERTH AMBOY			NJ	08862		
Phone: (ext.)	732-826-3118		Fax:	732-8	26-3111		
E-mail:	tfurlong@perthamboyha	.org					
Chief Executive Officer:	DOUGLAS DZEMA						
Phone: (ext.)	732-826-3114		Fax:	732-82	6-3111		
E-mail:	ddzema@perthamboyl	na.org	****				
Chief Financial Officer:	THOMAS FURLONC	ř					
Phone: (ext.)	732-826-3118	Fax		2-826-311	1		
E-mail:	tfurlong@perthamboy	ha.org	3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Name of Auditor:	RICHARD LARSEN						
Name of Firm:	NOVOGRADAC & C						
Address:	252 WASHINGTON S	STRE	ET SUITI	E 2			
City, State, Zip:	TOMS RIVER			NJ	08753		
			Fax:	732-34			

rich.larsen@novoco.com

E-mail:

HOUSING AUTHORITY INFORMATIONAL **QUESTIONNAIRE**

PERTH AMBOY (Name)

			FISCAL YEAR:	FROM:	04-01-2017	TO:	03-31-2018
Δr	iswet	· all questic	ns below completely a	nd attach additi	onal information a	s required.	
1)	Pro	vide the nu	mber of individuals em	ployed in caler	idar year 2015 as r	eported on	the Authority's
	For	m W-3, Tra	insmittal of Wage and '	Tax Statements	: 34		
2)	Pro	vide the an	nount of total salaries a	nd wages for ca	lendar year 2015 a	is reported	on the Authority's
•	For	m W-3, Tra	insmittal of Wage and	Tax Statements	: 2,140,210		
3)	Prov	vide the nur	nber of regular voting	members of the	governing body:	7	_
4)	Prov	vide the nui	nber of alternate voting	g members of th	e governing body:	0	
5)	Did	any person	listed on Page N-4 hav	e a family or b	usiness relationshi	p with any	other person listed
	on P	age N-4 du	ring the current fiscal y	/ear?no	If "yes," attach a	description	i of the relationship
٠.	incli	uding the n	ames of the individuals	invoivea ana ii	ieir positions at inc	e Auinority.	no ourrout figaal
6)	Did	all individu	nals that were required their relationship with	the Authority f	tal Disclosure State	wired? (Ch	ecked to see if
	year	because of	ually filed at http://fo	die Aumonty i	nides prod/fdes	ancus (Chi	v hefere
	indi	viduals act	yes If "no," prov	ide a list of the	njuca_prouzuss se individuals who	failed to fi	le a Financial
	ansv	wering)	ement and an explanati	on as to the rea	son for their failure	e to file	ic a i manciai
71	Disc	s the Autho	ority have any amounts	receivable from	current or former	commissio	oners, officers, key
"	emp	lovees or h	ighest compensated em	plovees? no	If "ves." at	tach a list	of those individuals
	their	nosition, t	he amount receivable,	and a description	on of the amount d	ue to the At	uthority.
8)	Was	the Autho	rity a party to a busines	s transaction w	ith one of the follo	wing partie	es:
-,	a.	A current	or former commission	ner, officer, ke	y employee, or hi	ghest comp	ensated employee
		no					
	b.	A family	member of a current	or former co	mmissioner, office	er, key en	nployee, or highes
		compensa	ted employee?no_		4 1 20		
	c.	An entity	of which a current	or former con	nmissioner, office	er, key em	iployee, or highes
		•	ted employee (or fami	ly member thei	eof) was an office	er or direct	or indirect owner
		no	C 47 1	" -44 mala or do	conjustion of the two	vanuation ir	aludina tha mana
	If th	e answer to	any of the above is "yo oner, officer, key emplo	es, allach a ae	scripiion oj ine ira Leomonated even	insuction in Jovaa (or fe	iciuaing ine name imili mambar
	oj in	ie commissi	oner, ojjicer, key emplo Authority; the name of t	the entity and ri	elationshin to the i	ndividual o	r family member
	the	eoj) oj ine i mount nai	d; and whether the tran	saction was sui	biect to a competiti	ve bid proc	cess.
9)	Did	the Author	ity during the most rece	ent fiscal year p	av premiums, direc	ctly or indi	rectly, on a persona
7)	hen	efit contrac	t? A personal benefit of	ontract is gener	ally any life insura	nce, annuit	y, or endowment
	con	tract that be	enefits, directly or indir	ectly, the transf	feror, a member of	the transfer	ror's family, or any
	othe	er nerson de	esignated by the transfe	ror. no	If "yes," attach a	description	ı of the
	arre	angement, t	he premiums paid, and	'indicate the be	neficiary of the cor	ntract.	
10) Ext	plain the Au	ithority's process for de	etermining com	pensation for all pe	ersons listed	d on Page N-4.
	Incl	lude whether	er the Authority's proce	ess includes any	of the following:	l) review a	nd approval by the
	con	nmissioners	or a committee thereo:	f; 2) study or su	rvey of compensat	ion data for	comparable
			nilarly sized entities; 3)				
	con	pensation	consultant; and/or 5) w	ritten employm	ent contract. Atta	ch a nai	rrative of your
1			rocedures for all				

Page N-3 (1 of 2)

11)	Did the Authority pay for meals or catering during the current fiscal year? Yes If "yes," attach
	a detailed list of all meals and/or catering invoices for the current fiscal year and provide an
	explanation for each expenditure listed. ATTACHED
12)	Did the Authority pay for travel expenses for any employee or individual listed on Page N-4?
	ves If "yes," attach a detailed list of all travel expenses for the current fiscal year and
	provide an explanation for each expenditure listed. ATTACHED
13)	Did the Authority provide any of the following to or for a person listed on Page N-4 or any other
•	employee of the Authority:
	a. First class or charter travelno
	b. Travel for companionsno
	c. Tax indemnification and gross-up paymentsno
	d. Discretionary spending account <u>no</u>
	e. Housing allowance or residence for personal useno
	f. Payments for business use of personal residence no
	g. Vehicle/auto allowance or vehicle for personal use yes
	h. Health or social club dues or initiation feesno
	i. Personal services (i.e.: maid, chauffeur, chef)no
	If the answer to any of the above is "yes," attach a description of the transaction including the name
	and position of the individual and the amount expended.
14)	Did the Authority follow a written policy regarding payment or reimbursement for expenses incurred
	by employees and/or commissioners during the course of Authority business and does that policy
	require substantiation of expenses through receipts or invoices prior to reimbursement?yes If
	"no," attach an explanation of the Authority's process for reimbursing employees and commissioners
	for expenses. (If your authority does not allow for reimbursements indicate that in answer)
15)	Did the Authority make any payments to current or former commissioners or employees for severance
	or termination? no If "yes," attach explanation including amount paid.
16)	Did the Authority make any payments to current or former commissioners or employees that were
	contingent upon the performance of the Authority or that were considered discretionary bonuses?
1.77	no If "yes," attach explanation including amount paid. Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances
1/)	outstanding by submitting its audited annual financial statements, annual operating data, and notice of
	material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace
	Access (EMMA) as required?n/a_ If "no," attach a description of the Authority's plan to
	ensure compliance with its Continuing Disclosure Agreements in the future.
10)	Did the Authority receive any notices from the Department of Housing and Urban Development or
10)	any other entity regarding maintenance or repairs required to the Authority's facilities to bring them
	into compliance with current regulations and standards that it has not yet taken action to remediate?
	15 " attach explanation as to why the Authority has not yet undertaken the required
	maintenance or repairs and describe the Authority's plan to address the conditions identified.
19)	Did the Authority receive any notices of fines or assessments from the Department of Housing and
1)	Urban Development or any other entity due to noncompliance with current regulations? _ no
	If "yes," attach a description of the event or condition that resulted in the fine or assessment and
	indicate the amount of the fine or assessment.
20)	Has the Authority been deemed "troubled" by the Department of Housing and Urban Development?
)	no If "ves," attach an explanation of the reason the Authority was deemed "troubled" and
	describe the Authority's plan to address the conditions identified.

LIST of MILEAGE, TRAVEL, MEALS CHECKS (4/1/16 -12/31/16)

				Amount
4/5/2016	34146	D.Carty-Daniel	Train Ticket, Per Diem, Travel Exp	365.70
4/11/2016	34210	D.Dzema	3/15/16 Board Meeting Lunch, 3/23/16 Staff Meeting Lunch	148.96
4/11/2016	34213	J.Guzman	Mileage Reim - March 2016	70.20
4/11/2016	34222	J.Kandiliotis	Mileage Reim - March 2016	349.38
4/11/2016	34224	R.McKeon	3/23/16 Staff Meeting Refreshments	33.64
4/11/2016	34232	D.Sabey	Fuel Allowance - March 2016	200.00
4/12/2016	34252	D.Dzema	4/8/16 Tenmast Training Lunch	289.17
4/12/2016	34258	D.Sabey	Travel to Keansburg, Highlands	556.85
4/21/2016	34268	D.Carty-Daniel	4/24-27/16 MARC NAHRO Conf Per Diem, Travel Exp	240.00
4/22/2016	34273	Ch.DeAmorim	Travel to Court -3 trips	79.04
5/9/2016	34327	L.Cardona	Mileage Reim - April 2016	217.62
5/9/2016	34329	D. Dzema	4/24-26/16 MARC NAHRO Conf - Travel Expenses	327.60
5/9/2016	34331	J.Guzman	Mileage Reim - April 2016	56.70
5/9/2016	34335	J.Kandiliotis	Mileage Reim - April 2016	327.78
5/9/2016	34363	D.Sabey	Fuel Allowance - April 2016	200.00
5/19/2016	34401	T.Furlong	4/24-27/16 MARC NAHRO hotel, Travel Reim	330.31
5/31/2016	34418	D.Carty-Daniel	NAHRO Conf Train Ticket	444.55
6/1/2016	34421	G. Pabon	NAHRO Conf Flight Ticket	615.96
6/13/2016	34450	D.Dzema	5-26-16 Meeting Refreshments	287.94
6/13/2016	34458	J.Guzman	Mileage Reimbursement - May 2016	62.10
6/13/2016	34473	D.Sabey	Fuel Allowance - May 2016	200.00
6/13/2016	34478	A. Thompson	Mileage Reimbursement - April 2016	71.82
6/13/2016	34495	B. Malave	Mileage Reimbursement - 3 Trips to Court	26.35
6/13/2016	34499	L.Cardona	Mileage Reimbursement - May 2016	132.30
6/23/2016	34513	D.Gonzalez	Travel to Training, Job Fair, Tolls	97.79
6/23/2016	34523	A.Thompson	Mileage Reimbursement - may 2016	70.20
6/24/2016	34533	M.Herrera	Travel to Job Fairs	22.41
6/24/2016	34537	D.Sabey	Travel to Highlands, Keansburg, Asbury Park	536.56
6/27/2016	34539	T.Furlong	BDO RAD Seminar - Travel exp	124.32
6/27/2016	34540	E.Hill	Job Fair, Class refreshments, Travel to Training	358.21

7/1/2016	34548	D.Dzema	Lunch for Staff	145.09
7/1/2016	34555	Y.Rodriguez	NJNAHRO Training - Mileage Reimbursement	31.41
7/12/2016	34574	J.Guzman	Mileage Reimbursement - June 2016	65.88
7/12/2016	34578	J.Kandiliotis	Mileage Reimbursement - June 2016	322.92
7/12/2016	34582	G.Pabon	NAHRO 2016 - Per Diem	240.00
7/19/2016	34608	T.Furlong	Dec 2016 Conf in Orlando FL - Flight Ticket Reim	184.20
7/19/2016	34609	E.Hill	Workshops Refreshments	208.46
8/2/2016	34666	A.Figueroa	Mileage Reimbursement - July 2016	81.00
8/2/2016	34668	J.Guzman	Mileage Reimbursement - July 2016	46.44
8/2/2016	34676	D.Sabey	Fuel Allowance - July 2016	200.00
8/4/2016	34694	J.Kandiliotis	Mileage Reimbursement - July 2016	236.52
8/18/2016	34732	L.Cardona	Mileage Riembursement - June, July 2016	256.50
8/18/2016	34743	D.Sabey	Travel to Highlands, Keansburg	521.10
8/22/2016	34755	G. Pabon	NAHRO Conf 7/14-16 - Hotel reim	542.12
9/13/2016	34804	A.Figueroa	Mileage Reimbursement - August 2016	43.74
9/13/2016	34808	J.Guzman	Mileage Reimbursement - August 2016	55.62
9/13/2016	34815	J.Kandiliotis	Mileage Reimbursement - August 2016	355.86
9/13/2016	34827	D.Sabey	Fuel Allowance - August 2016	200.00
9/21/2016	34867	D.Carty-Daniel	NJAHRA Per Diem	180.00
9/21/2016	34868	D.Dzema	8/2 and 9/13 Board meeting Refreshments , Staff Meeting 9/16	299.20
9/28/2016	34877	T.Furlong	NJAHRA Conf 9/25-27 -Travel Reim	109.98
10/11/2016	34905	D.Dzema	NAHRO Conf - Flight Ticket for D.Carty-Daniel	503.20
10/11/2016	34908	J.Guzman	Mileage Reimbursement - September 2016	44.28
10/11/2016	34913	J.Kandiliotis	Mileage Reimbursement - September 2016	336.96
10/11/2016	34921	D.Sabey	Fuel Allowance - September 2016	200.00
10/11/2016	34930	T.Furlong	11/3/16 Training in Washington DC - Travel Reim	157.00
10/11/2016	34942	D.Carty-Daniel	NAHRO Oct 2016 - Per Diem	360.00
10/12/2016	34943	Hyatt Regency	Oct 2016 NAHRO - Hotel for D.Carty - Daniel	1100.04
10/17/2016	34952	A.Figueroa	Mileage Reimbursement - September 2016	33.48
11/4/2016	35010	L.Cardona	Mileage Reimbursement - September, October 2016	272.16
11/4/2016	35017	A.Figueroa	Mileage Reimbursement - October 2016	79.92
11/4/2016	35019	J.Guzman	Mileage Reimbursement - October 2016	51.30
11/4/2016	35021	E.Hill	Refreshements for Workshops, Travel Reimb	188.04
11/4/2016	35029	D.Sabey	Fuel Allowance - October 2016	200.00

NJ/NAHRO NJNAHRO ' HUD Sessic	vn y-Daniel na ong	vn Nov 2016 NJ/NAHRO - Per Diem 180.00	y-Daniel NJ/NAHRO Nov 2016 - Per Diem 240.00	na NJNAHRO Training - travel and meal exp	ong HUD Session - Travel Exp 48.65	Refreshments for Workshops 75.29		is	is Mileage Reimbursement - October 2016 NJ/NAHRO Nov 2016 - Hotel Reimbursement, EZ PASS and Mileage Reim	is Mileage Reimbursement - October 2016 NJ/NAHRO Nov 2016 - Hotel Reimbursement, EZ PASS and Mileage Reim taurant Holiday Gathering - Seniors	is Mileage Reimbursement - October 2016 NJ/NAHRO Nov 2016 - Hotel Reimbursement, EZ PASS and Mileage Reim taurant Holiday Gathering - Seniors Mileage Reimbursement - November 2016	is Mileage Reimbursement - October 2016 NJ/NAHRO Nov 2016 - Hotel Reimbursement, EZ PASS and Mileage Reim taurant Holiday Gathering - Seniors Mileage Reimbursement - November 2016 Mileage Reimbursement - November 2016	is Mileage Reimbursement - October 2016 NJ/NAHRO Nov 2016 - Hotel Reimbursement, EZ PASS and Mileage Reim taurant Holiday Gathering - Seniors Mileage Reimbursement - November 2016 Mileage Reimbursement - November 2016 Mileage Reimbursement - November 2016	is Mileage Reimbursement - October 2016 NJ/NAHRO Nov 2016 - Hotel Reimbursement, EZ PASS and Mileage Reim taurant Holiday Gathering - Seniors Mileage Reimbursement - November 2016 Mileage Reimbursement - November 2016 is Mileage Reimbursement - November 2016 Fuel Allowance - November, Meal Reim Sayreville Housing	is Mileage Reimbursement - October 2016 NJ/NAHRO Nov 2016 - Hotel Reimbursement, EZ PASS and Mileage Reim taurant Holiday Gathering - Seniors Mileage Reimbursement - November 2016 Mileage Reimbursement - November 2016 Mileage Reimbursement - November 2016 Sis Mileage Reimbursement - November 2016 Casterline Seminar Orlando, FL - Travel Exp	is Mileage Reimbursement - October 2016 NJ/NAHRO Nov 2016 - Hotel Reimbursement, EZ PASS and Mileage Reim taurant Holiday Gathering - Seniors Mileage Reimbursement - November 2016 Mileage Reimbursement - November 2016 is Mileage Reimbursement - November 2016 Fuel Allowance - November, Meal Reim Sayreville Housing Casterline Seminar Orlando, FL - Travel Exp taurant Staff Gathering
	NJ/NAHRO NJNAHRO HUD Sessic Refreshme Mileage Re NJ/NAHRO nt Holiday Ga Mileage Re Mileage Re Mileage Re Fuel Allow Casterline nt Staff Gath		NOV 2016 - Per Dien	Fraining - travel and	ın - Travel Exp	nts for Workshops	imbursement - Octo	Nov 2016 - Hotel Re	thering - Seniors	imbursement - Nove	simbursement - Nove	imbursement - Nove	ance - November, M	Seminar Orlando, FL	ering	Travel to Highlands, Keansburg Housing
D.Carty-Daniel D.Dzema T.Furlong E.Hill J.Kandiliotis A.Brown Barge Restaurar A.Figueroa J.Guzman J.Kandiliotis D.Sabey T.Furlong Barge Restaural		35037	35038	35050	35055	35057	35061	35091	35115	35136	35139	35145	35153	35175	35188	35206
	35037 35038 35050 35055 35051 35061 35115 35115 35139 35139 35145 35153 35175 35175	11/10/2016	11/10/2016	11/21/2016	11/21/2016	11/21/2016	11/21/2016	12/1/2016	12/5/2016	12/14/2016	12/14/2016	12/14/2016	12/14/2016	12/15/2016	12/22/2016	12/30/2016

PERTH AMBOY HOUSING AUTHORITY BUDGET QUESTIONNAIRE MARCH 31, 2018

Page N-3 (1 of 2) Question #10

The Housing Authority Board of Commissioners authorized an independent executive compensation survey performed by Executech Inc. The survey provided comparable information for the five highest paid employees at the Authority that included all the persons listed on Page N-4 of this budget. In addition the Board of Commissioners perform a periodic performance evaluation of the Executive Director. Annual salary increases are authorized by the Board of Commissioners subject to budget appropriations.

Page N-3 (2 of2) Question #13g

The Housing Authority Construction inspector receives \$200 per month to compensate him for his business use of his own vehicle. The Executive Director is provided a car for his business and personal use. In accordance with IRS regulations the Director's personal use of the car is included in his w-2 wages.

AUTHORITY SCHEDULE OF COMMISSIONERS, OFFICERS, KEY EMPLOYEES, HIGHEST COMPENSATED EMPLOYEES AND INDEPENDENT CONTRACTORS

PERTH AMBOY

(Name)

FISCAL YEAR:

FROM:

04-01-2017

TO:

03-31-2018

Complete the attached table for all persons required to be listed per #I-4 below.

- 1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.
- 2) List all of the Authority's key employees and highest compensated employees other than a commissioner or officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's <u>former</u> officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's <u>former</u> commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- Commissioner: A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.
- Officer: A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.
- Key employee: An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:
 - a) The individual received reportable compensation from the authority and all other public entities in excess of \$150,000 for the most recent fiscal year completed; and
 - b) The individual has responsibilities or influence over the authority as a whole or has power to control or determine 10% or more of the authority's capital expenditures or operating budget.
- Highest compensated employee: One of the five highest compensated employees or independent contractors of the authority other than current commissioners, officers, or key employees whose aggregate reportable compensation from the authority and other public entities is greater than \$100,000 for the most recent fiscal year completed.
- Compensation: All forms of cash and non-cash payments or benefits provided in exchange for services, including salaries and wages, bonuses, severance payments, deferred payments, retirement benefits, fringe benefits, and other financial arrangements or transactions such as personal vehicles, meals, housing, personal and family education benefits, below-market loans, payment of personal or family travel, entertainment, and personal use of the Authority's property. Compensation includes payments and other benefits provided to both employees and independent contractors in exchange for services.
- Reportable compensation: The aggregate compensation that is reported (or is required to be reported) on Form W-2, box 1 or 5, whichever amount is greater, and/or Form 1099-MISC, box 7, for the most recent calendar year ended 60 days before the start of the proposed budget year. For example, for fiscal years ending December 31, 2017, the calendar year 2014 W-2 and 1099 should be used (60 days prior to start of budget year is November 1, 2015, with 2014 being the most recent calendar year ended), and for fiscal years ending June 30, 2017, the calendar year 2015 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2017, with 2015 being the most recent calendar year ended).
- Other Public Entity: Any municipality, county, local authority, fire district, or other government unit, regardless of whether it is related in any way to the Authority either by function or by physical location.

Perth Amboy Housing Authority For the Period April 1, 2017 to to March 31, 2018

			6.	Position	R	Authority	Reportable Compensation from Authority (W-2/ 1099)	Tom		į.						
					_								Average		Estimated amount	
				rati			Other	Other (auto	Estimated		Names of Other		Hours per		of other	
				Rue	gha		allow	allowance, arr	amount of other		Public Entities where	_	Week		тот поделением	
		_			92 /		exbr	expense	compensation		Individual Is an		Dedicated to	Reportable	Other Public Entitles	
		Average Hours			`o-		SCCC	account,	from the	-9076	Employee or Member Positions held at	r Positions held at	Positions at	Compensation	(nealth banefits,	
		per Week	-	Em		81	paym	payment in	Authority	Total	of the Governing	OtherPublic	Other Public	from Other	pension, payment in	Total
	i	2	Offic	nsat ploy ploy	/Auges orn			f health (h	lieu of health (health benefits,		Body (1) See note Entitles Listed in Entitles Listed	Entitles Listed in		Public Entitles		Compensation
Name	Title	Poshion	cer	181	ner	tipend Bor	Bonus benefit	benefits, etc.)	pension, etc.)	from Authority	below	Column O	in Column O	(W-2/ 1099)	benefits, etc.)	All Public Entitles
1 Edna Dorothy Carty-Daniel	Chaliperson	X GE	×		None					•	None					
2 Gregory Pabon	Vice-Chairperson	₹ 5	×		None					0	0 None					0
3 Miguel Arocho	Commissioner	× 5		1	None					0	0 None					0
4 Shtrley Jones	Commissioner	× 55			None					0	D Sate of NJ-Retinee	Retired	۵	25,937	10,000	35,937
5 H Wayne Brady	Commissioner	, s	> *		None					0	0 None					0
6 Bernadette Falcon-Lopez	Commissioner	× 57	, ,		None					0	0 None					0
7 David Benyola	Commissioner	× 57	,		None					0	O City of Perth Amboy Dep. Dept Head	Dep. Dept Head	SE	78,900	2,000	83,900
8 Douglas Dzema	Executive Director	35	×	×	16	160,991 4	42,264	16,917	72,226	292,398 None	None					292,398
9 Kristi Penta-Duffy	Asset Manager	€		×	11	117,100	12,497	á	52,465	182,062 None	Nome					182,062
10 Douglas Sabey	Construction Inspector	35		×	91	107,818	19,203	0	51,150		None					178,171
11 Thomas Furlong	Director of Finance	35	•	×	11	116,664 2	75,067	1,116	48,842	191,689 None	None					191,689
17:										0						0
13										۵						0
14										0						0
15									The state of the s	0						0
Total:					\$ 50.	\$ 1502,573 \$ 99,031 \$	li	18,033 \$	\$ 224,683 \$	\$ 844,320	←			\$ 104,857	\$ 15,000	\$ 954,157

[1] Insert "Hone" in this calumn for each individual that does not hold a position with another Public Entity

Schedule of Health Benefits - Detailed Cost Analysis

March 31, 2018

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Perth Amboy Housing Authority For the Period April 1, 2017

				į				
	# of Covered	Annual Cost Estimate per	Total Cost	# of Covered				
	(Medical & Rx) Proposed Budget	Proposed Budget	Proposed Budget	(Medical & Rx) Current Year	per Employee Current Year	Total Prior Year Cost	\$ Increase (Decrease)	% Increase (Decrease)
							THE SECOND	
Single Coverage	a	\$ 12.152	109 277		11 056	\$ 105 704	-	93 c
Parent & Child	. 4	22,222		, <u>~</u>	7 -	ጉ	ጉ	2.5%
Employee & Spouse (or Partner)	9		145.903	1 40		142.344	3,559	2.5%
Family	10		335,052	10		326,880	8,172	2.5%
Employee Cost Sharing Contribution (enter as negative -)	H SUN SULLINE		(109,580)		Seattly make	(106,907)	(2,673)	2.5%
Subtotal	29		567,978	29		554,125	13,853	2.5%
Commissioners - Health Benefits - Annual Cost								
Single Coverage							A PERSONAL PROPERTY OF THE PERSONAL PROPERTY O	#DIV/0i
Parent & Child			*			15.	9	#DIV/0!
Employee & Spouse (or Partner)			·			K 7	8	#DIV/0!
Family			į.			180	•	#DIV/0i
Employee Cost Sharing Contribution (enter as negative -)							•	#DIV/0i
Subtotal	0			0			•	#DIV/0]
Retirees - Health Benefits - Annual Cost	ALCOHOLD STATE OF THE PARTY OF							
Single Coverage	9	12,054	72,324	Ø	11,760	70,560	1,764	2.5%
Parent & Child								#DIV/0!
Employee & Spouse (or Partner)	8	_	62,177	€			1,517	2.5%
Family	1	26,550	26,550	1	25,092	25,092	1,458	5.8%
Employee Cost Sharing Contribution (enter as negative -)								#DIV/0i
Subtotal	10		161,050	10		156,312	4,738	3.0%
GRAND TOTAL	33		\$ 729,028	39		\$ 710,437	\$ 18,591	2.6%
Is medical coverage provided by the SHBP (Yes or No)? (Place Answer in Box)	nswer in Box)		Yes	Yes or No				
Is prescription drug coverage provided by the SHBP (Yes or No)? ((Place Answer in Box)		Yes	Yes or No				

Note: Remember to Enter an amount in rows for Employee Cost Sharing

Schedule of Accumulated Liability for Compensated Absences

Perth Amboy Housing Authority

For the Period

April 1, 2017

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March 31, 2018

Complete the below table for the Authority's accrued liability for compensated absences.

Agreement (check applicable items) Legal Basis for Benefit Employment leubivibal Resolution Agreement Approved Labor Absence Liability **Dollar Value of** Compensated Accrued Total liability for accumulated compensated absences at beginning of current year \$ **Gross Days of Accumulated Compensated Absences at** beginning of Current Year Individuals Eligible for Benefit See Attached

The total Amount Should agree to most recently issued audit report for the Authority

HOUSING AUTHORITY OF THE CITY OF PERTH AMBOY ANNUAL & SICK LEAVE 3-31-2016

		ANNUAL	Current	Long-Term	ANNUAL	ANNUAL	Annual	SICK	COST OF	Max	Total
EMPLOYEE	DAILY WAGE	LEAVE DAYS			LEAVE	LEAVE	Leave	LEAVE DAYS	SICK LEAVE	Sick Leave	
JUAN ARIAS	176.27			00.0	713.89	0.00	713.89	6.73	1,186.30	593.15	1,307.04
GEORGE BOULIERIS	358.16		27.00	24.62	9.670.32	8,817,90	18,488.22	149.51	53,548,50	26,774.25	45,262.47
HILDA CARDONA	306.24		27.00	81.88	B,258.48	25,074.93	33,343.41	287.40	88,013,3B	44,006.69	77,350.10
LUIS CARDONA	43.93		14.00	3.52	615.02	154.63	769.65	44.75	1,965.87	982.53	1,752.59
DAVID SANTIAGO	142.24		"	00.0	1,564.64	00.00	1,564.64		869.09	434.54	1.999.18
CHRISTINE DEAMORIM	223.54		6.02	00.0	1,345.71	00.00	1,345.71	10.00	2,235.40	1,117.70	2,463.41
KRISTI PENTA DUFFY	472.99		-	29.58	12,770.73	13,991.04	26,761.77	105.59	49,943.01	24,971.51	51,733,28
DOUGLAS DZEMA	761.71		20.21	00.0	15,394.16	0.00	15,394.16		228,513.00	114,256.50	129,650.66
ANTHONY FIGUEROA	106.40		12.00	4.94	1,276.80	525.62	1,802.42			365.48	2,167.90
THOMAS FURLONG	452.60				7,694.20	6,037.68	13,731.88	109.31	49.473.71	24,736.85	38,468.74
ALYCIA BROWN	196.92			00'0	1,342,99	0.00	1,342.99	18.84	3,709.97	1,854.59	3,197.98
DELILAH GONZALEZ	158.65				1,254.92	0.00	1,254.92	5.21	826.57	413.28	1,668.20
AARON GREEN	244.39			15.27	5,620.97	3,731.84	9,352.81		4,594,53	2,297,27	11,650,07
JUAN GUZMAN	128.32		23.00	16.52	2,951.36	2,119.85	5,071.21	42.99	5,516.48	2,758.24	7,829,44
JESSICA HERNANDEZ	149.81			14.32	0.00	2,145.28	2,145.28		00.0	00.00	2,145.28
MARTHA HERRERA	158.65			28.82	2,697.05	4,572.29	7,269.34	1 63.25	10,034.61	5,017.31	12,286.65
EUGENIA HILL	305.10			30.42	7,017.30	9,281.14	16,298.44		27,642.06	13,821.03	30,119.47
JOHN KANDILIOTIS	276.56			52.63	7,467.12	14,555.35	22,022.47		65,060.74	32,530.37	54,552.84
GARY LAMPLEY	156.24				3,381.03	00.0	3,381.03			14,764.68	18,145.71
JUDITH MATIAS ORTIZ	146.15				3,361,45	1,677.80	5,039.25		12,159.68	E,079.84	11,119.09
ROSE MCKEON	275.39		.,	47.46	7,435,53	13.070.01	20,505.54	173.17	47,689.29	23,844,64	44,350.18
YANAIRA RODRIGUEZ	157.69			00.00	157.69	00.0	157.69	11.04			1,028.14
CHRISTINE NICHOLSON	180.69			2	4,878.63	5,366.49	10,245,12	2 214.28	38,718,25	15,359.13	29,604.25
ELIZABETH NUNEZ	151.78			1.63	3,490.94	247.40	3,738.34	4 0.58	88.03	44.02	3,782.36
JACKIE CHAPMAN	188.25	11.92			2,243,94	00.0	2,243.94	1.46	3 274.85	137.42	2,381,36
BRENDA MALAVE RODRIGUEZ	176.92				895.22	00.00	895.22				6,901.65
WALTER SABEY	511.62				11,767.26	4,328.31	16,095.57		2 100,185,43	50,092,71	66,188,28
ALTON THOMPSON	146.16		.,	11.08	3,361.68	1,619.45	4,981.13	3 141.00	7 20,608.56	10,304.28	15,285.41
MAGADLENA TUREK	180.77				1,780,58	00.00	1,780.58	8 6.83	3 1,234.66	617,33	2,397.91
ESTHER WOLMERS	173.25		7		3,984.75	1,472.63	5.457.38	16.07	7 2,784.13	1,392.06	6,849.44
NANCY SANCHEZ	133.99				00.00	00.0	00.0	0.20	7 26.80	13.40	13.40
STEVE YUHASZ	249.68	3 37.42	27.00	10.42	6,741.36	2,601.67	9,343.03	3 37.10	9,263.13	4,631.56	13,974.59
					141,145.73	121,391,31	262,537.04	4	870,180.10	435,090,05	697,627.09
				taxes(7.65)	10,797.65	9,286.44	20,084.08	Ø	taxes(7.65)	33,284.59	53,368.47
				Total	151,943.38	130,677.75	282,621.13	ଳା	Total	468,374,44	750,995.57

Schedule of Shared Service Agreements

Perth Amboy Housing Authority
to

Apr

For the Period

April 1, 2017

March 31, 2018

Amount to be

Enter the shared service agreements that the Authority currently engages in and identify the amount that is received/paid for those services.

				Agreement		Received by/
			Comments (Enter more specifics if	Effective	Agreement	Paid from
Name of Entity Providing Service	Name of Entity Receiving Service	Type of Shared Service Provided	needed)	Date	End Date	Authority
Perth Amboy Housing Authority	Sayreville Housing Authority	Mgt/Acctg/HCV Support/Admin		1/1/2017	1/1/2017 12/31/2017 \$	161,540
Perth Amboy Housing Authority	Keansburg Housing Authority	Management/Acctg		1/1/2017	\$ 71/2017 12/31/2017 \$	49,300
Perth Amboy Housing Authority	Highlands Housing Authority	Management/Acctg		1/1/2017	1/1/2017 12/31/2017 \$	62,350
Perth Amboy Housing Authority	Bayonne Housing Authority	Computer Support		1/1/2017	1/1/2017 12/31/2017 \$	20,000
Woodbridge Housing Authority	Perth Amboy Housing Authority	Procurement Services		6/1/2016	6/1/2016 5/31/2017 \$	36,000

If No Shared Services X this Box

2017 HOUSING AUTHORITY BUDGET Financial Schedules Section

SUMMARY

March 31, 2018

Perth Amboy Housing Authority April 1, 2017 to

For the Period

		FY 20	FY 2017 Proposed Budget	Budget		FY 2016 Adopted Budget	\$ Increase (Decrease) Propased vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations All Operations	All Operations
REVENUES								
Total Operating Revenues	\$ 1,067,840	I®1	\$ 13,812,340	\$ 320,190	\$ 15,200,370	\$ 14,934,420	\$ 265,950	1.8%
Total Non-Operating Revenues		2	212,000	1,262,740	1,474,740	561,860	912,880	162.5%
Total Anticipated Revenues	1,067,840		14,024,340	1,582,930	16,675,110	15,496,280	1,178,830	7.6%
APPROPRIATIONS								
Total Administration	158,380		1,309,110	1,327,390	2,794,880	2,736,540	58,340	2.1%
Total Cost of Providing Services	812,020	Ñ	12,159,120	880,010	13,851,150	12,950,420	900,730	7.0%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXXXX	хххохохох	XXXXXXXXXXXX	xxxxxxxxxxx			"	#DIV/0}
Total Operating Appropriations	970,400	•	13,468,230	2,207,400	16,646,030	15,686,960	959,070	6.1%
Total Interest Payments on Debt Total Other Non-Operating Appropriations	XXXXXXXXXX	XXXXXXXXXXXXXX	xxxxxxxxxx	XXXXXXXXXXX	ù e		365-34	#DIV/0! #DIV/0!
Total Non-Operating Appropriations	**		*	8		*	,	#DIV/0I
Accumulated Deficit		•						#DIV/0i
Total Appropriations and Accumulated Deficit	970,400	*	13,468,230	2,207,400	16,646,030	15,686,960	959,070	6.1%
Less: Total Unrestricted Net Position Utilized			(325,260)	624,470	299,210	190,680	108,530	56.9%
Net Total Appropriations	970,400	t.	13,793,490	1,582,930	16,346,820	15,496,280	850,540	5.5%
ANTICIPATED SURPLUS (DEFICIT)	\$ 97,440	₩.	\$ 230,850	Ψ.	\$ 328,290	\$	\$ 328,290	#DIN/0i

Revenue Schedule

Perth Amboy Housing Authority

For the Perlod

April 1, 2017

to

March 31, 2018

\$ Increase

% Increase

		FY 201	17 Proposed	Budget		FY 2016 Adopted Budget	(Decrease) Proposed vs. Adopted	(Decrease) Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations	All Operations
OPERATING REVENUES								
Rental Fees					1.	\$:-	\$:=:	#DIV/OI
Homebuyers' Monthly Payments					\$ -	•		
Dwelling Rental	466890				466,890	1,910,000	(1,443,110)	-77.5%
Excess Utilities	11250				11,250	50,000	(38,750)	
Non-Dwelling Rental					18:	<u>;</u> •	44 000 4001	#DIV/01
HUD Operating Subsidy	556700				556,700	1,636,160	(1,079,460)	
New Construction - Acc Section 8					ARREST COM \$1450 /	1000703179999083	***************************************	#DIV/01
Voucher - Acc Housing Voucher			13663340		13,663,340	10,750,000	2,913,340	27,1%
Total Rental Fees	1,034,840		13,663,340		14,698,180	14,346,160	352,020	2.5%
Other Operating Revenues (List)								
Interlocal Agreements				308190		311,260	(3,070)	-1.0%
Frauds/Tenant charges/Laundry	4250		5000	12000	21,250	22,000	(750)	-3.4%
Portable admin Fees			144000		144,000	135,000	9,000	6.7%
Cell Tower Revenue	28750				28,750	120,000	(91,250)	-76.0%
Type In (Grant, Other Rev)					Ø€	4		#DIV/OI
Type In (Grant, Other Rev)					-	8	-	#DIV/01
Type In (Grant, Other Rev)					5 * S			#DIV/01
Type In (Grant, Other Rev)					5.65		24.0	#DIV/01
Type In (Grant, Other Rev)					120	2	241	#DIV/01
Type in (Grant, Other Rev)					300			#DIV/01
Type in (Grant, Other Rev)								#DIV/01
Type in (Grant, Other Rev)					2	1	720	#DIV/0I
							12	#DIV/0!
Type In (Grant, Other Rev)						2		#DIV/OI
Type In (Grant, Other Rev)					17.42			#DIV/01
Type In (Grant, Other Rev)					-		- 5	#DIV/01
Type In (Grant, Other Rev)					33			#DIV/01
Type In (Grant, Other Rev)	ľ							#DIV/01
Type In (Grant, Other Rev)					(2)	2	4	#DIV/01
Type In (Grant, Other Rev)	l.							#DIV/OI
Type In (Grant, Other Rev)	22.000		149,000	320,190	502,190	588,260	(86,070)	-14.6%
Total Other Revenue	33,000			320,190	15,200,370	14,934,420	265,950	1.8%
Total Operating Revenues	1,067,840		13,812,340	320,190	15,200,370	14,334,420	265,930	1.070
NON-OPERATING REVENUES								
Other Non-Operating Revenues (List)					0	PO 000	(50,000)	-100.0%
Capital Fund Operations					9.0	50,000		-100.0%
Capital Fund-Mgt Fees				4 256 740	4 350 340	70,000	(70,000)	563.0%
Non Federal Funds				1,259,740	1,259,740	190,000	1,069,740	
Ross Grant-FSS			195,000		195,000	191,460	3,540	1.8%
Office of Community Development			14,000		14,000	14,000	(0.0%
PNC Bank/Middlesex County			1,000	4	1,000	25,000	(24,000)	-96.0%
Total Other Non-Operating Revenue			210,000	1,259,740	1,469,740	540,460	929,280	171.9%
Interest on Investments & Deposits (List)								
Interest Earned			2,000	3,000	5,000	21,400	(16,400)	-76.6%
Penalties						(**	~	#DIV/01
Other								#DIV/01
Total Interest			2,000	3,000	5,000	21,400	(16,400)	-76.6%
Total Non-Operating Revenues			212,000	1,262,740	1,474,740	561,860	912,880	162.5%
	5 1,067,840	s .	5 14,024,340	1,582,930	\$ 16,675,110	\$ 15,496,280	\$ 1,178,830	7.6%

Prior Year Adopted Revenue Schedule

FY 2016 Adopted Budget

Perth Amboy Housing Authority

			TO Adopted Dat	-	
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
OPERATING REVENUES	Management	Jection b	T Duchier	other rograms	
Rental Fees					
Homebuyers' Monthly Payments					\$ -
Dwelling Rental	1,910,000				1,910,000
Excess Utilities	50,000				50,000
Non-Dwelling Rental	,				200
HUD Operating Subsidy	1,636,160				1,636,160
New Construction - Acc Section 8	_,,				0€5
Voucher - Acc Housing Voucher			10,750,000		10,750,000
Total Rental Fees	3,596,160		10,750,000		14,346,160
Other Revenue (List)		77.			
· ·		2 3 1100	15,000	296,260	311,260
Interlocal Agreements Frauds/Tenant charges/Laundry	17000		5,000	,	22,000
Portable admin Fees	2,555		135,000		135,000
Cell Tower Revenue	120000		122,00.0		120,000
	120000				
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					:#:
Type in (Grant, Other Rev)					*
Type in (Grant, Other Rev)					
Type In (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type In (Grant, Other Rev)					
Type in (Grant, Other Rev)					-
Type In (Grant, Other Rev)					
Type In (Grant, Other Rev)	1.5				-
Type in (Grant, Other Rev)					
Type In (Grant, Other Rev)				1	_
Type In (Grant, Other Rev)	ł				-
Type in (Grant, Other Rev)	ł				14
Type in (Grant, Other Rev)					345
Type in (Grant, Other Rev)	137,000		155,000	296,260	588,260
Total Other Revenue	3,733,160		10,905,000	296,260	14,934,420
Total Operating Revenues	3,733,100		20,303,000	250,200	1 (35 () 125
NON-OPERATING REVENUES					
Other Non-Operating Revenues (List)	50,000				50,000
Capital Fund Operations	70,000				70,000
Capital Fund-Mgt Fees	161,000		29,000	1	190,000
Non Federal Funds	101,000		191,460		191,460
Ross Grant-FSS			14,000		14,000
Office of Community Development			25,000		25,000
PNC Bank/Middlesex County	201.000		259,460		540,460
Other Non-Operating Revenues	281,000		233,400		546,406
Interest on Investments & Deposits	10.400		2,000		21,400
Interest Earned	19,400		2,000		21,-100
Penalties					
Other	20.400		2,000		21,400
Total Interest	19,400	-	261,460		561,860
Total Non-Operating Revenues	300,400	\$ -	\$ 11,166,460	\$ 296,260	\$ 15,496,280
TOTAL ANTICIPATED REVENUES	\$ 4,033,560		Q 11,100,400	2 230,200	7 13,130,200

Appropriations Schedule

Perth Ambay Housing Authority

For the Period

April 1, 2017

to

March 31, 2018

\$ Increase

% Increase

	24 111111	F	Y 2017 Propose	d Budget		FY 2016 Adopted Budget	(Decrease) Proposed vs. Adopted	(Decrease) Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations	All Operations
OPERATING APPROPRIATIONS						Carrie Manager		
Administration				***************************************				
Salary & Wages	69,010		757,200	767,020	\$ 1,593,230	\$ 1,442,020	\$ 151,210	10.5%
Fringe Benefits	37,490		417,910	406,870	862,270	848,020	14,250	1.7%
Legal	5,000		10,000	10,000	25,000	38,000	(13,000)	
Staff Training	2,510		17,500	5,000	25,010	30,000	(4,990)	
Travel	3,370		5,750	13,250	22,370	30,000	(7,630)	
Accounting Fees					1	253		#DIV/01
Auditing Fees	3,000		6,000	2,000	11,000	15,000	(4,000)	
Miscellaneous Administration*	38,000		94,750	123,250	255,000	333,500	(77,500)	-23.2%
Total Administration	158,380		1,309,110	1,327,390	2,794,880	2,736,540	58,340	2.1%
Cost of Providing Services								
Salary & Wages - Tenant Services	-				£ 2	(*)		#DIV/01
Salary & Wages - Maintenance & Operation	150,880			475,670	626,550	535,340	(8,790)	-1.4%
Salary & Wages - Protective Services	,				120	54°		#D(V/01
Salary & Wages - Utility Labor					9	-		#DIV/01
Fringe Benefits	70,370			359,670	430,040	385,000	45,040	11.7%
Tenant Services	5,250				5,250	25,200	(19,950)	-79.2%
Utilities	293,010				293,010	1,318,850	(1,025,840)	-77.8%
Maintenance & Operation	86,120				86,120	376,000	(289,880)	-77.1%
Protective Services	00,110						€	#DIV/01
Insurance	42,540		30,370	44,670	117,580	184,000	(66,420)	-36.1%
Payment In Lieu of Taxes (PILOT)	17,390		34,5.4	, ,,	17,390	64,110	(46,720)	-72,9%
•	17,350					- 7-2-	*	#DIV/01
Terminal Leave Payments	4,380				4,380	17,500	(13,120)	-75.0%
Collection Losses	140,100		40,000		180,100	144,420	35,680	24.7%
Other General Expense	140,100		12,088,750		12,088,750	9,800,000	2,288,750	23.4%
Rents			12,000,150		22,000,720	2,000,000	=,===,:==	#DIV/01
Extraordinary Maintenance	1,980				1,980		1,980	#DIV/01
Replacement of Non-Expendible Equipment	1,580				1,500		7,000	#DIV/01
Property Betterment/Additions					880	3		HDIV/OI
Miscellaneous COPS*	812,020		12,159,120	880,010	13,851,150	12,950,420	900,730	7.0%
Total Cost of Providing Services			12,135,110	000,010	10,000,1100	12,530,420	300,700	5
Total Principal Payments on Debt Service in Lieu of	XXXXXXXXXXXX	********	XXXXXXXXXX	XXXXXXXXX		2	45	#DIV/01
Depreciation	970,400	**********		2,207,400	16,646,030	15,686,960	959,070	6.1%
Total Operating Appropriations	970,400		12,400,230	ALEO TITO	10,010,000	15,000,000		
NON-OPERATING APPROPRIATIONS	XXXXXXXXXXX	VVVVVVVVVV	VVVVVVVVVVV	XXXXXXXXXX				#DIV/01
Total Interest Payments on Debt	2000000000	******	nakaananana .	O A CONTROL OF THE PARTY OF THE				#DIV/01
Operations & Maintenance Reserve						9		#DIV/01
Renewal & Replacement Reserve	1							#DIV/01
Municipality/County Appropriation	1					-		#DIV/01
Other Reserves								#DIV/01
Total Non-Operating Appropriations				2,207,400	16,646,030	15,686,960	959,070	6.1%
TOTAL APPROPRIATIONS	970,400		13,488,230	2,207,400	10,040,030	12,000,500	22,070	#DIV/01
ACCUMULATED DEFICIT								, MBINABI
TOTAL APPROPRIATIONS & ACCUMULATED				2 202 100	45.545.000	AF 505 050	959,070	6.1%
DEFICIT	970,400		13,468.230	2,207,400	16,646,030	15,686,960	939,070	0.176
UNRESTRICTED NET POSITION UTILIZED							521	#DIV/01
Municipality/County Appropriation			(0.00 0.00)		200 212	400.000	100 530	56.9%
Other			(325,260)	624,470	299,210	190,680	108,530	56.9%
Total Unrestricted Net Position Utilized			(325,260)	624,470	299,210	190,680	108,530	5.5%
TOTAL NET APPROPRIATIONS	5 970,400	S -	\$ 13,793,490	1,582,930	5 16,346,820	5 15,496,280	\$ 850,540	3,376

^{*} Miscellaneous line items may not exceed 5% of total operating appropriations shown below. If amount in miscellaneous is greater than the amount shown below, then the line item must be itemized above.

5% of Total Operating Appropriations

\$ 48,520.00 \$ - \$ 673,411.50 \$

110,370.00 \$

SUMMARY OF MISCELLANEOUS ADMINISTRATION EXPENSES

Line lem	Amount
Publications	1,000
Telephone	42,000
Fee for Service	15,000
Office Supplies	16,250
Payroll Service	18,000
Advertising	5,000
Computer Software	13,000
Credit Reports	4,000
Meetings	3,000
Office Cleaning	6,000
Total	123,250

Prior Year Adopted Appropriations Schedule

Perth Amboy Housing Authority

	/////////////////////////////////////	F	Y 2016 Adopted Bud	lget	
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
OPERATING APPROPRIATIONS					
Administration	c		4	120122	
Salary & Wages	\$ 790,500		\$ 515,040		\$ 1,442,020
Fringe Benefits	473,270		336,290	•	848,020
Legal	27,500		10,500		38,000
Staff Training	12,500		17,500		30,000
Travel	24,750		5,250	1	30,00
Accounting Fees					8
Auditing Fees	9,000		6,000		15,000
Miscellaneous Administration*	210,400		123,100	1	333,500
Total Administration	1,547,920		1,013,680		2,736,540
			2/3.17/333		
Cost of Providing Services				7	f
Salary & Wages - Tenant Services	C24 540			10,800	635,340
Salary & Wages - Maintenance & Operation	624,540			10,000	055,540
Salary & Wages - Protective Services					
Salary & Wages - Utility Labor				000	205.00
Fringe Benefits	384,120			880	385,000
Tenant Services	25,200				25,200
Utilities	1,318,850				1,318,850
Maintenance & Operation	376,000				376,000
Protective Services					
Insurance	147,700		36,300		184,000
Payment in Lieu of Taxes (PILOT)	64,110				64,110
Terminal Leave Payments					
Collection Losses	17,500				17,500
Other General Expense	114,420		30,000		144,420
	114,420		9,800,000		9,800,000
Rents			2,002,000		2,2-1,11
Extraordinary Maintenance					
Replacement of Non-Expendible Equipment					
Property Betterment/Additions					
Miscellaneous COPS*	2 272 112		0.055.300	11.500	12,950,420
Total Cost of Providing Services	3,072,440		9,866,300	11,680	12,950,420
Total Principal Payments on Debt Service in Lieu of					
Depreciation	XXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	15 505 056
Total Operating Appropriations	4,620,360		10,879,980	186,620	15,686,960
NON-OPERATING APPROPRIATIONS					
Total Interest Payments on Debt	XXXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXX	3
Operations & Maintenance Reserve					
Renewal & Replacement Reserve					3
Municipality/County Appropriation					9
Other Reserves					
Total Non-Operating Appropriations			-		
	4,620,360		10,879,980	186,620	15,686,960
TOTAL APPROPRIATIONS	4,020,500				,,-
ACCUMULATED DEFICIT					
TOTAL APPROPRIATIONS & ACCUMULATED	4 600 260		10 070 000	106 620	15,686,960
DEFICIT	4,620,360		10,879,980	186,620	13,080,500
UNRESTRICTED NET POSITION UTILIZED					
Municipality/County Appropriation	-	¥			daa r
Other	586,800		(286,480)		190,680
Total Unrestricted Net Position Utilized	586,800	14.	(286,480)	The second secon	190,680
TOTAL NET APPROPRIATIONS	\$ 4,033,560	\$ -	\$ 11,166,460	\$ 296,260	\$ 15,496,280

543,999.00 \$

9,331.00 \$

784,348.00

231,018.00 \$

shown below, then the line Item must be Itemized above.

5% of Total Operating Appropriations

Debt Service Schedule - Principal

	Perth Amboy Housing Authority	2018		1,550,000 1,550,000 1,550,000	v · v · v · v ·
Perth Amboy Housing Authority Proposed Budget Year 2017 \$ 1,550,000 1,550,000 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	iority Year Ending In	020			\$,
Proposed Budget Year 2017 \$ 1,550,000 1,550,000 \$ \$		19 26		ř.	5 -
Proposed Budget Year 2017 \$ 1,550,000 1,550,000	using Autho	203		×	S
Proposed Budget Year 2017 \$ 1,550,000 1,550,000	Perth Amboy Hou	2018			·so
		Proposed Budget Year 2017	\$ 1,550,000	1,550,000	•
Adopte		Adopted Budget Year 2016		135,000	•

Indicate the Authority's most recent bond rating and the year of the rating by ratings service.

Standard & Doors			
Fitch			
Mondu's			
	D1+10 D1+10	Vonc of Last Dation	ובמו חו רפזן עפרווול

Debt Service Schedule - Interest Perth Amboy Housing Authority

	1			Fiscal Year Ending in	Ending in					
	Adopted Budget Year 2016	Proposed Budget Year 2017	2018	2019	2020	2021		2022 The	Thereafter	Total Interest Payments Outstanding
Debt Leveraging Type In Issue Name Type In Issue Name Type in Issue Name	75,888	367,072								367,072
TOTAL INTEREST LESS: HUD SUBSIDY	75,888	367,072			h.	X	,	,		367,072
NET INTEREST	\$	\$	S	KA-	٠,	ts.	ı,	s,	•	\$

Net Position Reconciliation

Perth Amboy Housing Authority

For the Period

April 1, 2017

March 31, 2018

2

FY 2017 Proposed Budget

TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)

Less: Invested in Capital Assets, Net of Related Debt (1)

Less: Restricted for Debt Service Reserve (1)

Less: Other Restricted Net Position (1)

Total Unrestricted Net Position (1)

Less: Designated for Non-Operating Improvements & Repairs

Less: Designated for Rate Stabilization

Less: Other Designated by Resolution

Plus: Accrued Unfunded Pension Liability (1)

Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)

5,924,255

1,540,306

4,383,949

(190,680)

109,640

286,480

(586,800)

15,067,3997

15,181,096/

106,616

(243,042)4,547

Operations Total All

Other Programs

Housing Voucher

Public Housing

Section 8

Management

15,317,522 15,062,852 (2,385,827)

106,616

244,115 (491,704

2,255,409 (2,000,739)

2,499,524

Plus: Estimated Income (Loss) on Current Year Operations (2)

Plus: Other Adjustments (attach schedule)

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USE IN PROPOSED BUDGET
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<i>IED NET POSITION AVAILABLE F</i>
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Unrestricted Net Position Utilized to Balance Proposed Budget Unrestricted Net Position Utilized in Proposed Capital Budget Appropriation to Municipality/County (3)

PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR Total Unrestricted Net Position Utilized in Proposed Budget

4

3,347,748	299,210	ť	3	299,210	3,048,538
216,256	624,470		•	624,470	(408,214) \$ 3,048,538
1,335,082	(325,260)	Eg .	E.	(325,260)	\$ 1,660,342 \$
r	⊒¥	∃ 4	ſ	5	\$
1,796,410	3.	æ			1,796,410 \$
	Š Y				\$

Total of all operations for this line item must agree to audited financial statements.

(2) Include budgeted and unbudgeted use of unrestricted net position in the current year's operations.

3) Amount may not exceed 5% of total operating appropriations. See calculation below. Maximum Allowable Appropriation to Municipality/County

(4) If Authority is projecting a deficit for any operation at the end of the budget period, the Authority must attach a statement explaining its plan to reduce the 110,370 673,412 48,520

deficit, including the timeline for elimination of the deficit, if not already detailed in the budget narrative section.

2017 PERTH AMBOY

(Name)

HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

2017 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

PERTH AMBOY

(Name)

04-01-2017

TO:

03-31-2018

FROM:

FISCAL YEAR:

		OR				
2.2 for the followard to the Housing units to	RAD					
Officer's Signature:						
Name:	DOUGLAS DZEMA	V				
	EXECUTIVE DIRE	CTOR	7 07 11 2 - 500 12 11 3			
Title:	EXECUTIVE DITE	881 AMBOY AVE., PO BOX 390 PERTH AMBOY, NJ 08862				
Address:	881 AMBOY AVE.	, PO BOX 390	Al-Parent ayrithman - Veri -			
	881 AMBOY AVE.	, PO BOX 390	732-826-3111			

2017 CAPITAL BUDGET/PROGRAM MESSAGE

PERTH AMBOY Housing Authority

(Name)

FISCAL YEAR:

FROM:

04-01-2017

TO:

03-31-2018

This section is included in the Capital Budget pursuant to N.J.A.C. 5:31-2. It does not in itself confer any authorization to raise or expend funds. Rather, it is a document used as part of the Housing Authority's planning and management system. Specific authorization to spend funds for purposes described in this section must be granted elsewhere, by a separate financing agreement, security agreement, by resolution appropriating funds from the Renewal and Replacement Reserve, or other lawful means.

- 1. Has the Capital Budget/Program been prepared in consultation with or reviewed by, the local and county planning board(s), governing body(ies), or other affected governmental entity(ies) of the jurisdiction(s) served by the Housing Authority?
- 2. Has each capital project/project financing been developed from a specific plan or report and have the full life cycle costs of each been calculated?
- 3. Has the Housing Authority prepared a long-term (10-20 years) infrastructure needs assessment?
- 4. Are any of the capital projects/project financings being undertaken in a community that has a State Plan designated center? If so, please describe the relationship of same to the center's goals and objectives.
- 5. Describe the impact on the schedule of rents and/or user charges if the proposed capital projects are undertaken. Indicate the impact on current and future year's schedules.

6. Have the projects been reviewed and approved by HUD?

Add additional sheets if necessary.

Page CB-2

MARKAN PHONE

Proposed Capital Budget

Perth Amboy Housing Authority

For the Period

April 1, 2017

to

March 31, 2018

	3.50		Fu	nding Sources		
	Estimated Total Cost	Unrestricted Net Position Utilized	Renewal & Replacement Reserve	Debt	Capital Grants	Other Sources
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Enter brief description of up to four projects for each operation above. For operations with more than four budgeted projects, please attach additional schedules. Input total amount of all projects for the operation on single line and enter "See Attached Schedule" instead of project description.

5 Year Capital Improvement Plan

Perth Amboy Housing Authority

For the Period

TOTAL

April 1, 2017

to

March 31, 2018

Fiscal Year Beginning in **Estimated Total Current Budget** Year 2017 2018 Cost 2019 2020 2021 2022 **Public Housing Management** \$ \$ Type in Description Type in Description Type in Description Type in Description Total Section 8 Type in Description Type in Description Type in Description Type in Description Total Housing Voucher Type in Description Type in Description Type in Description Type in Description Total w. Other Programs Type in Description Type in Description Type in Description Type in Description Total

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Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.

5 Year Capital Improvement Plan Funding Sources

Perth Amboy Housing Authority

For the Period /

April 1, 2017

March 31, 2018

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Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.