

Authority Budget of:

ADOPTED COPY

Collingswood Housing Authority

State Filing Year

2020

For the Period:

April 1, 2020

to

March 31, 2021

www.collingswoodhousingauthority.com

Authority Web Address

APPROVED COPY



Division of Local Government Services

2020 HOUSING AUTHORITY BUDGET

Certification Section

APPROVED COPY

2020

COLLINGSWOOD
HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM _____ TO _____

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-11.

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

By: Paul D. Cwert CPA, RMA Date: 1/16/2020

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. Cwert CPA, RMA Date: 2/25/2020

2020 PREPARER'S CERTIFICATION


COLLINGSWOOD

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 4/1/20 TO: 3/31/21

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: |  | | |
| Name: | David W. Ciarrocca | | |
| Title: | C.P.A. | | |
| Address: | 1930 Wood Road Scotch Plains, N.J. 07076 | | |
| Phone Number: | 732-591-2300 | Fax Number: | 732-591-2525 |
| E-mail address | davidciarroccacpa@gmail.com | | |

2020 APPROVAL CERTIFICATION

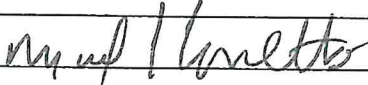
COLLINGSWOOD

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 4/1/20 TO: 3/31/21

It is hereby certified that the Housing Authority Budget, including all schedules appended hereto, are a true copy of the Annual Budget and Capital Budget/Program approved by resolution by the governing body of the Florence Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 10th day of December, 2019.

It is further certified that the recorded vote appearing in the resolution represents not less than a majority of the full membership of the governing body thereof.

| | | | |
|----------------------|---|-------------|--------------|
| Officer's Signature: |  | | |
| Name: | Mark J. Lonetto | | |
| Title: | Executive Director | | |
| Address: | 30 Washington Avenue Collingswood, N.J. 08108 | | |
| Phone Number: | 856-854-1077 | Fax Number: | 856-854-8283 |
| E-mail address | habofc@comcast.net | | |

INTERNET WEBSITE CERTIFICATION

| | |
|--------------------------|--------------------------------------|
| Authority's Web Address: | www.collingswoodhousingauthority.com |
|--------------------------|--------------------------------------|

All authorities shall maintain either an Internet website or a webpage on the municipality's or county's Internet website. The purpose of the website or webpage shall be to provide increased public access to the authority's operations and activities. N.J.S.A. 40A:5A-17.1 requires the following items to be included on the Authority's website at a minimum for public disclosure. Check the boxes below to certify the Authority's compliance with N.J.S.A. 40A:5A-17.1.

- ☒ A description of the Authority's mission and responsibilities
- ☒ Commencing with 2017, the budgets for the current fiscal year and immediately preceding two prior years
- ☒ The most recent Comprehensive Annual Financial Report (Unaudited) or similar financial information
- ☒ Commencing with 2016, the complete annual audits of the most recent fiscal year and immediately two prior years
- ☒ The Authority's rules, regulations and official policy statements deemed relevant by the governing body of the authority to the interests of the residents within the authority's service area or jurisdiction
- ☒ Notice posted pursuant to the "Open Public Meetings Act" for each meeting of the Authority, setting forth the time, date, location and agenda of each meeting
- ☒ Beginning January 1, 2016, the approved minutes of each meeting of the Authority including all resolutions of the board and their committees, for at least three consecutive fiscal years
- ☒ The name, mailing address, electronic mail address and phone number of every person who exercises day-to-day supervision or management over some or all of the operations of the Authority
- ☒ A list of attorneys, advisors, consultants and any other person, firm, business, partnership, corporation or other organization which received any remuneration of \$17,500 or more during the preceding fiscal year for any service whatsoever rendered to the Authority.

It is hereby certified by the below authorized representative of the Authority that the Authority's website or webpage as identified above complies with the minimum statutory requirements of N.J.S.A. 40A:5A-17.1 as listed above. A check in each of the above boxes signifies compliance.


Name of Officer Certifying compliance

Mark J. Lonetto

Title of Officer Certifying compliance

Executive Director

Signature



2020 HOUSING AUTHORITY BUDGET RESOLUTION COLLINGSWOOD HOUSING AUTHORITY

FISCAL YEAR: FROM: 04/01/20 TO: 03/31/21

WHEREAS, the Annual Budget and Capital Budget for the Collingswood Housing Authority for the fiscal year beginning, 4/1/20 and ending, 3/31/21 has been presented before the governing body of the Collingswood Housing Authority at its open public meeting of December 10, 2019; and

WHEREAS, the Annual Budget as introduced reflects Total Revenues of \$850,218, Total Appropriations, including any Accumulated Deficit if any, of \$874,687 and Total Unrestricted Net Position utilized of \$24,469; and

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of \$131,222 and Total Unrestricted Net Position planned to be utilized as funding thereof, of \$0; and

WHEREAS, the schedule of rents, fees and other charges in effect will produce sufficient revenues, together with all other anticipated revenues to satisfy all obligations to the holders of bonds of the Authority, to meet operating expenses, capital outlays, debt service requirements, and to provide for such reserves, all as may be required by law, regulation or terms of contracts and agreements; and

WHEREAS, the Capital Budget/Program, pursuant to N.J.A.C. 5:31-2, does not confer any authorization to raise or expend funds; rather it is a document to be used as part of the said Authority's planning and management objectives. Specific authorization to expend funds for the purposes described in this section of the budget, must be granted elsewhere; by bond resolution, by a project financing agreement, by resolution appropriating funds from the Renewal and Replacement Reserve or other means provided by law.

NOW, THEREFORE BE IT RESOLVED, by the governing body of the Collingswood Housing Authority, at an open public meeting held on December 10, 2019 that the Annual Budget, including all related schedules, and the Capital Budget/Program of the Collingswood Housing Authority for the fiscal year beginning, 4/1/20 and ending, 3/31/21 is hereby approved; and

BE IT FURTHER RESOLVED, that the anticipated revenues as reflected in the Annual Budget are of sufficient amount to meet all proposed expenditures/expenses and all covenants, terms and provisions as stipulated in the said Housing Authority's outstanding debt obligations, capital lease arrangements, service contracts, and other pledged agreements; and

BE IT FURTHER RESOLVED, that the governing body of the Collingswood Housing Authority will consider the Annual Budget and Capital Budget/Program for adoption on February 18, 2020.

nmf/lnetto
(Secretary's Signature)


12/10/2019
(Date)

| Governing Body | Recorded Vote | | | |
|---------------------------|---------------|-----|---------|--------|
| Member: | Aye | Nay | Abstain | Absent |
| Bradford Stokes, Chairman | ✓ | | | |
| Barbara Pine | ✓ | | | |
| Robert Rodriguez | ✓ | | | |
| Robert Tonsberg | ✓ | | | |
| John E. Warne III | ✓ | | | |

2020 ADOPTION CERTIFICATION
COLLINGSWOOD HOUSING AUTHORITY
HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 4/1/20 TO: 3/31/21

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 Collingswood Housing Authority, pursuant to N.J.A.C. 5:31-2.3, on the 18th day of, February, 2020.

| | | | |
|----------------------|---|-------------|--------------|
| Officer's Signature: |  | | |
| Name: | Mark J. Lonetto | | |
| Title: | Executive Director | | |
| Address: | 30 Washington Avenue Collingswood, N.J. 08108 | | |
| Phone Number: | 856-854-1077 | Fax Number: | 856-854-8283 |
| E-mail address | habofc@comcast.net | | |

2020 ADOPTED BUDGET RESOLUTION

COLLINGSWOOD

HOUSING AUTHORITY

FISCAL YEAR: FROM: 4/1/20 TO: 3/31/21

WHEREAS, the Annual Budget and Capital Budget/Program for the Collingswood Housing Authority for the fiscal year beginning April 1, 2020 and ending, March 31, 2021 has been presented for adoption before the governing body of the Collingswood Housing Authority at its open public meeting of February 18, 2020; and

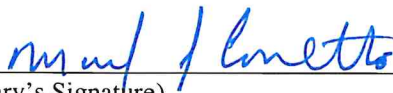
WHEREAS, the Annual Budget and Capital Budget as presented for adoption reflects each item of revenue and appropriation in the same amount and title as set forth in the introduced and approved budget, including all amendments thereto, if any, which have been approved by the Director of the Division of Local Government Services; and

WHEREAS, the Annual Budget as presented for adoption reflects Total Revenues of \$850,218, Total Appropriations, including any Accumulated Deficit, if any, of \$874,687 and Total Unrestricted Net Position utilized of \$24,469 and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$131,222 and Total Unrestricted Net Position planned to be utilized of \$0; and

NOW, THEREFORE BE IT RESOLVED, by the governing body of Collingswood Housing Authority, at an open public meeting held on February 18, 2020 that the Annual Budget and Capital Budget/Program of the Collingswood Housing Authority for the fiscal year beginning, April 1, 2020 and, ending, March 31, 2021 is hereby adopted and shall constitute appropriations for the purposes stated; and

BE IT FURTHER RESOLVED, that the Annual Budget and Capital Budget/Program as presented for adoption reflects each item of revenue and appropriation in the same amount and title as set forth in the introduced and approved budget, including all amendments thereto, if any, which have been approved by the Director of the Division of Local Government Services.


(Secretary's Signature)

2/18/2020
(Date)

| Governing Body | Recorded Vote | | | |
|---------------------------|---------------|-----|---------|--------|
| Member: | Aye | Nay | Abstain | Absent |
| Bradford Stokes, Chairman | ✓ | | | |
| Barbara Pine | | | | ✓ |
| Robert Rodriguez | ✓ | | | |
| Robert Tonsberg | ✓ | | | |
| John E. Warne III | ✓ | | | |

2020 HOUSING AUTHORITY BUDGET

Narrative and Information Section

2020 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS COLLINGSWOOD HOUSING AUTHORITY

AUTHORITY BUDGET

FISCAL YEAR: FROM: 4/1/20 TO: 3/31/21

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

1. Complete a brief statement on the 2020/2020-2021 proposed Annual Budget and make comparison to the 2019/2019-2020 adopted budget for each *Revenues and Appropriations*. Explain any variances over +/-10% (As shown on budget pages F-2 and F-4 explain the reason for changes for each revenue and appropriation changing more than 10%) for each individual revenue and appropriation line item. 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. (Example Rate Increase authorized by resolution or by HUD). **See attached.**
2. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. **No effect.**
3. 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. **To pay for budgeted extraordinary maintenance costs included in the budget.**
4. Identify any sources of funds transferred to the County/Municipality as a Pilot Payments, or a shared service and explain the reason for the transfer -- **Housing Authorities cannot transfer Unrestricted Net Position** (i.e.: to balance the County/Municipality budget, etc.). **P.I.L.O.T. is based on rental income and utility costs.**
5. The proposed budget must not reflect an anticipated deficit from 2020-2021 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. **While the authority remits an annual transmittal for pension, currently, no accumulated deficit exists.**

HOUSING AUTHORITY CONTACT INFORMATION

2020

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

| | | | |
|---------------------------|--------------------------------|-------------|--------------|
| Name of Authority: | Collingswood Housing Authority | | |
| Federal ID Number: | 22-2164426 | | |
| Address: | 30 Washington Avenue | | |
| City, State, Zip: | Collingswood | N.J. | 08108 |
| Phone: (ext.) | 856-854-1077 | Fax: | 856-854-8283 |

| | | | |
|----------------------------|---------------------------------|-------------|--------------|
| Preparer's Name: | David W. Ciarrocca, C.P.A., LLC | | |
| Preparer's Address: | 1930 Wood Road | | |
| City, State, Zip: | Scotch Plains | N.J. | 07076 |
| Phone: (ext.) | 732-591-2300 | Fax: | 732-591-2525 |
| E-mail: | davidciarroccacpa@gmail.com | | |

| | | | |
|---------------------------------|--------------------|-------------|--------------|
| Chief Executive Officer: | Mark J. Lonetto | | |
| Phone: (ext.) | 856-854-1077 | Fax: | 856-854-8283 |
| E-mail: | habofc@comcast.net | | |

| | | | |
|---------------------------------|--------------------|-------------|--------------|
| Chief Financial Officer: | Mark J. Lonetto | | |
| Phone: (ext.) | 856-854-1077 | Fax: | 856-854-8283 |
| E-mail: | habofc@comcast.net | | |

| | | | |
|--------------------------|------------------------------|-------------|---------------|
| Name of Auditor: | Anthony Giampaolo | | |
| Name of Firm: | Hymanson, Parnes & Giampaolo | | |
| Address: | 467 Middletown-Lincroft Road | | |
| City, State, Zip: | Lincroft | N.J. | 07738 |
| Phone: (ext.) | (732)842-4550 | Fax: | (732)842-4514 |
| E-mail: | tony@hphnj.com | | |

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

COLLINGSWOOD HOUSING AUTHORITY

FISCAL YEAR: FROM: 4/1/20 TO: 3/31/21

Answer all questions below completely and attach additional information as required.

- 1) Provide the number of individuals employed in (Use Most Recent W-3 Available 2018 or 2019) as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 5
- 2) Provide the amount of total salaries and wages as reported on the Authority's Form W-3, (Use Most Recent W-3 Available 2018 or 2019) Transmittal of Wage and Tax Statements: \$205,401
- 3) Provide the number of regular voting members of the governing body: 5 (Even if not all commissioners have been appointed (Total Commissioners are either 5 or 7 as per statute for your Authority))
- 4) Provide the number of alternate voting members of the governing body: 0 (Maximum is 2)
- 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year? No If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority.
- 6) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year (Most Recent Filing that March 31, 2019 or 2020 deadline has passed 2019 or 2020) because of their relationship with the Authority file the form as required? (Checked to see if individuals actually filed at <http://www.state.nj.us/dca/divisions/dlgs/resources/fds.html> before answering) Yes If "no," provide a list of those individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their failure to file.
- 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? No If "yes," attach a list of those individuals, their position, the amount receivable, and a description of the amount due to the Authority.
- 8) Was the Authority a party to a business transaction with one of the following parties:
 - a. A current or former commissioner, officer, key employee, or highest compensated employee? No
 - b. A family member of a current or former commissioner, officer, key employee, or highest compensated employee? No
 - c. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner? NoIf the answer to any of the above is "yes," attach a description of the transaction including the name of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process.
- 9) Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment contract that benefits, directly or indirectly, the transferor, a member of the transferor's family, or any other person designated by the transferor. No If "yes," attach a description of the arrangement, the premiums paid, and indicate the beneficiary of the contract.
- 10) Explain the Authority's process for determining compensation for all persons listed on Page N-4. Include whether the Authority's process includes any of the following: 1) review and approval by the commissioners or a committee thereof; 2) study or survey of compensation data for comparable positions in similarly sized entities; 3) annual or periodic performance evaluation; 4) independent compensation consultant; and/or 5) written employment contract. *Annual reviews determine salary adjustments.*

- 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.*
- 12) Did the Authority pay for travel expenses for any employee or individual listed on Page N-4? Yes *If "yes," attach a detailed list of all travel expenses for the current fiscal year and provide an explanation for each expenditure listed.*
- 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 travel No
 - b. Travel for companions No
 - c. Tax indemnification and gross-up payments No
 - d. Discretionary spending account No
 - e. Housing allowance or residence for personal use No
 - f. Payments for business use of personal residence No
 - g. Vehicle/auto allowance or vehicle for personal use No
 - h. Health or social club dues or initiation fees No
 - 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? No *If "yes," attach explanation including amount paid.*
- 17) Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances 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? Yes *If "no," attach a description of the Authority's plan to ensure compliance with its Continuing Disclosure Agreements in the future. (If no bonded Debt answer is Not Applicable) (Loans from a Bank or State Agencies are not bonded Debt)*
- 18) Did the Authority receive any notices from the Department of Environmental Protection or any other entity regarding maintenance or repairs required to the Authority's systems to bring them into compliance with current regulations and standards that it has not yet taken action to remediate? No *If "yes," 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 Environmental Protection or any other entity due to noncompliance with current regulations (i.e.: sewer overflow, etc.)? 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) Did the Authority receive any notices of fines or assessments from the Department of Housing and 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.*
- 21) Has the Authority been deemed "troubled" by the Department of Housing and Urban Development? No *If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.*

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

FISCAL YEAR: FROM: 4/1/20 TO: 3/31/21

Complete the attached table for all persons required to be listed per #1-4 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 former 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 former 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, 2019 Most recent available W-2 and 1099 should be used (2017 or 2018 Forms)(60 days prior to start of budget year is November 1, 2018, with 2017 being the most recent calendar year ended), and for fiscal years ending June 30, 2019, the calendar year 2018 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2019, with 2018 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.

Authority Schedule of Commissioners, Officers, Key Employees, Highest Compensated Employees and Independent Contractors (Continued)

Collingswood Housing Authority

For the Period April 1, 2020 to March 31, 2021

Reportable Compensation from Authority (W-2/ 1099)

| Name | Title | Average Hours per Week Dedicated to Position | Position | | | Base Salary/ Stipend | Reportable Compensation from Authority (W-2/ 1099) | | | Estimated amount of other compensation from the Authority (health benefits, pension, etc.) | Total Compensation from Authority | Names of Other Public Entities where Individual is an Employee or Member of the Governing Body (1) See note below | Positions held at Other Public Entities Listed in Column O | Average Hours per Week Dedicated to Positions at Other Public Entities Listed in Column O | Reportable Compensation from Other Public Entities (W-2/ 1099) | Estimated amount of other compensation from Other Public Entities (health benefits, pension, payment in lieu of health benefits, etc.) | Total Compensation All Public Entities |
|---------------------|--------------------|--|--------------|---------|--------------|------------------------------|--|---|-------|--|-----------------------------------|---|--|---|--|--|--|
| | | | Commissioner | Officer | Key Employee | Highest Compensated Employee | Former | Other (auto allowance, expense account, payment in lieu of health benefits, etc.) | Bonus | | | | | | | | |
| 1 Mark J. Lonetto | Executive Director | 35 | | | | | | | | | \$15,000 | | | | | | \$17,000 |
| 2 Bradford Stokes | Board Chairman | 2 | X | | | | | | | | | 0 None | | | | | 0 |
| 3 Barbara Pine | Commissioner | 2 | X | | | | | | | | | 0 None | | | | | 0 |
| 4 Robert Rodriguez | Commissioner | 2 | X | | | | | | | | | 0 None | | | | | 0 |
| 5 Robert Tonsberg | Commissioner | 2 | X | | | | | | | | | 0 None | | | | | 0 |
| 6 John E. Warne III | Commissioner | 2 | X | | | | | | | | | 0 None | | | | | 0 |
| 7 | | | | | | | | | | | | 0 | | | | | 0 |
| 8 | | | | | | | | | | | | 0 | | | | | 0 |
| 9 | | | | | | | | | | | | 0 | | | | | 0 |
| 10 | | | | | | | | | | | | 0 | | | | | 0 |
| 11 | | | | | | | | | | | | 0 | | | | | 0 |
| 12 | | | | | | | | | | | | 0 | | | | | 0 |
| 13 | | | | | | | | | | | | 0 | | | | | 0 |
| 14 | | | | | | | | | | | | 0 | | | | | 0 |
| 15 | | | | | | | | | | | | 0 | | | | | 0 |
| Total: | | | | | | | | | | | \$15,000 | | | | | | \$17,000 |

(1) Insert "None" in this column for each individual that does not hold a position with another Public Entity

Schedule of Health Benefits - Detailed Cost Analysis

Collingswood Housing Authority
 For the Period April 1, 2020 to March 31, 2021

Inout- X - in Box Below IF this Page is Non-Applicable

X

| | # of Covered Members (Medical & Rx) Proposed Budget | Annual Cost Estimate per Employee Proposed Budget | Total Cost Estimate Proposed Budget | # of Covered Members (Medical & Rx) Current Year | Annual Cost per Employee Current Year | Total Prior Year Cost | \$ Increase (Decrease) | % Increase (Decrease) |
|--|---|---|-------------------------------------|--|---------------------------------------|-----------------------|------------------------|-----------------------|
| Active Employees - Health Benefits - Annual Cost | | | | | | | | |
| Single Coverage | 0 | | \$ | 0 | | \$ | - | #DIV/0! |
| Parent & Child | 0 | | - | 0 | | - | - | #DIV/0! |
| Employee & Spouse (or Partner) | 0 | | - | 0 | | - | - | #DIV/0! |
| Family | 0 | | - | 0 | | - | - | #DIV/0! |
| Employee Cost Sharing Contribution (enter as negative -) | 0 | | | 0 | | | - | #DIV/0! |
| Subtotal | 0 | | | 0 | | | - | #DIV/0! |
| Commissioners - Health Benefits - Annual Cost | | | | | | | | |
| Single Coverage | 0 | | - | 0 | | - | - | #DIV/0! |
| Parent & Child | 0 | | - | 0 | | - | - | #DIV/0! |
| Employee & Spouse (or Partner) | 0 | | - | 0 | | - | - | #DIV/0! |
| Family | 0 | | - | 0 | | - | - | #DIV/0! |
| Employee Cost Sharing Contribution (enter as negative -) | 0 | | | 0 | | | - | #DIV/0! |
| Subtotal | 0 | | | 0 | | | - | #DIV/0! |
| Retirees - Health Benefits - Annual Cost | | | | | | | | |
| Single Coverage | 0 | | - | | | - | - | #DIV/0! |
| Parent & Child | 0 | | - | | | - | - | #DIV/0! |
| Employee & Spouse (or Partner) | 0 | | - | | | - | - | #DIV/0! |
| Family | 0 | | - | | | - | - | #DIV/0! |
| Employee Cost Sharing Contribution (enter as negative -) | 0 | | | 0 | | | - | #DIV/0! |
| Subtotal | 0 | | | 0 | | | - | #DIV/0! |
| GRAND TOTAL | 0 | | \$ | 0 | | \$ | - | #DIV/0! |

Is medical coverage provided by the SHBP (Yes or No)? (Place Answer in Box)
 Is prescription drug coverage provided by the SHBP (Yes or No)? (Place Answer in Box)

| | |
|----|-----------|
| No | Yes or No |
| No | Yes or No |

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

Schedule of Accumulated Liability for Compensated Absences

Collingswood Housing Authority

For the Period

April 1, 2020

to

March 31, 2021

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

| Individuals Eligible for Benefit | Gross Days of Accumulated Compensated Absences at beginning of Current Year | Dollar Value of Accrued Compensated Absence Liability | Legal Basis for Benefit (check applicable items) | | |
|--|---|---|---|------------|---------------------------------|
| | | | Approved Labor Agreement | Resolution | Individual Employment Agreement |
| None | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total liability for accumulated compensated absences at beginning of current year \$ | | - | | | |

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

Schedule of Shared Service Agreements

For the Period

April 1, 2020

×

If No Shared Services X this Box

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

Collingswood Housing Authority

to

March 31, 2021

[illegible]

2020 HOUSING AUTHORITY BUDGET

Financial Schedules Section

SUMMARY

For the Period April 1, 2020 to March 31, 2021
Collingswood Housing Authority

| | Public Housing Management | Section 8 | Housing Voucher | Other Programs | Total All Operations | FY 2019 Adopted Budget | Total All Operations | \$ Increase (Decrease) Proposed vs. Adopted | % Increase (Decrease) Proposed vs. Adopted |
|--|---------------------------|--------------|-----------------|----------------|----------------------|------------------------|----------------------|---|--|
| FY 2020 Proposed Budget | | | | | | | | | |
| REVENUES | | | | | | | | | |
| Total Operating Revenues | \$ 768,691 | \$ - | \$ - | \$ - | \$ 768,691 | \$ 761,106 | \$ 7,585 | | 1.0% |
| Total Non-Operating Revenues | 81,527 | - | - | - | 81,527 | 75,010 | 6,517 | | 8.7% |
| Total Anticipated Revenues | 850,218 | - | - | - | 850,218 | 836,116 | 14,102 | | 1.7% |
| APPROPRIATIONS | | | | | | | | | |
| Total Administration | 199,350 | - | - | - | 199,350 | 197,010 | 2,340 | | 1.2% |
| Total Cost of Providing Services | 675,337 | - | - | - | 675,337 | 636,434 | 38,903 | | 6.1% |
| Total Principal Payments on Debt Service in Lieu of Depreciation | XXXXXXXXXXXX | XXXXXXXXXXXX | XXXXXXXXXXXX | XXXXXXXXXXXX | - | - | - | | #DIV/0! |
| Total Operating Appropriations | 874,687 | - | - | - | 874,687 | 833,444 | 41,243 | | 4.9% |
| Total Interest Payments on Debt | XXXXXXXXXXXX | XXXXXXXXXXXX | XXXXXXXXXXXX | XXXXXXXXXXXX | - | - | - | | #DIV/0! |
| Total Other Non-Operating Appropriations | - | - | - | - | - | - | - | | #DIV/0! |
| Total Non-Operating Appropriations | - | - | - | - | - | - | - | | #DIV/0! |
| Accumulated Deficit | - | - | - | - | - | - | - | | #DIV/0! |
| Total Appropriations and Accumulated Deficit | 874,687 | - | - | - | 874,687 | 833,444 | 41,243 | | 4.9% |
| Less: Total Unrestricted Net Position Utilized | 24,469 | - | - | - | 24,469 | - | 24,469 | | #DIV/0! |
| Net Total Appropriations | 850,218 | - | - | - | 850,218 | 833,444 | 16,774 | | 2.0% |
| ANTICIPATED SURPLUS (DEFICIT) | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 2,672 | \$ (2,672) | | -100.0% |

Revenue Schedule

Collingswood Housing Authority

For the Period

April 1, 2020

to

March 31, 2021

| FY 2020 Proposed Budget | | | | | | FY 2019 Adopted Budget | \$ Increase (Decrease) Proposed 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 |
| OPERATING REVENUES | | | | | | | | |
| <i>Rental Fees</i> | | | | | | | | |
| Homebuyers' Monthly Payments | | | | | \$ - | \$ - | \$ - | #DIV/0! |
| Dwelling Rental | 431,769 | | | | 431,769 | 431,769 | - | 0.0% |
| Excess Utilities | 17,000 | | | | 17,000 | 18,000 | (1,000) | -5.6% |
| Non-Dwelling Rental | | | | | - | - | - | #DIV/0! |
| HUD Operating Subsidy | 188,700 | | | | 188,700 | 187,000 | 1,700 | 0.9% |
| New Construction - Acc Section 8 | | | | | - | - | - | #DIV/0! |
| Voucher - Acc Housing Voucher | | | | | - | - | - | #DIV/0! |
| Total Rental Fees | 637,469 | - | - | - | 637,469 | 636,769 | 700 | 0.1% |
| <i>Other Operating Revenues (List)</i> | | | | | | | | |
| HUD CFP Operations | 131,222 | | | | 131,222 | 124,337 | 6,885 | 5.5% |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Type In (Grant, Other Rev) | | | | | - | - | - | #DIV/0! |
| Total Other Revenue | 131,222 | - | - | - | 131,222 | 124,337 | 6,885 | 5.5% |
| Total Operating Revenues | 768,691 | - | - | - | 768,691 | 761,106 | 7,585 | 1.0% |
| NON-OPERATING REVENUES | | | | | | | | |
| <i>Other Non-Operating Revenues (List)</i> | | | | | | | | |
| Roof Antenna Rentals | 70,627 | | | | 70,627 | 65,810 | 4,817 | 7.3% |
| Laundry Commissions, Late Fees, Etc. | 9,700 | | | | 9,700 | 8,000 | 1,700 | 21.3% |
| Type In | | | | | - | - | - | #DIV/0! |
| Type In | | | | | - | - | - | #DIV/0! |
| Type In | | | | | - | - | - | #DIV/0! |
| Type In | | | | | - | - | - | #DIV/0! |
| Total Other Non-Operating Revenue | 80,327 | - | - | - | 80,327 | 73,810 | 6,517 | 8.8% |
| <i>Interest on Investments & Deposits (List)</i> | | | | | | | | |
| Interest Earned | 1,200 | | | | 1,200 | 1,200 | - | 0.0% |
| Penalties | | | | | - | - | - | #DIV/0! |
| Other | | | | | - | - | - | #DIV/0! |
| Total Interest | 1,200 | - | - | - | 1,200 | 1,200 | - | 0.0% |
| Total Non-Operating Revenues | 81,527 | - | - | - | 81,527 | 75,010 | 6,517 | 8.7% |
| TOTAL ANTICIPATED REVENUES | \$ 850,218 | \$ - | \$ - | \$ - | \$ 850,218 | \$ 836,116 | \$ 14,102 | 1.7% |

Prior Year Adopted Revenue Schedule

Collingswood Housing Authority

FY 2019 Adopted Budget

| | Public Housing Management | Section 8 | Housing Voucher | Other Programs | Total All Operations |
|---|------------------------------|-------------|--------------------|----------------|-------------------------|
| OPERATING REVENUES | | | | | |
| <i>Rental Fees</i> | | | | | |
| Homebuyers' Monthly Payments | | | | | \$ - |
| Dwelling Rental | 431,769 | | | | 431,769 |
| Excess Utilities | 18,000 | | | | 18,000 |
| Non-Dwelling Rental | | | | | - |
| HUD Operating Subsidy | 187,000 | | | | 187,000 |
| New Construction - Acc Section 8 | | | | | - |
| Voucher - Acc Housing Voucher | | | | | - |
| Total Rental Fees | 636,769 | - | - | - | 636,769 |
| <i>Other Revenue (List)</i> | | | | | |
| HUD CFP Operations | 124,337 | | | | 124,337 |
| 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) | | | | | - |
| 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) | | | | | - |
| Total Other Revenue | 124,337 | - | - | - | 124,337 |
| Total Operating Revenues | 761,106 | - | - | - | 761,106 |
| NON-OPERATING REVENUES | | | | | |
| <i>Other Non-Operating Revenues (List)</i> | | | | | |
| Roof Antenna Rentals | 65,810 | | | | 65,810 |
| Laundry Commissions, Late Fees, Etc. | 8,000 | | | | 8,000 |
| Type In | | | | | - |
| Type In | | | | | - |
| Type In | | | | | - |
| Type In | | | | | - |
| Total Other Non-Operating Revenues | 73,810 | - | - | - | 73,810 |
| <i>Interest on Investments & Deposits</i> | | | | | |
| Interest Earned | 1,200 | | | | 1,200 |
| Penalties | | | | | - |
| Other | | | | | - |
| Total Interest | 1,200 | - | - | - | 1,200 |
| Total Non-Operating Revenues | 75,010 | - | - | - | 75,010 |
| TOTAL ANTICIPATED REVENUES | \$ 836,116 | \$ - | \$ - | \$ - | \$ 836,116 |

Collingswood Housing Authority

For the Period April 1, 2020 to March 31, 2021

| | | | | | | | | | | |
|--------------------------------------|----|-----------|----|---|----|---|----|---|----|-----------|
| 5% of Total Operating Appropriations | \$ | 43,734.35 | \$ | - | \$ | - | \$ | - | \$ | 43,734.35 |
|--------------------------------------|----|-----------|----|---|----|---|----|---|----|-----------|

Prior Year Adopted Appropriations Schedule

Collingswood Housing Authority

FY 2019 Adopted Budget

| | Public Housing Management | Section 8 | Housing Voucher | Other Programs | Total All Operations |
|--|------------------------------|------------------|------------------|------------------|-------------------------|
| OPERATING APPROPRIATIONS | | | | | |
| <i>Administration</i> | | | | | |
| Salary & Wages | \$ 113,920 | | | | \$ 113,920 |
| Fringe Benefits | 21,420 | | | | 21,420 |
| Legal | 9,900 | | | | 9,900 |
| Staff Training | 3,000 | | | | 3,000 |
| Travel | 1,000 | | | | 1,000 |
| Accounting Fees | 15,470 | | | | 15,470 |
| Auditing Fees | 5,300 | | | | 5,300 |
| Miscellaneous Administration* | 27,000 | | | | 27,000 |
| Total Administration | 197,010 | - | - | - | 197,010 |
| <i>Cost of Providing Services</i> | | | | | |
| Salary & Wages - Tenant Services | | | | | - |
| Salary & Wages - Maintenance & Operation | 100,502 | | | | 100,502 |
| Salary & Wages - Protective Services | | | | | - |
| Salary & Wages - Utility Labor | 11,167 | | | | 11,167 |
| Fringe Benefits | 20,580 | | | | 20,580 |
| Tenant Services | 25,000 | | | | 25,000 |
| Utilities | 199,320 | | | | 199,320 |
| Maintenance & Operation | 94,000 | | | | 94,000 |
| Protective Services | 1,100 | | | | 1,100 |
| Insurance | 28,000 | | | | 28,000 |
| Payment in Lieu of Taxes (PILOT) | 23,928 | | | | 23,928 |
| Terminal Leave Payments | | | | | - |
| Collection Losses | 500 | | | | 500 |
| Other General Expense | | | | | - |
| Rents | | | | | - |
| Extraordinary Maintenance | 124,337 | | | | 124,337 |
| Replacement of Non-Expendible Equipment | 8,000 | | | | 8,000 |
| Property Betterment/Additions | | | | | - |
| Miscellaneous COPS* | | | | | - |
| Total Cost of Providing Services | 636,434 | - | - | - | 636,434 |
| Total Principal Payments on Debt Service in Lieu of Depreciation | XXXXXXXXXXXXXXXX | XXXXXXXXXXXXXXXX | XXXXXXXXXXXXXXXX | XXXXXXXXXXXXXXXX | - |
| Total Operating Appropriations | 833,444 | - | - | - | 833,444 |
| NON-OPERATING APPROPRIATIONS | | | | | |
| Total Interest Payments on Debt | XXXXXXXXXXXXXXXX | XXXXXXXXXXXXXXXX | XXXXXXXXXXXXXXXX | XXXXXXXXXXXXXXXX | - |
| Operations & Maintenance Reserve | | | | | - |
| Renewal & Replacement Reserve | | | | | - |
| Municipality/County Appropriation | | | | | - |
| Other Reserves | | | | | - |
| Total Non-Operating Appropriations | - | - | - | - | - |
| TOTAL APPROPRIATIONS | 833,444 | - | - | - | 833,444 |
| ACCUMULATED DEFICIT | | | | | - |
| TOTAL APPROPRIATIONS & ACCUMULATED DEFICIT | 833,444 | - | - | - | 833,444 |
| UNRESTRICTED NET POSITION UTILIZED | | | | | |
| Municipality/County Appropriation | - | - | - | - | - |
| Other | | | | | - |
| Total Unrestricted Net Position Utilized | - | - | - | - | - |
| TOTAL NET APPROPRIATIONS | \$ 833,444 | \$ - | \$ - | \$ - | \$ 833,444 |

* 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 \$ 41,672.20 \$ - \$ - \$ - \$ - \$ 41,672.20

Debt Service Schedule - Principal

Collingswood Housing Authority

If Authority has no debt X this box

X

| | Fiscal Year Ending in | | | | | | Total Principal Outstanding |
|--------------------|-----------------------------|---------------------------------|------|------|------|------|--------------------------------|
| | Adopted Budget Year 2019 | Proposed Budget Year 2020 | 2021 | 2022 | 2023 | 2024 | |
| Type in Issue Name | | | | | | | |
| Type in Issue Name | | | | | | | |
| Type in Issue Name | | | | | | | |
| Type in Issue Name | | | | | | | |
| TOTAL PRINCIPAL | | | | | | | |
| LESS: HUD SUBSIDY | | | | | | | |
| NET PRINCIPAL | | | | | | | |

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

| | | | |
|---------------------|---------|-------|------------------|
| Bond Rating | Moody's | Fitch | Standard & Poors |
| Year of Last Rating | | | |

If no Rating type in Not Applicable

Debt Service Schedule - Interest

Collingswood Housing Authority

If Authority has no debt X this box

X

| | Fiscal Year Ending in | | | | | Proposed Budget Year 2020 | Adopted Budget Year 2019 | Total Interest Payments Outstanding |
|--------------------|-----------------------|------|------|------|------|---------------------------------|-----------------------------|---|
| | 2021 | 2022 | 2023 | 2024 | 2025 | Thereafter | | |
| Type in Issue Name | | | | | | | | |
| Type in Issue Name | | | | | | | | |
| Type in Issue Name | | | | | | | | |
| Type in Issue Name | | | | | | | | |
| TOTAL INTEREST | | | | | | | | |
| LESS: HUD SUBSIDY | | | | | | | | |
| NET INTEREST | | | | | | | | |

Net Position Reconciliation

Collingswood Housing Authority

For the Period

April 1, 2020

to

March 31, 2021

FY 2020 Proposed Budget

| | Public Housing Management | Section 8 | Housing Voucher | Other Programs | Total All Operations |
|--|------------------------------|-----------|--------------------|----------------|-------------------------|
| TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1) | \$ 1,328,524 | \$ - | \$ - | \$ - | \$ 1,328,524 |
| Less: Invested in Capital Assets, Net of Related Debt (1) | 1,285,696 | | | | 1,285,696 |
| Less: Restricted for Debt Service Reserve (1) | | | | | - |
| Less: Other Restricted Net Position (1) | | | | | - |
| Total Unrestricted Net Position (1) | 42,828 | - | - | - | 42,828 |
| Less: Designated for Non-Operating Improvements & Repairs | | | | | - |
| Less: Designated for Rate Stabilization | | | | | - |
| Less: Other Designated by Resolution | | | | | - |
| Plus: Accrued Unfunded Pension Liability (1) | 445,516 | | | | 445,516 |
| Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1) | | | | | - |
| Plus: Estimated Income (Loss) on Current Year Operations (2) | | | | | - |
| Plus: Other Adjustments (attach schedule) | | | | | - |
| UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET | 488,344 | - | - | - | 488,344 |
| Unrestricted Net Position Utilized to Balance Proposed Budget | 24,469 | - | - | - | 24,469 |
| Unrestricted Net Position Utilized in Proposed Capital Budget | - | - | - | - | - |
| Appropriation to Municipality/County (3) | - | - | - | - | - |
| Total Unrestricted Net Position Utilized in Proposed Budget | 24,469 | - | - | - | 24,469 |
| PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR | | | | | |
| (4) | \$ 463,875 | \$ - | \$ - | \$ - | \$ 463,875 |

(1) 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 \$ 43,734 \$ - \$ - \$ - \$ 43,734

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

2020
COLLINSWOOD

HOUSING
AUTHORITY
CAPITAL
BUDGET/
PROGRAM

2020 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

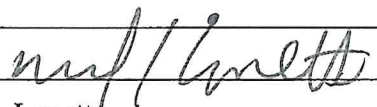
COLLINGSWOOD HOUSING AUTHORITY

FISCAL YEAR: FROM: 4/1/20 TO: 3/31/21

☒ It is hereby certified that the Housing Authority Capital Budget/Program annexed hereto is a true copy of the Capital Budget/Program approved, pursuant to N.J.A.C. 5:31-2.2, along with the Annual Budget, by the governing body of the Collingswood Housing Authority, on the 10th day of December, 2019.

OR

☐ It is hereby certified that the governing body of the _____ Housing Authority have elected **NOT** to adopt a Capital Budget /Program for the aforesaid fiscal year, pursuant to N.J.A.C. 5:31-2.2 for the following reason(s): _____

| | | | |
|----------------------|--|-------------|--------------|
| Officer's Signature: |  | | |
| Name: | Mark. J. Lonetto | | |
| Title: | Executive Director | | |
| Address: | 30 Washington Avenue Collingswood, N.J. 08108 | | |
| Phone Number: | 856-854-1077 | Fax Number: | 856-854-8283 |
| E-mail address | habofc@comcast.net | | |

2020 CAPITAL BUDGET/PROGRAM MESSAGE

Collingswood Housing Authority

FISCAL YEAR: FROM: 4/1/20 TO: 3/31/21

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 each municipality or county affected by the actions of the authority participated in the development of the capital plan and reviewed or approved the plans or projects included within the Capital Budget/Program (This may include the governing body or certain officials such as planning boards, Construction Code Officials) as to these Projects? **No.**
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? **Yes, a five year capital plan approved by HUD.**
3. Has a long-term (5 years or more) infrastructure needs and other capital items (Vehicles, Equipment) needs assessment been prepared? **Yes, a five year plan.**
4. If amounts are on Page CB-3 in the column Debt Authorizations. Indicate the primary source of funding the debt service for the Debt Authorizations (Example HUD Funding or Other sources) **N/A**
5. Have the current capital projects been reviewed and approved by HUD? **Yes.**

Add additional sheets if necessary.

Proposed Capital Budget

Collingswood Housing Authority
For the Period April 1, 2020 to March 31, 2021

| | | <i>Funding Sources</i> | | | | |
|--------------------------------------|----------------------|------------------------------------|-------------------------------|--------------------|-------------------|---------------|
| | Estimated Total Cost | Unrestricted Net Position Utilized | Renewal & Replacement Reserve | Debt Authorization | Capital Grants | Other Sources |
| <i>Public Housing Management</i> | | | | | | |
| Operations/Structures & Facilities | \$ 131,222 | | | | \$ 131,222 | |
| Type In Description | - | | | | | |
| Type In Description | - | | | | | |
| Type In Description | - | | | | | |
| Total | 131,222 | - | - | - | 131,222 | - |
| <i>Section 8</i> | | | | | | |
| Type In Description | - | | | | | |
| Type In Description | - | | | | | |
| Type In Description | - | | | | | |
| Type In Description | - | | | | | |
| Total | - | - | - | - | - | - |
| <i>Housing Voucher</i> | | | | | | |
| Type In Description | - | | | | | |
| Type In Description | - | | | | | |
| Type In Description | - | | | | | |
| Type In Description | - | | | | | |
| Total | - | - | - | - | - | - |
| <i>Other Programs</i> | | | | | | |
| Type In Description | - | | | | | |
| Type In Description | - | | | | | |
| Type In Description | - | | | | | |
| Type In Description | - | | | | | |
| Total | - | - | - | - | - | - |
| TOTAL PROPOSED CAPITAL BUDGET | \$ 131,222 | \$ - | \$ - | \$ - | \$ 131,222 | \$ - |

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

Collingswood Housing Authority

For the Period April 1, 2020 to March 31, 2021

Fiscal Year Beginning in

| | Estimated Total Cost | Current Budget Year 2020 | 2021 | 2022 | 2023 | 2024 | 2025 |
|------------------------------------|-------------------------|-----------------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
| <i>Public Housing Management</i> | | | | | | | |
| Operations/Structures & Facilities | \$ 787,332 | \$ 131,222 | \$ 131,222 | \$ 131,222 | \$ 131,222 | \$ 131,222 | \$ 131,222 |
| Type In Description | - | - | | | | | |
| Type In Description | - | - | | | | | |
| Type In Description | - | - | | | | | |
| Total | 787,332 | 131,222 | 131,222 | 131,222 | 131,222 | 131,222 | 131,222 |
| <i>Section 8</i> | | | | | | | |
| Type In Description | - | - | | | | | |
| Type In Description | - | - | | | | | |
| Type In Description | - | - | | | | | |
| Type In Description | - | - | | | | | |
| Total | - | - | - | - | - | - | - |
| <i>Housing Voucher</i> | | | | | | | |
| Type In Description | - | - | | | | | |
| Type In Description | - | - | | | | | |
| Type In Description | - | - | | | | | |
| Type In Description | - | - | | | | | |
| Total | - | - | - | - | - | - | - |
| <i>Other Programs</i> | | | | | | | |
| Type In Description | - | - | | | | | |
| Type In Description | - | - | | | | | |
| Type In Description | - | - | | | | | |
| Type In Description | - | - | | | | | |
| Total | - | - | - | - | - | - | - |
| TOTAL | \$ 787,332 | \$ 131,222 | \$ 131,222 | \$ 131,222 | \$ 131,222 | \$ 131,222 | \$ 131,222 |

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

Collingswood Housing Authority
For the Period April 1, 2020 to March 31, 2021

| | | Funding Sources | | | | |
|------------------------------------|----------------------|--|-------------------------------|--------------------|-------------------|---------------|
| | Estimated Total Cost | Unrestricted Net Position Utilized | Renewal & Replacement Reserve | Debt Authorization | Capital Grants | Other Sources |
| Public Housing Management | | | | | | |
| Operations/Structures & Facilities | \$ 787,332 | | | | | \$ 787,332 |
| Type in Description | - | | | | | |
| Type in Description | - | | | | | |
| Type in Description | - | | | | | |
| Total | 787,332 | - | - | - | 787,332 | - |
| 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 | - | - | - | - | - | - |
| Other Programs | | | | | | |
| Type in Description | - | | | | | |
| Type in Description | - | | | | | |
| Type in Description | - | | | | | |
| Type in Description | - | | | | | |
| Total | - | - | - | - | - | - |
| TOTAL | \$ 787,332 | \$ - | \$ - | \$ - | \$ 787,332 | \$ - |
| Total 5 Year Plan per CB-4 | \$ 787,332 | | | | | |
| Balance check | | - If amount is other than zero, verify that projects listed above match projects listed on CB-4. | | | | |

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.

COLLINGSWOOD HOUSING AUTHORITY

EXPLANATION OF BUDGET VARIANCES

SUPPLEMENT TO PAGE N-1

2020

| BUDGET ITEM | PERCENTAGE INCREASE/ (DECREASE) | EXPLANATION |
|---------------------------------------|---------------------------------------|---|
| LAUNDRY COMMISSIONES, LATE FEES, ETC. | 21.30% | INCREASE IN LATE CHARGES AND LAUNDRY COLLECTIONS. |
| MAINTENANCE & OPERATION | 26.60% | ALLOCATION CHANGES FROM EXTRAORDINARY MAINTENANCE |
| INSURANCE | 28.60% | INCREASE IN JIF PACKAGE POLICY. |

11/5/2019

Check Image

CASH ONLY IF ALL OTHER SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COVING

HOUSING AUTHORITY OF THE
BOROUGH OF COLLINGSWOOD
80 WASHINGTON AVE
COLLINGSWOOD, NJ 08108-1846
(856) 864-1077

1ST COLONIAL COMMUNITY BANK
COLLINGSWOOD, NJ 08108
55-786312

14916

12/10/18

PAY TO THE ORDER OF St. John \$ 700.00

seventy hundred and 00/100 DOLLARS

10 PROTECTANT MARKS FOR FRAUD

MEMO

⑈014916⑈ ⑈031207869⑈ 0122000088⑈

2587561605

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