Authority Budget of:

Adopted

Neptune Housing Authority

State Filing Year

2020

For the Period:

October 1, 2020

September 30, 2021

to

APPAdenteopy

Adopted

www.neptune housing.com

Authority Web Address



Division of Local Government Services

2020

Neptune Housing Authority Budget

www.neptunehousingauthority.com





Division of Local Government Services

2020 HOUSING AUTHORITY BUDGET

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Certification Section

2020

Neptune

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM October 1, 2020 TO September 30, 2021

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 <u>N.J.S.A.</u> 40A:5A-11.

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

Tave D. Curent CPA, RMA Date: 11/17/2020 By:

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: Tand D. Gwent CPVA RMA Date: 1/19/2021

Page C-1

2020 PREPARER'S CERTIFICATION

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Neptune

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 10/1/20 **TO:** 9/30/21

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.

	A STATE OF A CALLED		
Preparer's Signature:			
Name:	David W. Ciarrocca		
Title:	C.P.A.		
Address:	1930 Wood Road		
	Scotch Plains, N.J. 0707	/6	
Phone Number:	732-591-2300	Fax Number:	732-591-2525
E-mail address	davidciarroccacpa@gma	ail.com	

2020 APPROVAL CERTIFICATION

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Neptune

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 10/1/20 **TO:** 9/30/21

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 Neptune Housing Authority, at an open public meeting held pursuant to <u>N.J.A.C.</u> 5:31-2.3, on the <u>20th</u> day of <u>October</u>, <u>2020</u>.

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:	190		
Name:	Bart J. Cook		
Title:	Executive Director		
Address:	1810 Alberta Avenue		
	Neptune, N.J. 07753		
Phone Number:	732-774-7692	Fax Number:	732-774-9456
E-mail address	bcook1@tnha.org		

INTERNET WEBSITE CERTIFICATION

	Web Address:	www.neptunehousing.com
website. The operations an	e purpose of the webs ad activities. N.J.S.A. minimum for public of	or an Internet website or a webpage on the municipality's or county's Internet site or webpage shall be to provide increased public access to the authority's 40A:5A-17.1 requires the following items to be included on the Authority's lisclosure. Check the boxes below to certify the Authority's compliance with
\boxtimes	A description of the	Authority's mission and responsibilities
\boxtimes	Commencing with 2 prior years	018, the budgets for the current fiscal year and immediately preceding two
	The most recent Cor information	nprehensive Annual Financial Report (Unaudited) or similar financial
\boxtimes	Commencing with 2 two prior years	017, the complete annual audits of the most recent fiscal year and immediately
		s, regulations and official policy statements deemed relevant by the governing to the interests of the residents within the authority's service area or
\boxtimes		nt to the "Open Public Meetings Act" for each meeting of the Authority, , date, location and agenda of each meeting
\boxtimes		, 2018, the approved minutes of each meeting of the Authority including all ard and their committees, for at least three consecutive fiscal years
\boxtimes		ddress, electronic mail address and phone number of every person who supervision or management over some or all of the operations of the
\boxtimes	corporation or other	lvisors, consultants <u>and any other person, firm, business, partnership,</u> organization which received any remuneration of \$17,500 or more during the <u>for any service whatsoever</u> rendered to the Authority.
It is hereby o	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 <u>N.J.S.A. 40A:5A-17.1</u> as listed above. A check in each of the above boxes signifies compliance.

Name of Officer Certifying compliance

Title of Officer Certifying compliance

Signature

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Bart J. Cook

Executive Director

Page C-4

Resolution # 2091 2020 HOUSING AUTHORITY BUDGET RESOLUTION Neptune

FISCAL YEAR: FROM: 10/1/20 **TO:** 9/30/21

WHEREAS, the Annual Budget and Capital Budget for the Neptune Housing Authority for the fiscal year beginning, $\frac{10/1/20}{10/20}$ and ending, $\frac{9/30/21}{10/20/20}$ has been presented before the governing body of the Neptune Housing Authority at its open public meeting of $\frac{10/20/20}{10/20/20}$ and

WHEREAS, the Annual Budget as introduced reflects Total Revenues of $\frac{6,375,800}{5,375,800}$, Total Appropriations, including any Accumulated Deficit if any, of $\frac{66,301,735}{5,301,735}$ and Total Unrestricted Net Position utilized of $\frac{50}{50}$; and

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of <u>\$859,684</u> and Total Unrestricted Net Position planned to be utilized as funding thereof, of <u>\$0</u> 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 <u>N.J.A.C.</u> 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 Neptune Housing Authority, at an open public meeting held on 10/20/20 that the Annual Budget, including all related schedules, and the Capital Budget/Program of the Neptune Housing Authority for the fiscal year beginning, 10/1/20 and ending, 9/30/21 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 Neptune Housing Authority will consider the Annual Budget and Capital Budget/Program for adoption on $\frac{12/15/20}{2}$.

(Secretary's Signature)

Governing Body

Member:

Recorded Vote Aye Nay

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Abstain Absent

Beverly J. Holland, Chair Winifred P. Johnson, Vice Chair Carol A. Foster Derrick T. Griggs Eileen M. Holly Keith G. Vuono Rev. Johnny R. Wright

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10/20/90 (Date)

2020 ADOPTION CERTIFICATION

Neptune

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 10/1/20 **TO:** 9/30/21

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 Neptune Housing Authority, pursuant to N.J.A.C. 5:31-2.3, on the 15th day of, December, 2020.

	///		
Officer's Signature:	1/00		
Name:	Bart J. Cook		
Title:	Executive Director		
Address:	1810 Alberta Avenue		
	Neptune, N.J. 07753		
Phone Number:	732-774-7692	Fax Number:	732-774-9456
E-mail address	bcook1@tnha.org		

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2020 ADOPTED BUDGET RESOLUTION

RESOLUTION # 2096 Neptune HOUSING AUTHORITY

FISCAL YEAR: FROM: 10/1/20 TO: 9/30/21

WHEREAS, the Annual Budget and Capital Budget/Program for the <u>Neptune Housing Authority</u> for the fiscal year beginning <u>October 1, 2020</u> and ending, <u>September 30, 2021</u> has been presented for adoption before the governing body of the <u>Neptune Housing Authority</u> at its open public meeting of <u>December 15, 2020</u>; 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 <u>\$6,375,800</u>, Total Appropriations, including any Accumulated Deficit, if any, of <u>\$6,301,735</u> and Total Unrestricted Net Position utilized of <u>\$0</u>; and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of <u>\$859.684</u> and Total Unrestricted Net Position planned to be utilized of <u>\$0</u>; and

NOW, THEREFORE BE IT RESOLVED, by the governing body of <u>Neptune Housing Authority</u>, at an open public meeting held on <u>December 15, 2020</u> that the Annual Budget and Capital Budget/Program of the <u>Neptune Housing Authority</u> for the fiscal year beginning, <u>October 1, 2020</u> and, ending, <u>September 30, 2021</u> 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.

1PY				12/15/2020
(Secretary's Signature)				(Date)
Governing Body Member:	Recorded Aye	Vote Nay	Abstain	Absent
Beverly J. Holland, Chair Carol A. Foster, Vice Chair Winifred P. Johnson	X			Х
Derrick T. Griggs Eileen M. Holly Keith G. Vuono	X X X			Х
Rev. Johnny R. Wright	X			

2020 HOUSING AUTHORITY BUDGET

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Narrative and Information Section

2020 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS

NEPTUNE HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 10/1/20 TO: 9/30/21

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

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1. Complete a brief statement on the 2020/2021 proposed Annual Budget and make comparison to the 2019/2020 adopted budget for each operation. Explain any variances over +/-10% (As shown on budget page F-4 explain the reason for changes for each <u>appropriation</u> 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). See attached.

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 <u>revenue</u> changing more than 10%) from the current year adopted budget. See attached.

3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. No affect.

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. N/A

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.).

N/A

6. The proposed budget must not reflect an anticipated deficit from 2019/2020 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)

The deficit reflected in the audit is a result of the GASB 68 accruals. The authority pays the annual pension appropriation to the State.

HOUSING AUTHORITY CONTACT INFORMATION 2020

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

Name of Authority:	Neptune Housing Authority		
Federal ID Number: Address:	21-0726758 1810 Alberta Avenue		
City, State, Zip:	Neptune, N.J. 07753		
Phone: (ext.)	732-774-7692	Fax:	732-774-9456

Preparer's Name:	David W. Ciarrocca		
Preparer's Address:	1930 Wood Road		
City, State, Zip:	Scotch Plains, N.J. 07076		T
Phone: (ext.)	732-591-2300	Fax:	732-591-2525
E-mail:	davidciarroccacpa@gmail.com		······································

Chief Executive Officer:	Bart J. Cook		
Phone: (ext.)	732-774-7692	Fax:	732-774-9456
E-mail:	bcook1@tnha.org	I	

Chief Financial Officer:	N/A
Phone: (ext.)	Fax:
E-mail:	bcook1@tnha.org

Name of Auditor:	Richard Larson, C.P.A.		······································			
Name of Firm:	Novogradac & Company	y,LLP	1997-1997 1			
Address:	252 Washington Street, Suite B					
City, State, Zip:	Toms River, N.J. 08753					
Phone: (ext.)	732-503-4257	Fax:	732-341-1424			
E-mail:	rich.larsen@novoco.com	1				

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

Neptune Housing Authority

FISCAL YEAR: FROM: Oct. 1, 2020 TO: Sept. 30, 2021

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: 20
- 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: \$1,043,079
- 3) Provide the number of regular voting members of the governing body: $\underline{7}$
- 4) (Even if not all commissioners have been appointed (Total Commissioners are either 5 or 7 as per statute for your Authority)
- 5) Provide the number of alternate voting members of the governing body: $\underline{0}$ (Maximum is 2)
- 6) 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? <u>No</u> If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority.
- *7) 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) <u>Yes</u> 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.
- 8) 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.*
- 9) 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? <u>No</u>
 - 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? <u>No</u>

If 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.

- 10) 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.
- 11) 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. <u>All adjustments to salaries are based on evaluations conducted by the executive director and board of commissioners.</u>

- 12) Did the Authority pay for meals or catering during the current fiscal year? <u>Yes.</u> 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.
 - 13) Did the Authority pay for travel expenses for any employee or individual listed on Page N-4? <u>Yes</u> If "yes," <u>attach a detailed list of all travel expenses</u> for the current fiscal year and provide an explanation for each expenditure listed.
 - 14) 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 \underline{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.

- 15) 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)
- 16) 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.
- 17) 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.*
- 18) 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? <u>Yes</u> 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). (New Jersey Infrastructure Trust Loans are not bonded debt of an Authority)
- 19) 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.
- 20) 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.
- 21) 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? <u>No</u> 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)
- 22) Has the Authority been deemed "troubled" by the Department of Housing and Urban Development? <u>No</u> If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.

Page N-3 (2 of 2)

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

FISCAL YEAR: FROM: 10/1/20 **TO:** 9/30/21

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 <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, 2018, the calendar year 2017 W-2 and 1099 should be used (60 days prior to start of budget year is November 1, 2017, with 2016 being the most recent calendar year ended), and for fiscal years ending June 30, 2018, the calendar year 2016 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2017, with 2016 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.

Page N-4 (1 of 2)

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

	T Compe All Publ	\$ 210,932	152 052	5 976		, c) C	o c) C	. 0	0	0	C		. 0	0	- \$ 368,960
	Estimated amount of other compensation from compensation from the Other Public Entities bible Other Public Entities ther pension, payment in titles lieu of health 299) benefits, etc.)			5.976													5,976 \$
1993 1993	 Reportable Reportable from Other from Other fw-2/1099) 																Ś
	Average Hours per Week Dedicated to d at Positions at te Other Public d in Entites Listed																
	re Positions held at Other Public (1) Entities Listed in Column O			Retired													
	Names of Other Public Entities where Individual is an Employee or Member of the Governing Body (1) See note below			0 State of N.J.	0 None	0 None	0 None	0 None	0 None	0 None							÷
	To Compe from A	\$ 210,932	152,052		0	0			0	U	0	0	0	0	0	0	\$ 362,984
×	Estimated Estimated amount of other compensation from the Authority (health benefits, pension, etc.)		-														\$
1 M Instan from 2/1099	Other allow exp accc baym crefi	\$ 51,000	45,000														- \$ 96,000
September 30, 2021 .j. K L Reportable Compensation from Authority (W-2/ 1099)	Base Salary/ Stipend Bonus	255,541 ל	107,052														\$ 266,984 \$
	Former Highest Compensated Employee Key Employee		×														S
н Р С	Officer Commissioner		^	×	×	×	×	×	×	×							
For the Period October 1, 2020 to	Average Hours per Week Dedicared to Position	S	40														
For the Period	Title Breattich of Diseases	EXECUTIVE DIFECTOR	Operations Director	Commissioner	Commissioner	Commissioner	Commissioner	Commissioner	Commissioner	Commissioner							
	Name Asar Cook		2 Joseph Mauro	3 Beverly Holland	4 Derrick Griggs	5 Eileen Holly	6 Keith Vuono	7 Rev. Johnny Wright	8 Carol Foster	9 Winifred Johnson	10	. 11	12	13	14	15	Total:

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

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Schedule of Health Benefits - Detailed Cost Analysis

Inout- X - in Box Below IF this Page is Non-Applicable For the Period Octob	Neptune rousing Authority October 1, 2020	to	Septembe	September 30, 2021		s.
Annual Cost # of Covered Estimate per Members Employee	Total Cost Estimate	# of Covered Members	Annual Cost			•
	Proposed	(Medical & Rx)	per Employee	Total Prior Year	\$ Increase	% Increase
Proposed Budget Budget	Budget	Current Year	Current Year	Cost	(Decrease)	(Decrease)
<u>Active Employees - Health Benefits - Annual Cost</u>						
3 \$ 12,121	\$ 36.363	m	\$ 11 544	¢ 34.637	¢ 1731	200
•) +	20.663			%0.c %0.r
	48,482	1 71	23,087	46,174	2.308	5.0%
9 33,817	304,353	σ	32,206	289.854	14 499	2°0%
Employee Cost Sharing Contribution (enter as negative -)						#DIV/01
15 20 20 20 20 20 20 20 20 20 20 20 20 20	410,894	15		391,323	19,571	5.0%
Commissioners - Health Benefits - Annual Cost						
	1		1		'	#DIV/01
	1			ı	ſ	#DIV/01
	I			1	,	i0//IC#
	I			1	,	i0///d#
Employee Cost Sharing Contribution (enter as negative -)					I	i0//IC#
		0] •	ı	i0/vid#
Retirees - Health Benefits - Annual Cost						
2 4,056	8,112	2	3,863	7,726	386	5.0%
0	'	0		•	•	#DIV/0i
2 10,575	21,150	2	10,071	20,142	1,008	5.0%
1 26,838	26,838	tri	25,560	25,560	1,278	5.0%
Employee Cost Sharing Contribution (enter as negative -)					ı	#DIV/01
5	56,100	5		53,428	2,672	5.0%
20		20	° /		ł	5.0%
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)	××	Yes or No Yes or No				
7	8,112 11,150 11,150 16,838 66,100	2		V #2 cost	\$ 2 2 44 5	7,726 - 1, 20,142 1, 25,560 1, 53,428 2, \$ 444,751 \$ 22,

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

Schedule of Accumulated Liability for Compensated Absences

	to
eptune Housing Authority	October 1, 2020
Neptur	For the Period

, '

, '

September 30, 2021

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

			Legal Basis for Benefit (check applicable items)	or Benefit Ible items)
	Gross Days of Accumulated Compensated Absences at	Dollar Value of Accrued Compensated	olution or eement	leubiv tnemyolo tnemee
Individuals Eligible for Benefit	beginning of Current Year	Absence Liability	odeJ orgA	ibnl 1m3
See the attached Schedule				
Total liability for accumulated compensated absence	ensated absences at beginning of current year $\frac{5}{2}$	÷ -		

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

Schedule of Shared Service Agreements

. '			•	Amount to be	Received by/ Paid from	Authority	\$ 49,596						
					Agreement	End Date	9/30/2021						
					Agreement Effective	Date	10/1/2018						
	September 30, 2021		eceived/paid for those services.		Comments (Enter more specifics if	needed)							
Neptune Housing Authority	to		in and identify the amount that is r			Type of Shared Service Provided	Management Services						
	October 1, 2020		that the Authority currently engages			Name of Entity Receiving Service Type of Shared Service Provided	Neptune City Housing Authority						
	For the Period	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.			Name of Entity Providing Service	Neptune Housing Authority						

2020 HOUSING AUTHORITY BUDGET

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Financial Schedules Section

		FY 2019 Adopted Budget
IARY	September 30, 2021	ed Budaet
SUMMARY	ing Authority to	FY 2020 Proposed Budaet
	Neptune Housing Authority October 1, 2020 to	FY
	For the Period	

, **·**

		FY 2	FY 2020 Proposed Budget	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 Operation	All Operations All Operations
REVENUES								
Total Operating Revenues	\$ 2,870,000	¢.	\$ 3,205,000 \$	\$ 50,000	\$ 6,125,000	\$ 6,074,000) \$ 51,000	0.8%
Total Non-Operating Revenues	248,000	T	2,800	1	250,800	361,956	2 (111,156)	-30.7%
Total Anticipated Revenues	3,118,000	1	3,207,800	50,000	6,375,800	6,435,956	(60,156)	.0
APPROPRIATIONS								
Total Administration	656,765	і	197,767	20,000	904,532	903,862	570	0.1%
Total Cost of Providing Services	2,427,003	ı	2,970,200		5,397,203	5,462,506	5 (65,303)	3) -1.2%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX		XXXXXXXXXXX	1			i0//la#
Total Operating Appropriations	3,083,768	ı	3,167,967	50,000	6,301,735	6,366,368	3 (64,633)	3) -1.0%
Total Interest Payments on Debt Total Other Non-Operating Appropriations	-	- XXXXXXXXXXXXXX	- - -		1 1]	i0//10#
Total Non-Operating Appropriations		•		ı	ı		4	10//\IQ# -
Accumulated Deficit	1	•	-	1	-			- #DIV/0I
Total Appropriations and Accumulated Deficit	3,083,768	Y	3,167,967	50,000	6,301,735	6,366,368	3 (64,633)	3) -1.0%
Less: Total Unrestricted Net Position Utilized)	1						i0//10#
Net Total Appropriations	3,083,768	1	3,167,967	50,000	6,301,735	6,366,368	3 (64,633)	-1.0%
ANTICIPATED SURPLUS (DEFICIT)	\$ 34,232	÷ ÷	\$ 39,833 9	- -	\$ 74,065	\$ 69,588	\$ \$ 4,477	۲ 6.4% =

/

F.1

Revenue Schedule

\$ Inci	
(Decr FY 2019 Adopted Proposed Budget Budget Adopted Adopted Adoptet A	ease) (Decrease) ed vs. Proposed vs.
Public Housing Housing Total All Total All	
	rations All Operation
OPERATING REVENUES	
Rental Fees	
Homebuyers' Monthly Payments \$ - \$ - \$	- #DIV/0!
Dwelling Rental 1,760,000 1,760,000 1,760,000	- 0.09
Excess Utilities	- #DIV/01
Non-Dwelling Rental	- #DIV/01
HUD Operating Subsidy 1,110,000 1,110,000 1,080,000	30,000 2.8
New Construction - Acc Section 8	- #DIV/0!
Voucher - Acc Housing Voucher 3,205,000 3,205,000 3,190,000	15,000 0.5
Total Rental Fees 2,870,000 - 3,205,000 - 6,075,000 6,030,000	45,000 0.79
Other Operating Revenues (List)	
Capital Fund 50,000 50,000 44,000	6,000 13.69
Type in (Grant, Other Rev)	- #DIV/01
Type in (Grant, Other Rev)	- #DIV/01
Type In (Grant, Other Rev)	- #DIV/01
Type In (Grant, Other Rev)	- #DIV/01
Type in (Grant, Other Rev)	- #DIV/0!
Type in (Grant, Other Rev)	- #DIV/01
Type in (Grant, Other Rev)	- #DIV/0!
Type in (Grant, Other Rev)	- #DIV/01
Type in (Grant, Other Rev)	- #DIV/01
Type in (Grant, Other Rev)	- #DIV/01
Type in (Grant, Other Rev)	- #DIV/01
Type in (Grant, Other Rev)	- #DIV/01
Type in (Grant, Other Rev)	- #DIV/01
Type in (Grant, Other Rev)	- #DIV/01
Type in (Grant, Other Rev)	- #DIV/0!
Type In (Grant, Other Rev)	- #DIV/01
Type in (Grant, Other Rev)	- #DIV/01
Type In (Grant, Other Rev)	- #DIV/01
Type In (Grant, Other Rev)	#DIV/0!
Total Other Revenue 50,000 50,000 44,000	6,000 13.69
	51,000 0.8
NON-OPERATING REVENUES	
Other Non-Operating Revenues (List)	
Late Fees, Commissions, etc. 28,000 25,000	3,000 12.0
	12,956) -40.2
Port-In Fees 2,200 2,200 400	1,800 450.09
Management Fees 49,600 49,600 54,000	(4,400) -8.19
Type in	- #DIV/01
Type in - </td <td>- #DIV/0!</td>	- #DIV/0!
Total Other Non-Operating Revenue 245,600 - 2,200 - 247,800 360,356 (1 Interest on Investments & Deposits (List) - - 247,800 - 100,000 - </td <td>12,556) -31.29</td>	12,556) -31.29
	1 400
Interest Earned 2,400 600 3,000 1,600 Penalties -	1,400 87.59
Other	- #DIV/01
	<u>-</u> #DIV/01
	1,400 87.59
	<u>11,156)</u> -30.79
TOTAL ANTICIPATED REVENUES \$ 3,118,000 - ############ \$ 50,000 \$ 6,375,800 \$ 6,435,956 \$ (50,156) -0.99

Prior Year Adopted Revenue Schedule

Neptune Housing Authority

· · ·

FY 2019 Adopted Budget

	Public Housing	• • • •	Housing		Total All
OPERATING REVENUES	Management	Section 8	Voucher	Other Programs	Operations
Rental Fees					
Homebuyers' Monthly Payments					
Dwelling Rentai	1 760 000				\$.
Excess Utilities	1,760,000				1,760,000
Non-Dwelling Rental					
HUD Operating Subsidy	1 000 000				
New Construction - Acc Section 8	1,080,000				1,080,000
Voucher - Acc Housing Voucher			_		
_			3,190,000		3,190,000
Total Rental Fees	2,840,000	-	3,190,000	-	6,030,000
Other Revenue (List)	F				
Capital Fund				44,000	44,000
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)					
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Total Other Revenue	L		· · · · · · · · · · · · · · · · · · ·	44.000	-
Total Operating Revenues	2,840,000		3,190,000	44,000	44,000
NON-OPERATING REVENUES	2,040,000		5,190,000	44,000	6,074,000
Dther Non-Operating Revenues (List)					
Late Fees, Commissions, etc.	25,000				
C.F.P. Operations/Admin. Fees					25,000
Port-In Fees	280,956				280,956
	54.000		400		400
Management Fees	54,000				54,000
Type in					-
Type in					-
Other Non-Operating Revenues	359,956	-	400	-	360,356
nterest on Investments & Deposits			·····		
Interest Earned	800		800		1,600
Penalties					
Other					-
Total Interest	800	-	800	-	1,600
Total Non-Operating Revenues	360,756	_	1,200	-	361,956
OTAL ANTICIPATED REVENUES	\$ 3,200,756	\$ - :	\$ 3,191,200	\$ 44,000 \$	and the second distance of the second distanc

Appropriations Schedule

			Neptune Hous	sing Authority	
,	·	For the Period	October 1, 2020	to	September 30, 2021

		FY 2	2020 Propose	ed 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 APPROPRIATIONS			,	······································				
Administration	222 615		104,797		\$ 437,412	\$ 404,242	\$ 33,170	8.2%
Salary & Wages	332,615				295,320	3 404,242	(39,500)	-11.8%
Fringe Benefits	231,120		64,200 8,640		43,200	40,000	3,200	8.0%
Legal	34,560		8,040	8,000	8,000	10,000	(2,000)	-20.0%
Staff Training	2 800		1,200	17,000	21,000	26,000	(5,000)	-19.2%
Travel	2,800		1,200	17,000	21,000	20,000	(3,000)	#DIV/01
Accounting Fees	11 500		2,000		13,500	14,000	(500)	-3.6%
Auditing Fees	11,500		2,000	25,000	86,100	74,800		-5.0%
Miscellaneous Administration*	44,170		16,930	25,000	904,532	903,862	<u> </u>	0.1%
Total Administration	656,765	-	197,767	50,000	904,552	505,802		0.1%
Cost of Providing Services	05.025				05.025	02 422	1 6 1 2	1 70/
Salary & Wages - Tenant Services	95,035				95,035	93,422	1,613	1.7%
Salary & Wages - Maintenance & Operation Salary & Wages - Protective Services	407,043				407,043	397,096	9,947	2.5% #DIV/01
Salary & Wages - Utility Labor	170,161				170,161	165,898	4,263	2.6%
Fringe Benefits	346,680				346,680	363,180	(16,500)	-4.5%
Tenant Services	8,500				8,500	8,500	-	0.0%
Utilities	792,000				792,000	800,000	(8,000)	-1.0%
Maintenance & Operation Protective Services	316,000				316,000	370,000	(54,000)	-14.6% #DIV/0I
Insurance	154,800		17,200		172,000	170,000	2,000	1.2%
Payment in Lieu of Taxes (PILOT)	79,784		,		79,784	79,410	374	0.5%
Terminal Leave Payments	/5,/04					-	-	#DIV/01
Collection Losses	12,000				12,000	12,000	-	0.0%
	12,000		3,000		3,000	3,000	-	0.0%
Other General Expense			2,950,000		2,950,000	2,950,000	-	0.0%
Rents	10,000		2,550,000		10,000	20,000	(10,000)	-50.0%
Extraordinary Maintenance	35,000				35,000	30,000	5,000	16.7%
Replacement of Non-Expendible Equipment Property Betterment/Additions	55,000				-	-	-	#DIV/01 #DIV/01
Miscellaneous COPS*	2 (27 002		2 070 200	-	5,397,203	5,462,506	(65,303)	-1.2%
Total Cost of Providing Services Total Principal Payments on Debt Service in Lieu of	2,427,003	<u> </u>	2,970,200		5,597,205		(03,303)	#DIV/01
Depreciation		xxxxxxxxxxx		XXXXXXXXXXXX	- 	6,366,368	ICA (222)	-
Total Operating Appropriations	3,083,768		3,167,967	50,000	6,301,735	0,300,308	(64,633)	-1.0%
NON-OPERATING APPROPRIATIONS								#DIV/01
Total Interest Payments on Debt	XXXXXXXXXXXX	XXXXXXXXXXXX	<u> </u>	XXXXXXXXXXX		-	-	
Operations & Maintenance Reserve					-	-	-	#DIV/01
Renewal & Replacement Reserve						-	-	#DIV/01
Municipality/County Appropriation Other Reserves					-		-	#DIV/01 #DIV/01
Total Non-Operating Appropriations	-	-	-	· •		-		#DIV/01
TOTAL APPROPRIATIONS	3,083,768	-	3,167,967	50,000	6,301,735	6,366,368	(64,633)	~1.0%
ACCUMULATED DEFICIT					-	-		#DIV/01
TOTAL APPROPRIATIONS & ACCUMULATED								
DEFICIT	3,083,768	-	3,167,967	50,000	6,301,735	6,366,368	(64,633)	-1.0%
UNRESTRICTED NET POSITION UTILIZED			.,,				· ·····	-
Municipality/County Appropriation	-	-	-	-	-	-	-	#DIV/01
• • • • • •	ſ				7 -		-	#DIV/01
Other	L					-		#DIV/01
Total Unrestricted Net Position Utilized	\$ 3,083,768		\$ 3,167,967	\$ 50,000	\$ 6,301,735	\$ 6,366,368	\$ (64,633)	
TOTAL NET APPROPRIATIONS	÷ 5,005,708	Y	- 0,107,507				s <u>mining training</u>	=

* 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

- \$ 158,398.35 \$

the line item must be itemized above.

5% of Total Operating Appropriations

-

ons \$ 154,188.40 \$

2,500.00 \$

315,086.75

.

Prior Year Adopted Appropriations Schedule

FY 2019 Adopted Budget



Neptune Housing Authority

Public Housing Total All Management Section 8 **Housing Voucher Other Programs** Operations **OPERATING APPROPRIATIONS Administration** Salary & Wages \$ 307,733 \$ 96,509 \$ 404,242 **Fringe Benefits** 265,020 69,800 334,820 Legal 32,000 8,000 40,000 Staff Training 10,000 10,000 Travel 2,800 1,200 22,000 26,000 **Accounting Fees Auditing Fees** 12,000 2,000 14,000 Miscellaneous Administration* 45,670 17,130 12,000 74,800 **Total Administration** 665,223 194,639 -44,000 903,862 Cost of Providing Services Salary & Wages - Tenant Services 93,422 93,422 Salary & Wages - Maintenance & Operation 397,096 397,096 Salary & Wages - Protective Services Salary & Wages - Utility Labor 165,898 165,898 **Fringe Benefits** 363,180 363,180 **Tenant Services** 8,500 8,500 Utilities 800,000 800,000 Maintenance & Operation 370,000 370,000 **Protective Services** Insurance 153,000 17,000 170,000 Payment in Lieu of Taxes (PILOT) 79,410 79,410 **Terminal Leave Payments Collection Losses** 12,000 12,000 Other General Expense 3,000 3,000 Rents 2,950,000 2,950,000 **Extraordinary Maintenance** 20,000 20,000 **Replacement of Non-Expendible Equipment** 30,000 30,000 Property Betterment/Additions Miscellaneous COPS* Total Cost of Providing Services 2,492,506 2,970,000 5,462,506 Total Principal Payments on Debt Service in Lieu of Depreciation XXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXX **Total Operating Appropriations** 3,157,729 3,164,639 44,000 6,366,368 NON-OPERATING APPROPRIATIONS Total Interest Payments on Debt **Operations & Maintenance Reserve** Renewal & Replacement Reserve Municipality/County Appropriation **Other Reserves Total Non-Operating Appropriations** TOTAL APPROPRIATIONS 3,157,729 3,164,639 44,000 ~ 6,366,368 ACCUMULATED DEFICIT **TOTAL APPROPRIATIONS & ACCUMULATED** 3,157,729 DEFICIT 3,164,639 44,000 6,366,368 UNRESTRICTED NET POSITION UTILIZED Municipality/County Appropriation Other Total Unrestricted Net Position Utilized TOTAL NET APPROPRIATIONS \$ 3,157,729 \$ Ś 3,164,639 -\$ 44,000 \$ 6,366,368

* 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 \$ 157,886.45 \$ - \$ 158,231.95 \$ 2,200.00 \$ 318,318.40

Debt Service Schedule - Principal

. '		Total Principal Thereafter Outstanding		•	•									
		7075					1	، د						
		2024					ı	\$ - \$						
	inding in	2023						, Ş						
Neptune Housing Authority	Fiscal Year Ending in	2022					,	\$ -			Jrs		T	
Neptune Hou		2021						Ş		gs service.	Standard & Poors			olicable
	Pronosed	Budget Year 2020						\$ -		f the rating by ratin	Fitch			If no Rating type in Not Applicable
×		Adopted Budget Year 2019				•		\$		nd rating and the year o	Moody's			lf no Rat
If Authority has no debt X this box			Type in Issue Name Type in Issue Name	Type in Issue Name	Type in Issue Name	TOTAL PRINCIPAL	LESS: HUD SUBSIDY	NET PRINCIPAL	Indirotes the Areteria A	muture the Authomy's most recent bond rating and the year of the rating by ratings service.	Bond Rating	Year of Last Rating		

.

,'		Total-Interest Payments Outstanding		
		- Thereafter		
		2025		
		2024		
terest	Fiscal Year Ending in	2023	, v,	
Debt Service Schedule - Interest Neptune Housing Authority	Fiscal Yec	2022		
ebt Service (2021		
Ω		Proposed Budget Year 2020		
	×	Adopted Budget Year 2019		
	If Authority has no debt X this box		Type in Issue Name Type in Issue Name Type in Issue Name TOTAL INTEREST LESS: HUD SUBSIDY NET INTEREST	

F-7

Neptune For the Period	Neptune Housing Authority he Period October 1, 2020	y , 2020	to	September 30, 2021	• .
		FY 2	:020 Propo	FY 2020 Proposed Budget	
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)	\$ 815,918	Ŷ	\$ (1,224,251)	¢	\$ (408,333)
Less: Invested in Capital Assets, Net of Related Debt (1) Less: Restricted for Debt Service Reserve (1)	5,470,495				5,470,495
Less: Other Restricted Net Position (1) Total Unrestricted Net Position (1)	(4,654,577)		(1,224,251)	T	(5,878,828)
Less: Designated for Non-Operating Improvements & Repairs Less: Designated for Rate Stabilization					1 1
Less: Other Designated by Resolution	2.213.501		568,705		2,782,206
Plus: Accrued Unfunded Pension Liability (1) Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)	3,327,732		870,047		4,197,779 -
Plus: Estimated Income (Loss) on Current Year Operations (2) Plus: Other Adjustments (attach schedule)					
I INIDESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET	886,656	I	214,501	I	1,101,157
Unrestricted Net Position Utilized to Balance Proposed Budget	1	I	1	I	1
Unrestricted Net Position Utilized in Proposed Capital Budget	I	1		1 1	, ,
Appropriation to Municipality/County (3)					1
PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR				-	
(4)	\$ 886,656	\$	\$ 214,501	\$	Ş 1,101,157
 Total of all operations for this line item must agree to audited financial statements. Include budgeted and unbudgeted use of unrestricted net position in the current year's operations. Amount may not exceed 5% of total operating appropriations. See calculation below. 	stements. urrent year's operati tion below.	ons.			ન
Maximum Allowable Appropriation to Municipality/County \$ 154,188 \$ - \$ 158,398 \$ 2.50.05 Maximum Allowable Appropriation to Municipality/County \$ 154,188 \$ - \$ 158,398 \$ 2.500 \$ 2.50	\$ 154,188 \$ get period, the Authority the budget narrative sec	\$ rity <u>must attac</u> section.	Ş 158,398 <u>ch a statement</u>	ک explaining its plan to rec	vov.cre duce the deficit.

Net Position Reconciliation

Ъ-8-7

2020 Neptune

HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

2020 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

Neptune Housing Authority

FISCAL YEAR: FROM: 10/1/20 TO: 9/30/21

[X] 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 <u>N.J.A.C. 5:31-2.2</u>, along with the Annual Budget, by the governing body of the Neptune Housing Authority, on the <u>20th</u> day of <u>October</u>, 2020.

OR

I 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.5:31-2.2for the following reason(s): ______

Officer's Signature:	J- J-		
Name:	Bart J. Cook		
Title:	Executive Director		
Address:	1810 Alberta Avenue		
	Neptune, N.J. 07753		
Phone Number:	732-774-7692	Fax Number:	732-774-9456
E-mail address	bcook1@tnha.org		

2020 CAPITAL BUDGET/PROGRAM MESSAGE

Neptune Housing Authority

FISCAL YEAR: FROM: 10/1/20 **TO:** 9/30/21

This section is included in the Capital Budget pursuant to <u>N.J.A.C. 5:31-2</u>. 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 plan prepared in consultation with the authority residents.
- **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 capital 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.

Page CB-2

Proposed Capital Budget



Neptune Housing Authority

For the Period October 1, 2020 to September 30, 2021

Funding Sources Renewal & **Estimated Total Unrestricted Net** Replacement Debt Other Authorization Capital Grants Cost **Position Utilized** Reserve Sources Public Housing Management \$ Operations/Mgt. Fees/A & E Ś 278,000 278,000 516,684 516,684 Site/Dwelling Structures 65,000 65,000 Equipment/Relocation Costs Type in Description 859,684 Total 859,684 -_ -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 -----\$ \$ \$ \$ 859,684 \$ 859,684 -\$ --TOTAL PROPOSED CAPITAL BUDGET

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

			N	leptune Hous	ing Authorit	y						
ж ,	F	or the Period	Octob	er 1, 2020	to		Septembe	r 30	, 2021			
							Fiscal Year B	egin	ning in			
	Esti	mated Total Cost		ent Budget ear 2020	2021		2022		2023		2024	2025
Public Housing Management	Yes and Statistical Inc						a sana ana na 1. I			·····		
Operations/Mgt. Fees/A & E	\$	1,668,000	\$	278,000	\$278,000	\$	278,000	\$	278,000	\$	278,000	\$ 278,000
Site/Dwelling Structures		3,100,104		516,684	516,684		516,684		516,684		516,684	516,684
Equipment/Relocation Costs		390,000		65,000	65,000		65,000		65,000		65,000	65,000
Type in Description		-		-								
Total		5,158,104		859,684	859,684		859,684		859,684		859,684	859,684
Section 8												·····
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Housing Voucher												
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Total		-			••		-		-		-	 -
Other Programs												
Type in Description		-		-								
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Total		-		-	~		-		•		-	
TOTAL	\$	5,158,104	\$	859,684	\$859,684	\$	859,684	\$	859,684	\$	859,684	\$ 859,684

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

Type in Description - Type in Description - Type in Description - Total - Housing Voucher - Type in Description - Total - Total - Total - Total - Total - Total S Year Plan per CB-4 \$<	, 1			Neptune Housing A	uthority							
Estimated Total Renewal & Cost Replacement Debt Public Housing Management Operations/Mgt. Fees/A & E \$ 1,668,000 Site/Dwelling Structures 3,100,104 Sq0,000 Site/Dwelling Structures 3,100,104 Sq0,000 Site/Dwelling Structures 3,100,104 Sq0,000 Site/Dwelling Structures 3,100,104 Sq0,000 Site/Dwelling Structures Sq0,000 Site/Site/Site/Site/Site/Site/Site/Site/		F	or the Period	October 1, 2020	to	Septembe	er 30, 2021					
Renewal & Renewal & Public Housing Management Operations/Mgt, Fees/A & E \$ 1,668,000 Stef/Dwelling Structures 3,100,104 Equipment/Relocation Costs 390,000 Type in Description - Type in Descr					Fi	Inding Sources	rces					
Cost Position Utilized Reserve Authorization Cepital Grants Other Sources Public Housing Management Operations/Mgt. Fees/A & E \$ 1,668,000 \$ 3,100,104 \$ 3,100,104 \$ 3,100,104 Equipment/Relocation Costs 390,000 \$ 390,000 \$ 390,000 \$ 390,000 Type in Description - - 5,158,104 - Section 8 - - 5,158,104 - Type in Description - - - - Type in Description - - - - - Type in Description - - - - - - Type in Description -				1		5						
Public Housing Management S 1,668,000 Site/Owelling Structures 3,100,104 3,100,104 Equipment/Relocation Costs 390,000 390,000 Type in Description - - Total 5,158,104 - Section 8 - - Type in Description - - Type in Des		Esti	imated Total		•							
Operations/Mgt, Fees/A & E \$ 1,668,000 Site/Dwelling Structures 3,100,104 Equipment/Relocation Costs 390,000 Type in Description - Total 5,158,104 Section 8 - Type in Description -			Cost	Position Utilized	Reserve	Authorization	Capital Grants	Other Sources				
Site/Dwelling Structures 3,100,104 Equipment/Relocation Costs 390,000 Type in Description - Total 5,158,104 Section 8 - Type in Description - Type in Descripti					······································							
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Type in Description - - - - 5,158,104 - - - - 5,158,104 - - - - 5,158,104 -	Site/Dwelling Structures		3,100,104				3,100,104					
Total 5,158,104 - - - 5,158,104 - Section 8	Equipment/Relocation Costs		390,000				390,000					
Section 8 Type in Description Type in Description Type in Description Total Total Housing Voucher Type in Description Total	Type in Description						·					
Type in Description - Type in Description - Type in Description - Total - Housing Voucher - Type in Description - Total - Type in Description - Total - Total - Total - Total - Total - Total - S	Total		5,158,104	••		-	5,158,104	-				
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Total - <td>Type in Description</td> <td></td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td></td>	Type in Description		-									
Housing Voucher - Type in Description - Type in Description - Type in Description - Type in Description - Total - Other Programs - Type in Description - Total - Total - - - Total - - - Total - - - - - Total - - - - - - - - - - - - - - - - - - - - - -	Type in Description		-									
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Total - - - - - TOTAL \$ 5,158,104 \$ - \$ - \$ - \$ Total 5 Year Plan per CB-4 \$ 5,158,104 \$ - \$ - \$ - \$ - \$			-									
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Total 5 Year Plan per CB-4 \$ 5,158,104	TOTAL	\$	5,158,104	\$	\$ -	- \$	\$ 5,158,104	\$ -				
	Total 5 Year Plan per CB-4			<u></u>								
	Balance check	<u> </u>		f amount is other than z	ero, verifv that pro	iects listed above i	natch proiects list	ed 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.

NEPTUNE HOUSING AUTHORITY

EXPLANATION OF BUDGET VARIANCES IN EXCESS OF TEN PERCENT

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F.Y.E. 9/30/21

BUDGET ITEM	PERCENTAGE INCREASE/ (DECREASE)	EXPLANATION
CAPITAL FUND	13.60%	ADDITIONAL REVENUE ALLOCATED TO SOFTWARE UPGRADES.
LATE FEES, COMMISSIONS	12.00%	PROJECTED INCREASE IN LATE FEES.
C.F.P. OPERATIONS/ADMIN. FEES	-40.20%	MORE OF CURRENT CAPITAL FUND TO BE UTILIZED FOR RENOVATIONS.
PORT-IN FEES	450.00%	INCREASE IN PORT-IN UNITS ADMINISTERED.
INTEREST EARNED	87.50%	SIGNIFICANT INCREASES IN BOTH CASH FLOW DESPITE RATE REDUCTIONS.
FRINGE BENEFITS-ADMIN.	-11.80%	DUE TO STAFF RETIREMENTS.
STAFF TRAINING	-20.00%	FEWER SCHEDULED CONFERENCES.
TRAVEL	-19.20%	FEWER SCHEDULED CONFERENCES.
MISCELLANEOUS ADMINISTRATION	15.10%	ADDITIONAL EXPENSES FOR SOFTWARE UPGRADES.
MAINTENANCE & OPERATION	-14.60%	CAPITAL UPGRADES RESULTED IN LOWER REPAIR COSTS.
EXTRAORDINARY MAINTENANCE	-50.00%	DECREASE IN SITE WORK ANTICIPATED.
REPLACEMENT OF EQUIPMENT	16.70%	UPGRADE OFFICE EQUIPMENT.

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NEPTUNE HOUSING AUTHORITY SCHEDULE OF COMPENSATED ABSENCES

FYE 9/30/19

	SEC. 8	***	00 U\$	000000	00.0UU.24	\$0.00	\$0.00	\$0.00	\$0.00	\$15 647 NO	00.00	00.04	\$7,481.94	\$0.00		0.00	\$0.00	\$1,782.54	\$0.00		97,010,020	10765	C0 / n · I	\$28.974.06		
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	РНА		\$29.857.87	CE L'JE EN	107070¢	4-0,451.43	\$48,042.57	\$15,413.52	\$15.771.33	80.00	0.00	1.0040	\$12,104.28	\$76.370.66	\$0 070 8\$	0.010,00	00.04	\$9,614.00	\$30,968.78	000 E00	00.702' 107¢	X 1 0765		\$288,483.27		
	TOTAL ACCRUED		\$29.857.87	\$8.034.00	00.400.00	010,401.40	\$48,U42.57	\$15,413.52	\$15,771.33	\$15 642 09	\$12E 77	11.001.010	\$19,586.22	\$76,370,66	89 040 88	00.04	00.0¢	\$11,396.54	\$30,968.78	2001 807 66	00.100,4070	X 1 0765	00101	\$317,457.33		
	TOTAL DAYS		129,625	4 7	00.75	100.00	10/07/00	GZ9.26	73	91.25	V		C.78	190.75	62 375			58.5	134				1		ł	
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	РНА		\$23,178.00	\$0.00	\$0 603 75	071 77 PA	10.141.149	00.201,114	\$12,962.74	\$0.00	00.0%	\$0 E07 05	07 120'24	\$64,359.55	\$7.390.92	00.0\$	00.00	\$0'388'28	\$24,035.47	\$211 116 95 \$17 749 66		X 1.0765		\$227,267.40		
	TOTAL ACCRUED SICK	VIDIO	\$23,178.00	\$0.00	\$9 693 25	EA1 7A7 EA	611 7E2 EE	00.201,114	\$12,962.74	\$11,870.85	\$0.00	\$14 765 00	00.001,414	\$64,359.55	\$7,390.92	\$0.00	00000	90.011,74	\$24,035.47	\$228,866,61		X 1.0765		\$246,374.91		
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	SICK DAYS		201.25	65.25	116.5	Ľ.			120	138.5	18	147		321.5	92.75	0	7.5	2	208							
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	I O I AL ACCRUED VACATION		19.510,04	\$8,034.00	\$3,744.18	\$6.294.93	\$3,660.97	60 000 E0	80.000,2¢	\$3,//1.24	\$435.77	\$4,821.22	11 110 010	\$17'011.11	\$2,549.97	\$0.00	\$4 785 88	00.002.14	p0,933.51	\$66,031.04 \$56,865.64		X 1.0765 X 1.0765		\$71,082.42 \$61,215.87		
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	DAILY RATE	10 UCC-3	40.0020	\$535.60	\$166.41	\$349.72	\$166.41	\$216 DE	00.0170	21/1.42	\$108.94	\$200.88	\$400 27	10.0014	\$159.37	\$84.00	\$194.81	\$234 14	11.1020							
ANIMITAT	BASE	\$50 882 AD	pt-000 000	\$139,256.00	\$43,266.03	\$90,926.79	\$43,266.03	S56 171 86		44, 303.24	\$28,325.00	\$52,229.92	\$104 006 31	10.000 1010	CB.024-144	\$21,840.00	\$50.651.28	SED ORR ER	00.000,000							
	EMPLOYEE	CARLSON	0001	B. CUUK	S. CONKLIN	M. DILEO	C. FOSTER	M. GARAIO	K IONEC	- JOINTO	MARSHALL	C MASSEY	I MAURO	C NAVEDETE		S. PUKYEAR	J. SCHRIEFER	C TAYLOR				FICA		TOTAL		
	SEC. 8 Years of % Service	1 70	Ŧ		16 S	28 M	16 C	14 M		+	-	15 C	1.1 92	T			10 J.	21 IC				Ĩ		Т		
**	SEC. 8 1	- -			0	0	0	0	100	3		35	0	, c		۶	6	0	NEW							

* ALL EMPLOYEE'S DAILY RATES ARE BASED ON 260 WORKING DAYS PER YEAR. ALSO, SICK DAYS ARE ONLY ACCRUED FOR EMPLOYEES WITH 10 OR MORE YEARS OF SERVICE CONSISTENT WITH THE PERSONNEL POLICY.

\$2,897.41 \$26,076.66 \$28,974.06

\$28,848.33 \$259,634.94 \$288,483.27

\$31,745.73 \$285,711.60 \$317,457.33

\$24,637.49 \$22,726.74 \$1,910.75 \$221,737.42 \$204,540.66 \$17,196.76

\$63,974.18 \$55,094.28 \$71,082.42 \$61,215.87

LONG TERM TOTAL

\$227,267.40 \$19,107.51

\$246,374.91

\$9,866.55 \$8,879.90

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OCTOBER 1, 2019 - SEPTEMBER 30, 2020

NEPTUNE HOUSING AUTHORITY NAHRO TRAVEL EXPENSES ATTACHMENT, PAGE N-3, QUESTION #12

ECUTIVE DIRECTOR,			2020 BUD	<u>GET</u>				
TRAVELER	LOCATION & DATE	PURPOSE	LODGING	TRAVEL/FLIGHT	REGISTRATION	PER DIEM	CAR/SHUTTLE	TOTAL
BART COOK (Oceans Resort)	Austin, TX 3/3-7/2020 San Antonio, TX 10/10-12/19 AC-Tropicana 11/18-20/19	RAD NAHRO NJNAHRO	\$906.60 \$847.56 \$438.77	\$486.80 \$446.78	\$150.00 \$495.00 \$325.00	\$800.00 \$800.00 \$600.00	\$374.79 \$61.35	\$2,718.19 \$2,650.69 \$1,363.77
TOTAL for EX. DIRECT	With the second s	A A A A A A A A A A A A A A A A A A A	\$2,192.93	\$933.58	\$970.00	\$2,200.00	 \$436.14	\$6,732.65
COMMISSIONERS BEVERLY HOLLAND	Washington, DC 3/29-31/20	NAHRO			\$75.00			#75 00
	San Antonio, TX 10/10-12/19	NAHRO	\$847.56	\$446.78	\$495.00	\$800.00	\$61.35	\$75.00 \$2,650.69 \$0.00
TOTALS:			\$847.56	\$446.78	\$570.00	\$800.00	\$61.35	\$2,725.69
WINIFRED JOHNSON								\$0.00 \$0.00 \$0.00
TOTALS:			\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
KEITH VUONO								\$0.00 \$0.00 \$0.00
TOTALS:			\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CAROL FOSTER	Washington, DC 3/29-31/20	NAHRO			\$75.00			\$75.00
	San Antonio, TX 10/10-12/19	NAHRO	\$847.56	\$446.78	\$495.00	\$800.00	\$61.35	\$2,650.69 \$0.00
TOTALS:			\$847.56	\$446.78	\$570.00	\$800.00	\$61.35	\$2,725.69
EILEEN HOLLY	Washington, DC 3/29-31/20	NAHRO			\$75.00		· · · · · · · · · · · · · · · · · · ·	\$75.00
	San Antonio, TX 10/10-12/19	NAHRO	\$847.56	\$446.78	\$495.00	\$800.00	\$61.35	\$2,650.69 \$0.00
TOTALS:			\$847.56	\$446.78	\$570.00	\$800.00	\$61.35	\$2,725.6
REV. JOHNNY WRIGHT	San Antonio, TX 10/10-12/19	NAHRO	\$847.56	\$446.78	\$495.00	\$800.00	\$61.35	\$0.00 \$2,650.69 \$0.00
TOTALS:			\$847.56	\$446.78	\$495.00	\$800.00	\$61.35	\$2,650.6
Derrick T. Griggs						<u></u>		\$0.00 \$0.00 \$0.00
TOTALS:			\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
***MISC EXTRA'S ***								\$0.00
Commissioners Totals			\$3,390.24	\$1,787.12	\$2,205.00	\$3,200.00	\$245.40	\$10,827.7
FOTALS for ED & COM	MISSIONERS		\$5,583.17	\$2,720.70	\$3,175.00	\$5,400.00	\$681.54	\$17,560.4
Kevin Wigenton								\$0.00 \$0.00
TOTALS:			\$0.00		\$0.00		\$0.00	\$0.00
FOTAL (Including La	wyer)		\$5,583.17	\$2,720.70	\$3,175.00	\$5,400.00	\$681.54	\$17,560.4
INHA STAFF EDUCATION					T			
Victoria Bardsley	Sayreville-3/2-6/2020	HCV Specialist (Sec 8)		\$ 166.85	\$ 1,200.00			\$ 1,366. \$
		<u>I</u> <u>I</u>		I	<u>I</u>	ST	AFF TRAINING :	