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FINA 1*

**SECTION II: FINANCIAL INFORMATION**

A. Activity Number	B. Amount Revised Budgeted	C. Cumulative Amount Drawdown	D. Cumulative Balance (B - C)	E. Expended This Quarter	F. Obligated End of Quarter	G. Cumulative Expended to Date	H. Cumulative Obligated to Date	I. Cumulative Total (G + H)	J. Cumulative Percentage
001-B-H	467,679.93	467,679.93	0.00	0.00	0.00	467,679.93	0.00	467,679.93	100.00%
001-B-I	2,055,000.00	1,731,141.26	323,858.74	-17,608.56	0.00	2,036,220.65	0.00	2,036,220.65	99.09%
013-A-H	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
013-A-I	45,000.00	0.00	45,000.00	0.00	0.00	45,000.00	0.00	45,000.00	100.00%
14A-B-H	532,320.07	115,429.45	416,890.62		416,890.62	115,429.45	416,890.62	532,320.07	100.00%
14A-B-I	567,258.52	350,079.39	217,179.13	62,559.59	214,907.97	351,167.31	214,907.97	566,075.28	99.79%
21A (Admin)	234,079.67	25,754.08	208,325.59	76.86	16,995.00	25,754.08	16,995.00	42,749.08	18.26%
<b>Totals</b>	<b>3,901,338.19</b>	<b>2,690,084.11</b>	<b>1,211,254.08</b>	<b>45,027.89</b>	<b>648,793.59</b>	<b>3,041,251.42</b>	<b>648,793.59</b>	<b>3,690,045.01</b>	<b>94.58%</b>

**SECTION III: CONTRACTS AND SUBCONTRACTS FOR THIS QUARTER**

Contractor/ Subcontractor Name	Address	City, State, Zip	Prime Contractor ID Number	Sec	Sub Contractor ID Number	Sec	Total Amt of Contract/ Subcontract	CDBG Part Contract/ Subcontract	Trade/ Race Codes	Women Owned
				3		3				

Trade Codes: 1 = New Construction, 2 = Education/Training, 3 = Other  
 Racial/Ethnic Codes: 1 = White, 2 = Black, 3 = Native American, 4 = Hispanic, 5 = Asian  
 Total Contractors/Subcontracts:  Page 1  
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GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS  
QUARTERLY EXPENDITURES AND PROGRESS REPORT

Final Report No

Recipient Name: Gwinnett County

Grant Number: 08-ns-5063

Report No: 08

Quarter End: 2/28/2011

Final Report:

**SECTION IV: Work in Progress**

Use this section to provide a brief narrative description of work in progress during the reporting period. Use the Project Implementation Schedule included in your application as the basis for reporting.

There were no additional properties purchased, and no additional sales this period.

A total of \$320,981 in program income has been collected, and \$160,012.42 has been spent

**SECTION V: Other Supporting Efforts**

Use this section to provide a description of all other supporting efforts that have begun, been partially implemented, or completed during this period. Use quantifiable data whenever possible. Use the information from DCA 8 (Budget Analysis) as the basis for reporting.

A total of \$320,981 of program income has been generated. A total of \$160,012.42 has been spent from program income including \$61,659.08 this quarter. This leaves a program income balance of \$160,968.59

**SECTION VI: Problems Encountered / Technical Assistance Needed**

Use this section to provide a brief description of any problems or delays encountered or anticipated, or any technical assistance needed from DCA.

**SECTION VIII: Performance Measurement**  
**QUARTERLY EXPENDITURES AND PROGRESS REPORT**

**All Grants** LEVERAGE THIS GRANT  
 Public Private  
 CDBG and CDBG Stimulus - People

This Quarter Cumulative  
 This Quarter Cumulative  
 This Quarter Cumulative

CDBG and CDBG Stimulus - Housing  
 TOTAL HOUSING THIS  
 Units Units Units Total  
 Owner Rental Buyer Units  
 This Quarter Cumulative  
 CDBG and CDBG Stimulus - EIP Jobs (do not include ARRA jobs)  
 TOTAL FT+FTE JOBS THIS  
 Created LM Retained LM Created Retained  
 This Quarter Cumulative

NSP - Housing / Projects  
 HOUSING ACCOMPLISHMENTS THIS  
 Units Units Units Units  
 Acquired Rehab Construct Sold  
 This Quarter Cumulative  
 PROJECTS COMPLETED THIS  
 Projects Completed  
 This Quarter Cumulative

Units	Units	Units	Units
0	0	0	0
29	29	29	29

PERFORMANCE  
 This certifies that  
 All accomplishments for this quarter have been reported accurately.

GRANT  
 This Quarterly Report is NOT complete.  
 Date

**CERTIFICATION**  
 The signature of the Certifying Official below certifies that the data and other information provided in this Report (including Pages 1 and 2 of the Quarterly Report and the Project Activity and Completion as applicable), whether submitted in paper form or on-line, is correct, based on official accounting system and other records, and that expenditures and obligations shown have been made for the purpose of and in accordance with applicable Grant Terms and Conditions.

Signature of Certifying Official: Mania Wosda Title of Official: Director Financial Services Date: 8/15/11  
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