State Filing Year

2017

ADOPTED COPY

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

Start Year

**End Year** 

2017

2017

Fiscal Year

Authority Budget of:

JAN 27 2017

# Garfield Housing Authority

For the Period:

April 1, 2017

to

March 31, 2018

## www.garfieldhousing.org

**Authority Web Address** 

Department Of

Community

Affairs

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Division of Local Government Services

# 2017 HOUSING AUTHORITY BUDGET

# **Certification Section**

#### 2017

## Garfield

(Name)

## **HOUSING AUTHORITY BUDGET**

FISCAL YEAR: FROM <u>4/01/2017</u> TO <u>3/31/2018</u>

For Division Use Only

#### CERTIFICATION OF APPROVED BUDGET

It is hereby certified that the approved Budget made a part hereof complies with the requirements of law and the rules and regulations of the Local Finance Board, and approval is given pursuant to N.J.S.A. 40A:5A-11.

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

By: \auQD. Cwest CPA, RMA Date: 3/13/2017

#### 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. Covert CPA, RMA Date: 3/29/2017

## 2017 PREPARER'S CERTIFICATION

## **Garfield Housing Authority**

(Name)

## HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:4/1/2017

TO:3/31/2018

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

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

1.11/11/

Preparer's Signature:		Wills					
Name:	William Katchen						
Title:	Fee Accountant						
Address:	Suite 303, 596 Ander 07010	Suite 303, 596 Anderson Avenue, Cliffside Park, NJ 07010					
Phone Number:	201-943-4449	Fax Number:	201-943-5099				
E-mail address	bill@katchencpa.com						

## 2017 APPROVAL CERTIFICATION

# Garfield Housing Authority (Name)

## HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:4/1/2017

TO:3/31/2018

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 Garfield Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 23 day of January, 2017.

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:	Mu							
Name:	Martin Geisler	Martin Geisler						
Title:	Executive Director							
Address:	71 Daniel P. Conte Court, Garfield, NJ 07026							
Phone Number: 973-340-4170 Fax Number: 973-773-7804								
E-mail address <u>marty@garfieldhousing.org</u>								

# INTERNET WEBSITE CERTIFICATION

Authority's	Web Address: www.garfieldhousing.org	
All authoriti	es shall maintain either an Internet website or a web	page on the municipality's or county's Interne
website. Th	e purpose of the website or webpage shall be to pro	ovide increased public access to the authority's
operations a	nd activities. N.J.S.A. 40A:5A-17.1 requires the foll	owing items to be included on the Authority's
website at a	minimum for public disclosure. Check the boxes be	low to certify the Authority's compliance with
N.J.S.A. 40A	<u>x:5A-17.1</u> .	
<u>d</u> /	A description of the Authority's mission and respons	sibilities
<u>d</u>	Commencing with 2013, the budgets for the current prior years	fiscal year and immediately preceding two
	The most recent Comprehensive Annual Financial R information	eport (Unaudited) or similar financial
	Commencing with 2012, the complete annual audits two prior years	of the most recent fiscal year and immediately
<u>d</u>	The Authority's rules, regulations and official policy body of the authority to the interests of the residents jurisdiction	v statements deemed relevant by the governing within the authority's service area or
	Notice posted pursuant to the "Open Public Meetings setting forth the time, date, location and agenda of ear	
	Beginning January 1, 2013, the approved minutes of resolutions of the board and their committees, for at	
	The name, mailing address, electronic mail address a exercises day-to-day supervision or management over Authority	
Þ	A list of attorneys, advisors, consultants <u>and any other</u> corporation or other organization which received any preceding fiscal year <u>for any service whatsoever</u> rendered	remuneration of \$17,500 or more during the
webpage as i	certified by the below authorized representative of the dentified above complies with the minimum statuted A check in each of the above boxes signifies compliant.	ory requirements of N.J.S.A. 40A:5A-17.1 as
Name of Office	cer Certifying compliance	Martin Geisler
Title of Office	er Certifying compliance	Executive Director
Signature		Mu

## 2017 ADOPTION CERTIFICATION

## Garfield

(Name)

## HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:4/1/2017

TO:3/31/2018

It is hereby certified that the Housing Authority Budget and Capital Budget/Program annexed hereto is a true copy of the Budget adopted by the governing body of the Garfield Housing Authority, pursuant to N.J.A.C. 5:31-2.3, on the 20 day of, March, 2017.

Officer's Signature:	m								
Name:	Martin Geisler	Martin Geisler							
Title:	Executive Director								
Address:	70 Daniel P. Conte Court								
Phone Number:	973-340-4170	Fax Number:	973-773-7804						
E-mail address	marty@garfieldhousing	.org							

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## 2017-18

## 2017 ADOPTED BUDGET RESOLUTION

# Garfield Housing Authority (Name) HOUSING AUTHORITY

FISCAL YEAR:

FROM:4/1/2017

TO:3/31/2018

3/20/17 (Date)

Absent

WHEREAS, the Annual Budget and Capital Budget/Program for the Garfield Housing Authority for the fiscal year beginning April 1, 2017 and ending, March 31, 2018 has been presented for adoption before the governing body of the Garfield Housing Authority at its open public meeting of March 20, 2017; 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 \$ 3,457,381, Total Appropriations, including any Accumulated Deficit, if any, of \$3,534,050 and Total Unrestricted Net Position utilized of \$76,669; and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$575,409 and Total Unrestricted Net Position planned to be utilized of \$\_\_\_\_\_0\_\_\_; and

NOW, THEREFORE BE IT RESOLVED, by the governing body of Garfield Housing Authority, at an open public meeting held on March 20, 2017 that the Annual Budget and Capital Budget/Program of the Garfield Housing Authority for the fiscal year beginning, 4/1/2017 and, ending, 3/31/2018 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)

Governing Body Recorded Vote
Member: Aye Nay Abstain

Dabal V
Ribaudo

Susino V
Giacomrro

Barckett Puzio

Quiles

## 2017 HOUSING AUTHORITY BUDGET

Narrative and Information Section

# 2017 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS

## **Garfield Housing Authority**

(Name)

## AUTHORITY BUDGET

FISCAL YEAR:

FROM:4/1/2017

TO:3/31/2018

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

- 1. Complete a brief statement on the 2017 proposed Annual Budget and make comparison to the 2016 adopted budget for each operation. Explain any variances over +/-10% (As shown on budget page F-4 explain the reason for changes for each appropriation changing more than 10%) for each line item by operation. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. For example, if anticipated service charges have increased 15% due to an increase in rates, provide documentation of how the increase occurred (Example Rate Increase authorized by resolution or by HUD). The budget is similar to the current year's with increases in part time maintenance staffing to accomplish needed work items. Based on the expected level of funding from HUD, the Authority anticipates utilizing \$76,669 in surplus versus \$10,865 in the current year to balance the budget.
- 2. Complete a brief statement on the impact the proposed Annual Budget will have on Anticipated Revenues, especially service charges and on the general purpose/component unit financial statements. Explain significant increases or decreases, if any. An increase or decrease is considered significant if it is over +/-10% (As shown on budget page F-2 explain reason for change for each revenue changing more than 10%) from the current year adopted budget. The budget is comparable to the current year's with increases in part time maintenance staffing to accomplish needed work items.
- 3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program.

The local economy is stable.

- 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. HUD funding is expected to be comparable to the current level of 90% resulting in lower funding than the Authority is entitled to under the HUD operating formula.
- 5. Identify any sources of funds transferred to the County/Municipality as a budget subsidy or a shared service and explain the reason for the transfer (i.e.: to balance the County/Municipality budget, etc.). None.
- 6. The proposed budget must not reflect an anticipated deficit from 2017 operations. If there exists an accumulated deficit from prior years' budgets (and funding is included in the proposed budget as a result of a prior deficit) explain the funding plan to eliminate said deficit (N.J.S.A. 40A:5A-12). If the Authority has a net deficit reported in its most recent audit, it must provide a deficit reduction plan in response to this question. (Prepare a response to deficits caused by the implementation of GASB 68) The Authority's anticipated deficit is due to accounting for both GASB # 68 and OPEB.

# HOUSING AUTHORITY CONTACT INFORMATION 2017

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

Name of Authority:	Garfield Housing Authori	ty			
Federal ID Number:	22-6002883				
Address:	71 Daniel P. Conte Court				
City, State, Zip:	Garfield		NJ	07026	
Phone: (ext.)	973-340-4170	973-772-7804			
Preparer's Name:	William Katchen, CPA				
Preparer's Address:	Suite 303, 596 Anderson	Avenue			
City, State, Zip:	Cliffside Park		NJ	07010	
Phone: (ext.)	201-943-4449	201-943-5099			
E-mail:	bill@katchencpa.com				
		<u> </u>	<del>.</del>		
Chief Executive Officer:	Martin Geisler				
Phone: (ext.)	973-340-4170	Fax:	973-772-7804		
E-mail:	marty@garfieldhousing.or	·g			
Chief Financial Officer:	William Katchen, CPA				
Phone: (ext.)	<del> </del>	ax: 2	01-943-509	99	
E-mail:	bill@katchencpa.com				
Name of Auditor:	Michael Maurice, CPA				
Name of Firm:	Polcari and Company				
Address:	2035 Hamburg Turnpike,	Unit H			
City, State, Zip:	Wayne		NJ	07470	
Phone: (ext.)	973-831-6969	Fax:	973-83	1-6972	
E-mail:	polcari@optonline.net				

# HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

# **Garfield Housing Authority**

(Name)

TO:3/31/2018

FROM:4/1/2017

**FISCAL** 

YEAR:

An	swer all questions below completely and attach additional information as required.
	Provide the number of individuals employed in calendar year 2015 as reported on the Authority's
	Form W-3, Transmittal of Wage and Tax Statements: 47
2)	
3)	Provide the number of regular voting members of the governing body:7
4)	Provide the number of alternate voting members of the governing body:7
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 because of their relationship with the Authority file the form as required? (Checked to see if individuals actually filed at http://fds.state.nj.us/njdca_prod/fdssearch.aspx before answering)Yes If "no," provide a list of those individuals who failed to file a Financial
7)	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
٥١	Authority.
0)	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?
	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.
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. Board review and HUD required
	comparability study.

	11) Did the Authority pay for meals or catering during the current fiscal year? No 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?  _No 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 NoNo
	c. Tax indemnification and gross-up paymentsNo
	d. Discretionary spending accountNo
	e. Housing allowance or residence for personal useNo
	f. Payments for business use of personal residence No
	g. Vehicle/auto allowance or vehicle for personal useNo
	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?
	NoIf "yes," attach explanation including amount paid.
	17) Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances
	outstanding by submitting its sudited annual financial statements, annual according by
	outstanding by submitting its audited annual financial statements, annual operating data, and notice of
	material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace
	Access (EMMA) as required?N\A If "no," attach a description of the Authority's plan to
	ensure compliance with its Continuing Disclosure Agreements in the future.
	8) Did the Authority receive any notices from the Department of Housing and Urban Development or
	any other entity regarding maintenance or repairs required to the Authority's facilities to bring them
	into compliance with current regulations and standards that it has not yet taken action to remediate?
	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.
	9) Did the Authority receive any notices of fines or assessments from the Department of Housing and
	Urban Dayslanmant on any other artist due to naneouslieus with assessment of flousing 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.
2	20) 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

# Garfield Housing Authority (Name)

FISCAL TRANS

TO:3/31/2018

Complete the attached table for all persons required to be listed per #1-4 below.

YEAR:

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.

FROM:4/1/2017

- 2) List all of the Authority's key employees and highest compensated employees other than a commissioner or officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's <u>former</u> officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's <u>former</u> commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- **Commissioner:** A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.
- Officer: A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.
- Key employee: An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:
  - a) The individual received reportable compensation from the authority and all other public entities in excess of \$150,000 for the most recent fiscal year completed; and
  - b) The individual has responsibilities or influence over the authority as a whole or has power to control or determine 10% or more of the authority's capital expenditures or operating budget.
- Highest compensated employee: One of the five highest compensated employees or independent contractors of the authority other than current commissioners, officers, or key employees whose aggregate reportable compensation from the authority and other public entities is greater than \$100,000 for the most recent fiscal year completed.
- Compensation: All forms of cash and non-cash payments or benefits provided in exchange for services, including salaries and wages, bonuses, severance payments, deferred payments, retirement benefits, fringe benefits, and other financial arrangements or transactions such as personal vehicles, meals, housing, personal and family education benefits, below-market loans, payment of personal or family travel, entertainment, and personal use of the Authority's property. Compensation includes payments and other benefits provided to both employees and independent contractors in exchange for services.
- Reportable compensation: The aggregate compensation that is reported (or is required to be reported) on Form W-2, box 1 or 5, whichever amount is greater, and/or Form 1099-MISC, box 7, for the most recent calendar year ended 60 days before the start of the proposed budget year. For example, for fiscal years ending December 31, 2017, the calendar year 2014 W-2 and 1099 should be used (60 days prior to start of budget year is November 1, 2015, with 2014 being the most recent calendar year ended), and for fiscal years ending June 30, 2017, the calendar year 2015 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2017, with 2015 being the most recent calendar year ended).
- Other Public Entity: Any municipality, county, local authority, fire district, or other government unit, regardless of whether it is related in any way to the Authority either by function or by physical location.

					Gar	ield H	ousing Auth											
	For the Period	April 1, 2017		t	D		March 3	31, 2018										•
				Po	sition			ible Comp thority (W	ensation from 2/ 1099)	1								
Name	Title	Average Hours per Week Dedicated to Position	Commissioner	officer	:	Former	Base Salary/ Stipend	Bonus	Other (auto allowance, expense account, payment in lieu of health benefits, etc.)	Estimated amount of other compensation from the Authority (health benefits, pension, etc.)	Total Compensation from Authority	of the Go	ties where ual is an or Member overning See note	Positions held at Other Public Entities Listed in Column O		Reportable Compensation from Other Public Entitles (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 Entitles
1 Noel Quiles 2 Edward Puzio	Chairperson Vice Chairperson		X									None				· · · · · · · · · · · · · · · · · · ·		\$ -
3 Edward Daibal	Commissioner		X Y									NJPERS		Retired		58,859		58,859
4 Marie Barckett	Commissioner		x									None None						0
5 Richard Giacomarro	Commissioner		x									NJPERS		Retired		31,497		31,497
6 Rosemarie Ribaudo	Commissioner		X								0	NJPERS		Retired		27,276		27,276
7 Judith Susino 8 Martin Geisler	Commissioner		X									None						0
9 Colleen Day	Executive Director Ass't. Executive Direct	•		X			164,574 104,667			57,600	222,174							222,174
10	733 t. Executive Dilect	101		^			104,667			36,634	141,301	None						141,301
11											0	,						0
12											0							0
13											0	)						ō
14 15											0	)						0
Total:							**********	ė .	\$ -	\$ 94,234	<u> </u>					4 44-44		0
							***************************************	<del></del>	<del></del>	3 34,234	\$ 363,475	<b>-</b>			•	\$ 117,632	<u> </u>	\$ 481,107

(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

**Garfield Housing Authority** 

For the Period April 1, 2017 to March 31, 2018 Annual Cost # of Covered Estimate per **Total Cost** # of Covered Members Employee **Estimate** Members **Annual Cost** (Medical & Rx) Proposed Proposed (Medical & Rx) per Employee **Total Prior Year** \$ Increase % Increase **Proposed Budget** Budget Budget **Current Year Current Year** Cost (Decrease) (Decrease) Active Employees - Health Benefits - Annual Cost Single Coverage 4 5 11,862 | \$ 47,448 4 \$ 11,873 | \$ 47,492 \$ (44)-0.1% Parent & Child 40,879 40,879 (40,879)-100.0% Employee & Spouse (or Partner) 2 23.722 2 47,444 23,745 47,490 (46)-0.1% Family 6 33,093 198,558 6 33,126 198,756 (198)-0.1% Employee Cost Sharing Contribution (enter as negative - ) (11,161)(11,161)0.0% Subtotal 12 282,289 13 323,456 (41.167)-12.7% Commissioners - Health Benefits - Annual Cost Single Coverage #DIV/0! Parent & Child #DIV/0! Employee & Spouse (or Partner) #DIV/0! #DIV/0! Employee Cost Sharing Contribution (enter as negative - ) #DIV/0! Subtotal 0 0 #DIV/0! Retirees - Health Benefits - Annual Cost Single Coverage 3 6,510 19,530 6,485 19,455 75 0.4% Parent & Child #DIV/0! Employee & Spouse (or Partner) 5 18,790 93,950 5 18,772 93,860 90 0.1% Family #DIV/0! Employee Cost Sharing Contribution (enter as negative - ) #DIV/0! Subtotal 8 113,480 8 113,315 165 0.1% **GRAND TOTAL** 20 \$ 395,769 21 436,771 \$ (41,002) -9.4% Is medical coverage provided by the SHBP (Yes or No)? (Place Answer in Box) YES Yes or No Is prescription drug coverage provided by the SHBP (Yes or No)? (Place Answer in Box) YES Yes or No

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

# **Schedule of Accumulated Liability for Compensated Absences**

### **Garfield Housing Authority**

For the Period

April 1, 2017

to

March 31, 2018

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

Legal Basis for Benefit

Individuals Eligible for Benefit	Gross Days of Accumulated Compensated Absences at beginning of Current Year	Dollar Value of Accrued Compensated Absence Liability	Approved Labor	Agreement	Resolution	Individual Employment	Agreement
Schedule Attached		\$ 136,485	<u> </u>		X	_ =	<u> </u>
							_
			<del></del>				
						<del></del>	_
Total liability for accumulated compensated abs		\$ 136,485					

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

## **Schedule of Shared Service Agreements**

**Garfield Housing Authority** 

For the Period

April 1, 2017

to

March 31, 2018

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

			Authority
	······································		
			 <u></u>
		-	 

If No Shared	Services >	( this Box
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IY			
1/			

# 2017 HOUSING AUTHORITY BUDGET

# Financial Schedules Section

#### **SUMMARY**

For the Period

#### **Garfield Housing Authority** April 1, 2017

March 31, 2018

		EV.	2017 Duom	d Books		FY 2016 Adopted	\$ Increase (Decrease) Proposed vs.	% Increase (Decrease) Proposed vs.
	Public Housing		2017 Propose	a Buaget		Budget	Adopted	Adopted
	Management	Section 8	Housing Voucher	Other Programs	Total All	Total All		
REVENUES		000.00	Voucilei	Other Frograms	Operations	Operations	All Operations	All Operations
Total Operating Revenues	\$ 3,333,511	\$	- \$ -	· \$ 113,970	\$ 3,447,481	\$ 3,454,625	\$ (7,144)	-0.2%
<b>Total Non-Operating Revenues</b>	9,900			·	9,900	9,900	-	0.0%
Total Anticipated Revenues	3,343,411			113,970	3,457,381	3,464,525	(7,144)	-0.2%
APPROPRIATIONS								<b>5.2</b> 70
Total Administration	887,130			80,000	967,130	983,310	(16,180)	-1.6%
<b>Total Cost of Providing Services</b>	2,532,950			33,970	2,566,920	2,492,080	74,840	3.0%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXXX	XXXXXXXXXXX	xxxxxxxxx	xxxxxxxxxx	<u> </u>			#DIV/0!
<b>Total Operating Appropriations</b>	3,420,080			113,970	3,534,050	3,475,390	58,660	1.7%
Total Interest Payments on Debt Total Other Non-Operating Appropriations Total Non-Operating Appropriations	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXX 	xxxxxxxxxxx	•		-	#DIV/0! #DIV/0!
Accumulated Deficit	_				•	•	-	#DIV/0!
Total Appropriations and Accumulated Deficit	3,420,080		•	113,970	3,534,050	3,475,390	58,660	#DIV/0!
Less: Total Unrestricted Net Position Utilized	76,669			<u> </u>	76,669	10,865	65,804	605.7%
Net Total Appropriations	3,343,411	<del></del>	-	113,970	3,457,381	3,464,525	(7,144)	-0.2%
ANTICIPATED SURPLUS (DEFICIT)	\$ -	\$ -	\$ <u>-</u>	\$	\$ -	\$ -	\$ -	#DIV/0!

## **Revenue Schedule**

For the Period

Garfield Housing Authority

April 1, 2017

t

March 31, 2018

		FY 2017	Proposed	Budget		FY 2016 Adopted Budget	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Public Housing  Management	Section 8	Housing Voucher	Other Programs	Total All	Total All		
OPERATING REVENUES			Vocalet	Other Programs	Operations	Operations	All Operations	All Operation
Rental Fees								
Homebuyers' Monthly Payments					ר\$ -	\$ -	<b>s</b> -	#DIV/0!
Dwelling Rental	2317560				2,317,560	2,315,910	1,650	•
Excess Utilities	35860				35,860	35,860	1,050	0.1%
Non-Dwelling Rental						-	•	0.0%
HUD Operating Subsidy	850091				850,091	854,445	(4,354)	#DIV/0!
New Construction - Acc Section 8						-	(4,554)	-0.5% #DIV/0I
Voucher - Acc Housing Voucher						_	-	#DIV/01
Total Rental Fees	3,203,511	-	_		3,203,511	3,206,215	(2,704)	-0.1%
Other Operating Revenues (List)							(2,704)	-0.1%
Late charges and prorations	130000			113970	243,970	248,410	(4,440)	-1.8%
Type in (Grant, Other Rev)	ł				1 .	- 10,120	(0++(+)	#DIV/0!
Type in (Grant, Other Rev)							•	
Type in (Grant, Other Rev)					1 .	_	-	#DIV/0!
Type in (Grant, Other Rev)					1 -	_	-	#DIV/0!
Type in (Grant, Other Rev)						_	-	#DIV/0!
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)					١.	_	•	#DIV/01
Type in (Grant, Other Rev)					١.	_	-	#DIV/0!
Type in (Grant, Other Rev)						_	-	#DIV/0!
Type in (Grant, Other Rev)					l .	_	-	#DIV/01
Type in (Grant, Other Rev)	j				l .		-	#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/0!
Type in (Grant, Other Rev)					_	_	•	#DIV/01
Total Other Revenue	130,000	-	•	113,970	243,970	248,410	- (4.440)	#DIV/0!
Total Operating Revenues	3,333,511	_	•	113,970	3,447,481	3,454,625	(4,440)	-1.8%
NON-OPERATING REVENUES					577.02	3,434,023	(7,144)	-0.2%
Other Non-Operating Revenues (List)								
Type in					_			#50.46s
Type in					_		•	#DIV/01
Type in					_	•	-	#DIV/0!
Type in	ĺ				_	-	-	#DIV/01
Type in				1	_	•	• .	#DIV/O!
Type in						•	•	#DIV/01
Total Other Non-Operating Revenue	•	•	•		<del></del>		-	#DIV/0!
Interest on Investments & Deposits (List)						<del></del>	<u> </u>	#DIV/01
Interest Earned	9,900				9,900	0.000		
Penalties	1			ŀ	3,300	9,900	-	0.0%
Other					-	•	-	#DIV/01
Total Interest	9,900	•		L	9 900		-	#DIV/01
	9,900	•	-				<del></del>	0.0%
TOTAL ANTICIPATED REVENUES	\$ 3,343,411 \$	- \$	- \$	113.970			· (5.44)	0.0% -0.2%
Total Non-Operating Revenues TOTAL ANTICIPATED REVENUES	9,900	•		113,970	9,900 9,900 \$3,457,381	9,900 9,900 \$ 3,464,525	\$ (7,144)	_

# **Prior Year Adopted Revenue Schedule**

## **Garfield Housing Authority**

	Public Housing	FY 201	16 Adopted Bu	dget	
	Management	Section 8	Housing Voucher	Other Programs	Total All
OPERATING REVENUES	- Trianagement	5000000	voucilei	Other Programs	Operation
Rental Fees					
Homebuyers' Monthly Payments					ـ ا
Dwelling Rental	2,315,910				\$
Excess Utilities	35,860				2,315,91
Non-Dwelling Rental	33,800				35,860
HUD Operating Subsidy	854,445				
New Construction - Acc Section 8	054,445				854,44
Voucher - Acc Housing Voucher					i
Total Rental Fees	3,206,215				
Other Revenue (List)	3,200,215		-	•	3,206,219
Late charges and prorations	120000				
Type in (Grant, Other Rev)	130000			118,410	248,410
Type in (Grant, Other Rev)				1	
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)					
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Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)				Í	
Type in (Grant, Other Rev)	i				-
Type in (Grant, Other Rev)				1	
Type in (Grant, Other Rev)	i				
Type in (Grant, Other Rev)				}	
Type in (Grant, Other Rev)				ĺ	-
Type in (Grant, Other Rev)					-
Total Other Revenue	130,000	-	-	118,410	248,410
Total Operating Revenues	3,336,215	-	-	118,410	3,454,625
ON-OPERATING REVENUES				——·	
ther Non-Operating Revenues (List)					
Type in					
Type in					_
Type in					_
Type in	1				_
Type in				]	_
Type in				İ	_
Other Non-Operating Revenues	-	_	-	<u>-</u>	
terest on Investments & Deposits					
Interest Earned	9,900				9,900
Penalties	1				5,500
Other				[	-
Total Interest	9,900		-		0.000
Total Non-Operating Revenues	9,900		<u> </u>	-	9,900
OTAL ANTICIPATED REVENUES	\$ 3,346,115 \$	- \$		\$ 118,410	9,900 \$3,464,525

## **Appropriations Schedule**

For the Period

**Garfield Housing Authority** 

April 1, 2017

March 31, 2018

		FY	2017  Propos	sed Budget		FY 2016 Adopted Budget	\$ Increase (Decrease) Proposed vs.	% Increase (Decrease) Proposed vs.
	Public Housing Management	Carrie 0	Housing		Total All	Total All	Adopted	Adopted
OPERATING APPROPRIATIONS	wanagement	Section 8	Voucher	Other Programs	Operations	Operations	All Operations	All Operation
Administration								
Salary & Wages	426,350				•			
Fringe Benefits	267,880			55,000	\$ 481,350	\$ 498,080	\$ (16,730)	-3,49
Legal	30,600			25,000	292,880	292,330	550	0.29
Staff Training	15,000				30,600	30,600		0.0%
Travel	12,000				15,000	15,000		0.09
Accounting Fees	35,400				12,000	12,000		0.0%
Auditing Fees	8,500				35,400	35,400		0.0%
Miscellaneous Administration*	91,400				8,500	8,500	_	0.0%
Total Administration	887,130				91,400	91,400		0.0%
Cost of Providing Services		<del></del>		80,000	967,130	983,310	(16,180)	-1.6%
Salary & Wages - Tenant Services	24,000							-1.0%
Salary & Wages - Maintenance & Operation	634,480			33,970	57,970	63,810	(5,840)	-9.2%
Salary & Wages - Protective Services	034,400				634,480	511,450	123,030	24.1%
Salary & Wages - Utility Labor	40,250				•	•		#DIV/01
Fringe Benefits	401,820				40,250	40,250	•	0.0%
Tenant Services	11,400			1	401,820	401,000	820	0.2%
Utilities	571,870			1	11,400	11,400	•	0.0%
Maintenance & Operation	506,000				571,870	620,020	(48,150)	-7.8%
Protective Services	300,000			İ	506,000	506,000	( - ) = 0 - )	0.0%
Insurance	140,000				•	•	-	#DIV/0!
Payment in Lieu of Taxes (PILOT)	174,130				140,000	140,000	-	0.0%
Terminal Leave Payments	177,130				174,130	169,150	4,980	2.9%
Collection Losses	10,000				-	•	4,500	#DIV/0!
Other General Expense	10,000				10,000	10,000	-	0.0%
Rents	1			ì	-	•	-	#DIV/01
Extraordinary Maintenance	i			į.	•		_	#DIV/0!
Replacement of Non-Expendible Equipment	19,000			i	•	•	_	#DIV/01
Property Betterment/Additions	15,000				19,000	19,000	_	0.0%
Miscellaneous COPS*	İ				•	•	_	#DIV/01
Total Cost of Providing Services	2,532,950				<u> </u>	-	_	#DIV/0!
Total Principal Payments on Debt Service in Lieu of	2,332,930		<u> </u>	33,970	2,566,920	2,492,080	74,840	3.0%
Depreciation	XXXXXXXXXXX XX						. 1,010	3.0%
<b>Total Operating Appropriations</b>	3,420,080	XXXXXXXXX X	(XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXX		•	_	#DIV/01
NON-OPERATING APPROPRIATIONS	3,420,080	•	•	113,970	3,534,050	3,475,390	58,660	1.7%
Total Interest Payments on Debt	XXXXXXXXXXXX XX						30,000	1.7%
Operations & Maintenance Reserve	^^^^^	XXXXXXXXX	XXXXXXXXX >	CXXXXXXXXX	-		_	#DIV/OI
Renewal & Replacement Reserve	{				-	•	_	#DIV/0!
Municipality/County Appropriation	1				-	-		#DIV/0!
Other Reserves	•				-		_	#DIV/0!
Total Non-Operating Appropriations					<u>-</u>		_	-
TOTAL APPROPRIATIONS	2 420 000	<b>.</b>					<del></del>	#DIV/01 #DIV/01
ACCUMULATED DEFICIT	3,420,080	<u> </u>		113,970	3,534,050	3,475,390	58,660	-
FOTAL APPROPRIATIONS & ACCUMULATED					•	-,,	30,000	1.7%
DEFICIT								#DIV/OI
JNRESTRICTED NET POSITION UTILIZED	3,420,080	•		113,970	3,534,050	3,475,390	F0.550	
Municipality/County Appropriation						3,473,330	58,660	1.7%
Other County Appropriation			-					
Total Unrestricted Net Position Utilized	76,669				76,669	10.055		#DIV/01
TAL NET ADDOCOCHATIONS	76,669		-		76,669	10,865 10,865	65,804	605.7%
THE REPORT OF TRUTH	\$ 3,343,411 \$	- \$	- \$	113,970 \$	3,457,381		65,804	605.7%
								-0.2%

<sup>•</sup> 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

\$ 171,004.00 \$

- \$

5,698.50 \$

176,702.50

## **Prior Year Adopted Appropriations Schedule**

#### **Garfield Housing Authority**

			Y 2016 Adopted Bud	get	
	Public Housing				Total All
OPERATING APPROPRIATIONS	Management	Section 8	Housing Voucher	Other Programs	Operations
Administration					
Salary & Wages	\$ 443,080			A	
Fringe Benefits	1			\$ 55,000 \$	•
Legal	267,330			25,000	292,330
Staff Training	30,600				30,600
Travel	15,000			1	15,000
Accounting Fees	12,000				12,000
Auditing Fees	35,400				35,400
Miscellaneous Administration*	8,500				8,500
Total Administration	91,400				91,400
	903,310	•	•	80,000	983,310
Cost of Providing Services	25 400				
Salary & Wages - Tenant Services	25,400			38,410	63,810
Salary & Wages - Maintenance & Operation	511,450				511,450
Salary & Wages - Protective Services					•
Salary & Wages - Utility Labor	40,250			. [	40,250
Fringe Benefits	401,000				401,000
Tenant Services	11,400				11,400
Utilities	620,020				620,020
Maintenance & Operation	506,000				506,000
Protective Services					
Insurance	140,000				140,000
Payment in Lieu of Taxes (PILOT)	169,150				169,150
Terminal Leave Payments					
Collection Losses	10,000				10,000
Other General Expense					-
Rents					-
Extraordinary Maintenance	1				•
Replacement of Non-Expendible Equipment	19,000				19,000
Property Betterment/Additions					
Miscellaneous COPS*					
Total Cost of Providing Services	2,453,670	-		38,410	2,492,080
Total Principal Payments on Debt Service in Lieu of					
Depreciation	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	-
<b>Total Operating Appropriations</b>	3,356,980	-	-	118,410	3,475,390
NON-OPERATING APPROPRIATIONS	-				
Total Interest Payments on Debt	XXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	-
Operations & Maintenance Reserve					-
Renewal & Replacement Reserve					-
Municipality/County Appropriation					-
Other Reserves					
Total Non-Operating Appropriations	•	-	•	•	-
TOTAL APPROPRIATIONS	3,356,980	•	•	118,410	3,475,390
ACCUMULATED DEFICIT				220,120	5,475,050
OTAL APPROPRIATIONS & ACCUMULATED	·	·			
DEFICIT	3,356,980	_	_	118,410	2 475 200
INRESTRICTED NET POSITION UTILIZED	3,000,000		<del>-</del>	110,410	3,475,390
Municipality/County Appropriation	_	_	_		
Other	10,865		<b>-</b>		10.055
			<del></del>		10,865
Total Unrestricted Net Position Utilized	10,865	_			10,865

5,920.50 \$

173,769.50

\* Miscellaneous line items may not exceed 5% of total operating appropriations shown below. If amount in miscellaneous is greater than the amount

167,849.00 \$

shown below, then the line item must be itemized above. 5% of Total Operating Appropriations \$

# Debt Service Schedule - Principal

If Authority has no debt X this box	×		Garfield Housing Authority	; Authority					,
				Fiscal Year Ending in	na in				
	Adopted Budget Year 2016	Proposed Budget Year 2017	2018	2019	2020	2021	2022	Thereafter	Total Principal Outstanding
Type in Issue Name Type in Issue Name									\$
Type in Issue Name									, ,
Type in Issue Name TOTAL PRINCIPAL									•
LESS: HUD SUBSIDY						•	•	•	
	^	٠.	\$	\$	- \$	٠.	\$	÷ \$	\$
Indicate the Authority's most recent bond rating and the year of the rating by ratings service	ond rating and the year o	f the ration by ration	onico su						

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

Standard & Poors	
Fitch	
Moody's	
	Year of Last Rating

## **Net Position Reconciliation**

## **Garfield Housing Authority**

For the Period

April 1, 2017

to

March 31, 2018

			FY 20	017 Pr	opose	ed Budget	-
	Pu	blic Housing			using		Total All
TOTAL NET DOCUMENT DECIMALS	M	lanagement	Section	B Vo	ucher	Other Program	Operations
TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)	\$	7,563,431	\$	- \$	-	\$ 11,0	72 \$7,574,503
Less: Invested in Capital Assets, Net of Related Debt (1)		9,583,016				<u> </u>	9,583,016
Less: Restricted for Debt Service Reserve (1)							_
Less: Other Restricted Net Position (1)	L						_
Total Unrestricted Net Position (1)		(2,019,585)		-	-	11,0	72 (2,008,513)
Less: Designated for Non-Operating Improvements & Repairs							(2,000,525)
Less: Designated for Rate Stabilization	1						_
Less: Other Designated by Resolution	1						_
Plus: Accrued Unfunded Pension Liability (1)		3,051,582					3,051,582
Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)		674,734					674,734
Plus: Estimated Income (Loss) on Current Year Operations (2)		(10,865)	•				(10,865)
Plus: Other Adjustments (attach schedule)							(10,803)
UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET		1,695,866					
Unrestricted Net Position Utilized to Balance Proposed Budget		76,669		<u> </u>		11,07	
Unrestricted Net Position Utilized in Proposed Capital Budget		70,003		•	-		- 76,669
Appropriation to Municipality/County (3)		_		-	-		-
Total Unrestricted Net Position Utilized in Proposed Budget		76,669	<del>-</del>	-			<u> </u>
PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR		70,009		-			- 76,669
(4)	\$	1,619,197	\$	- \$	-	\$ 11,07	2 \$1,630,269
(1) Total of all operations for this line item must agree to audited financial state							
(2) Include budgeted and unbudgeted use of unrestricted net position in the cur	ment	5.					
(3) Amount may not exceed 5% of total operating appropriations. See calculation	rent ye	ear's operatio	ons.				
Maximum Allowable Appropriation to Maximum Allowable Appropriation to Maximum Allowable Appropriation							
Maximum Allowable Appropriation to Municipality/County	\$	171,004	\$	- \$	-	\$ 5,69	9 \$ 176,703
(4) If Authority is projecting a deficit for <u>any</u> operation at the end of the budget	perio	d, the Author	rity <u>must att</u>	ach a sto	temen	t explaining its plai	to reduce the
deficit, including the timeline for elimination of the deficit, if not already detaile	d in th	ne budget nai	rrative sectio	on.			