

**ADOPTED COPY**

*Authority Budget of:  
Garfield Housing Authority*

**OFFICE COPY**

State Filing Year                      2021  
For the Period:                      *April 1, 2021      to      March 31, 2022*

**ADOPTED COPY**

[www.garfieldhousing.org](http://www.garfieldhousing.org)  
Authority Web Address

**APPROVED COPY**



*Division of Local Government Services*

**2021 (2021-2022) HOUSING AUTHORITY BUDGET**

**Certification Section**

2021 (2021-2022)

**Garfield Housing Authority**  
(Name)

**HOUSING AUTHORITY BUDGET**

**FISCAL YEAR: FROM April 1, 2021 TO March 31, 2022**

**For Division Use Only**

**CERTIFICATION OF APPROVED BUDGET**

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

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

By: Paul D. Crest, CPA, RMA Date: 2/24/2021

**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. Crest, CPA, RMA Date: 3/17/2021

# 2021 (2021-2022) PREPARER'S CERTIFICATION

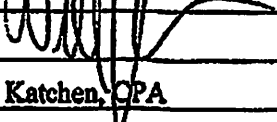
**Garfield Housing Authority**  
(Name)

## HOUSING AUTHORITY BUDGET

**FISCAL** FROM: 4/1/2021 TO: 3/31/2022  
**YEAR:**

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

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

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

# 2021 (2021-2022) APPROVAL CERTIFICATION

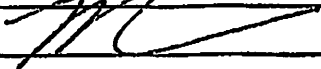
## Garfield Housing Authority (Name)

### HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM:4/1/2021 TO:3/31/2022

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 25 day of January, 2021.

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

|                      |  |             |              |
|----------------------|--|-------------|--------------|
| Officer's Signature: |  |             |              |
| Name:                | Martin Geisler   |             |              |
| Title:               | Executive Director   |             |              |
| Address:             | 70 Daniel P. Conte Court, Garfield, NJ 07026                                       |             |              |
| Phone Number:        | 973-340-4170   | Fax Number: | 973-772-7804 |
| E-mail address       | <a href="mailto:marty@garfieldhousing.org">marty@garfieldhousing.org</a>           |             |              |

## INTERNET WEBSITE CERTIFICATION

|                                 |  |
|---------------------------------|--|
| <b>Authority's Web Address:</b> | <a href="http://www.garfieldhousing.org">www.garfieldhousing.org</a> |
|---------------------------------|--|

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

- A description of the Authority's mission and responsibilities
- The budgets for the current fiscal year and immediately preceding two prior years
- The most recent Comprehensive Annual Financial Report (Unaudited) or similar financial information (Similar information are items such as Revenue and Expenditures Pie Charts or other types of Charts, along with other information that would be useful to the public in understanding the finances/budget of the Authority)
- The complete (All Pages) annual audits (Not the Audit Synopsis) of the most recent fiscal year and immediately two prior years
- The Authority's rules, regulations and official policy statements deemed relevant by the governing body of the authority to the interests of the residents within the authority's service area or jurisdiction
- Notice posted pursuant to the "Open Public Meetings Act" for each meeting of the Authority, setting forth the time, date, location and agenda of each meeting
- The approved minutes of each meeting of the Authority including all resolutions of the board and their committees, for at least three consecutive fiscal years
- The name, mailing address, electronic mail address and phone number of every person who exercises day-to-day supervision or management over some or all of the operations of the Authority
- A list of attorneys, advisors, consultants and any other person, firm, business, partnership, corporation or other organization which received any remuneration of \$17,500 or more during the preceding fiscal year for any service whatsoever rendered to the Authority.

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


Name of Officer Certifying compliance

Martin Geisler

Title of Officer Certifying compliance

Executive Director

Signature



2021-01

2021 (2021-2022) HOUSING AUTHORITY BUDGET  
RESOLUTION

Garfield Housing Authority  
(Name)

FISCAL YEAR: FROM: 4/1/2021 TO: 3/31/2022

WHEREAS, the Annual Budget and Capital Budget for the Garfield Housing Authority for the fiscal year beginning, April 1, 2021 and ending, March 31, 2022 has been presented before the governing body of the Garfield Housing Authority at its open public meeting of January 25, 2021; and

WHEREAS, the Annual Budget as introduced reflects Total Revenues of \$ 3,666,533, Total Appropriations, including any Accumulated Deficit if any, of \$ 3,660,700 and Total Unrestricted Net Position utilized of 0; and

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of \$865,000 and Total Unrestricted Net Position planned to be utilized as funding thereof, of \$ 0; and


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

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

NOW, THEREFORE BE IT RESOLVED, by the governing body of the Garfield Housing Authority, at an open public meeting held on January 25, 2021 that the Annual Budget, including all related schedules, and the Capital Budget/Program of the Garfield Housing Authority for the fiscal year beginning, 4/1/2021 and ending, 3/31/2022 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 Garfield Housing Authority will consider the Annual Budget and Capital Budget/Program for adoption on March 15, 2021.

  
\_\_\_\_\_  
(Secretary's Signature)

1/25/2021  
(Date)

Governing Body Member: Recorded Vote Aye Nay Abstain Absent

*P. 10 - Grants*

Note Fill in the name of Each Commissioner and indicate their

|          | Garfield Housing Authority Board of Commissioners |                          |                          |                                     |
|----------|---|--------------------------|--------------------------|-------------------------------------|
|          | Ayes  | Nays                     | Abstain                  | Absent                              |
| Dabiel   | <input checked="" type="checkbox"/>               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Barklett | <input checked="" type="checkbox"/>               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Garisto  | <input checked="" type="checkbox"/>               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Quiles   | <input type="checkbox"/>                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Puzzo    | <input checked="" type="checkbox"/>               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| Rowe     | <input checked="" type="checkbox"/>               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |

# 2021 (2021-2022) ADOPTION CERTIFICATION

## GARFIELD HOUSING AUTHORITY

(Name)

## HOUSING AUTHORITY BUDGET

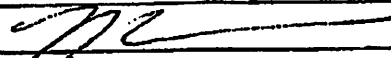
FISCAL  
YEAR:

FROM:4/1/2021

TO:3/31/2022

Note: This is filled on for Adoption of the Budget Don't fill in for Introduction of the Budget

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 15 day of, March, 2021.

|                      |   |             |              |
|----------------------|---|-------------|--------------|
| Officer's Signature: |  |             |              |
| Name:                | Martin Geisler  |             |              |
| Title:               | Executive Director  |             |              |
| Address:             | 71 Daniel P. Conte Court, Garfield, NJ 07026                                      |             |              |
| Phone Number:        | 973-340-4170  | Fax Number: | 973-772-7804 |
| E-mail address       | marty@garfieldhousing.org   |             |              |



2021-04

2021 (2021-2022) ADOPTED BUDGET RESOLUTION
Important - The Amounts on this page need to agree with budget pages F-1 and CB-3. Fill these amounts in after you finalize the amounts on pages F-1 and CB-3. Re-check before this resolution is adopted

GARFIELD HOUSING AUTHORITY
(Name)
HOUSING AUTHORITY

FISCAL YEAR: FROM: 4/1/2021 TO: 3/31/2022

WHEREAS, the Annual Budget and Capital Budget/Program for the Garfield Housing Authority for the fiscal year beginning April 1, 2021 and ending, March 31, 2022 has been presented for adoption before the governing body of the Garfield Housing Authority at its open public meeting of March 15, 2021; 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 \$ 3,666,533, Total Appropriations, including any Accumulated Deficit, if any, of \$3,660,700 and Total Unrestricted Net Position utilized of \$ 0; and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$865,000 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 15, 2021 that the Annual Budget and Capital Budget/Program of the Garfield Housing Authority for the fiscal year beginning, 4/1/2021 and, ending, 3/31/2022 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)

(Date)

Governing Body Member: Recorded Vote Aye Nay Abstain Absent
Note Fill in the name of Each Commissioner and indicate their recorded Vote

6/9/01

Paul Gantz

Table with columns: Garfield Housing Authority Board of Commissioners, Ayes, Nays, Abstain, Absent. Rows: Debel, Bancroft, Gantz, Giffes, Puzio, Ribando.

X

**2021 (2021-2022) HOUSING AUTHORITY BUDGET**

**Narrative and Information Section**

**2021 (2021-2022) HOUSING AUTHORITY BUDGET  
MESSAGE & ANALYSIS  
Garfield Housing Authority  
(Name)**

**AUTHORITY BUDGET**

**FISCAL  
YEAR:**

**FROM:4/1/2021**

**TO:3/31/2022**

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

**1. Complete a brief statement on the 2021/2021-2022 proposed Annual Budget and make comparison to the 2020/2020-2021 adopted budget for each *Revenues and Appropriations*. Explain any variances over +/-10% (As shown on budget pages F-2 and F-4 explain the reason for changes for each revenue and appropriation changing more than 10%) for each individual revenue and appropriation line item. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. (Example Rate Increase authorized by resolution or by HUD).  
See variance description attached.**

**2. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. Example would be effect on a recession in the economy on the housing Authority The local economy is impacted by the pandemic COVID-19, resulting in increased maintenance costs due to implementation of disinfectant work.**

**3. Describe the reasons for utilizing Unrestricted Net Position in the proposed Annual Budget, i.e. rate stabilization, debt service reduction, to balance the budget, etc. If the Authority's budget anticipates a use of Unrestricted Net Position, this question must be answered.  
It is not anticipated that unrestricted net position will be utilized.**

**4. Identify any sources of funds transferred to the County/Municipality as a Pilot Payments, or a shared service and explain the reason for the transfer -- Housing Authorities cannot transfer Unrestricted Net Position (i.e.: to balance the County/Municipality budget, etc.).  
PILOT only.**

**5. The proposed budget must not reflect an anticipated deficit from 2021/2021-2022 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. The Authority has an accumulated deficit due to accounting for the noncash OPEB and pension requirements. The proposed budget anticipates a surplus in operations that will reduce the accumulated deficit.**

**(Prepare a response to deficits in most recent audit report pertaining to Deficits to Unrestricted Net Position caused by recording Pension and Post-Employment Benefits liabilities as required by GASB 68 and GASB 75).**

## HOUSING AUTHORITY CONTACT INFORMATION AUTHORITY CONTACT INFORMATION 2021 (2021-2022)

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

|                           |                            |             |              |
|---------------------------|----------------------------|-------------|--------------|
| <b>Name of Authority:</b> | Garfield Housing Authority |             |              |
| <b>Federal ID Number:</b> | 22-6002883                 |             |              |
| <b>Address:</b>           | 70 Daniel P. Conte Court   |             |              |
| <b>City, State, Zip:</b>  | Garfield                   | NJ          | 07026        |
| <b>Phone: (ext.)</b>      | 973-340-4170               | <b>Fax:</b> | 973-772-7804 |

|                            |  |             |              |
|----------------------------|--|-------------|--------------|
| <b>Preparer's Name:</b>    | William Katchen, CPA   |             |              |
| <b>Preparer's Address:</b> | 596 Anderson Avenue, Suite 303                               |             |              |
| <b>City, State, Zip:</b>   | Cliffside Park   | NJ          | 07010        |
| <b>Phone: (ext.)</b>       | 201-943-4449   | <b>Fax:</b> | 201-943-5099 |
| <b>E-mail:</b>             | <a href="mailto:bill@katchencpa.com">bill@katchencpa.com</a> |             |              |

|   |  |             |              |
|---|--|-------------|--------------|
| <b>Chief Executive Officer:(1)</b>                                    | Martin Geisler   |             |              |
| <b>(1) Or person who performs these functions under another Title</b> |  |             |              |
| <b>Phone: (ext.)</b>  | 973-340-4170   | <b>Fax:</b> | 973-772-7804 |
| <b>E-mail:</b>  | <a href="mailto:marty@garfieldhousing.org">marty@garfieldhousing.org</a> |             |              |

|   |  |             |              |
|---|--|-------------|--------------|
| <b>Chief Financial Officer(1)</b>                                     | Martin Geisler   |             |              |
| <b>(1) Or person who performs these functions under another Title</b> |  |             |              |
| <b>Phone: (ext.)</b>  | 973-340-4170   | <b>Fax:</b> | 973-772-7804 |
| <b>E-mail:</b>  | <a href="mailto:marty@garfieldhousing.org">marty@garfieldhousing.org</a> |             |              |

|                          |  |             |              |
|--------------------------|--|-------------|--------------|
| <b>Name of Auditor:</b>  | Michael Maurice, CPA   |             |              |
| <b>Name of Firm:</b>     | Polcari and Company  |             |              |
| <b>Address:</b>          | 2035 Hamburg Turnpike, Unit H  |             |              |
| <b>City, State, Zip:</b> | Wayne  | NJ          | 07470        |
| <b>Phone: (ext.)</b>     | 973-831-6969   | <b>Fax:</b> | 973-831-6972 |
| <b>E-mail:</b>           | <a href="mailto:polcarico@optonline.net">polcarico@optonline.net</a> |             |              |

# HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

Garfield Housing Authority  
(Name)

FISCAL  
YEAR:

FROM:4/1/2021

TO:3/31/2022

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 2019 or 2020) as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 50
- 2) Provide the amount of total salaries and wages as reported on the Authority's Form W-3, (Use Most Recent W-3 Available 2019 or 2020) Transmittal of Wage and Tax Statements: \$1,700,740
- 3) Provide the number of regular voting members of the governing body: 7 (Even if not all commissioners have been appointed (Total Commissioners are either 5 or 7 as per statute for your Authority)
- 4) Provide the number of alternate voting members of the governing body: 0 (Maximum is 2)
- 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year? No If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority.
- 6) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year (Most Recent Filing that March 31, 2020 or 2021 deadline has passed 2020 or 2021) because of their relationship with the Authority file the form as required? (Checked to see if individuals actually filed at <http://www.state.nj.us/dca/divisions/dlgs/resources/fds.html> before answering) Yes If "no," provide a list of those individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their failure to file.
- 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? No If "yes," attach a list of those individuals, their position, the amount receivable, and a description of the amount due to the Authority.
- 8) Was the Authority a party to a business transaction with one of the following parties:
  - a. A current or former commissioner, officer, key employee, or highest compensated employee? No
  - b. A family member of a current or former commissioner, officer, key employee, or highest compensated employee? No
  - c. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner? NoIf the answer to any of the above is "yes," attach a description of the transaction including the name of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process.
- 9) Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment contract that benefits, directly or indirectly, the transferor, a member of the transferor's family, or any other person designated by the transferor. No If "yes," attach a description of the arrangement, the premiums paid, and indicate the beneficiary of the contract.
- 10) Explain the Authority's process for determining compensation for all persons listed on Page N-4. Include whether the Authority's process includes any of the following: 1) review and approval by the commissioners or a committee thereof; 2) study or survey of compensation data for comparable positions in similarly sized entities; 3) annual or periodic performance evaluation; 4) independent compensation consultant; and/or 5) written employment contract. Attach a narrative of your Authority's procedures for all individuals listed on Page N-4 (2 of 2). Board review and action.

- 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?
- First class or charter travel   No
  - Travel for companions   No
  - Tax indemnification and gross-up payments   No
  - Discretionary spending account   No
  - Housing allowance or residence for personal use   No
  - Payments for business use of personal residence   No
  - Vehicle/auto allowance or vehicle for personal use   No
  - Health or social club dues or initiation fees   No
  - Personal services (i.e.: maid, chauffeur, chef)   No
- If the answer to any of the above is "yes," attach a description of the transaction including the name and position of the individual and the amount expended.
- 14) Did the Authority follow a written policy regarding payment or reimbursement for expenses incurred by employees and/or commissioners during the course of Authority business and does that policy require substantiation of expenses through receipts or invoices prior to reimbursement?   Yes   If "no," attach an explanation of the Authority's process for reimbursing employees and commissioners for expenses. (If your authority does not allow for reimbursements indicate that in answer)
- 15) Did the Authority make any payments to current or former commissioners or employees for severance or termination?   No   If "yes," attach explanation including amount paid.
- 16) Did the Authority make any payments to current or former commissioners or employees that were contingent upon the performance of the Authority or that were considered discretionary bonuses?   No   If "yes," attach explanation including amount paid.
- 17) Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances outstanding by submitting its audited annual financial statements, annual operating data, and notice of material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace Access (EMMA) as required?   No   If "no," attach a description of the Authority's plan to ensure compliance with its Continuing Disclosure Agreements in the future. (If no bonded Debt answer is Not Applicable) (Loans from a Bank or State Agencies are not bonded Debt)
- 18) Did the Authority receive any notices from the Department of Environmental Protection or any other entity regarding maintenance or repairs required to the Authority's systems to bring them into compliance with current regulations and standards that it has not yet taken action to remediate?   No   If "yes," attach explanation as to why the Authority has not yet undertaken the required maintenance or repairs and describe the Authority's plan to address the conditions identified.
- 19) Did the Authority receive any notices of fines or assessments from the Department of Environmental Protection or any other entity due to noncompliance with current regulations (i.e.: sewer overflow, etc.)?   No   If "yes," attach a description of the event or condition that resulted in the fine or assessment and indicate the amount of the fine or assessment.
- 20) Did the Authority receive any notices of fines or assessments from the Department of Housing and Urban Development or any other entity due to noncompliance with current regulations?   No   If "yes," attach a description of the event or condition that resulted in the fine or assessment and indicate the amount of the fine or assessment.
- 21) Has the Authority been deemed "troubled" by the Department of Housing and Urban Development?   No   If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.

*(This page is directions for filling in page (N-4 (2-of 2) ) (No answers should be entered on this page)*

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

**Garfield Housing Authority**

(Name)

**FISCAL  
YEAR:**

**FROM:4/1/2021**

**TO:3/31/2022**

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

- 1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.
- 2) List all of the Authority's key employees and highest compensated employees other than a commissioner or officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's former officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's former commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.

**Commissioner:** A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.

**Officer:** A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.

**Key employee:** An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:

- a) The individual received reportable compensation from the authority and 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:** (Use the Most Recent W-2 available 2019 or 2020. 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, 2021, the most recent W-2 and 1099 should be used 2020 or 2019 (60 days prior to start of budget year is November 1, 2020, with 2019 being the most recent calendar year ended), and for fiscal years ending June 30, 2021, the calendar year 2020 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2021, with 2020 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.

**2021 (2022) HOUSING AUTHORITY BUDGET**

**Financial Schedules Section**



2021 (2021-2022)  
GARFIELD  
HOUSING  
AUTHORITY  
(Name)

HOUSING  
AUTHORITY  
CAPITAL  
BUDGET/  
PROGRAM

# 2021 (2021-2022) CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM


**Garfield Housing Authority**  
(Name)

**FISCAL YEAR: FROM:4/1/2021 TO:3/31/2022**

enter X to the left if this paragraph is applicable  
It is hereby certified that the Housing Authority Capital Budget/Program annexed hereto is a true copy of the Capital Budget/Program approved, pursuant to N.J.A.C. 5:31-2.2, along with the Annual Budget, by the governing body of the Garfield Housing Authority, on the 25 day of January, 2021.

OR

enter X to the left if this paragraph is applicable  
It is hereby certified that the governing body of the \_\_\_\_\_ Housing Authority have elected **NOT** to adopt a Capital Budget /Program for the aforesaid fiscal year, pursuant to N.J.A.C. 5:31-2.2 for the following reason(s): \_\_\_\_\_

|                      |   |             |              |
|----------------------|---|-------------|--------------|
| Officer's Signature: |  |             |              |
| Name:                | Martin Geisler  |             |              |
| Title:               | Executive Director  |             |              |
| Address:             | 70 Daniel P. Conte Court, Garfield, NJ 07026  |             |              |
| Phone Number:        | 973-340-4170  | Fax Number: | 973-772-7804 |
| E-mail address       | marty@garfieldhousing.org   |             |              |

# 2021 (2021-2022) CAPITAL BUDGET/PROGRAM MESSAGE

## Garfield Housing Authority

(Name)

FISCAL  
YEAR:

FROM:4/1/2021

TO:3/31/2022

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

1. Has each municipality or county affected by the actions of the authority participated in the development of the capital plan and reviewed or approved the plans or projects included within the Capital Budget/Program (This may include the governing body or certain officials such as planning boards, Construction Code Officials) as to these Projects?

No.

2. Has each capital project/project financing been developed from a specific plan or report and have the full life cycle costs of each been calculated?

No.

3. Has a long-term (5 years or more) infrastructure needs and other capital items (Vehicles, Equipment) needs assessment been prepared?

No.

4. If amounts are on Page CB-3 in the column Debt Authorizations. Indicate the primary source of funding the debt service for the Debt Authorizations (Example HUD Funding or Other sources)

N/A

5. Have the current capital projects been reviewed and approved by HUD?

Yes

*Add additional sheets if necessary.*

# Proposed Capital Budget

Garfield Housing Authority  
 For the Period April 1, 2021 to March 31, 2022

|                                      | Estimated Total Cost | Funding Sources                    |                               |                    |                |
|--------------------------------------|----------------------|------------------------------------|-------------------------------|--------------------|----------------|
|                                      |                      | Unrestricted Net Position Utilized | Renewal & Replacement Reserve | Debt Authorization | Capital Grants |
| <b>Public Housing Management</b>     |                      |                                    |                               |                    |                |
| Management Improvements              | \$ 65,000            |                                    |                               | \$ 65,000          |                |
| Various Capital Projects             | 800,000              |                                    |                               | 800,000            |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| <b>Total</b>                         | <b>865,000</b>       | -                                  | -                             | <b>865,000</b>     | -              |
| <b>Section 8</b>                     |                      |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| <b>Total</b>                         | <b>-</b>             | -                                  | -                             | -                  | -              |
| <b>Housing Voucher</b>               |                      |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| <b>Total</b>                         | <b>-</b>             | -                                  | -                             | -                  | -              |
| <b>Other Programs</b>                |                      |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| Type In Description                  | -                    |                                    |                               |                    |                |
| <b>Total</b>                         | <b>-</b>             | -                                  | -                             | -                  | -              |
| <b>TOTAL PROPOSED CAPITAL BUDGET</b> | <b>\$ 865,000</b>    | <b>\$ -</b>                        | <b>\$ -</b>                   | <b>\$ 865,000</b>  | <b>\$ -</b>    |

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

Garfield Housing Authority  
 For the Period April 1, 2021 to March 31, 2022

*Fiscal Year Beginning In*

|                                  | Estimated Total<br>Cost | Current Budget<br>Year 2021 | 2022              | 2023              | 2024              | 2025              | 2026              |
|----------------------------------|-------------------------|-----------------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
| <b>Public Housing Management</b> |                         |                             |                   |                   |                   |                   |                   |
| Management Improvements          | \$ 390,000              | \$ 65,000                   | \$ 65,000         | \$ 65,000         | \$ 65,000         | \$ 65,000         | \$ 65,000         |
| Various Capital Projects         | 4,800,000               | 800,000                     | 800,000           | 800,000           | 800,000           | 800,000           | 800,000           |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| <b>Total</b>                     | <b>5,190,000</b>        | <b>865,000</b>              | <b>865,000</b>    | <b>865,000</b>    | <b>865,000</b>    | <b>865,000</b>    | <b>865,000</b>    |
| <b>Section 8</b>                 |                         |                             |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| <b>Total</b>                     | <b>-</b>                | <b>-</b>                    | <b>-</b>          | <b>-</b>          | <b>-</b>          | <b>-</b>          | <b>-</b>          |
| <b>Housing Voucher</b>           |                         |                             |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| <b>Total</b>                     | <b>-</b>                | <b>-</b>                    | <b>-</b>          | <b>-</b>          | <b>-</b>          | <b>-</b>          | <b>-</b>          |
| <b>Other Programs</b>            |                         |                             |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| Type In Description              | -                       | -                           |                   |                   |                   |                   |                   |
| <b>Total</b>                     | <b>-</b>                | <b>-</b>                    | <b>-</b>          | <b>-</b>          | <b>-</b>          | <b>-</b>          | <b>-</b>          |
| <b>TOTAL</b>                     | <b>\$ 5,190,000</b>     | <b>\$ 865,000</b>           | <b>\$ 865,000</b> | <b>\$ 865,000</b> | <b>\$ 865,000</b> | <b>\$ 865,000</b> | <b>\$ 865,000</b> |

*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

Garfield Housing Authority  
 For the Period April 1, 2021 to March 31, 2022

|                                   | Estimated Total Cost | <i>Funding Sources</i>   |                               |                    |                              |
|-----------------------------------|----------------------|--|-------------------------------|--------------------|------------------------------|
|                                   |                      | Unrestricted Net Position Utilized   | Renewal & Replacement Reserve | Debt Authorization | Capital Grants Other Sources |
| <b>Public Housing Management</b>  |                      |  |                               |                    |                              |
| Management Improvements           | \$ 390,000           |  |                               |                    | \$ 390,000                   |
| Various Capital Projects          | 4,800,000            |  |                               |                    | 4,800,000                    |
| Type In Description               | -                    |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| <b>Total</b>                      | <b>5,190,000</b>     | -  | -                             | -                  | <b>5,190,000</b>             |
| <b>Section 8</b>                  |                      |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| <b>Total</b>                      | <b>-</b>             | -  | -                             | -                  | -                            |
| <b>Housing Voucher</b>            |                      |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| <b>Total</b>                      | <b>-</b>             | -  | -                             | -                  | -                            |
| <b>Other Programs</b>             |                      |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| Type In Description               | -                    |  |                               |                    |                              |
| <b>Total</b>                      | <b>-</b>             | -  | -                             | -                  | -                            |
| <b>TOTAL</b>                      | <b>\$ 5,190,000</b>  | <b>\$ -</b>  | <b>\$ -</b>                   | <b>\$ -</b>        | <b>\$ 5,190,000</b>          |
| <b>Total 5 Year Plan per CB-4</b> | <b>\$ 5,190,000</b>  |  |                               |                    |                              |
| <b>Balance check</b>              |                      | - If amount is other than zero, verify that projects listed above match projects listed on CB-4. |                               |                    |                              |

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

**GARFIELD HOUSING AUTHORITY**

**2021 NEW JERSEY BUDGET**

**PAGE N-1, QUESTION 1**

**Appropriations:**

- 1.) Tenant services salaries increased in the proposed budget to provide for increased services provided to tenants.**