

Annual Statement /Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: Community Development Authority of the City of Madison	Grant Type and Number Capital Fund Program Grant No: WI39-P003-501-07 Replacement Housing Factor Grant No:	Federal FY of Grant: 2007
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Development Number Name / HA Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
WI39-P003-001		9/13/2009			9/13/2011		
WI39-P003-004		9/13/2009			9/13/2011		
WI39-P003-005		9/13/2009			9/13/2011		
WI39-P003-006		9/13/2009			9/13/2011		
WI39-P003-007		9/13/2009			9/13/2011		
WI39-P003-008		9/13/2009			9/13/2011		
WI39-P003-009		9/13/2009			9/13/2011		
WI39-P003-0013		9/13/2009			9/13/2011		
WI39-P003-00all		9/13/2009			9/13/2011		
WI39-P003-00mngt.		9/13/2009			9/13/2011		
WI39-P003-00admin.		9/13/2009			9/13/2011		

(1) To Be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date	Signature of Public Housing Director/Office of Native American Programs Administrator and Date
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