

CERTIFICATIONS

I hereby certify that:

I have the authority to sign these Certifications;

I understand that these Certifications are in addition to the provisions in those certifications incorporated by reference into the above cited contract;

All activities undertaken by the grantee with funds provided under this contract have to the best of my knowledge been carried out in accordance with the Arizona Department of Housing contract;

The grantee shall resolve any findings and/or remit to the state any disallowed costs by any subsequent audit report that are sustained by the Arizona Department of Housing, within 60 days of the date of a written determination by ADOH that such are required;

The State of Arizona is under no obligation to make any further payment to the grantee under this contract; and

The very statement and amount set forth in this Closeout Report is to the best of my knowledge true and correct as of this date.

June 25, 2013

Signature of Chief Elected Official or Designee (CD-1)

Date

Michael A. Pastor

Chairman, Gila Co. Board of Supervisors

Typed/Printed Name

Title

For CDBG Program Use Only

This Closeout Report for ADOH CDBG Contract # _____, FY _____, is hereby approved effective this date.

Signature _____

Date _____

Typed Name Katherine Blodgett

Title CD&R Program Administrator

Closeout Report Checklist

Check each item as completed or N/A. This form should be page 2 (after the Closeout Certification).

A. DRAFT CLOSEOUT OR FINAL CLOSEOUT

B. AUTHORIZED SIGNATURE ON CERTIFICATIONS

C. ATTACHMENTS

- 1. Certifications (required) page 1
- 2. Section I. Business Opportunities Report (required) page 3
- 3. Section II. Performance Report (required) page 4
- 4. Section III. Contract Accounting (required) page 5
- 5. Section IV. Housing Applicant/Beneficiary Statement N/A or page _____
- 6. Section V. Job Creation/Retention Applicant/
Beneficiary Statement N/A or page _____
- 7. A description of all property acquired with CDBG N/A or page _____
- 8. A description of how Program Income *was* used N/A or page _____
- 9. A description of how Program Income *will be* used N/A or page _____
- 10. Nomination Form for Outstanding CDBG Project N/A or page _____

D. CONSISTENCY REVIEW

- 1. The total amount of contracts indicated in Section I.H shall be equal to the total of CDBG funds shown in Section III.A.5.
- 2. Ensure that the totals agree in Section II.G and Section III.A.5.
- 3. The list of providers on Section I. BOR, must be supported by other information in the file, e.g., contractor verification forms, contracts, and RFPs.
- 4. The total CDBG funds expended per activity (Section II.E) equals the total indicated on the RFPs and is at least as much as the contract amount in Section I.D.
- 5. The number of beneficiaries (and number of units if a housing activity) stated in Section II.D is the same as in Section IV. or Section V., as applicable.
- 6. All other descriptive information is consistent throughout the Closeout Report.

E. COPY OF CLOSEOUT RETAINED FOR GRANTEE RECORDS

Section I. BUSINESS OPPORTUNITIES REPORT (BOR)

Grantee:	Contract Number	Contact Person	Phone Number	Address, City, State Zip Code +4
Gila County	144-11	Malissa Buzan	928-425-7631	5515 S. Apache Ave, Ste 200, Globe 85501

Contractor/Subcontractor Information												
A. Amount of Contract	B. Type of Trade Code*	C. Racial Code*	D. Hispanic Owned (Y/N)	E. Women Owned (Y/N)	F. IRS Tax ID (EIN) and DUNS Numbers	G. Sec. 3 (Y/N)	H. Legal Name	I. Street Address	J. City	K. State	L. Zip Code	M. Date of Contract
\$33,837.44	2	11	N	N	526-33-8005 & 03-829-4362	N	Greentree Construction	P.O. Box 2215	Claypool	AZ	85532	12-6-12
\$11,526.14	2	11	N	N	526-33-8005 & 03-829-4362	N	Greentree Construction	P.O. Box 2215	Claypool	AZ	85532	9-14-12
\$16,642.79	2	11	Y	N	20-2958914 & 162230952	N	Rodriguez Construction	P.O. Box 12	Miami	AZ	85539	3-19-13
\$30,823.65	2	11	N	N	26-4534717 & 94-875-1206		Pointe Companies, Inc.	1792 Commerce Dr.	Lakeside	AZ	85929	2-13-13
\$												

*See Demographic and Trade Code table below for information

Vendors/Suppliers/Professional Service Providers Information												
A. Amount of Contract	B. Type of Trade Code*	C. Racial Code*	D. Hispanic Owned (Y/N)	E. Women Owned (Y/N)	F. IRS Tax ID (EIN) and DUNS Numbers	G. Sec. 3 (Y/N)	H. Legal Name	I. Street Address	J. City	K. State	L. Zip Code	M. Date of Contract
\$ 440.00	4	11	N	N	86-0506255 & 148941628	N	Pioneer Title Agency	PO Box 250	Payson	AZ	85501	Multiple
\$1,665.00	4	11	N	N	31-1274947 & 025806406	N	Environmental Consulting Service	4727 E. Bell Road, Suite 45-250	Phoenix	AZ	85032	Multiple
\$473.70	4	11	N	N	86-0938049 & 176648635	N	DJ'S Companies Inc.	978 E. Saguaro Drive	Globe	AZ	85501	Multiple
\$												
\$												
\$												
\$												

*See Demographic and Trade Code table below for information

Demographic and Trade Codes	
Race	Type of Trade Code
11 – White	1- New Construction
12 – African American	2 – Substantial Rehab
13 – Asian	3 – Repair
14 – American Indian or Alaskan Native	4 – Service
15 – Native Hawaiian or Other Pacific Islander	5- Project Management
16 – American Indian or Alaskan Native and White	6 – Professional
17 – Asian and White	7 – Tenant Services
18 – African American and White	8 – Educational Training
19 – American Indian or Alaskan Native and African American	9- Architecture/Engineering
20 – Other Multi-racial	10 – Other

Section III. CONTRACT ACCOUNTING

A. GRANT BALANCE (round all numbers to the nearest dollar)

- 1. TOTAL CDBG FUNDS as stated in the *original* contract \$ 139,635.00
- 2. CDBG FUNDS ADDED TO THIS CONTRACT \$ 0.00
From CDBG contract no. _____ Amount: _____
From CDBG contract no. _____ Amount: _____
- 3. FUNDS TRANSFERRED TO OTHER CDBG CONTRACT(S) \$ 0.00
To CDBG contract no. _____ Amount: _____
To CDBG contract no. _____ Amount: _____
- 4. DEOBLIGATED FUNDS \$ 2,960.20
- 5. TOTAL CDBG FUNDS PER MOST RECENT FORM 1-R \$ 0.00
- 6. TOTAL CDBG FUNDS RECEIVED AND DISBURSED \$ 136,674.80
- 7. TOTAL LEVERAGE FUNDS RECEIVED AND DISBURSED \$ 0.00
- 8. TOTAL EXPENDITURES (CDBG, LEVERAGE, and OTHER FUNDS) \$ 136,674.80

B. PROGRAM INCOME (PI): Yes N/A

- 1. Amount of Program Income earned during grant period \$ _____
- 2. Amount of Program Income disbursed during grant period \$ _____
- 3. Balance of Program Income retained by grantee \$ _____
- 4. Description of how Program Income *was* used is attached as page _____.
- 5. Description of how Program Income retained by grantee *will be* used is attached as page _____.

Prepared By: Malissa Buzan Malissa Buzan
(Signature) (Printed Name)