

Housing Counseling Agency
Fiscal Year Activity Report

U.S. Department of Housing
and Urban Development
Office of Housing
Federal Housing Commissioner

OMB Approval No. 2502-0261
(exp.02/28/2009)

Read the instructions and Public Burden in your instruction packet.

1. Counseling agency name and address/telephone/fax/contact person/e-mail

* Agency Name: [Redacted]

Address:

* Street1: [Redacted]

Street2: [Redacted]

* City: [Redacted]

County: [Redacted]

* State: [Redacted]

* Zip Code: [Redacted]

* Country: [Redacted]

Contact Person:

Prefix: [Redacted]

* First Name: [Redacted]

Middle Name: [Redacted]

* Last Name: [Redacted]

Suffix: [Redacted]

* Phone Number: [Redacted]

Fax Number: [Redacted]

Email Address: [Redacted]

Check here if any of this is new information: Yes No * 2. Reporting Year: 10/01/ [Redacted] * To: 09/30/ [Redacted]

	All Counseling Activities	HUD Grant Activities
3. Ethnicity of Clients (select only one)		
a. Hispanic	[Redacted]	[Redacted]
b. Not Hispanic	[Redacted]	[Redacted]
4. Race of Clients		
Single Race		
a. American Indian/Alaskan Native	[Redacted]	[Redacted]
b. Asian	[Redacted]	[Redacted]
c. Black or African American	[Redacted]	[Redacted]
d. Native Hawaiian or Other Pacific Islander	[Redacted]	[Redacted]
e. White	[Redacted]	[Redacted]
Multi-Race		
f. American Indian or Alaska Native and White	[Redacted]	[Redacted]
g. Asian and White	[Redacted]	[Redacted]
h. Black or African American and White	[Redacted]	[Redacted]
i. American Indian or Alaska Native and Black or African American	[Redacted]	[Redacted]
j. Other multiple race	[Redacted]	[Redacted]
5. Income Levels		
a. < 50% of Area Median Income (AMI)	[Redacted]	[Redacted]
b. 50 - 80% of AMI	[Redacted]	[Redacted]
c. 80 - 100% of AMI	[Redacted]	[Redacted]
d. >100% AMI	[Redacted]	[Redacted]
6. Numbers of Clients Receiving Educational/Outreach Services (if client also receives counseling, please include in count below)		
a. Completed Homebuyer Education Workshop	[Redacted]	[Redacted]
b. Completed Post-Purchase Homeowner Workshop	[Redacted]	[Redacted]
c. Sought Help with Fair Housing Issue	[Redacted]	[Redacted]
d. Sought Help with or Attended Workshop on Predatory Lending	[Redacted]	[Redacted]

	All Counseling Activities	HUD Grant Activities
7. Numbers of Clients Counseled, by Purpose of Visit and Results		
a. Seeking Pre-Purchase Homebuyer Counseling		
Purchased Housing		
Client will be Mortgage Ready within 90 Days		
Client will be Mortgage Ready after 90 Days; Receiving Long-Term Prepurchase Counseling		
Entered Lease Purchase Program		
Decided Not to Purchase Housing; No Further Effort to Prepare Needed		
Other		
Total		
b. Seeking Help with Resolving or Preventing Mortgage Delinquency		
Brought Mortgage Current		
Mortgage Refinanced		
Mortgage Modified		
Received Second Mortgage		
Initiated Forbearance Agreement/Repayment Plan		
Executed a Deed-in-Lieu		
Sold Property/Preforeclosure Sale, Chose Alternative Housing Solution		
Mortgage Foreclosed		
Currently Receiving Foreclosure Prevention/Budget Counseling		
Partial Claim		
Other		
Total		
c. Seeking Help Converting Home Equity into Cash or Seeking Better Mortgage Loan Terms		
Obtained a Home Equity Conversion Mortgage (HECM)		
Received Home Equity or Home Improvement Loan		
Received Consumer Loan (Unsecured)		
Mortgage Refinanced		
Referred to Other Social Service Agency		
Sold House, Chose Alternative Housing Solution		
Counseled on HECM; Decided Not to Obtain Mortgage		
Currently Receiving Counseling		
Other		
Total		
d. Seeking Help in Locating, Securing, or Maintaining Residence in Rental Housing		
Received Housing Search Assistance		
Obtained Temporary Rental Relief		
Referred to Agency with Rental Assistance Program		
Advised on Recertification for HUD/Other Subsidy Program		
Referred to Other Social Service Agency		
Counseled or Referred to Legal Aid Agency for Eviction or Other Fair Housing Assistance		
Found Alternative Rental Housing		
Decided to Remain in Current Housing Situation		
Entered Debt Management/Repayment Plan		
Currently Receiving Counseling		
Other		
Total		
e. Seeking Shelter or Services for the Homeless		
Occupied Emergency Shelter		
Occupied Transitional Housing		
Occupied Permanent Housing with Rental Assistance		
Occupied Permanent Housing without Rental Assistance		
Referred to Other Social Service Agency		
Remained Homeless		
Currently Receiving Counseling		
Other		
Total		

8. HUD Grant Activity - Summary Data

* HUD Grant No.	* HUD Grant Amount	* Number of Clients	* Amount Invoiced
	* Total:		

9. Name of Person Authorized to Sign this Report

* Title:

* Signature:

* Date: