GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS
QUARTERLY EXPENDITURES AND PROGRESS REPORT

SECTION I: GENERAL INFORMATION

Recipient Name: Cobb County
Grant Number: 08-ns-5056
Report No: 03
Quarter End: 11/30/2009
Final Report? No
Final Report:
Contact Person: Nick Autorina
Telephone Number: 770-528-4600
E-mail: nautorina@cobbcountycdbg.com

SECTION II: FINANCIAL INFORMATION

A. Activity Number	B. Amount Revised Budgeted	C. Cumulative Amount Drawdown	D. Cumulative Balance (B - C)	E. Expended This Quarter	F. Obligated End of Quarter	G. Cumulative Expended to Date	H. Cumulative Obligated to Date	I. Cumulative Total to Date (G + H)	J. Cumulative Percentage
001-B-H	311,100.69	0.00	311,100.69	0.00	83,640.00	0.00	83,640.00	83,640.00	26.89%
001-B-I	1,113,851.33		1,113,851.33	106,466.68		106,466.68		106,466.68	9.56%
013-A-H	85,671.40		85,671.40						0.00%
013-A-I	64,253.55		64,253.55						0.00%
14A-B-H	56,543.12		56,543.12						0.00%
14A-B-I	127,222.03	0.00	127,222.03	0.00	17,000.00	0.00	17,000.00	17,000.00	13.36%
21A (Admin)	54,615.52		54,615.52						0.00%
Totals	1,813,257.64	0.00	1,813,257.64	106,466.68	100,640.00	106,466.68	100,640.00	207,106.68	11.42%

SECTION III: CONTRACTS AND SUBCONTRACTS FOR THIS QUARTER

Contractor/ Subcontractor Name	Address	City, State, Zip	Prime Contractor ID Number	Sec 3	Sub Contractor ID Number	Sec 3	Total Amt. of Contract/ Subcontract	CDBG Part Contract/ Subcontract	Trade/ Race Codes		Women Owned

Trade Codes: 1 = New Construction, 2 = Education/Training, 3 = Other

Racial/Ethnic Codes: 1 = White, 2 = Black, 3 = Native American, 4 = Hispanic, 5 = Asian

Total Contracts/Subcontracts: 0

DCA 2009 v.2.0

Reference No. 10371

Scanned Date:

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SECTION IV: Work in Progress

Use this section to provide a brief narrative description of work in progress during the reporting period. Use the Project Implementation Schedule included in your application as the basis for reporting.

During Q3-2009, Cobb County acquired its first DCA funded property. The project set-up and drawdown process was completed and rehab is currently underway on this project

For next quarter, we anticipate drawing down funds for rehab on the above referenced acquisition. We have also set up a new project for acquisition for mid-January and the rehab phase will commence, once the acquisition is complete.

SECTION V: Other Supporting Efforts

Use this section to provide a description of all other supporting efforts that have begun, been partially implemented, or completed during this period. Use quantifiable data whenever possible. Use the information from DCA 8 (Budget Analysis) as the basis for reporting

Cobb NSP is not leveraging funds at this point.

SECTION VI: Problems Encountered / Technical Assistance Needed

Use this section to provide a brief description of any problems or delays encountered or anticipated, or any technical assistance needed from DCA.

Sally Adams, NSP Program Manager, came out for a site visit on Tuesday, November 17th 2009 and provided technical assistance during our first project set-up.

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SECTION VIII: Performance Measurement

All Grants

LEVERAGE THIS GRANT

	Public	Private
This Quarter	$0.00	$0.00
Cumulative	$0.00	$0.00

CDBG and CDBG Stimulus - People

TOTAL PEOPLE THIS GRANT

	People	People L/M
This Quarter	0	0
Cumulative	0	0

CDBG and CDBG Stimulus - Housing

TOTAL HOUSING THIS GRANT

	Units Owner	Units Rental	Units Buyer	Total Units
This Quarter	0	0	0	0
Cumulative	0	0	0	0

CDBG and CDBG Stimulus - EIP Jobs (do not include ARRA jobs)

TOTAL F/T+FTE JOBS THIS GRANT

	Created	Created L/M	Retained	Retained L/M	Lost: Created	Lost: Retained
This Quarter	0	0	0	0	0	0
Cumulative	0	0	0	0	0	0

NSP - Housing / Projects

HOUSING ACCOMPLISHMENTS THIS GRANT

	Units Acquired	Units Rehab	Units Construct	Units Sold
This Quarter	1	0	0	0
Cumulative	1	0	0	0

PROJECTS COMPLETED THIS GRANT

	Projects
This Quarter	0
Cumulative	0

PERFORMANCE CERTIFICATION
This certifies that

All accomplishments for this quarter have been reported accurately.

GRANT ADMINISTRATOR
This Quarterly Report is NOT complete.
Date

CERTIFICATION
The signature of the Certifying Official below certifies that the data and other information provided in this Report (including Pages 1 and 2 of the Quarterly Report and the Project Activity and Completion as applicable), whether submitted in paper form or on-line, is correct, based on official accounting system and other records, and that expenditures and obligations shown have been made for the purpose of and in accordance with applicable Grant Terms and Conditions.

Signature of Certifying Official Title of Official **Samuel S. Olens, Chairman Cobb County Board of Commissioners** Date 12-21-09

DCA 2009 v.2.0

APPROVED
PER MINUTES OF
COBB COUNTY
BOARD OF COMMISSIONERS
1-13-09 KK