

Prince William County Office of Housing and Community Development
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SUBRECIPIENT CLOSEOUT REPORT
Community Development Block Grant

(Due within 30 days of expiration/termination of Subrecipient Agreement)

Project Number	
Project Name	
Sponsor	
Address	
Phone	

FINANCIAL REPORT:

	<i>CDBG Funds</i>	<i>Subrecipient Funds</i>
Amount Budgeted		
Program Income Year-To-Date		
Gross Disbursements Year-To-Date		
Reimbursement Drawdowns From OHCD Year-To-Date		
Total Request (<i>un-reimbursed Balance</i>)		

PROPERTY INVENTORY:

List below personal property (supplies, furniture, equipment, etc.,) purchased with CDBG funds currently in Subrecipient's inventory. Will inventory continue to be used for project?

PERFORMANCE:

List in bullet form the location, activity, status and specific accomplishments of your project. This information is needed in connection with the County's preparation of its annual Grantee Performance Report for the Consolidate Plan which will be submitted to HUD.

NATIONAL OBJECTIVE:

To verify that the CDBG National Objective has been met the following statistical information is needed. If your project meet the National Objective based upon "Area Benefit Activities" disregard this section. **If housing activity report household instead of persons served.**

Persons Served Statistical Information	Year to Date
1. # Extremely Low- Income Persons Served	
2. # Low-Income Persons Served	
3. # Moderate-Income Persons Served	
4. Total # Persons Served	
5. Race of Persons Served	
a. White	
b. Black/African American	
c. Black/African American & White	
d. Asian	
e. Asian & White	
f. American Indian/Alaskan Native	
g. American Indian/Alaskan Native & White	
h. American Indian/Alaskan Native & Black/African American	
i. Native Hawaiian/Other Pacific Islander	
j. Other Multi-racial	
6. Ethnicity of Persons Served:	
a. Hispanic	
b. Non-Hispanic	
7. # Elderly Served	
8. # Physically Disabled Served	
9. # Mentally Disabled Served	
10. # Female Head of Households Served	

**NOTE: Items #1, #2 & #3 should equal item #4.
Items 5a-j should equal item #4.
Item 6a-b should equal item #4.**

CERTIFICATION:

I certify that, to the best of my knowledge, this information is an accurate accounting of the Community Development Block Grant (CDBG) activities and funds awarded to

Name of Preparer Title

Signature of Preparer Date

Name of Executive Director/Chief Administrative Officer

Signature Date

Original Signatures