C0713

CITY OF EL CAJON COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM PERIODIC PERFORMANCE REPORT

12-13

FY Period Reported:F	Y 2012-2013	· · · · · · · · · · · · · · · · · · ·	Reported: July 1,201	
Agency Name: East County Transitional Living Conten Reporter's Name: IVAN ANDYAR				
Program Name: Heating v A/C Unit naplacements Phone Number: 619 442 0457				
Numbers served must reflect number of Persons (P) served. Number of Households (H) served may only be reported with prior approval of the Redevelopment & Housing Division.				
Please indicate (P) or (H) :	(7)	Annual City Grad	nt Amount: \$\phi 30,00	00-
	(A)	(B)	(C) Total number of	(D)
	Number of <u>Persons</u> <u>served</u> with El Cajon's CDBG funding this reporting period	Of persons in Column (A), how many reported as Hispanic this reporting period (for Each Race)?	Persons served with El Cajon CDBG funding Year-To-Date (July 1 to end of current report period)	Total # for Each Race reported as Hispanic <u>Year-To-Date</u>
1. TOTAL	34	12	34	12
	Total # Each Race	Total # of Hispanics Each Race	Total # Each Race <u>Year-to-Date</u>	Total # of Hispanics Each Race Year-to-Date
White	26	12		
Black / African American	8			
Asian				
American Indian / Alaskan Native				
Native Hawaiian / Other Pacific Islander				
American Indian / Alaskan Native and White				
Asian and White			,	
Black / African American and White				
American Indian / Alaskan Native & Black / African American				·
Other/Multi-Racial				
2. TOTAL	34	12	34	12
Extremely Low Income (0-30% MFI)	. 4	and the second	Ч	
Low Income (>30-50% MFI)	30		3 <i>0</i>	
Moderate income (>50-80% MFI)				
Income above 80% MFI				17.7
3. TOTAL	34		34	
Homeless	34		34	
Female Headed Households				Service Control
Disabled/Special Needs				

IMPORTANT—PLEASE NOTE: 1) Hispanic is no longer considered a race, but an ethnicity and must be reported separately. A member of any race may also report as Hispanic. "Other" is for multi-racial reports only and must be identified in the narrative report.

2) Totals for lines 1, 2, and 3 must match each other for each column. 3) List only unduplicated program participants—clients receiving continued services from previous fiscal year may be counted only once during the new contract year. 4) A narrative report must accompany this form. The narrative should include the definition of "Persons Served" (typically El Cajon residents) and should reflect all additional data collected as agreed in the contract such as Number of Families served, Number of Projects Completed, Number of Program Hours provided, Number of Bed Nights provided, or other Performance Outcome Measurements. For questions, please call Redevelopment & Housing Division at (619) 441-1786.

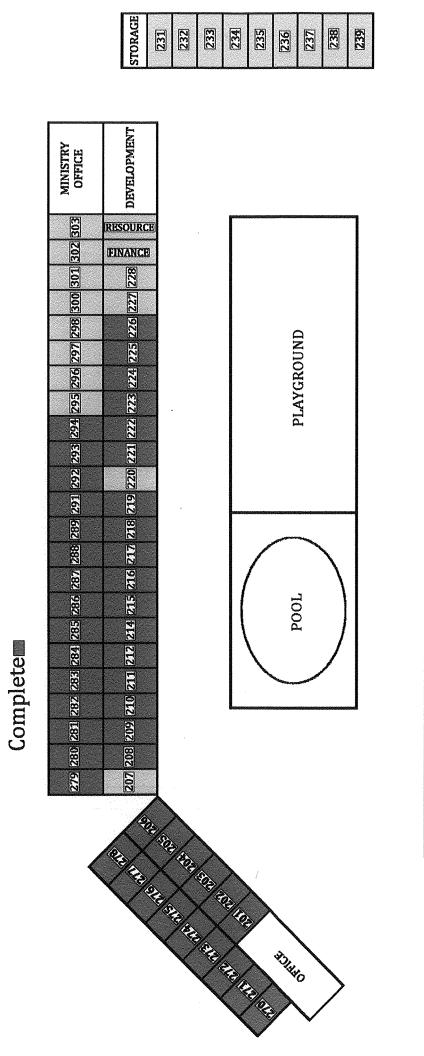
EXHIBIT "C-2"

CDBG LOW MOD CLIENTELE NATIONAL OBJECTIVE REPORT FEDERAL FISCAL YEAR 2012-13 PROJECT STATUS NARRATIVE

The purpose of this form is to report accomplishment data for the project named below. This form must be completed for projects providing eligible CDBG/HOME activities to <u>Low to Moderate Income residents of the City of El Cajon</u>. This form must be completed and submitted with each monthly/quarterly Periodic Performance Report.

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AGENCY NAME:	East County Transitional Living Center
PROJECT NAME:	Heating + A/C Unit replace point
REPORTING PERIOD:	July 1 2012 - June 30, 2013
PREPARED BY:	IVAN ANDUJAR NAME PHONE
PROJECT STATUS:	Pending Active Complete Date: 3-28-13
PROJECT STATUS NAI	RRATIVE:
<<	
	(50) Heating + A/C units purchased + installed.
•	
	Lower number of clients served from
	FY 2011-12 due to clients receiving
	services under FY 2012-13 Energency
	Shelter Program and reported under that
	CDBG Program
•	

East County Transitional Living Center A/C - Heat Unit Replacement



DONAHON

LAUNDRY