Property Name: Green Pastures Apartments **OID/OAR#:** 99-500A

Report Period (Choose One): ☑ **ANNUAL:** January 31, 2007 to December 31, 2007

☐ **QUARTERLY:** Beginning and Ending

CCPC BOND PART B

WASHINGTON STATE HOUSING FINANCE COMMISSION

Prepared by: **E-Mail:** **Telephone:** (360) 555-1212 **Date:** 01-02-07

Special Needs Set-Asides (If Applicable)				**Number of set-aside units ON THIS PAGE**	8	50%
ON THIS PAGE at the end of the reporting period:	4		4	**at the end of the reporting period:**	0	0%
	L		**D**		0	0%

SPREADSHEET (See sample & read instructions before entering data.)

Unit Number	Resident Name	Move-In Date	Re-Cert Date *	Move-Out Date	Qualified Vacant	Special-Needs Set-Aside	%	Household Size	Maximum Annual Household Income	Household Annual Gross Income	Over 140% *	No. Bdrms.	Resident Rent	Rent Subsidy?
1	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**	**12**	**13**	**14**	**15**
A101	Hargrove	06-12-06				D	50	1	19,100	6,001		1	$150.00	Section 8
A102	Market	03-31-05										2		
A103	Sexson	04-01-04	04-01-06			L	50	4	24,550	21,000		3	$550.25	
A104	Lopez	08-01-04	08-01-06	10-25-06		D	50	2	21,850	12,000		2	$450.00	
A104	Vacant-Qualified				Y							2		
A105	Market	03-03-03										2		
A106	Betencourt	05-01-04	05-01-06			D	50	4	27,300	21,050		3	$525.50	
A107	Bletre	08-01-06					50	1	19,100	18,500		2	$125.00	Section 8
A108	Ibanez	01-01-06		09-26-06		L	50	6	31,650	25,010		4	$600.00	
A108	Vacant-Qualified				Y							4		
B101	Hernandez	02-01-05	02-01-06			L	50	6	31,650	**45,000**	***Yes***	4	$650.75	
B102	Market	05-25-04										2		
B103	Putz	03-01-05	03-01-06			D	50	4	27,300	18,500		3	$525.00	
B104	Guillen	02-01-04	02-01-06	05-20-06		L	50	5	29,500	19,650		3	$525.00	
B104	Wachburn	07-01-06				L	50	4	27,300	18,050		3	$525.00	
B105	Market	06-22-06										2		
B106	Market	09-01-02										1		
B107	Morrow	02-01-05	02-01-06	05-20-06		L	50	4	27,300	**28,450**		3	$520.00	
B108	Market	11-01-05				D						1		
C101	Market	05-01-04		07-08-06								4		
C101	Vacant-Market											2		
C102	Market	03-01-03										4		

Property Name: Green Pastures Apartments **OID/OAR#:** 99-500A

Report Period (Choose One): ☑ **ANNUAL:** January 31, 2007 to December 31, 2007

☐ **QUARTERLY:** _____ and _____

Beginning Ending

CCPC BOND PART B

WASHINGTON STATE HOUSING FINANCE COMMISSION

Prepared by: _____ **E-Mail:** _____ **Telephone:** (360) 555-1212 **Date:** 01-02-07

Special Needs Set-Asides (If Applicable)			**Number of set-aside units ON THIS PAGE**	8	50%
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	L	**D**		0	0%

SPREADSHEET (See sample & read instructions before entering data.)

Unit Number	Resident Name	Move-In Date	Re-Cert Date *	Move-Out Date	Qualified Vacant	Special-Needs Set-Aside	%	Household Size	Maximum Annual Household Income	Household Annual Gross Income	Over 140% *	No. Bdrms.	Resident Rent	Rent Subsidy?
1	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**	**12**	**13**	**14**	**15**

Property Name: Green Pastures Apartments **OID/OAR#:** 99-500A

Report Period (Choose One): ☑ **ANNUAL:** January 31, 2007 to December 31, 2007

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