Authority Budget of: OLD BRIDGE HOUSING AUTHORITY

State Filing Year

2021

For the Period:

January 1, 2021

to

December 31, 2021

www.oldbridgehousing.com

Authority Web Address

Adopted APP**RQYED**GOPY



Division of Local Government Services

2021 (2021-2022) HOUSING AUTHORITY BUDGET

Certification Section

2021 (2021-2022)

OLD BRIDGE

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM JANUARY 1, 2021 TO DECEMBER 31, 2021

For Division Use Only

CERTIFICATION OF APPROVED BUDGET

It is hereby certified that the approved Budget made a part hereof complies with the requirements of law and the rules and regulations of the Local Finance Board, and approval is given pursuant to N.J.S.A. 40A:5A-11.

State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services

By: Paul D. Cwest CPA RMA Date: 11/19/2020

CERTIFICATION OF ADOPTED BUDGET

It is hereby certified that the adopted Budget made a part hereof has been compared with the approved Budget previously certified by the Division, and any amendments made thereto. This adopted Budget is, certified with respect to such amendments and comparisons only.

State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services

By: Taul D. Circh CPA RMA Date: 1/7/2021

2021 (2021-2022) PREPARER'S CERTIFICATION

OLD BRIDGE

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

01-01-2021

TO:

12-31-2021

It is hereby certified that the Housing Authority Budget, including both the Annual Budget and the Capital Budget/Program annexed hereto, represents the members of the governing body's resolve with respect to statute in that: all estimates of revenue are reasonable, accurate and correctly stated; all items of appropriation are properly set forth; and in itemization, form and content, the budget will permit the exercise of the comptroller function within the Housing Authority.

It is further certified that all proposed budgeted amounts and totals are correct. Also, I hereby provide reasonable assurance that all assertions contained herein are accurate and all required schedules are completed and attached.

Preparer's Signature:	Jhon In	w	
Name:	THOMAS FURLO	NG, CPA	
Title:	FEE ACCOUNTAN	IT	
Address:	470 HIGHWAY 79,	SUITE 2	
VI	MORGANVILLE, 1	NJ 07751	
Phone Number:	732-591-2300	Fax Number:	732-591-2525
E-mail address	thomasfurlongcpa@	gmail.com	

2021 (2021-2022) APPROVAL CERTIFICATION

OLD BRIDGE (Name)

01-01-2021

TO:

12-31-2021

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

It is hereby certified that the Housing Authority Budget, including all schedules appended hereto, are a true copy of the Annual Budget and Capital Budget/Program approved by resolution by the governing body of the OLD BRIDGE Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 20 TH day of OCTOBER , 2020
It is further certified that the recorded vote appearing in the resolution represents not less than a majority of the full membership of the governing body thereof.

FROM:

Officer's Signature:	Mah	Whl.	
Name:	MARK NOBLE		
Title:	EXECUTIVE DIR	ECTOR	
Address:	2000 ROUTE 18 N OLD BRIDGE, NJ	ORTH, SUITE 100 08857	
Phone Number:	732-607-6383	Fax Number:	732-679-0894
E-mail address	obtha@optonline.n	et	

INTERNET WEBSITE CERTIFICATION

Authorit	y's Web Address:	w.oldbridgehousing.com
All autho	rities shall maintain eith	Internet website or a webpage on the municipality's or county's Internet
website.	The purpose of the web	or webpage shall be to provide increased public access to the authority's
operations	and activities. N.J.S.A	A:5A-17.1 requires the following items to be included on the Authority's
NISA A	0Λ:5Λ-17.1.	osure. Check the boxes below to certify the Authority's compliance with
Linkson, M	<u>0/1,5/1-17.1</u> .	
x	A description of the	nority's mission and responsibilities
X	The budgets for the	nt fiscal year and immediately preceding two prior years
X	information (Similar other types of Char	nensive Annual Financial Report (Unaudited) or similar financial ormation are items such as Revenue and Expenditures Pie Charts or long with other information that would be useful to the public in ces/budget of the Authority)
X	The complete (All Painmediately two prices	annual audits (Not the Audit Synopsis) of the most recent fiscal year and
X	The Authority's rules body of the authority jurisdiction	ulations and official policy statements deemed relevant by the governing e interests of the residents within the authority's service area or
Z	Notice posted pursuar setting forth the time,	the "Open Public Meetings Act" for each meeting of the Authority, location and agenda of each meeting
X	The approved minute their committees, for a	each meeting of the Authority including all resolutions of the board and st three consecutive fiscal years
X	The name, mailing add exercises day-to-day so Authority	, electronic mail address and phone number of every person who vision or management over some or all of the operations of the
X	corporation or other or	, consultants and any other person, firm, business, partnership, cation which received any remuneration of \$17,500 or more during the y service whatsoever rendered to the Authority.
webpage as i	dentified above compli	orized representative of the Authority that the Authority's website or with the minimum statutory requirements of N.J.S.A. 40A:5A-17.1 as boxes signifies compliance.
Name of Offic	cer Certifying complianc	MARK NOBLE
itle of Office	er Certifying compliance	EXECUTIVE DIRECTOR
ignature		Moule Hobbe

Page C-4

2021 (2021-2022) HOUSING AUTHORITY BUDGET RESOLUTION

OLD BRIDGE (Name)

FIS	SCAL YEAR:	FROM:	01-01-3	2021	TO:	12-31-2021	
WHEREAS, the Annual B year beginning,0[-01-20] OLD BRIDGE Housing	021a	nd ending, _	12-31-2021	has been p	resented l	lousing Authority pefore the govern	/ for the fiscal ing body of the
WHEREAS, the schedule revenues, together with all meet operating expenses, e F-4, all as may be required	other anticipated rapital outlays, debt	evonues (o s service requ	atisfy all oblining irements, and	gations to I to provide	he halder for such r	s of bonds of th	e Authority, to
WHEREAS, the Capital Buany authorization to raise management objectives. Specified elsewhere; by Renewal and Replacement	or expend funds; ra necific authorization bond resolution, by	other it is a control to expend for a project f	locument to b linds for the pi lnancing agree	e used as p urposes des	oart of the cribed in	e said Authority's this section of th	s planning and e budget, must
NOW, THEREFORE BE IT open public meeting held Budget/Program of the Oending, [2-31-202] i	on <u>[0-20-2020]</u> LD BRIDGE I	that the lousing Autl	Annual Budge	t, includin	g all rela	ted schedules, ar	nd the Capital
BE IT FURTHER RESOLA meet all proposed expenditu outstanding debt obligations	res/expenses and al	l covenants,	terms and pro-	visions as s	tipulated	in the said Housi	
BE IT FURTHER RESOLV Annual Budget and Capital I	ED, that the govern	ning body of adoption on	the <u>OLD</u> 12-15-2020	BRIDGE	Hous	ing Authority wi	I consider the
(Secretary's Signature)	shle			(Da	1201 te)	2020	
Governing Body	Recorded Vo		41				
Member:	Aye	Nay	Abstain	Absent			
Note Fill in the name of	Each Commissi	oner and in	ndicate their	recorded	Vote		
LANCE HILFMAN	×			×			
RAMON PAULINO BRENDA DUNLOP				X			
DUPREE ANDERSON	75						
JUNE DUNGEE	×						
CORINNE RODRIGUE	Z ×						
TONY PASKITTI	X						

2021 (2021-2022) ADOPTION CERTIFICATION

OLD BRIDGE

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM:

01-01-2021

TO:

12-31-2021

Note: This is filled on for Adoption of the Budget Don't fill in for Introduction of the Budget

It is hereby certified that the Housing Authority Budget and Capital Budget/Program annexed hereto is a true copy of the Budget adopted by the governing body of the <u>OLD BRIDGE</u> Housing Authority, pursuant to <u>N.J.A.C. 5:31-2.3</u>, on the <u>15TH</u> day of, <u>OCTOBER</u>, <u>2020</u>.

Officer's Signature:	Mack	rble	
Name:	MARK NOBLE		
Title:	EXECUTIVE DIR	ECTOR	
Address:	2000 ROUTE 18 N OLDBRIDGE, NJ	•	
Phone Number:	732-607-6383	Fax Number:	732-679-0894
E-mail address	obtha@optonline.n	ot	

2021 HOUSING AUTHORITY BUDGET RESOLUTION

OLD BRIDGE

FISCAL YEAR:

FROM:

01-01-2021 TO:

: 12-31-2021

WHEREAS, the Annual Budget and Capital Budget from the Old Bridge Housing Authority for the fiscal year beginning, 01-01-2021 and ending, 12-31-2021 has been presented before the governing body of the Old Bridge Housing Authority at its open public meeting of 10-20-2020; and

WHEREAS, the schedule of rents, fees and other charges, shown on <u>Budget Page F-2</u> in effect will produce sufficient revenues, together with all other anticipated revenues to satisfy all obligations to the holders of bonds of the Authority, to meet operating expenses, capital outlays, debt service requirements, and to provide for such reserves shown on <u>Budget Page F-4</u>, all as may be required by law, regulation or terms of contracts and agreements; and

WHEREAS, the Capital Budget/Program shown on <u>Capital Budget Page CB-3</u>, pursuant to <u>N.J.A.C.</u>, 5:31-2, does not confer any authorization to raise or expend funds; rather it is a document to be used as part of the said Authority's planning and management objectives. Specific authorization to expend funds for the purposes described in this section of the budget, must be granted elsewhere; by bond resolution, by a project financing agreement, by resolution appropriating funds from the Renewal and Replacement Reserve or other means provided by law.

NOW, THEREFORE BE IT RESOLVED, by the governing body of the Old Bridge Housing Authority, at an open public meeting held on 10-20-2020 that the Annual Budget, including all related schedules, and the Capital Budget/Program of the Old Bridge Housing Authority for the fiscal year beginning 01-01-2021 and ending, 12-31-2021 is hereby approved; and

BE IT FURTHER RESOLVED, that the anticipated revenues as reflected in the Annual Budget are of sufficient amount to meet all proposed expenditures/expenses and all covenants, terms and provisions as stipulated in and said Housing Authority's outstanding debt obligations, capital lease arrangements, service contracts, and other pledged agreements; and

BE IT FURTHER RESOLVED, that the governing body of the Old Bridge Housing Authority will consider the Annual Budget and Capital Budget/Program for adoption on 12-15-2020.

LANCE HILFMAN, Chairman

Attested to:

I hereby certify that there is appropriate funding in the budget for said expenditures.

MARK NOBLE, Secretary

THOMAS FURLONG, CPA

Meeting date:

Resolution #2020-07 for 2021 Housing Authority Budget Resolution was moved by Commissio Oner Brenda Dunlop and seconded by Commissioner Tony Paskitti and upon Roll Call the Ayes and Nays were as follows:

AYES; Hilfman, Dunlop, Anderson, Dungee, Rodriguez, Pasketti

NAYS:

ABSENT: Paulino

ABSTAIN:

CERTIFICATION

I, MARK NOBLE, Secretary of the Old Bridge Housing and Redevelopment Authority, in the County of Middlesex, State of New Jersey (the "Authority"), DO HEREBY CERTIFY that the foregoing annexed extract from the Minutes of the regular and business of the Board of Commissioners of the Authority duly called and held on December 15, 2020, has been compared by me with the original minutes as officially recorded in my office in the Minutes Book of such governing body and is a true, complete and correct copy thereof and of the whole of the original minutes so far as they relate to the subject matter referred to in the extract.

IN WITNESS WHEREOF, I have hereunto set my hand on behalf of the Authority and affixed the corporate seal of said Authority this 15th day of December, 2020.

MARK NOBLE, Secretary

Old Bridge Township Housing and

Redevelopment Authority

2021 (2021-2022) HOUSING AUTHORITY BUDGET

Narrative and Information Section

2021 (2021-2022) HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS OLD BRIDGE

(Name)

AUTHORITY BUDGET

FISCAL YEAR:

FROM:

01-01-2021

TO:

12-31-2021

Answer all questions below. Attach additional pages and schedules as needed.

1. Complete a brief statement on the 2021/2021-2022 proposed Annual Budget and make comparison to the 2020/2020-2021 adopted budget for each *Revenues and Appropriations*. Explain any variances over +/-10% (As shown on budget pages F-2 and F-4 explain the reason for changes for each <u>revenue</u> and <u>appropriation</u> changing more than 10%) for each individual revenue and appropriation line item. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. (Example Rate Increase authorized by resolution or by HUD).

There are no variances in excess of 10%.

- 2. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. Example would be effect on a recession in the economy on the housing Authority. NONE
- 3. Describe the reasons for utilizing Unrestricted Net Position in the proposed Annual Budget, i.e. rate stabilization, debt service reduction, to balance the budget, etc. If the Authority's budget anticipates a use of Unrestricted Net Position, this question must be answered. NONE
- 4. Identify any sources of funds transferred to the County/Municipality as a Pilot Payments, or a shared service and explain the reason for the transfer -- Housing Authorities cannot transfer Unrestricted Net Position (i.e.: to balance the County/Municipality budget, etc.). N/A
- 5. The proposed budget must not reflect an anticipated deficit from 2021/2021-2022 operations. If there exists an accumulated deficit from prior years' budgets (and funding is included in the proposed budget as a result of a prior deficit) explain the funding plan to eliminate said deficit (N.J.S.A. 40A:5A-12). If the Authority has a net deficit reported in its most recent audit, it must provide a deficit reduction plan in response to this question.

(Prepare a response to deficits in most recent audit report pertaining to Deficits to Unrestricted Net Position caused by recording <u>Pension and Post-Employment Benefits liabilities as required by GASB 68 and GASB 75).</u>

PHA has no employees, so there is no liability.

HOUSING AUTHORITY CONTACT INFORMATION AUTHORITY CONTACT INFORMATION 2021 (2021-2022)

Please complete the following information regarding this Authority. <u>All</u> information requested below must be completed.

Name of Authority:	OLD BRIDGE HOUSING AT	JTHORITY	7	
Federal ID Number:	22-3076229			
Address:	2000 ROUTE 18 NORTH, SU	JITE 100		
City, State, Zip:	OLD BRIDGE	Ti Ti	NJ	08857
Phone: (ext.)	732-607-6383	Fax:	732-6	79-0894
Preparer's Name:	THOMAS FURLONG			
Preparer's Address:	470 HIGHWAY 79, SUITE 2			
City, State, Zip:	MORGANVILLE		NJ	08857
Phone: (ext.)	732-591-2300	Fax:	732-59	91-2525
E-mail:	thomasfurlongcpa@gmail.com			
Chief Executive Officer:(1) MARK NOBLE			
(1)Or person who performs	these functions under another Title	Э		
Phone: (ext.)	732-607-6383	Fax:	732-679	0894
E-mail:	obtha@optonline.net			
Chief Financial Officer:(1)	THOMAS FURLONG			
(4) 0 1 0	these functions under another Titl	A		
(4) Or person who performs	mese functions under another 110	.0		
Phone: (ext.)	732-591-2300 Fax		2-591-2525	12
	- r	k: 732	2-591-2525	
Phone: (ext.)	732-591-2300 Fax	k: 732	2-591-2525	12
Phone: (ext.) E-mail:	732-591-2300 Fax thomasfurlongcpa@gmail.c	c: 732		
Phone: (ext.) E-mail: Name of Auditor:	732-591-2300 Fax	c: 732	LO	
Phone: (ext.) E-mail: Name of Auditor: Name of Firm:	732-591-2300 Fax thomasfurlongcpa@gmail.c	c: 732 com GIAMPO	LO	07738
Phone: (ext.) E-mail: Name of Auditor: Name of Firm: Address:	732-591-2300 Fax thomasfurlongcpa@gmail.c HYMANSON, PARNES & 467 MIDDLETOWN-LINC	c: 732 com GIAMPO	LO AD	

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

$\frac{\textbf{OLD BRIDGE}}{(\text{Name})}$

		F'.	ISCAL YEAR:	FROM:	01-01-2021	10:	12-31-2021	
		Provide the number	elow completely and r of individuals emp Form W-3, Transmi	oloyed in (Use I	Most Recent W-3.	Available	2019 or 2020) as report	ted
	2)	Provide the amoun	t of total salaries and	d wages as repo	orted on the Author	ity's Form		
	3)	Provide the number	able 2019 or 2020) r of regular voting n ve been appointed (nembers of the	governing body:		(Even if not all	
	45	your Authority)	r of alternate voting	mombane of th	a governing hodes	0	(Maximum is 2)	
		Did any person list on Page N-4 during	ed on Page N-4 have g the current fiscal y	e a family or bu ear? <u>no</u>	isiness relationship If "yes," attach a	with any o	other person listed of the	
	•	Did all individuals year (Most Recent	ling the names of the that were required to Filing that March with the Authority	o file a Financi 31. 2020 or 20	al Disclosure Stater 21 deadline has pa	ment for thassed 2020	e current fiscal or 2021) because	
		actually filed at http	o://www.state.nj.us	s/dca/division	s/dlgs/resources/f	ds.html b	efore answering)	
			o," provide a list of			e a Financi	al Disclosure	
			cplanation as to the have any amounts r			commissio	ners officers key	
ĺ			st compensated emp					
		individuals, their po	sition, the amount r	eceivable, and	a description of the	e amount d	lue to the	
		Authority.	24					
8			a party to a business					
			commissioner, office					
	t	o. A family member of employee? NO	of a current or former	commissioner, of	ificer, key employee,	or highest	compensated	
	(a current or former co	mmissioner, offi	cer. kev emplovee in	r highest co	mnensated	
			y member thereof) wa					
	Į		of the above is "yes,				luding the name	
	0	f the commissioner,	officer, key employ	ee, or highest c	ompensated emplo	yee (or fan	nily member	
			rity; the name of the					
			d whether the transa					
9	,		uring the most recen		~ ,	V		
			ntract? A personal be		1.00			
			t that benefits, direc				100 100	
			person designated b				i a aescription of	
1.			e premiums paid, ar				an Dago XI A	
1			Authority's process					
			committee thereof;					
			y sized entities; 3) a					
		-	iltant; and/or 5) writ					
			lures for all indivi					

Page N-3 (1 of 2)

No Employees.

11) Did the Authority pay for meals or catering during the current fiscal year? <u>no</u> If "yes," attact a detailed list of all meals and/or catering invoices for the current fiscal year and provide an explanation for each expenditure listed.
12) Did the Authority pay for travel expenses for any employee or individual listed on Page N-4?
13) Did the Authority provide any of the following to or for a person listed on Page N-4 or any other
employee of the Authority?
a. First class or charter travel no
b. Travel for companions no
c. Tax indemnification and gross-up paymentsno
d. Discretionary spending account <u>no</u>
e. Housing allowance or residence for personal use <u>no</u>
f. Payments for business use of personal residence no
g. Vehicle/auto allowance or vehicle for personal useno
h. Health or social club dues or initiation fees <u>no</u> i. Personal services (i.e.: maid, chauffeur, chef) no
If the answer to any of the above is "yes," attach a description of the transaction including the nam
and position of the individual and the amount expended.
14) Did the Authority follow a written policy regarding payment or reimbursement for expenses incurred
by employees and/or commissioners during the course of Authority business and does that policy
require substantiation of expenses through receipts or invoices prior to reimbursement? yes If
"no," attach an explanation of the Authority's process for reimbursing employees and commissioners
for expenses. (If your authority does not allow for reimbursements indicate that in answer)
15) Did the Authority make any payments to current or former commissioners or employees for
severance or termination? <u>no</u> If "yes," attach explanation including amount paid.
16) Did the Authority make any payments to current or former commissioners or employees that were contingent upon the performance of the Authority or that were considered discretionary bonuses?
17) Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances
outstanding by submitting its audited annual financial statements, annual operating data, and notice of
material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace
Access (EMMA) as required?n/a If "no," attach a description of the Authority's plan to
ensure compliance with its Continuing Disclosure Agreements in the future. (If no bonded Debt
answer is Not Applicable) (Loans from a Bank or State Agencies are not bonded Debt)
18) Did the Authority receive any notices from the Department of Environmental Protection or any other
entity regarding maintenance or repairs required to the Authority's systems to bring them into
compliance with current regulations and standards that it has not yet taken action to remediate?
no If "yes," attach explanation as to why the Authority has not yet undertaken the required
maintenance or repairs and describe the Authority's plan to address the conditions identified. 19) Did the Authority receive any notices of fines or assessments from the Department of Environmental
Protection or any other entity due to noncompliance with current regulations (i.e.: sewer overflow,
etc.)? <u>no</u> If "yes," attach a description of the event or condition that resulted in the fine or
assessment and indicate the amount of the fine or assessment.
20) Did the Authority receive any notices of fines or assessments from the Department of Housing and
Urban Development or any other entity due to noncompliance with current regulations? no If
"yes," attach a description of the event or condition that resulted in the fine or assessment and indicate
the amount of the fine or assessment.
21) Has the Authority been deemed "troubled" by the Department of Housing and Urban Development?
no If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.

(This page is directions for filling in page (N-4 (2-of 2)) (No answers should be entered on this page)

AUTHORITY SCHEDULE OF COMMISSIONERS, OFFICERS, KEY EMPLOYEES, HIGHEST COMPENSATED EMPLOYEES AND INDEPENDENT CONTRACTORS

OLD BRIDGE

(Name)

FISCAL YEAR:

FROM:

01-01-2021

TO:

12-31-2021

Complete the attached table for all persons required to be listed per #1-4 below.

- 1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.
- List all of the Authority's key employees and highest compensated employees other than a commissioner or
 officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's former officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's <u>former</u> commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- Commissioner: A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.
- Officer: A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.
- Key employee: An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:
 - g) The individual received reportable compensation from the authority and other public entities in excess of \$150,000 for the most recent fiscal year completed; and
 - h) The individual has responsibilities or influence over the authority as a whole or has power to control or determine 10% or more of the authority's capital expenditures or operating budget.
- Highest compensated employee: One of the five highest compensated employees or independent contractors of the authority other than current commissioners, officers, or key employees whose aggregate reportable compensation from the authority and other public entities is greater than \$100,000 for the most recent fiscal year completed.
- Compensation: All forms of cash and non-cash payments or benefits provided in exchange for services, including salaries and wages, bonuses, severance payments, deferred payments, retirement benefits, fringe benefits, and other financial arrangements or transactions such as personal vehicles, meals, housing, personal and family education benefits, below-market loans, payment of personal or family travel, entertainment, and personal use of the Authority's property. Compensation includes payments and other benefits provided to both employees and independent contractors in exchange for services.
- Reportable compensation: (Use the Most Recent W-2 available 2019 or 2020. The aggregate compensation that is reported (or is required to be reported) on Form W-2, box 1 or 5, whichever amount is greater, and/or Form 1099-MISC, box 7, for the most recent calendar year ended 60 days before the start of the proposed budget year. For example, for fiscal years ending December 31, 2021, the most recent W-2 and 1099 should be used 2020 or 2019 (60 days prior to start of budget year is November 1, 2020, with 2019 being the most recent calendar year ended), and for fiscal years ending June 30, 2021, the calendar year 2020 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2021, with 2020 being the most recent calendar year ended).
- Other Public Entity: Any municipality, county, local authority, fire district, or other government unit, regardless of whether it is related in any way to the Authority either by function or by physical location.

Cras	13	5 June Oungee 6 Corinne Rodriguez 7 Tony Paskirti 7 Mark Noble 9	2 Ramon Paulino 3 Brenda Dunlop 4 Dupree Anderson	Name Lance Hilfman	100
		Commissioner Commissioner Commissioner Commissioner Executive Director	Vice Chair Commissioner Commissioner	Title	je.
		6 N N N N N N N N N N N N N N N N N N N		per Week Dedicated to Position SX	<u>5</u>
		* * * *	× × × :	Former Highest Compensated Employee Key Employee	S E G H I
S . S				Base Salary/ Stipend Bonus	Reportable Compensation from Authority (W-2/1099)
\$		a		Other (auto allowance, expense account, payment in lieu of health benefits, etc.)	pensation from (v-2/ 1099)
			in	Estimated amount of other compensation from the Authority (health benefits, persion, etc.)	M
	\$000	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	, 6 6	Total Compensation	z
 →		O None O None O None O South Amboy H.A.	- Roselle Bd. Of Ed. D None D Kean University	Names of Other Public Entities where Individual is an Employee or Member of the Governing Body [1] See note below	io;
		Executive Director	Teacher Grant Admin.	Positions held at Other Public Entities Listed in Column O	80
I.		40	35	Average Hours per Week Dedicated to Positions at Other Public Entiries listed in Column 0	o,
\$ 116,150		116,150		Reportable Compensation from Other Public Entities (W-2/ 1099)	50)
s			- [Estimated amount of other compensation from Other Public Entitles (health benefits, pension, payment in lieu of health benefits, etc.)	lu.
\$ 116,150	00000	0 0 116,150 0	۷.	Total Compensation All Public Entities	-4

Schedule of Health Benefits - Detailed Cost Analysis

Note: Remember to Enter an amount in rows for Employee Cost Sharing	is medical coverage provided by the SHBP (Yes or No)? {Place Answer in Box} Is prescription drug coverage provided by the SHBP (Yes or No)? {Place Answer in Box}		GRAND TOTAL	Employee Cost Sharing Contribution (enter as negative -) Subtotal	Employee & Spouse (or Partner) Family	Parent & Child	Retirees - Health Benefits - Annual Cost Single Coverage		Subtotal	Employee Cost Sharing Contribution (enter as negative _)	Family	Employee & Sporise for Partner	Parent & Child	Commissioners - Health Benefits - Annual Cost Single Coverses	是一位的一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一	Subtotal	Employee Cost Sharing Contribution (enter as negative -)	Family	Employee & Spouse (or Partner)	Parent & Child	Active Employees - Health Benefits - Annual Cost Single Coverage			×	inout- X - in Box Below IF this Page is Non-Applicable
ployee Cost Shari	(Place Answer in Box) or No)? (Place Answer in Box			0					>				-			0						000	# of Covered Members (Medical & Rx) Proposed Budget		For the Period
, Ig		Ü					_									10 m					経験的	punger.	Annual Cost Estimate per Employee Proposed Budget		Old Bridge Housing Authority January 1, 2021
		· ·			(- Jr	, ,					E		7						Ξ.	⟨		tagona	Total Cost Estimate Proposed		e Housing Authority January 1, 2021
	Yes or No	0		0		4		0			D				0	THE PERSON NAMED IN	The second second				は、一般の	Current Year	# of Covered Members (Medical & Rx)	ā	**
																						Current Year	Annual Cost per Employee	Decemb	
		\$,								•								\$		Cost	Total Prior Year	December 31, 2021	
		\$.			× 1	9		,		•	H#15 3				•			*	, v	45		(Decrease)	\$ increase		
×		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		#DIV/0!	#DiV/0!	#DIV/O!	#DIV/0!	#570/01	#DIV/0!		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		(Decrease)	%Increase		

Schedule of Accumulated Liability for Compensated Absences

For the Period Old Bridge Housing Authority January 1, 2021

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December 31, 2021

Complete the below table for the Authority's accrued liability for compensated absences.

			Individuals Eligible for Benefit NONE	Gross Days of Accumulated Compensated Absences at beginning of Current Year	Dollar Value of Accrued Compensated Absence Liability	Approved Labor Agreement	Resolution
	Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA R Individuals Eligible for Benef	Individuals Eligible for Benefit beginning of Current Year Absence Liability A La gresolution Resolution Resol			Dollar Value of	t	1
of t	Individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R in Individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R individuals Eligible for Benefit beginning of Current Year Absence Liability A L A R Eligible for Benefit beginning of Current Year Absence Liability A L A R Eligible for Benefit beginning of Current Year Absence Liability A L A R Eligible for Benefit beginning of Current Year Absence Liability A L A R Eligible for Benefit beginning of Current Year Absence Liability A L A R Eligible for Benefit beginning of Current Year Absence Liability A L A R Eligible for Benefit beginning of Current Year Absence Liability A L A R Eligible for Benefit beginning a L A R Eligible for Benefit beginning a L A	Individuals Eligible for Benefit beginning of Current Year Absence Liability A LA Reinfeld		Gross Days of Accumulated Compensated Absences at	Accrued	r	
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Gross Days of Accumulated Accrued e in the compensated Absences at Compensated individuals Eligible for Benefit beginning of Current Year Absence Liability A a work of the compensation o			NONE			ŀ	-1-
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The total Amount Should agree to most recently issued audit report for the Authority

Schedule of Shared Service Agreements

Old Bridge Housing Authority

If No Shared Services X this Box For the Period January 1, 2021

December 31, 2021

Enter the shared service agreements that the Authority currently engages in and identify the amount that is received/paid for those services.

							South Amboy Housing Authority	Name of Entity Providing Service
		500					Old Bridge Housing Authority	Name of Entity Receiving Service
							Management Services	Type of Shared Service Provided
								Comments (Enter more specifics if needed)
	-						1/1/2021	Agreement Effective Date
							12/31/2021	Agreement End Date
							12/31/2021 \$ 126,000	Amount to be Received by/ Paid from Authority

2021 (2022) HOUSING AUTHORITY BUDGET

Financial Schedules Section

SUMMARY

Old Bridge Housing Authority
January 1, 2021 to

For the Period

December 31, 2021

ANTICIPATED SURPLUS (DEFICIT)	Net Total Appropriations	Less: Total Unrestricted Net Position Utilized	Total Appropriations and Accumulated Deficit	Accumulated Deficit	rotal worl-Operating Appropriations	Total Interest Payments on Debt Total Other Non-Operating Appropriations	Total Operating Appropriations	Total Principal Payments on Debt Service in Lieu of Depreciation	Total Cost of Providing Services	Total Administration	APPROPRIATIONS	Total Anticipated Revenues	Total Non-Operating Revenues	Total Operating Revenues	REVENUES	*
ļ.s						XXXXXXXX		XXXXXXXXXXX		æ				₩	Management	
φ.			(<u>18</u>)		•	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	3	XXXXXXXXXXX	.9	*		(a)		\$	ng Section 8	
- \$ 23,350	- 2,065,900		2,065,900	*		XXXXXXXXXXX	- 2,065,900	XXXXXXXXXXX	1,871,700	- 194,200		2,089,250	- 2,750	÷ \$ 2,086,500	Housing Voucher	FY 2021 Proposed Budget
v.						XXXXXXXXXXXXXX		XXXXXXXXXX						₩	Other Programs	d Budget
in	•		•		Ō,		•0		•()				(0)	 ₹7-	122	
23,350	2,065,900		2,065,900	á.		i i	2,065,900		1,871,700	194,200		2,089,250	2,750	2,086,500	Operations	÷
S												Ĭ		₹A		FY Zi
13,200	1,922,800		1,922,800			r jr	1,922,800		1,723,200	199,600		1,936,000	3,000	1,933,000	Total All Operations	FY 2020 Adapted Budget
S														w	All o	\$1 (De Prop
10,150	143,100		143,100	3-		r r	143,100	, k	148,500	(5,400)		153,250	(250)	153,500	perations i	\$ Increase (Decrease) Proposed vs. Adopted
76.9%	7.4%	#DIV/0!	7.4%	#D(V/0!	#DIV/0!	#DIV/0!	7.4%	#DIV/0!	8.6%	-2.7%		7.9%	-8.3%	7.9%	All Operations All Operations	% Increase (Decrease) Proposed vs. Adopted

Revenue Schedule

Old Bridge Housing Authority

For the Period

January 1, 2021

December 31, 2021

	Public Housing	7.	Proposed (Total All	FY 2020 Adopted Budget Total All	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Management	Section 8	Voucher	Other Programs	Operations	Operations	All Operations	All Operations
OPERATING REVENUES								
Rental Fees					7.			#6 P (16)
Homebuyers' Monthly Payments	-				\$	\$	\$	#DIV/0!
Dwelling Rental						180	*	#D(V/0)
Excess Utilities							-	#0(V/01
Non-Dwelling Rental					100	58)		#DIV/0!
HUD Operating Subsidy							•	#DIV/0!
New Construction - Acc Section 8					(8)	290		#DIV/01
Voucher - Acc Housing Voucher			2,070,000		2,070,000	1,915,000	155,000	8.1%
Total Rental Fees			2,070,000	:(•	2,070,000	1,915,000	155,000	8.1%
Other Operating Revenues (List)					1			
Ports			14,600		14,600	16,000	(1,400)	-8.8%
Frauds			1,900		1,900	2,000	(100)	-5.0%
Type In (Grant, Other Rev)						ar .	•	#DIV/01
Type In (Grant, Other Rev)						*	*	#DIV/01
Type in (Grant, Other Rev)					*	500	*	#DIV/01
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					-		293	#DIV/0!
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							50%	#DIV/01
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Type in (Grant, Other Rev)							1961	#DIV/0!
Type in (Grant, Other Rev) Type in (Grant, Other Rev)							•	#DIV/01
Total Other Revenue			16 500		10.500	10.000	(4.500)	#DIV/01
			16,500		16,500	18,000	(1,500)	-8.3%
Total Operating Revenues NON-OPERATING REVENUES			2,086,500		2,086,500	1,933,000	153,500	7.9%
Other Non-Operating Revenues (List)								
Type in					ì .			#DIV/01
Type in					(5)			#DIV/01
Type In								#DIV/0!
Type in					120			#DIV/0!
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Type in					35	E 20		#DIV/OI
Total Other Non-Operating Revenue	*							#DIV/01
Interest on Investments & Deposits (List)								11019/01
Interest Earned			2,750		2,750	3,000	(250)	-8,3%
Penalties			4,730		2,730	3,000	(230)	#DIV/0l
Other								#DIV/01
Total Interest	¥		2,750		2 750	3,000	(250)	-8,3%
Total Non-Operating Revenues			2,750		2,750 2,750	3,000	(250)	-8.3%
	\$.		\$ 2,089,250 \$		\$2,089,250	\$ 1,936,000	\$ 153,250	7.9%
TOTAL MINICIPALED REVENUES	\$ -	•	2,009,230 \$		32,003,230	1,330,000	\$ 133,230	7.370

Prior Year Adopted Revenue Schedule

Old Bridge Housing Authority

	Public Housing	.,	20 Adopted Bud Housing		Total All
	Management	Section 8	Voucher	Other Programs	
OPERATING REVENUES					
Rental Fees					
Homebuyers' Monthly Payments					\$
Dwelling Rental					
Excess Utilities					
Non-Dwelling Rental					
HUD Operating Subsidy					
New Construction - Acc Section 8					
Voucher - Acc Housing Voucher			1,915,000		1,915,00
Total Rental Fees	-	-	1,915,000		1,915,000
Other Revenue (List)					
Ports			16,000		16,000
Frauds			2,000		2,000
Type in (Grant, Other Rev)					-/
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Total Other Revenue	-	5 4 3	18,000		18,000
Total Operating Revenues			1,933,000		1,933,000
ION-OPERATING REVENUES			2,500,000		1,555,000
Other Non-Operating Revenues (List)					
Type in					
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Other Non-Operating Revenues					
nterest on Investments & Deposits					
Interest Earned			2 000		2 000
Penalties			3,000		3,000
Other					:=
Total Interest	<u> </u>		3,000		3,000
Total Non-Operating Revenues			3,000		3,000
	\$ - \$	- \$	1,936,000		1,936,000

Appropriations Schedule

Old Bridge Housing Authority January 1, 2021 to

For the Period

December 31, 2021

		FY	2021 Propos	ed Budget				Adopted dget	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs		Total All Operations		al All ations	All Operations	All Operations
OPERATING APPROPRIATIONS										
Administration					-					
Salary & Wages					5		\$	36	ş ·	#DIV/01
Fringe Benefits									9	#DIV/01
Legal			16,200			16,200		16,200		0.0%
Staff Training			5,000			5,000		5,000		0.0%
Travel			3,000			3,000		3,000		0.0%
Accounting Fees	1		13,700			13,700		13,400	300	2.2%
Auditing Fees	12		6,300			6,300		6,000	300	5.0%
Miscellaneous Administration*			150,000		1_	150,000	No.	156,000	(6,000)	-3.8%
Total Administration			194,200		g.	194,200		199,600	(5,400)	-2.7%
Cost of Providing Services					144				4000	
Salary & Wages - Tenant Services					T					IIDIV/01
Salary & Wages - Maintenance & Operation	1				1	190			+0	#DIV/OI
Salary & Wages - Protective Services	1				1				27	#DIV/OI
Salary & Wages - Utility Labor	1					- 3		1.50	•	#DIV/0!
Fringe Benefits					1			1000	1065	#DIV/0!
Tenant Services					II.	12		(2)		HDIV/01
Utilities					1	7		0.00		#DIV/OI
Maintenance & Operation					1				(**)	#DIV/01
Protective Services					1	2			520	#DIV/OI
Insurance			6,900		1	6,900		7,500	(600)	-8.0%
Payment in Lieu of Taxes (PILOT)					1	*			(0.00)	#DIV/OI
Terminal Leave Payments	1				1				-	HOIV/OI
Collection Losses	1									#DIV/01
Other General Expense	J.		14,800		1	14,800		15,700	(900)	-5.7%
Rents	1		1,850,000		I	1,850,000	1.	700,000	150,000	8.8%
Extraordinary Maintenance					1	¥		. 00,000	120,000	HDIV/OI
Replacement of Non-Expendible Equipment	1				l l				197	#DIV/OI
Property Betterment/Additions					1	20		12	Sa/	#DIV/OI
Miscellaneous COPS*										#DIV/OI
Total Cost of Providing Services			1,871,700	/.*	_	1,871,700	1	723,200	148,500	8.6%
Total Principal Payments on Debt Service in Lieu of						2,012,100		Lujiou	210,500	4.075
Depreciation	XXXXXXXXXXX XXXX	xxxxxxx x	XXXXXXXXXXX	(XXXXXXXXX					4.	#DIV/O!
Total Operating Appropriations			2,065,900			2,065,900	1.5	922,800	143,100	7,4%
NON-OPERATING APPROPRIATIONS						, , , , , , , , , , , , , , , , , , ,		- Conjust	110,100	,,,,,
Total Interest Payments on Debt	XXXXXXXXXXX XXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXX	. ×	(2)		2	ৃ	#DIV/OI
Operations & Maintenance Reserve					1	7.0				HDIV/O!
Renewal & Replacement Reserve						260		43	8	#DIV/01
Municipality/County Appropriation						3				#DIV/0!
Other Reserves								0.		#DIV/01
Total Non-Operating Appropriations		(e)		•						#DIV/01
TOTAL APPROPRIATIONS			2,065,900			2,065,900	10	922,800	143,100	7.4%
ACCUMULATED DEFICIT			-70.0075.00			2,000,000	±,-	22,000	143,100	#DIV/OI
TOTAL APPROPRIATIONS & ACCUMULATED										WDIV/OI
DEFICIT	2	2.5	2,065,900			2,065,900	1.0	122 000	143 100	7 404
UNRESTRICTED NET POSITION UTILIZED			2,000,300		_	2,085,900	1,5	22,800	143,100	7,4%
Municipality/County Appropriation	1121	520								11011/101
Other						•		•	7)	#DIV/01
Total Unrestricted Net Position Utilized					-					HOIV/OI
	s - s	\$	3 06E 000 6		-	3.005.000		33.000	6 442 400	#DIV/01
	*		2,065,900 \$		2	2,065,900	\$ 1,9	22,800	\$ 143,100	7.4%
* Miscellaneous line Items may not exceed 5% of tota the line Item must be Itemized above. 5% of Total Operating Appropriations	al operating appropriat	lons shown b	elow. If amount in		ater t	han the amount 103,295.00	shown belov	v, then	:	

OLD BRIDGE HOUSING AUTHORITY MISCELLANEOUS ADMINISTRATION

Item	2020	2021
	Budget	Budget
Publications	500	500
Membership Dues	2,000	2,000
Telephone Costs/Internet	6,000	5,000
Computer Consultant	2,000	2,000
Office Supplies	3,600	3,000
Advertising	1,000	1,000
Postage	2,900	2,900
Equipment Maintenance	1,000	1,000
Payroll Services	0	0
Computer Support	3,100	2,500
Utilities	1,500	1,500
Minutes (Labor)	1,700	0
Background Checks	1,200	1,200
Consulting	1,500	1,400
Management Fees	128,000	126,000
Total	156,000	150,000

Prior Year Adopted Appropriations Schedule

Old Bridge Housing Authority

			FY 2020 Adopted But	lget	
	Public Housing				Total All
	Management	Section 8	Housing Voucher	Other Programs	Operations
OPERATING APPROPRIATIONS					
Administration					ř.
Salary & Wages					\$
Fringe Benefits	1				(#(
Legal			16,200		16,200
Staff Training	1		5,000		5,000
Travel	1		3,000		3,000
Accounting Fees			13,400		13,400
Auditing Fees			6,000		6,000
Miscellaneous Administration*			156,000		156,000
Total Administration			199,600		199,600
Cost of Providing Services					
Salary & Wages - Tenant Services					
Salary & Wages - Maintenance & Operation					
Salary & Wages - Protective Services					
Salary & Wages - Utility Labor					2.00
Fringe Benefits					*
Tenant Services					
Utilities					
Maintenance & Operation					•
Protective Services					:4/1
Insurance			7,500		7,500
Payment in Lieu of Taxes (PILOT)	1				
Terminal Leave Payments	1 *			1	
Collection Losses	4			T I	2.0
Other General Expense			15,700		15,700
Rents			1,700,000	1	1,700,000
Extraordinary Maintenance				1	
Replacement of Non-Expendible Equipment	ľ				*
Property Betterment/Additions					
Miscellaneous COPS*	L				<u> </u>
Total Cost of Providing Services			1,723,200	/6-	1,723,200
Total Principal Payments on Debt Service in Lieu of					
Depreciation	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXX	
Total Operating Appropriations			1,922,800		1,922,800
NON-OPERATING APPROPRIATIONS			A MANAGEMENT AND A MANAGEMENT		
Total Interest Payments on Debt	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	
Operations & Maintenance Reserve				9.	
Renewal & Replacement Reserve	1				
Municipality/County Appropriation	1			Į,	•
Other Reserves					
Total Non-Operating Appropriations				•	*
TOTAL APPROPRIATIONS	· ·		1,922,800		1,922,800
ACCUMULATED DEFICIT					
TOTAL APPROPRIATIONS & ACCUMULATED					
DEFICIT			1,922,800	*/	1,922,800
UNRESTRICTED NET POSITION UTILIZED					
Municipality/County Appropriation					
Other					····
Total Unrestricted Net Position Utilized					
TOTAL NET APPROPRIATIONS	\$ -	\$.	\$ 1,922,800	\$ -	\$ 1,922,800

96,140.00 \$

96,140.00

shown below, then the line item must be itemized above.

5% of Total Operating Appropriations

Debt Service Schedule - Principal

Year of Last Rating	Indicate the Authority's most recent band rating and the year of the rating by ratings service. Moody's Fitch Stand Bond Rating	NET PRINCIPAL	TOTAL PRINCIPAL LESS: HUD SUBSIDY	Type in Issue Name Type in Issue Name	Type in Issue Name Type in Issue Name			If Authority has no debt X this boy
If no Ra	nd rating and the year of Moody's	ts.				Adopted Budget Year 2020	>	<
If no Rating type in Not Applicable	the rating by ratings s	\$	167			Budget Year 2021		
able	ervice. Standard & Poors	\$	*			2022		Old Bridge Housing Authority
		•	*			2023	Fiscal Year Ending in	uthority
		\$	e			2024 2025		
		\$				2026		
		· · · · · · · · · · · · · · · · · · ·		72		Thereafter C		
			×	* *		Total Principal Outstanding		

Debt Service Schedule - Interest Old Bridge Housing Authority

	LESS: HUD SUBSIDY	Type in Issue Name TOTAL INTEREST	Type in Issue Name	Type in Issue Name	Type in Issue Name			If Authority has no debt X this box
1	n				1001 5050	Adopted Budget		×
·	Դ-			X	1707	Budget Year	Property	
-<					2022			Old Bridge H
- \$		1			2023		Fiscal Ye	Old Bridge Housing Authority
\$					2024		Fiscal Year Ending In	
, \$					2025			
\$	(4)				2026			
- \$	9							
- \$	ũ				Thereafter Outstanding	Total Interest Payments		
					ag.	rest ts		

Net Position Reconciliation

For the Period Old Bridge Housing Authority

January 1, 2021

December 31, 2021

ರ

5 10103	S 231 705	S		TOTAL INC. PUBLICION BEGINNING OF CURRENT YEAR (1)
Other Program	Voucher	Section 8	Management	
	Buisnom		Fublic mousing	
FY 2021 Proposed Budget	1 Propose	FY 202		

1	11	ROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR	Total Unrestricted Net Position Hilliand in proposed Budget	Appropriation to Municipality/County (3)	Unrestricted Net Position Hilliand in proposed Conit-1 and and Bullet	NRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET Unrestricted Net Position Litilized to Release Bronce of Budget	The control of control	Plus: Estimated Income (Loss) on Current Year Operations (2)	Plus: Accrued Unfunded Pension Liability (1) Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)	Less: Other Designated by Resolution	Less: Designated for Rate Stabilization	Person Designated for Non-Operating promote the promote to the promote the	Total Unrestricted Not Position (1)	Page Other Restricted Net Position (1)	Less: Restricted for Debt Service Reserve (1)	Less: Invested in Capital Assets Not of Boliston Dobt (1)	TAL NET BOSITION BEGINNING OF CHROTIST STATES	
	1	ř.	ŝ	ı	j	7											Wanagement	Public Housing
	\$ - \$			ï	\ <u>\</u>							·		,		\$	Section 8	
	\$ 262,114 \$		ĭ	ţ	j	262,114		13,200	22,828			226,086	5,119			\$ 231,205 \$	Voucher	Buisnom
	- The state of the			a-		•						*	857,991		1,061,385	1,919,376	Other Programs	
	\$ 262,114	i	ě	1	j	262,114		13,200	22,828	ı	1	226,086	863,110	1	1,061,385	1,919,376 \$ 2,150,581	Operations	iotal All

(1) Total of all operations for this line item must agree to audited financial statements.

0

- (2) Include budgeted and unbudgeted use of unrestricted net position in the current year's operations.
- (3) Amount may not exceed 5% of total operating appropriations. See calculation below.

Maximum Allowable Appropriation to Municipality/County

deficit, including the timeline for elimination of the deficit, if not already detailed in the budget narrative section. (4) If Authority is projecting a deficit for any operation at the end of the budget period, the Authority must attach a statement explaining its plan to reduce the \$ 103,295 103,295

2021 (2021-2022) OLD BRIDGE

(Name)

HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

2021 (2021-2022) CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

OLD BRIDGE (Name)

FISCAL YEAR: FROM: 01-01-2021 TO: 12-31-2021											
[] enter X to the left if the It is hereby certified that the of the Capital Budget/Prograby the governing body of	e Housing am approv the	Authority Ca ed. pursuant	ipital Budget/Progr to N.J.A.C. 5:31-2	2, alon	g with the Annual Buages						
			OR								
[X] enter X to the left if the It is hereby certified that the to adopt a Capital Budget /I following rea	governin	g body of the or the aforesa	id fiscal year, purs	uant to	N.J.A.C. 5:31-2.2 for the						
Officer's Signature:	1	Make	Trble								
Name:	MARK	MARK NOBLE									
Title:	EXEC	EXECUTIVE DIRECTOR									
Address:	1	2000 ROUTE 18 NORTH, SUITE 100 OLD BRIDGE, NJ 08857									
Phone Number;	732-60	7-6383	Fax Number:	73	2-679-0894						
E-mail address	obtha@optonline.net										

2021 (2021-2022) CAPITAL BUDGET/PROGRAM MESSAGE

OLD BRIDGE Housing Authority

(Name)

FISCAL YEAR:

FROM:

01-01-2021

TO:

12-31-2021

This section is included in the Capital Budget pursuant to N.J.A.C. 5:31-2. It does not in itself confer any authorization to raise or expend funds. Rather, it is a document used as part of the Housing Authority's planning and management system. Specific authorization to spend funds for purposes described in this section must be granted elsewhere, by a separate financing agreement, security agreement, by resolution appropriating funds from the Renewal and Replacement Reserve, or other lawful means.

- 1. Has each municipality or county affected by the actions of the authority participated in the development of the capital plan and reviewed or approved the plans or projects included within the Capital Budget/Program (This may include the governing body or certain officials such as planning boards, Construction Code Officials) as to these Projects?
- 2. Has each capital project/project financing been developed from a specific plan or report and have the full life cycle costs of each been calculated?
- 3. Has a long-term (5 years or more) infrastructure needs and other capital items (Vehicles, Equipment) needs assessment been prepared?
- 4. If amounts are on Page CB-3 in the column Debt Authorizations. Indicate the primary source of funding the debt service for the Debt Authorizations (Example HUD Funding or Other sources)
- 5. Have the current capital projects been reviewed and approved by HUD?

Add additional sheets if necessary.

Proposed Capital Budget

Old Bridge Housing Authority

For the Period

January 1, 2021

December 31, 2021

		Funding Sources						
		***************************************	Renewal &					
	Estimated Total	Unrestricted Net	Replacement	Debt		Other		
	Cost	Position Utilized	Reserve	Authorization	Capital Grants	Sources		
Public Housing Management					•			
Type in Description	\$							
Type in Description								
Type in Description	-							
Type in Description								
Total		· ·	2.			-		
Section 8								
Type in Description								
Type in Description						1		
Type in Description								
Type in Description								
Total								
Housing Voucher								
Type in Description				,				
Type in Description	:*:							
Type in Description	145							
Type in Description								
Total	:*/				-			
Other Programs	•							
Type in Description	1							
Type in Description	lu.	1				1		
Type in Description	den .							
Type in Description	-							
Total								
TOTAL PROPOSED CAPITAL BUDGET	\$ -	\$ -	\$.	\$ -	\$ - \$			

Enter brief description of up to four projects for each operation above. For operations with more than four budgeted projects, please attach additional schedules. Input total amount of all projects for the operation on single line and enter "See Attached Schedule" instead of project description.

5 Year Capital Improvement Plan

Old Bridge Housing Authority

For the Period

January 1, 2021

to

December 31, 2021

Fiscal Year Beginning in **Estimated Total Current Budget** Cost Year 2021 2022 2023 2024 2025 2026 Public Housing Management Type in Description \$ \$ Type in Description Type in Description Type in Description Total Section 8 Type in Description Type in Description Type in Description Type in Description Total Housing Voucher Type in Description Type in Description Type in Description Type in Description Total Other Programs Type In Description Type in Description Type in Description Type In Description Total

\$

- \$

- \$

\$

\$

Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.

TOTAL

5 Year Capital Improvement Plan Funding Sources

Old Bridge Housing Authority

For the Period January 1, 2021 to

December 31, 2021

		Funding Sources						
			Renewal &					
	Estimated Total	Unrestricted Net	Replacement	Debt				
	Cost	Position Utilized	Reserve	Authorization	Capital Grants	Other Sources		
Public Housing Management								
Type in Description	\$							
Type in Description					ic.			
Type in Description								
Type in Description	ŝ	-						
Total		1 * 0.	1.00		(*)	-		
Section 8	8							
Type in Description	*							
Type in Description		1:						
Type in Description		1						
Type in Description	- A							
Total	•	*	· ·			(4)		
Housing Voucher		****				V		
Type in Description	343							
Type in Description								
Type in Description						*		
Type in Description	· ·							
Total	-22	-	-					
Other Programs								
Type in Description								
Type in Description	.84							
Type in Description	19							
Type in Description	*							
Total		¥2.			=			
TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Total 5 Year Plan per CB-4	\$ -				(Control Control			
Balance check	- If a	mount is other than zero	. washithat assis	to liste al sit	6-6	60. 4		

Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.