



# TXHAF Subrecipient HCS Performance Report Training

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March 18, 2023

# AGENDA

CONTRACTUAL REQUIREMENTS

SUBMITTING YOUR DRAW REQUEST  
FORM

SUBMITTING YOUR DRAW REQUEST IN  
HCS – “HAF DRAW PERFORMANCE  
REPORT”

SUBMITTING YOUR SUPPLEMENTAL  
REPORT

SUBBITTING YOUR QUARTERLY REPORT

COMMON ERRORS



# Contractual Requirement



## EXHIBIT A

### VI. CONTRACT BENCHMARKS AS REFLECTED THROUGH THE MONTHLY EXPENDITURE AND PERFORMANCE REPORT:

A. Monthly Reports. **All monthly required reports from the HCS as part of making a draw request.**

B. Contract **Expenditure Benchmarks**, as Provided in the Budget:

1. At least 25% of award expended by 3 months out
2. At least 50% of award expended by 6 months out
3. At least 75% of award expended by 9 months out
4. At least 100% of award expended by 12 months out

C. Performance Reporting Benchmarks.

1. **Monthly Performance Reports** provided to the Department on the **15th of each month**, for previous month's activity, beginning the first month following award
2. **Quarterly performance report** provided to the Department not more than **two (2) months after the end of each completed quarter**.
3. **Final Monthly Performance Report** provided to the Department on the **15th of the month following contract termination**.
4. **Close-Out Report** provided to the Department **45 days after contract termination**
5. Inventory Report provided to the Department **45 days after contract termination**

# MONTHLY DRAW REQUESTS

- Draw for advance requests
- Draw for actuals with a request for additional advance when actuals exceed the advance balance
- Draw for actuals with a request for additional advance when actuals are less than the advance balance
- Submitting actuals and projections with an advance balance
- Submitting actuals and projections with a negative draw balance
- Submitting actuals and projections with a positive draw balance



# Scenario 1: Draw for advance requests

Advance Request: Beginning balance is the breakout of the funding for your contract.

INITIAL ADVANCE ONLY:  
Advance request is submitted under Adjustment Amount Column.

BUDGET CATEGORIES		Provided
B.1 Personnel <i>(Detailed on Budget Support Sheet B.1)</i>	INTAKE	
	COUNSELING	
B.2 Fringe Benefits <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE	
<i>According to your accounting practices this may be included in overall admin</i>	COUNSELING	
B.2 Travel <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE	
	COUNSELING	
B.2 Supplies <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE	
	COUNSELING	
B.3 Equipment <i>(Detailed on Budget Support Sheet B.3)</i>	INTAKE	
	COUNSELING	
B.4 Contractual <i>(Detailed on Budget Support Sheet B.4)</i>	INTAKE	
	COUNSELING	
B.5 Other <i>(Detailed on Budget Support Sheet B.5)</i>	INTAKE	
	COUNSELING	
B.6 Direct Client Support <i>(Detailed on Budget Support Sheet B.6)</i>	INTAKE	
	COUNSELING	
B.7 Indirect Costs/Administrative	ADMIN	
<b>**TOTAL</b>		
<i>Advance Balance</i>	No more than 30 days	
<i>Advance Request</i>	Must have 75% balance paid	
<i>Advance Reimbursement</i>	Shown in Adjustment Column	
<i>New Advance Balance</i>	No more than 3 advances	

		Optional	Optional	
		APRIL		
Beginning Balance	March Projection	March Actual	Adjustment Amount	Draw Amount
\$ 100,000.00			\$ 10,000.00	\$10,000.00
\$ 200,000.00			\$ 20,000.00	\$20,000.00
\$ -				\$0.00
\$ 30,000.00			\$ 10,000.00	\$10,000.00
\$ 30,000.00			\$ 10,000.00	\$10,000.00
\$ -				\$0.00
\$ 10,000.00			\$ 2,000.00	\$2,000.00
\$ 10,000.00			\$ 2,000.00	\$2,000.00
\$ -				\$0.00
\$ 10,000.00			\$ 2,000.00	\$2,000.00
\$ 10,000.00			\$ 2,000.00	\$2,000.00
\$ -				\$0.00
\$ 5,000.00			\$ 500.00	\$500.00
\$ 5,000.00			\$ 250.00	\$250.00
\$ -				\$0.00
\$ 20,000.00			\$ 250.00	\$250.00
\$ 20,000.00			\$ 100.00	\$100.00
\$ -				\$0.00
\$ 2,500.00			\$ 200.00	\$200.00
\$ 2,500.00			\$ 200.00	\$200.00
\$ -				\$0.00
\$ 7,000.00			\$ 500.00	\$500.00
\$ 7,000.00			\$ 500.00	\$500.00
\$ -				\$0.00
\$ 47,000.00			\$ 7,500.00	\$7,500.00
\$ 516,000.00	\$0.00	\$0.00	\$68,000.00	\$68,000.00

				<b>TOTAL DRAW AMT.</b>
\$	68,000.00			
\$	-			
\$	68,000.00			

A draw request is submitted for \$68,000

# Scenario 2: Draw for actuals with a request for additional advance when actuals exceed the advance balance

Beginning balance is the budget breakout of the funding for your contract.

Advance amounts from "Adjustment Amount" are entered into Projection Column.

Actuals spent are entered in Actual Column.

Enter amounts to account for the 25% overage in advance versus actuals.

BUDGET CATEGORIES		Optional		Optional		
		Beginning	April	MAY	Adjustment	Draw
		Balance	Projection	Actual	Amount	Amount
B.1 Personnel <i>(Detailed on Budget Support Sheet B.1)</i>	INTAKE	\$ 100,000.00	\$10,000.00	\$10,000.00	\$ 5,000.00	\$5,000.00
	COUNSELING	\$ 200,000.00	\$20,000.00	\$25,000.00		\$5,000.00
B.2 Fringe Benefits <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE	\$ 30,000.00	\$10,000.00	\$12,000.00		\$2,000.00
<i>According to your accounting practices this may be included in overall admin</i>						
B.2 Travel <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE	\$ 10,000.00	\$ 2,000.00	\$ 1,000.00	\$ 1,000.00	\$0.00
	COUNSELING	\$ 10,000.00	\$ 2,000.00	\$ 1,000.00	\$ 1,000.00	\$0.00
B.2 Supplies <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE	\$ 10,000.00	\$ 2,000.00	\$ 1,000.00	\$ 1,000.00	\$0.00
	COUNSELING	\$ 10,000.00	\$ 2,000.00	\$ 1,500.00	\$ 1,500.00	\$1,000.00
B.3 Equipment <i>(Detailed on Budget Support Sheet B.3)</i>	INTAKE	\$ 5,000.00	\$ 250.00	\$ 500.00		\$250.00
	COUNSELING	\$ 20,000.00	\$ 250.00	\$ 500.00	\$ 500.00	\$750.00
B.4 Contractual <i>(Detailed on Budget Support Sheet B.4)</i>	INTAKE	\$ 2,500.00	\$ 100.00	\$ 250.00		\$150.00
	COUNSELING	\$ 2,500.00	\$ 200.00	\$ 200.00		\$0.00
B.6 Direct Client Support <i>(Detailed on Budget Support Sheet B.6)</i>	INTAKE	\$ 7,000.00	\$ 500.00	\$ 750.00		\$250.00
	COUNSELING	\$ 7,000.00	\$ 500.00	\$ 1,000.00		\$500.00
B.7 Indirect Costs/Administrative	ADMIN	\$ 47,000.00	\$ 7,500.00	\$ 8,500.00	\$ 1,000.00	\$2,000.00
<b>**TOTAL</b>		\$ 516,000.00	\$68,000.00	\$69,450.00	\$17,000.00	\$18,450.00
<b>Advance Balance</b>		No more than 30 days				
<b>Advance Request</b>		Must have 75% balance paid				
<b>Advance Reimbursement</b>		Shown in Adjustment Column				
<b>New Advance Balance</b>		No more than 3 advances				

75% (\$51,000) is applied to advance reimbursement. 25% (\$17,000) is part of monthly draw. \$1,450 overage on actual+ \$17,000 adjustment= \$18,450

# Scenario 3: Draw for actuals with a request for additional advance when actuals are less than the advance balance

Beginning balance is from the previous month's reporting period minus any actuals

Projection Column was completed in the previous month for the draw.

Expended from the previous month's Projections are entered into the Actual Column.

Nothing will be entered into the adjustment column unless there are corrections from previous draws.

		Optional	JUNE		Optional	
		Beginning Balance	May Projection	May Actual	Adjustment Amount	Draw Amount
		\$ 85,000.00	\$ 10,000.00	\$ 10,000.00		\$ 0.00
		\$ 175,000.00	\$ 20,000.00	\$ 20,000.00		\$ 0.00
<b>BUDGET CATEGORIES</b>						
		<i>Provided</i>				
B.1 Personnel <i>(Detailed on Budget Support Sheet B.1)</i>	INTAKE	\$ 18,000.00	\$ 10,000.00	\$ 10,000.00		\$ 0.00
	COUNSELING	\$ 20,000.00	\$ 10,000.00	\$ 10,000.00		\$ 0.00
B.2 Fringe Benefits <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE	\$ 8,000.00	\$ 2,000.00	\$ 2,000.00		\$ 0.00
<i>According to your accounting practices this may be included in overall admin</i>		\$ 8,000.00	\$ 2,000.00	\$ 2,000.00		\$ 0.00
B.2 Travel <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE	\$ 8,000.00	\$ 2,000.00	\$ 2,000.00		\$ 0.00
	COUNSELING	\$ 7,000.00	\$ 2,000.00	\$ 2,000.00		\$ 0.00
B.2 Supplies <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE	\$ 3,000.00	\$ 500.00	\$ 500.00		\$ 0.00
	COUNSELING	\$ 4,500.00	\$ 250.00	\$ 250.00		\$ 0.00
B.3 Equipment <i>(Detailed on Budget Support Sheet B.3)</i>	INTAKE	\$ 19,000.00	\$ 250.00	\$ 250.00		\$ 0.00
	COUNSELING	\$ 19,750.00	\$ 100.00	\$ 100.00		\$ 0.00
B.4 Contractual <i>(Detailed on Budget Support Sheet B.4)</i>	INTAKE	\$ 2,250.00	\$ 200.00	\$ 200.00		\$ 0.00
	COUNSELING	\$ 2,300.00	\$ 200.00	\$ 200.00		\$ 0.00
B.5 Other <i>(Detailed on Budget Support Sheet B.5)</i>	INTAKE	\$ 6,250.00	\$ 500.00	\$ 200.00		\$ -300.00
	COUNSELING	\$ 6,000.00	\$ 500.00	\$ 200.00		\$ -300.00
B.6 Direct Client Support <i>(Detailed on Budget Support Sheet B.6)</i>	INTAKE					\$ 0.00
	COUNSELING					\$ 0.00
B.7 Indirect Costs/Administrative	ADMIN					\$ 0.00
<b>**TOTAL</b>						\$ 0.00
<b>Advance Balance</b>						
<i>No more than 30 days</i>						
<b>Advance Request</b>		\$ 37,500.00	\$ 7,500.00	\$ 7,500.00		\$ 0.00
<i>Must have 75% balance paid</i>						
<b>Advance Reimbursement</b>		\$ 429,550.00	\$ 68,000.00	\$ 67,400.00		\$ -600.00
<i>Shown in Adjustment Column</i>						
<b>New Advance Balance</b>			\$ 102,000.00			
<i>No more than 3 advances</i>			\$ 67,400.00			
			\$ 34,600.00			

75% of the advance has not been reimbursed so an additional advance cannot be requested. The \$600 is added to your advance balance.

# Scenario 4: Submitting actuals and projections with an advance balance

Beginning balance is from the previous month's reporting period minus any actuals

Expended funds from previous Projection are entered into the Actual Column

Enter the values to account for the reimbursement are listed in the adjustment amount column

BUDGET CATEGORIES		Provided	Optional	JULY	Optional		
			Beginning Balance	June Projection	June Actual	Adjustment Amount	Draw Amount
B.1 Personnel <i>(Detailed on Budget Support Sheet B.1)</i>	INTAKE						
	COUSSELING						
B.2 Fringe Benefits <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE		\$ 75,000.00		\$ 10,000.00		\$10,000.00
<i>According to your accounting practices this may be included in overall admin</i>	COUSSELING		\$ 155,000.00		\$ 20,000.00	\$ (20,000.00)	\$0.00
B.2 Travel <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE						\$0.00
	COUSSELING		\$ 8,000.00		\$ 10,000.00	\$ (10,000.00)	\$0.00
B.2 Supplies <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE		\$ 10,000.00		\$ 10,000.00		\$10,000.00
	COUSSELING						\$0.00
B.3 Equipment <i>(Detailed on Budget Support Sheet B.3)</i>	INTAKE		\$ 6,000.00		\$ 2,000.00	\$ (1,000.00)	\$1,000.00
	COUSSELING		\$ 6,000.00		\$ 2,000.00	\$ (1,000.00)	\$1,000.00
B.4 Contractual <i>(Detailed on Budget Support Sheet B.4)</i>	INTAKE						\$0.00
	COUSSELING		\$ 6,000.00		\$ 2,000.00	\$ (1,000.00)	\$1,000.00
B.5 Other <i>(Detailed on Budget Support Sheet B.5)</i>	INTAKE		\$ 5,000.00		\$ 2,000.00	\$ (1,000.00)	\$1,000.00
	COUSSELING						\$0.00
B.6 Direct Client Support <i>(Detailed on Budget Support Sheet B.6)</i>	INTAKE		\$ 2,700.00		\$ 500.00		\$500.00
	COUSSELING		\$ 4,250.00		\$ 250.00		\$250.00
B.7 Indirect Costs /Administrative	ADMIN						\$0.00
<b>**TOTAL</b>			\$ 18,750.00		\$ 250.00		\$250.00
<b>Advance Balance</b>			\$ 19,650.00		\$ 100.00		\$100.00
<i>No more than 30 days</i>							\$0.00
<b>Advance Request</b>			\$ 2,050.00		\$ 200.00		\$200.00
<i>Must have 75% balance paid</i>							\$0.00
<b>Advance Reimbursement</b>			\$ 2,100.00		\$ 200.00		\$200.00
<i>Shown in Adjustment Column</i>							\$0.00
<b>New Advance Balance</b>			\$ 6,050.00		\$ 500.00	\$ (500.00)	\$0.00
<i>No more than 3 advances</i>			\$ 5,800.00		\$ 500.00	\$ (100.00)	\$400.00
							\$0.00
			\$ 30,000.00		\$ 7,500.00		\$7,500.00
			\$ 362,150.00	\$0.00	\$68,000.00	-\$34,600.00	\$33,400.00
			\$ 34,600.00				
			\$ 58,000.00				
			\$ 34,600.00				
			\$ 58,000.00				

The actuals will be reduced by the adjustments and a draw can be submitted for the balance of \$33,400

If you did not request a projection from the previous month or if you did not pay back 75% of previous projection this column is left blank.



# Scenario 5: Submitting actuals and projections with a negative draw balance

Beginning balance is from the previous month's reporting period minus any actuals.

Expended funds from previous Projection are entered into the Actual Column

When the actuals are less than the previous projections the balance is carried over to the requested projection and reduced from the projection total

BUDGET CATEGORIES		Provided	AUGUST				
			Beginning Balance	July Projection	July Actual	Adjustment Amount	Draw Amount
B.1 Personnel <i>(Detailed on Budget Support Sheet B.1)</i>	INTAKE		\$ 65,000.00	\$ 10,000.00	\$ 9,000.00		-\$1,000.00
	COUNSELING		\$155,000.00	\$ 20,000.00	\$ 18,000.00		-\$2,000.00
B.2 Fringe Benefits <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE						\$0.00
	COUNSELING	<i>According to your accounting practices this may be included in overall admin</i>	\$ 8,000.00	\$ 10,000.00	\$ 6,000.00		-\$4,000.00
B.2 Travel <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE		\$ -	\$ -	\$ -		\$0.00
	COUNSELING						\$0.00
B.2 Supplies <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE		\$ 5,000.00	\$ 2,000.00	\$ 2,000.00		\$0.00
	COUNSELING		\$ 5,000.00	\$ 2,000.00	\$ 2,000.00		\$0.00
B.3 Equipment <i>(Detailed on Budget Support Sheet B.3)</i>	INTAKE		\$ 5,000.00	\$ 2,000.00	\$ 2,000.00		\$0.00
	COUNSELING		\$ 4,000.00	\$ 2,000.00	\$ 2,000.00		\$0.00
B.4 Contractual <i>(Detailed on Budget Support Sheet B.4)</i>	INTAKE						\$0.00
	COUNSELING		\$ 2,000.00	\$ 500.00	\$ 500.00		\$0.00
B.5 Other <i>(Detailed on Budget Support Sheet B.5)</i>	INTAKE		\$ 4,000.00	\$ 250.00	\$ 250.00		\$0.00
	COUNSELING						\$0.00
B.6 Direct Client Support <i>(Detailed on Budget Support Sheet B.6)</i>	INTAKE		\$ 18,500.00	\$ 250.00	\$ 250.00		\$0.00
	COUNSELING		\$ 19,550.00	\$ 100.00	\$ 100.00		\$0.00
B.7 Indirect Costs/Administrative	ADMIN						\$0.00
<b>**TOTAL</b>			\$ 1,850.00	\$ 200.00	\$ 200.00		\$0.00
			\$ 1,900.00	\$ 200.00	\$ 200.00		\$0.00
<i>Advance Balance</i>		No more than 30 days					\$0.00
<i>Advance Request</i>		Must have 75% balance paid	\$ 6,050.00	\$ 500.00	\$ 500.00		\$0.00
<i>Advance Reimbursement</i>		Shown in Adjustment Column	\$ 5,400.00	\$ 500.00	\$ 500.00		\$0.00
<i>New Advance Balance</i>		No more than 3 advances	\$ 22,500.00	\$ 7,500.00	\$ 7,000.00		-\$500.00
			\$328,750.00	\$58,000.00	\$50,500.00	\$0.00	-\$7,500.00
			\$ 58,000.00				
			\$ 43,000.00				
			\$50,500.00				
			\$ 50,500.00				

A draw request is submitted for \$43,000.00

# Scenario 6: Submitting actuals and projections with a positive draw balance

Beginning balance is from the previous month's reporting period minus any actuals.

Projection Column was completed in the previous month for the draw.

Actuals spent are entered in Actual Column.

BUDGET CATEGORIES		Provided	Option 1		Option 2		Draw Amount	
			Beginning Balance	August Projection	August Actual	Adjustment Amount		
		SEPTEMBER						
B.1 Personnel <i>(Detailed on Budget Support Sheet B.1)</i>	INTAKE		\$ 56,000.00	\$ 9,000.00	\$ 12,000.00		\$3,000.00	
	COUNSELING		\$ 137,000.00	\$ 18,000.00	\$ 20,000.00		\$2,000.00	
B.2 Fringe Benefits <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE						\$0.00	
<i>According to your accounting practices this may be included in overall admin</i>								
B.2 Travel <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE		\$ 2,000.00	\$ 6,000.00	\$ 2,000.00		-\$4,000.00	
	COUNSELING		\$ -	\$ -	\$ -		\$0.00	
B.2 Supplies <i>(Detailed on Budget Support Sheet B.2)</i>	INTAKE		\$ 3,000.00	\$ 2,000.00	\$ 2,000.00		\$0.00	
	COUNSELING		\$ 3,000.00	\$ 2,000.00	\$ 2,000.00		\$0.00	
B.3 Equipment <i>(Detailed on Budget Support Sheet B.3)</i>	INTAKE		\$ 3,000.00	\$ 2,000.00	\$ 2,000.00		\$0.00	
	COUNSELING		\$ 2,000.00	\$ 2,000.00	\$ 2,000.00		\$0.00	
B.4 Contractual <i>(Detailed on Budget Support Sheet B.4)</i>	INTAKE		\$ 1,500.00	\$ 500.00	\$ 500.00		\$0.00	
	COUNSELING		\$ 3,750.00	\$ 250.00	\$ 3,000.00		\$2,750.00	
B.5 Other <i>(Detailed on Budget Support Sheet B.5)</i>	INTAKE		\$ 18,250.00	\$ 250.00	\$ 8,750.00		\$8,500.00	
	COUNSELING		\$ 19,450.00	\$ 100.00	\$ 200.00		\$100.00	
B.6 Direct Client Support <i>(Detailed on Budget Support Sheet B.6)</i>	INTAKE		\$ 1,650.00	\$ 200.00	\$ 200.00		\$0.00	
	COUNSELING		\$ 1,700.00	\$ 200.00	\$ 200.00		\$0.00	
B.7 Indirect Costs/Administrative	ADMIN						\$0.00	
<b>**TOTAL</b>			\$ 278,250.00	\$50,500.00	\$65,850.00	\$0.00	\$15,350.00	
	<i>Advance Balance</i>	No more than 30 days	\$ 5,550.00	\$ 500.00	\$ 2,500.00		\$2,000.00	
	<i>Advance Request</i>	Must have 75% balance paid	\$ 4,900.00	\$ 500.00	\$ 1,000.00		\$500.00	
	<i>Advance Reimbursement</i>	Shown in Adjustment Column	\$ 15,500.00	\$ 7,000.00	\$ 7,500.00		\$500.00	
	<i>New Advance Balance</i>	No more than 3 advances	\$ 278,250.00	\$50,500.00	\$65,850.00	\$0.00	\$15,350.00	
			\$ 50,500.00					
			\$ 50,000.00					
			\$ 50,500.00					
			\$ 50,000.00					

A draw request is then submitted for the total value of \$15,350 with your monthly. (reimbursement)

# HCS DRAW PERFORMANCE REPORTING

- Expenditure Overview
- Performance Report
- Total Services Provided
- Total Applications Received
- Total Applications Processed
- Total Applications Referred



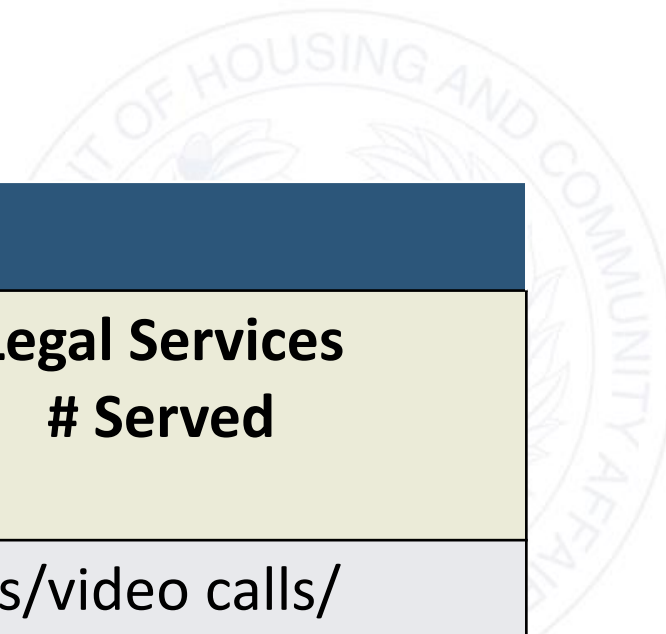
# HCS Draw Performance Report

- **Monthly Spent-** Enter Project Draw (Intake, Legal & Housing) and Admin Draw amount for the reporting period.
- **YTD Spent-** Total amount from award start to date (includes monthly spent amount)
- **YTD % Spent-** The percent of your YTD spend for project service & admin divided by the category budget.
- **Quarterly Spent-** Total dollar of funding spent for the reporting quarter.

Expenditure Overview					Budget	
	Intake Centers	Legal Counseling	Housing Counseling	Admin	Intake	
Monthly Spent	\$125,000.00	\$25,000.00	\$80,000.00	\$15,000.00	Housing	\$588,272
YTD Spent	\$250,000.00	\$100,000.00	\$188,000.00	\$25,000.00	Legal	\$400,000
YTD % Spent	30%	25%	32%	30%	Admin	\$84,663
	Q1	Q2	Q3	Q4	Total Funded:	\$931,292
Quarterly Spent						

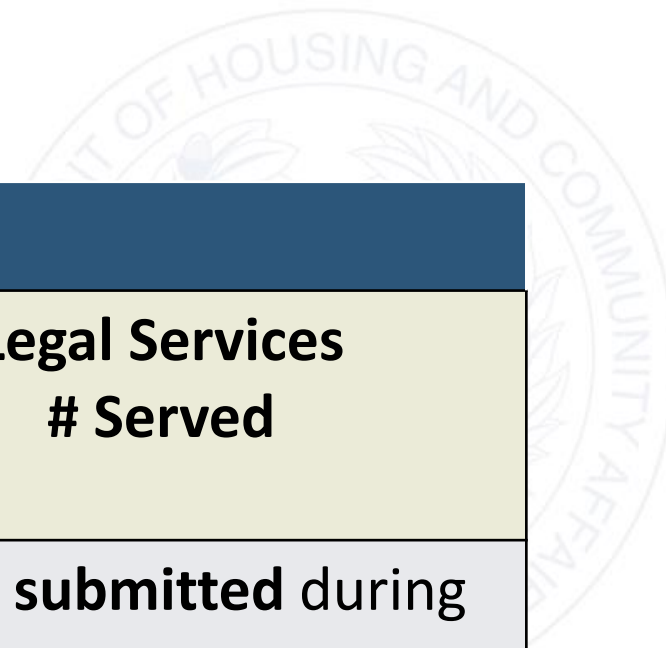
# Performance Report

	Homeowners (HO) Served	Foreclosures Prevented	Homeowners Contacted	Unduplicated Count of Homeowners	Intake Outreach
<b>Total</b>	<p>All HO served for report period. Count 1 HO for each Service provided. May be counted up to 3 times for:</p> <ul style="list-style-type: none"> <li>• Intake (1)</li> <li>• Legal (1)</li> <li>• Housing Counseling (1)</li> </ul> <p><b>*Crosscheck:</b> Supplemental Report columns M, N, and O</p>	<p>HO in foreclosure or threat of foreclosure when obtained services AND issues resolved prior to foreclosure</p> <p><b>*Crosscheck:</b> Supplemental Report column P</p>	<p>HO contacted includes:</p> <ul style="list-style-type: none"> <li>• calls</li> <li>• trackable outreach events</li> <li>• referrals</li> <li>• walk-ins, etc.</li> </ul> <p><b>*Crosscheck:</b> Outreach Event sign-in sheets/tracked calls</p>	<p>HOs that receive one or multiple services are counted 1 time.</p> <p>Unlike HOs Served, this is 1 count per HO to obtain an unduplicated count.</p> <p><b>*Crosscheck:</b> Supplemental Report column B-"No"</p>	<p>Number of Outreach events, includes:</p> <ul style="list-style-type: none"> <li>• Pre-scheduled events</li> <li>• Pop up events</li> <li>• Partnered events</li> <li>• Regularly scheduled events</li> </ul> <p><b>*Crosscheck:</b> Outreach Form</p>
<b>PPC</b>	Above from a PPC	Above from a PPC	Above from a PPC	Above from a PPC	Above from a PPC



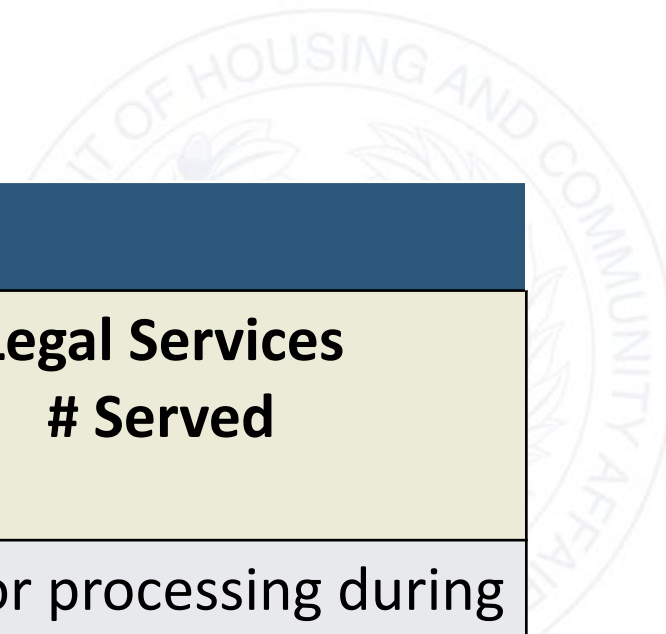
## Total Services Provided

	Intake Centers # Served	Housing Counseling # Served	Legal Services # Served
<p>Number of services provided to homeowners through calls/walk ins/video calls/referrals/Intake/Legal/Housing</p> <ul style="list-style-type: none"> <li>• Includes all services not just applications</li> <li>• Does not necessarily have to be a completed, or submitted application just that some type of service was provided</li> </ul>			
<b>PPC</b>	# in PPC <i>*Crosscheck: Supplemental Report column B+ Outreach Form + Calls+ Referrals</i>	# in PPC <i>*Crosscheck: Supplemental Report columns M, N+ Outreach Form +Calls + Referrals</i>	# in PPC <i>*Crosscheck: Supplemental Report columns M, O, P+ Outreach Form + Calls + Referrals</i>
<b>Non-PPC</b>	# in Non-PPC	# in Non-PPC	# in Non-PPC



## Total Applications Received

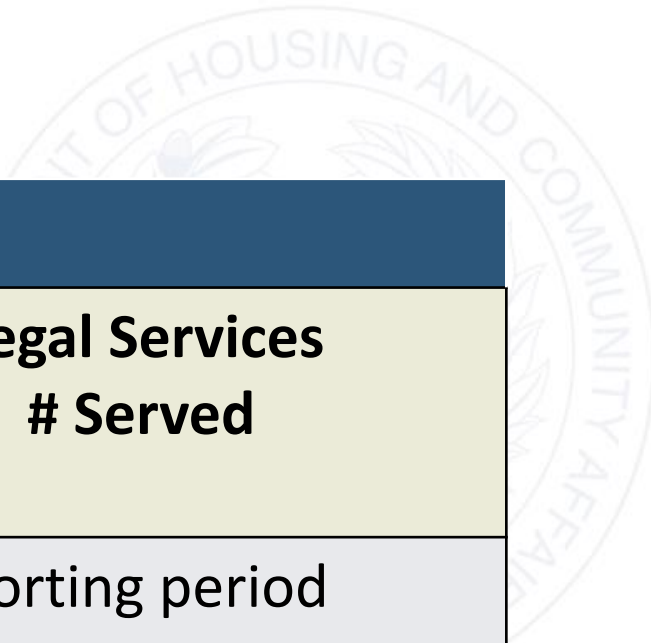
	<b>Intake Centers # Served</b>	<b>Housing Counseling # Served</b>	<b>Legal Services # Served</b>
Number of applications received that <b>have not been electronically submitted</b> during the reporting period.			
<b>PPC</b>	# in PPC <i>*Crosscheck: Supplemental Report column M that are "In-process"</i>	# in PPC <i>*Crosscheck: Supplemental Report column N that are "In-process"</i>	# in PPC <i>*Crosscheck: Supplemental Report column O that are "In-process"</i>
<b>Non-PPC</b>	# in Non-PPC	# in Non-PPC	# in Non-PPC



## Total Applications Processed

	<b>Intake Centers # Served</b>	<b>Housing Counseling # Served</b>	<b>Legal Services # Served</b>
Number of applications that <b>have been electronically submitted</b> for processing during the reporting period regardless of status.			
<b>PPC</b>	# in PPC <i>*Crosscheck: Supplemental Report column M "Applied/Submitted"</i>	# in PPC <i>*Crosscheck: Supplemental Report column N "Applied/Submitted"</i>	# in PPC <i>*Crosscheck: Supplemental Report column O "Applied/Submitted"</i>
<b>Non-PPC</b>	# in Non-PPC	# in Non-PPC	# in Non-PPC





## Total Applications Referred

	<b>Intake Centers # Served</b>	<b>Housing Counseling # Served</b>	<b>Legal Services # Served</b>
Number of applications referred for outside services during the reporting period regardless of status. <ul style="list-style-type: none"><li>• How are you tracking referral information for reporting?</li></ul>			
<b>PPC</b>	# in PPC	# in PPC	# in PPC
<b>Non-PPC</b>	# in Non-PPC	# in Non-PPC	# in Non-PPC

# SUPPLEMENTAL REPORTING

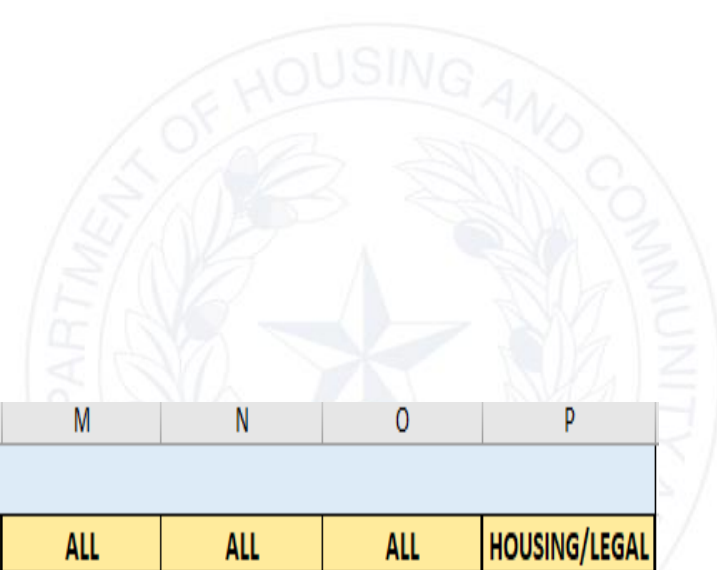
- Overview
- Template



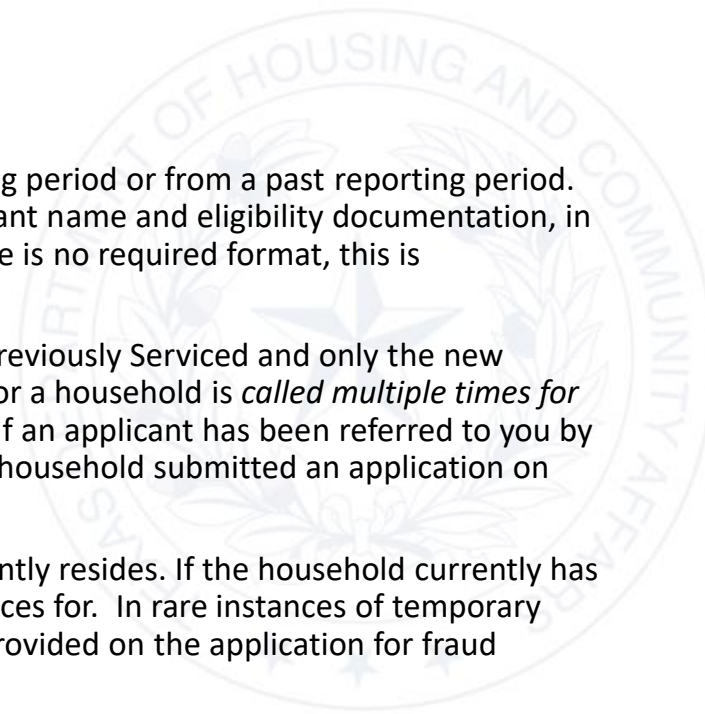
## Supplemental Overview

- The supplemental report captures **all data** on “UNDUPLICATED” households.
- A household is “UNDUPLICATED” the **first time** it is provided any type of service.
  - All services will be captured on one row with all services that were provided.
- Households that have been served in previous reporting months are reported as "Previously Served" with **only the additional service** provided
- Totals for categories in this spreadsheet, should equal the report submitted in the Housing Contract System Performance Report and Draw.
  - Draws WILL NOT be approved if totals do not match.
- Reports are due on or before the 15<sup>th</sup> of each month.
- Information required during the intake application process is not required to be input on this form.
- Legal and housing have to submit all areas of the form since their information is not submitted into the application system.

# Supplemental Report Template



A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
<b>Reporting Month:</b>			<b>2023</b>		<b>Organization:</b>										
<b>ALL</b>	<b>ALL</b>	<b>ALL</b>	<b>ALL</b>	<b>ALL</b>	<b>ALL</b>	<b>ALL</b>	<b>ALL</b>	<b>HOUSING/LEGAL</b>	<b>HOUSING/LEGAL</b>	<b>HOUSING/LEGAL</b>	<b>ALL</b>	<b>ALL</b>	<b>ALL</b>	<b>ALL</b>	<b>HOUSING/LEGAL</b>
Unique Identifier	Previously Serviced	Region	Zip Code	County	Household Size	Persistent Poverty County	Household Income	Gender of Applicant	Race of Household	Ethnicity of Household	Age of Homeowner	Intake Center	Housing Counseling	Legal Services	Foreclosure Prevention Achieved

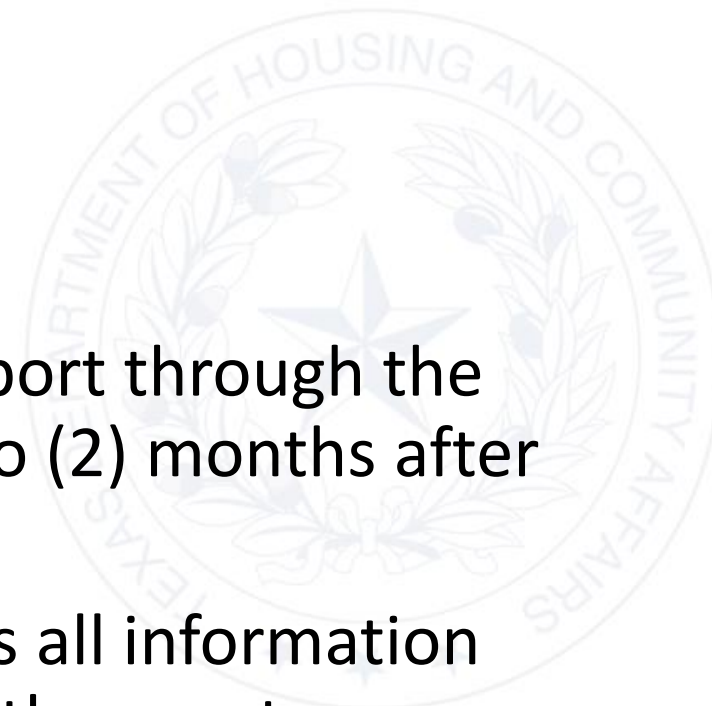


- **Data is ONLY submitted for the specific reporting month.**
- **Unique Identifier** is important so that we can track and verify that an applicant is not listed twice during the reporting period or from a past reporting period. Each applicant should have a unique ID that ties directly to an application for each of the 3 Services; including applicant name and eligibility documentation, in your organization's records. The ONLY time an ID is repeated is if the applicant returns for an additional service. There is no required format, this is Subrecipient unique and required regardless of the services provided
- **Previously Serviced:** If a household returns for an additional service in a later month that household is counted as Previously Serviced and only the new service provided is indicated on the supplemental report. If a household returns multiple times for *service inquiries*, or a household is *called multiple times for information*, that household is counted one time on the supplemental regardless of the amount of times contacted. If an applicant has been referred to you by another Subrecipient then *both* Subrecipients can count that applicant on their individual supplemental reports. If a household submitted an application on their own and comes for additional assistance, report as *Previously Serviced* and indicate services provided.
- **Region/Zip/County-** Enter the region as urban or rural **zip code** of residence and **county** where the household currently resides. If the household currently has no permanent residence they are not eligible for assistance. They must reside in the house they are requesting services for. In rare instances of temporary displacement an exception may be made. If their mailing address different from their residence a reason must be provided on the application for fraud review.
- **Household Size:** The total number of persons living in the household, including any dependents. You do not have to be included on the Mortgage to be included in the Household Size.
- **Persistent Poverty County:** Either yes or no if the household is in a persistent poverty county. A tab listing all PPC Counties is included in this template
- **Household Income:** List the income for the household. Included and excluded income requirements are listed in the HAF Policy located at [www.texas homeownerassistance.com](http://www.texas homeownerassistance.com)
- **Gender/Race/Ethnicity/Age: Only required by Housing and Legal since reports in Yardi can pull this from intake data.** Enter the gender/race/ ethnicity and age of the Homeowner completing the application. Remember this information is ONLY for the homeowner, regardless of other household member's demographics. Although if you are reporting Housing Counseling or Legal with an Intake you MUST report all fields for that applicant. If you are ONLY doing intake these fields are not required.
- **Intake/Housing/Legal** – NOTE this section has changed; hopefully to make reporting easier. Rather than Yes or No, you will now select the Outcome per Service. **Applied/Submitted** meaning the homeowner received your services and completed the process; **In-Process** means the homeowner is in the process of receiving your services but actions are not complete; **Referred** means the homeowner was referred to another provider for the service.

# QUARTERLY REPORTS

- Overview
- Template

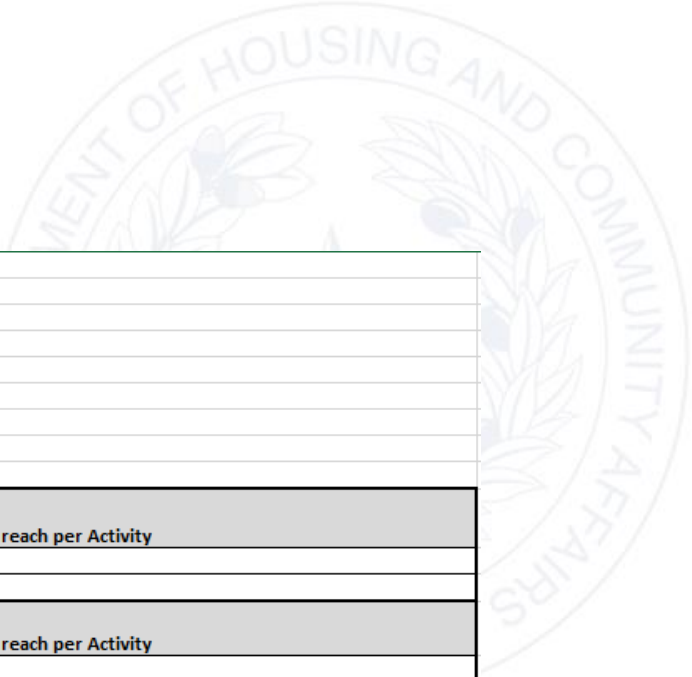




## Quarterly Report Overview

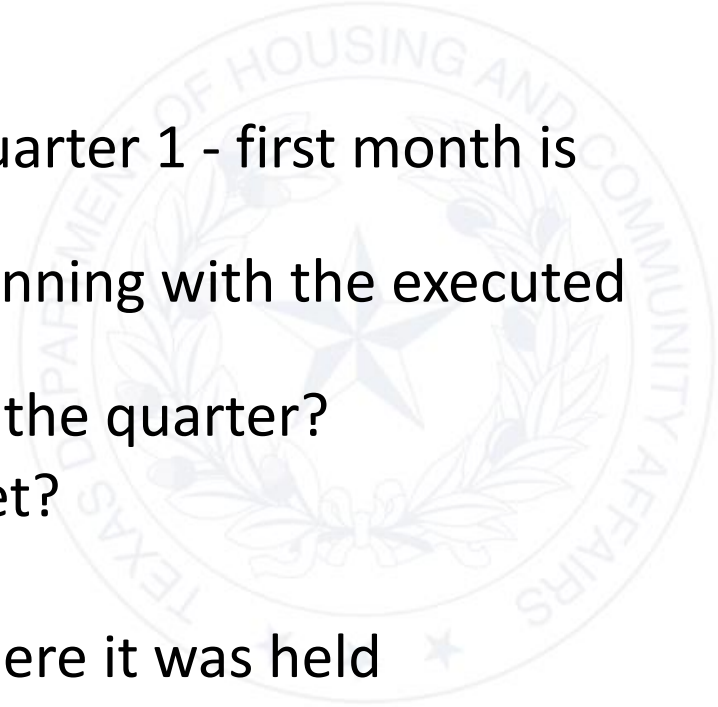
- Subrecipient must submit a quarterly performance report through the HCS established by the Department not more than two (2) months after the end of each completed quarter
- The Quarterly Report is completed in HCS and includes all information from the monthly performance reports that comprise the quarter.
- The narrative is submitted as an attachment in the Housing Contract System (HCS) with the Quarterly Performance Report.

# Quarterly Report Template



Narrative Quarterly Report		
Quarterly Financials and Performance measures are submitted in HCS on the Performance Report		
Organization		
Quarter		
Date Range:		
Program Description:		
Proposed VS Actual Staffing	Proposed _____ Actual _____	
Month 1 Please insert total number of activities: _____ and list Date/Location below	Outreach Activities	Total reach per Activity
Month 12 Please insert total number of activities: _____ and list Date/Location below*	Outreach Activities	Total reach per Activity
<i>* If a month has more Outreach, please insert the needed number of additional rows under that month</i>		
<b>Narrative</b>		
<b>Challenges</b>		
<i>Describe any challenges you faced during the program</i>		
<b>Overcoming Challenges</b>		
<b>What did you do to try and overcome these challenges</b>		
<b>Conclusion</b>		
<b>What is one Training would have been helpful starting this program.</b>		



- 
- **Quarter** - enter which quarter is being reported starting with quarter 1 - first month is contract execution
  - **Date Range** - enter the 3 month date range for the quarter beginning with the executed contract month as month 1.
  - **Program Description** - What services have you provided during the quarter?
  - **Proposed** - How many staff were in the initially proposed budget?
  - **Actual Staffing** - How many staff are there currently?
  - **Date Location** - Enter the date of each outreach activity and where it was held
  - **Outreach Activities** - What was the activity your organization participated in?
  - **Total Reach Per Activity** - How many people were served at the activity?
  - **Narrative Challenges** - list three challenges you encountered
  - **Narrative Overcoming Challenges** - How were these challenges resolved?
  - **Narrative Conclusion** - What were lessons learned from the challenge?
  - **What is one Training that would have been helpful starting this program** - list any trainings that would have been helpful at the onset.

# COMMON ERRORS

- Draw Report
- Supplemental Report



# Common Errors

## Draw Request Template

Budget Category – “B.7 Indirect Costs/Administrative” is where all Administrative costs are to be reported.

## HCS Draw Request Entries

### Failure to Enter:

- Failure to enter Administrative Draw as noted on the “HAF Performance Draw Request Report”.
- Totals entered for draw requests do not reflect totals on Draw Request Form and/or “HAF Performance Draw Request Report”

## HAF Draw Performance Report

- Failure to enter Year to Date Spent
- Failure to enter Year to Date % Spent
- Failure to enter Quarterly Spent
- Failure to enter Administrative Expenses
- Homeowners Served total does not match what is shown on the respective “Supplemental Report”

## Supplemental Report

- Number of homeowners listed on the “Supplemental Report” does not match numbers entered on the “HAF Draw Performance Report”
- Duplicate entries – homeowners from previous reporting periods listed on current report.

# QUESTIONS



# TX HAF Subrecipient TEAM

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**TDHCA**

221 E. 11<sup>TH</sup> STREET

AUSTIN, TEXAS 78701

