

**HOME HHR/HCRI Program**

**Program Administration File Checklist**

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| --- |
| **Grantee:** |
| **Contract #:** |
| **Date:** |

*Continued on reverse.*

| **File Contents** | **Present** | **Notes/Comments** |
| --- | --- | --- |
| Contract | Yes  No |  |
| Amendments | Yes  No  NA |  |
| Equal Opportunity/Fair Housing | Yes  No |  |
| Procurement | Yes  No  NA |  |
| Financial Management Admin. Funds:  Staff Time Reporting  Receipts of Administrative Purchases  Allocation Policy | Yes  No  NA  Yes  No  NA  Yes  No  NA |  |
| Program Income Reporting | Yes  No  NA |  |

*TBRAClientFile\_5/2018v1*

*06.2018\_HHR Project File*