

HOMEOWNERS POLICY
TERRA NOVA INSURANCE COMPANY LIMITED
 TERRA NOVA HOUSE
 41 - 43 MINING LANE
 LONDON EC6M 7SP ENGLAND

4520024

POLICY NUMBER HP 18834 88	EFFECTIVE DATE 18/04/87	EXPIRES 18/04/91	PREM. NO. HP 18834 88	CONTRACT T0887633	POLICY 0284
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LAKE, RICHARD E. & BILBA CARTER
 1204 FAULINE STREET
 NEW ORLEANS, LA. 70117-

LAPARA INSURANCE AGENCY
 1421 NORTH CASSARD BLVD.
 METairie, LA. 70001-

The residential premises covered by this policy is located at the same address.

The Fire District: **NEW ORLEANS**. Parish: **ORLEANS**
 Coverage for the above property is provided only where a limit of liability is shown on a premium is stated. **OWNER OCCUPIED**
RATING INFORMATION: Frame, Built in 62. Mileage from fire station: 3
 Protection Class Rating: 3 Territory rated: 30.
 \$100.00 - Section I Loss Deductible. Families: 3.
(SPECIAL PROVISION: \$75.00 MINIMUM DAILY PREMIUM)

SECTION I COVERAGE	LIMITS OF LIABILITY	PREMIUMS
A. Dwelling	\$4000.00	\$82.50
B. Apartment Structures	\$400.00	
C. Unattached Personal Property	\$1000.00	IF EVENT THIS POLICY IS CANCELLED FOR ANY REASON THE POLICY FEE IS FULLY EARNED.
D. Additional Living Expense	\$400.00	
	Credit: \$ 0.00	\$82.50

SECTION II COVERAGE	LIMITS OF LIABILITY	PREMIUMS
E. Automobile Liability	\$5000.00 Per Occurrence	
F. Medical Payments	\$500.00 Per Person	
	(Policy) Fee	\$5.00
	Tax	\$4.00

TOTAL ANNUAL PREMIUM DEVELOPED FROM INFORMATION SUPPLIED \$121.50

1st. Mortgage End Mortgage

THE CITY OF NEW ORLEANS NONE

C/O U.S.E. TRUST BIRD COLLECTION

P. O. BOX 123
 DOWNEY, CA. 90241-8123

Loan Number: Loan Number:
 Basic Forms: HO-8 (8-84) HO-100 (8-86) HO-122 (8-81) SPP-1 (8-86)

WGA-400, WGA-1101, WGA-1886, WGA-2341, WGA-2342, WGA-800 (7-83), HO-81 (4-84)

POLICY EXPIRES AT 12:03 A.M. STANDARD TIME ON 18/04/91
 RENEWAL OF POLICY No.: HP 18834 88

18/02/88

WINCHESTER GENERAL AGENCY, INC.

By *John A. Smith*
 Authorized Representative

PERSONAL AND CONFIDENTIAL

REPORT OF TRAVEL

REPORT MADE AT: **NEW ORLEANS, LA** DATE OF TRAVEL: **12-12-95**

REPORT MADE BY: **WILLIAM B. BROWN**

DATE OF REPORT: **12-12-95**

TO: **NEW ORLEANS, LA**

FROM: **NEW ORLEANS, LA**

REASON FOR TRAVEL: **PERSONAL**

TRAVEL DURING: **12-12-95**

TRAVEL WITH: **WIFE AND CHILDREN**

TRAVEL CLASS: **COACH**

TRAVEL METHOD: **BY AIR**

TRAVEL DURATION: **12-12-95**

TRAVEL PURPOSE: **PERSONAL**

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Filed 1/17/96 with Lab

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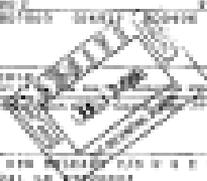
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TRAVEL METHOD: **BY AIR**

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GOOD TO GO
EXEMPTED FROM
SEARCH AND
SEIZURE
PROCESSES
FOR THE
FBI

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TRAVEL PURPOSE: **PERSONAL**

vill

1520023

NONCASHING MORTGAGE BILL

DECLARANTS AFFIDAVIT EFFECTIVE 08-13-1988 POLICY NUMBER 80-888-113

NAME: BUTCHELL BEATER 3
ISSUED: 2011 PEARLBO ST
MAILING: NEW ORLEANS LA 70117
ADDRESS:

Policy Period: From 08-13-1988 To 08-13-1989 CONTINUOUSLY Renewed
 Add to successive policy periods as stated herein

AGENT'S CODE: 51-0112
Agency or Broker: CENTRAL AGENCY INC
Office Address: P O BOX 80000
Branch and City: METairie LA 70002-0000

The Applicant hereby certifies that this policy issued in his name and that, unless otherwise stated hereon, he is, his, her, his or her estate.

We will provide the maximum described in this policy in return for the premium you contribute with an applicable policy discount. If we elect to suspend this coverage, we will return the policy if you pay the required renewal premium for 600 days following notice thereof. Subject to our premiums, rates and terms then in effect. You shall pay the premium when due or when this policy will expire, after appropriate notice is mailed to you.

Consent is provided when a premium of less of value is shown for the coverage.

SECTION & DESCRIPTION	Limit of Liability	Premium		Type of Premium	Continued Premium
		Basic Policy Premium	For Schedule		
A. Dwelling	\$ 28,000	\$ 213.00	\$	Flat	
B. Other Structures	\$ 2,000	\$	\$	Flat	
C. Personal Effects	\$ 28,000	\$ 21.00	\$	Pro-rata	
D. Loss of Use	\$ 12,000	\$	\$	Pro-rata	
E. Personal Liability	\$ 100,000	\$ 300.00	\$	Flat	
F. Medical Payments to Others - per Person	\$ 1,000	\$	\$	Flat	
		Total Annual Premium	\$ 544.00		

CONTACT TO ADJUST CLAIMS: (800) 800-8000 (800) 800-8000 (800) 800-8000 (800) 800-8000 (800) 800-8000 (800) 800-8000

DESCRIPTION - SECTION 1: 200 PLAT DESCRIBIBLE OTHER
 in case of a loss under Section 1, we cover only that part of the loss over the deductible stated.

Section 2 - Other insured interests: Owner, Lessee, Assignee, Tenant or Dis. Courts, State, BP Code

MORTGAGE: FIRST HOUSING CORPORATION LOAN # 1000000
 Name and C/O: P O BOX 80000 NEW ORLEANS LA 70117
 Address: 211 BINGER ST NEW ORLEANS LA 70117

If a mortgage is noted in this policy, we will continue the insurance for the mortgagee's interest for ten days after written notice of assignment is received by the insurer and the assignment is recorded.

Year	1	2	3	4	5	6	7	8	9	10
1988	1	1	1	1	1	1	1	1	1	1
1989	1	1	1	1	1	1	1	1	1	1

Complete this form to file a claim. It is to be filled out by the insured or the insured's agent. It is to be filled out by the insured or the insured's agent. It is to be filled out by the insured or the insured's agent.

This Declaration Page, together with the policy, constitutes the contract. It is to be read in conjunction with the policy. It is to be read in conjunction with the policy. It is to be read in conjunction with the policy.

ADJUSTED PREMIUM \$0.000000

NEW ORLEANS APPOINTABLE HOME OWNERSHIP, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

NOTES TO FINANCIAL STATEMENTS--CONTINUED

December 31, 1995

NOTE D - RENOVATIONS

Renovations at December 31, 1995 consists of the following:

Renovations	\$ 184,819
Less accumulated depreciation	<u>4 1,563</u>
	\$ 182,256

NOTE E - CONCENTRATIONS OF CREDIT RISK

The bank balances are comprised of the following, which are not fully secured by federal deposit insurance:

Demand deposits, per bank statement	\$ 144,000
Deposits secured by federal deposit insurance	<u>(100,000)</u>
Total unsecured deposits	\$ 44,000

The corporation provides loans to low and moderate income persons located in the city of New Orleans.

NOTE F - CONTINGENCIES

The Corporation is engaged in a lawsuit involving the termination of a construction management contract. In the opinion of management, the ultimate outcome of this lawsuit is not determinable at this time.

The corporation expended certain grant funds in a manner that may have violated certain of the restrictive provisions of the related grants. The possible outcome of these matters, which have been reported to appropriate grantor officials, is uncertain at this time. Accordingly, no provision for any liability has been made in these financial statements for possible grantor claims for refunds of those grant monies.

NOTE G- DUE TO THE CITY OF NEW ORLEANS

The amount due to the City of New Orleans as of December 31, 1995 consists of the loans, net of the reserve for possible loss losses, and accrued interest.

LAFAYETTE INSURANCE COMPANY
P.O. BOX 83288
NEW ORLEANS LA 70183-3288

NEW ORLEANS LA 70183-3288

LAFAYETTE INSURANCE COMPANY
A STOCK INSURANCE COMPANY
2424 CANAL STREET
NEW ORLEANS LOUISIANA 70119-0424
PHONE: 504-521-5222

C/O M O HOME AND AUTHORITY
URBAN HOUSING CORP
618 MARCONI ST
NEW ORLEANS LA 70113

7520023

HOMEOWNERS POLICY



PERSONAL LINES POLICY

NEW ORLEANS AFFORDABLE HOME OWNERSHIP, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

NOTES TO FINANCIAL STATEMENTS-CONTINUED

December 31, 1995

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES-Continued

8. Depreciation

Depreciation is provided for in amounts sufficient to relate the cost of depreciable assets to operations over their estimated service lives, principally in the straight-line method. Depreciation expense for the period January 1, 1995 through December 31, 1995 totaled \$5,134.

9. Cash Equivalents

The Corporation considers all demand deposits and short-term investments with an original maturity of three months or less to be cash equivalents.

NOTE B - RESERVE FOR LOAN LOSSES

A summary of the activity in the Reserve for Loan Losses for the period January 1, 1995 through December 31, 1995, follows.

Balance at beginning of period	\$ 409,716
Provision charged to due from funding service	<u> 59,363</u>
Balance at end of period	<u>\$ 469,079</u>

NOTE C - LAND AND BUILDING

Land and building at December 31, 1995 consists of the following:

Building	\$ 101,116
Less accumulated depreciation	<u>(18,816)</u>
	84,999
Land	<u> 15,800</u>
	<u>\$ 100,799</u>

**STATE FARM INSURANCE COMPANIES**

State Farm Fire and Casualty, Company
 22 State Farm Drive
 Monroe, LA 70009-0808

RENEWAL CERTIFICATE

Policy No. 18-00-2287-7	Homeowners Special Form Policy AUG 13 1996 TO AUG 13 1997	Effective Date AUG 13 1996	Initial Year Renewal Amount \$421.00
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D-132875, P R
 NEW ORLEANS HMO MTA AUTHORITY
 PO BOX 50539
 NEW ORLEANS LA 70030-0539

ILLUSTRATION OF PREMIUM SCHEDULE

Insured: DROWN, JOHNNY JR & THEODORA
 MO GEC
Location: 5129 4TH ST B GBOE21
 NEW ORLEANS LA 70113-1327

Mortgagee: NEW ORLEANS HMO MTA AUTHORITY
 Loan No: 752802

Forms, Options, and Endorsements

Homeowners Policy Form 3	FP-1923
Replacement Cost-Contents	RPT RC
Accessory Construction	FE-1210-A

Coverages and Limits

Section I

A. Dwelling	148,500
Dwelling Extensions	4,850
B. Personal Property	33,000
C. Loss of Use	Actual Loss Sustained

Deductibles - Section I

All Losses	250
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Section II

1. Personal Liability	\$100,000
Damage to Property of Others	500
2. Medical Payments to Others (Each Person)	1,000

Annual Premium	\$421.00
Annual Deductible	\$421.00

Premium Reductions

Your premium has already been reduced by the following:

Home Alert Discount	21.00
Renewal Discount (3 Years)	21.00

Inflation Coverage Index: 100.0

Ready for pickup or mail.
 agent: VERNAL REATING
 Telephone: (504) 885-0808

See reverse side for important information.
 Please keep this part for your records.

POLICY DECLARATIONS
FORMALPOLICY TERMS / EFFECTIVE 12:01 AM
12/01/94 TO 12/31/97POLICY NUMBER
1-9333-5870-2PREMIUM PAYER
FIRST FORTSARICAGENT NAME AND ADDRESS
INTEGRAL BROKER/INSURERS LTD
2515 DOUGLASS AVENUE
PO BOX 5714
METairie LA 70005 4702INSURED NAME AND ADDRESS
SERRIA S B-ROCHELLE M SMITH
2125 ALYON ST
NEW ORLEANS LA 70117-3885

TELEPHONE (504) 881-2588

TELEPHONE (504) 948-4708

PROPERTY DESCRIPTION
BUILDING
ONE FLOOR WITH NO BASEMENT
A SINGLE FAMILY RESIDENCECONTENTS
HOUSEHOLD CONTENTS LOCATED
ON FIRST FLOOR ONLY

NON ELEVATED BUILDING

BUILDING AND CONTENTS COVERAGE AND RATING
COVERAGE

DEDUCTIBLE

TOTAL
PREMIUMBUILDING 400,000
CONTENTS 410,0004000
40006100.00
680.00

FIRM CODE A3

GENERAL LIABILITY:	6000.00
WARRANTY DISCOUNT:	- 400.00
COMMUNITY DISCOUNT:	- 314.00
EXPENSE COVERAGE:	640.00

RATES: 1 - 10.48/100.00
2 - 10.39/100.00

TOTAL WRITTEN PREMIUM:	6110.00
FEDERAL POLICY SERVICE FEE:	620.00
TOTAL PREMIUM PAID:	6730.00

INSURED PROPERTY ADDRESS
2125 ALYON ST
NEW ORLEANS LA 70117

COMMUNITY NUMBER 20 5000 2

LENDER NAME AND ADDRESS

BANK SUPERFUNDING CORP OF MO

PO BOX 5019
654 HOLLAND LA 70050-8519

LOAN NUMBER: 1000021

CALL YOUR AGENT IF YOU DO NOT HAVE THE CURRENT SWEETING POLICY PACKET.
THIS DECLARATION WAS AS OF OCTOBER 04, 1994

NEW ORLEANS AFFORDABLE HOME OWNERSHIP, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

NOTES TO FINANCIAL STATEMENTS

December 31, 1995

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A summary of the significant accounting policies consistently applied in the preparation of the accompanying financial statements follows:

1. Organization

New Orleans Affordable Homeownership, Inc. is a non-profit corporation organized under the laws of the State of Louisiana. The corporation is organized to provide home ownership opportunities to low and moderate persons who otherwise could not afford to buy a home; increase the number of safe, decent and sanitary housing units in the City of New Orleans; create meaningful activities for youths at risk; and in general, improve the quality of life, housing conditions and work opportunities for residents of the City of New Orleans.

2. Presentation of Financial Statements

The accompanying financial statements have been prepared in accordance with generally accepted accounting principles. They are presented on the accrual basis of accounting.

3. Method of Accounting

The records are maintained in accordance with the principles of fund accounting. Accordingly, resources for various programs are classified for accounting and reporting purposes into the funds established according to their nature and purpose. Separate accounts are maintained for each fund.

4. Loans

Loans are stated at the amount of unpaid principal, reduced by an allowance for loan losses. Interest on loans is calculated by using the simple interest method on daily balances of the principal amount outstanding.

5787

RECEIVED
1948
DO NOT WRITE IN THESE SPACES
APR 15 1948
1948

APR 15 1948

NEW ORLEANS AFFORDABLE HOME OWNERSHIP, INC.
(Formerly Urban Redevelopment Corporation of New Orleans)

COMPREHENSIVE FINANCIAL STATEMENTS

For the year ended December 31, 1948

Under provisions of state law, this report is a public document. A copy of the report has been submitted to the auditor, or secretary, clerk and other appropriate public officials. The report is available for public inspection at the Baton Rouge office of the Legislative Auditor and, where appropriate, at the office of the parish clerk of court.

Printing Date APR 15 1948

NEW ORLEANS AFFORDABLE HOME OWNERSHIP, INC.
(Formerly Urban Redevelopment Corporation of New Orleans)

STATEMENT OF REVENUE AND EXPENSES

For the year ended December 31, 1968

REVENUE	
Grant appropriations	\$201,022
Other	<u>22,888</u>
	\$223,910
EXPENSES	
Professional services	256,181
Print supplies	83,330
Rehabilitation and professional	"
Education	"
Property acquisition	"
Appraisal, legal, and insurance	5,477
Postage	"
Office expense	"
Supplies	"
Depreciation	8,334
Other costs	<u>1,428</u>
	<u>354,867</u>
EXCESS OF REVENUE OVER EXPENSES	<u>\$177,153</u>

The accompanying notes are an integral part of this financial statement.

NEW ORLEANS AFFORDABLE HOUSING OWNERSHIP, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

BALANCE SHEET

December 31, 1995

Assets

Cash		\$ 166,851
Receivables		
Grants	\$ 509,196	
Interest	<u>3,348</u>	
		505,944
Loans		
Loans	2,642,290	
Less reserve for possible losses	<u>(518,879)</u>	2,123,411
Real estate held for resale		92,725
Land and building-at cost, net		89,569
Renovations - at cost, net		<u>182,556</u>
		<u>\$1,179,486</u>

LIABILITIES AND FUND BALANCE

Accounts payable and accrued liabilities	309,134
Due to City of New Orleans	2,129,199
Program advances	438,000
Contingencies	-
Fund Balance	<u>303,103</u>
	<u>\$1,179,486</u>

The accompanying notes are an integral part of this financial statement.

time. Accordingly, no provision for any liability has been made in these financial statements for possible greater claims for refunds of those grant monies.

Our audit was made for the purpose of forming an opinion on the financial statements taken as a whole. The accompanying financial information listed in the table of contents is presented for the purpose of additional analysis and is not a required part of the basic financial statements of New Orleans Affordable Homeownership, Inc. Since information has been subjected to the auditing procedures applied in the examination of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

In accordance with Government Auditing Standards, we have also issued a report in our consideration of New Orleans Affordable Homeownership, Inc.'s internal control structure and a report on its compliance with laws and regulations, both dated March 27, 1997.

Paul A. ... and ...

New Orleans, Louisiana
March 27, 1997

PAUL, MEYER and LeBLANC, L.L.P.

Certified Public Accountants
Management Consultants

INDEPENDENT AUDITOR'S REPORT

Board of Directors
New Orleans Affordable Homeownership, Inc.

We have audited the accompanying balance sheet of New Orleans Affordable Homeownership, Inc., a non-profit corporation under Internal Revenue Service Code Section 501(c)(3), as of December 31, 1995, and the related statements of revenues and expenses, changes in fund balance, and cash flows for the year ended December 31, 1995. These financial statements are the responsibility of New Orleans Affordable Homeownership, Inc.'s management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards and Government Auditing Standards, issued by the Comptroller General of the United States, and the provisions of the Office of Management and Budget Circular A-133 "Audits of Institutions of Higher Education and Other NonProfit Institutions". These standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly in all material respects, the financial position of New Orleans Affordable Homeownership, Inc. as of December 31, 1995, and the results of its operations and cash flows for the year ended December 31, 1995 in conformity with generally accepted accounting principles.

As discussed in Note F to the financial statements, the Corporation has expended certain grant funds in a manner that may have violated certain of the restrictive provisions of the related grants. The possible outcome of these matters, which have been reported to appropriate grantor officials, is uncertain at this



NEW ORLEANS AFFORDABLE HOUSING COMPANY, INC.
(Formerly Urban Redevelopment Corporation of New Orleans)

STATEMENT OF CASH FLOWS

For the year ended December 31, 1981

Increase (decrease) in cash and cash equivalents	
Cash flows from operating activities:	
Excess of revenues over expenses	\$ 179,150
Adjustments to reconcile excess of revenue over expenses to net cash provided by operating activities:	
Depreciation	\$ 5,104
Changes in assets and liabilities:	
Increase in grants receivable	(74,314)
Increase in accounts payable and accrued liabilities	76,524
Increase in deferred revenue	<u>22,812</u> <u>30,562</u>
Net cash provided by operating activities	<u>\$ 200,234</u>
Cash flows from investing activities:	
Renovations to building	<u>(184,210)</u>
Net cash used in investing activities	<u>(184,210)</u>
Net increase in cash and cash equivalents	16,024
Cash and cash equivalents, beginning of period	<u>147,158</u>
Cash and cash equivalents, end of period	<u>163,182</u>

The accompanying notes are and integral part of this financial statement.

NEW ORLEANS AFFORDABLE HOME OWNERSHIP, INC.
(Formerly Texas Homeowner's Corporation of New Orleans)

STATEMENT OF CHANGES IN FUND BALANCE

For the year ended December 31, 1988

Fund Balance, beginning of period	\$121,950
Excess of revenue over expenses	<u>172,193</u>
Fund Balance, end of period	<u>\$294,143</u>

The accompanying notes are an integral part of this financial statement.

NEW ORLEANS AFFORDABLE HOME OWNERSHIP, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

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USP Special Renewal Coverage Summary



INSURANCE PROVIDED BY
FIDELITY AND CASUALTY COMPANY

P.O. Box 1626 Reading, PA 19612-9626

LESLIAN HOMEOWNERS CORP OF NEW
ORLEANS 307M OLEANS
HOME BLDG AUTH POB 90019
NEW ORLEANS LA 70116

NAME INSURED:
VIVIAN DEL SARDLEY
8718 OLIVER ST
NEW ORLEANS LA 70116

AGENT:
HUGHES MALMLEY & COMPANY, INC.
729 GRAND STREET
NEW ORLEANS LA 70130
PHONE: 504-581-2623 810-8903011-0000

POLICY NUMBER: US 14689457

24 HOUR CLAIM REPORTING 800-866-7400
12-01 AM STANDARD TIME

POLICY PERIOD: 02/15/97 TO 02/15/98

RESIDENCE DESCRIPTION				EFFECTIVE DATE
1. 8718 OLIVER ST.	NEW ORLEANS	LA	70116	02/15/97
COVERAGE				LIMIT
HOME LIABILITY				LIMIT
RESIDENCE(S) 1				
PERSONAL LIABILITY				\$ 100,000
MEDICAL EXPENSE				\$ 5,000
HOME PROPERTY COVERAGE				LIMIT
RESIDENCE 1				\$ 60,000
THE LIMIT SHOWN REPRESENTS THE LIMIT OF THE RESIDENCE VALUE OF:				
				\$ 50,000
THE LIMIT SHOWN IS THE TOTAL AMOUNT OF INSURANCE ON YOUR RESIDENCE, TANGIBLE PERSONAL PROPERTY AND OTHER STRUCTURES FOR YOUR PRIMARY RESIDENCE RESIDENCE 1 DEDUCTIBLE				
				\$ 250

HOME OPTIONAL COVERAGES	LIMIT	DEDUCTIBLE
REAL PROPERTY BASIC REPLACEMENT COST COVERAGE APPLIES - RESIDENCE(S) 1	PER ENDORSEMENT	
PERSONAL PROPERTY PLUS RESIDENCE(S) 1	PER ENDORSEMENT	

THE COVERAGES AND LIMITS SHOWN HERE ARE SUBJECT TO THE RESTRICTIONS, CONDITIONS, AND EXCLUSIONS OF THE POLICY AND ITS ENDORSEMENTS. PLEASE READ THIS ENTIRE PACKAGE CAREFULLY AND CONTACT YOUR INDEPENDENT CNA AGENT IF YOU HAVE ANY QUESTIONS.

SUBJECT TO THE FOLLOWING FORMS AND ENDORSEMENTS:

72-18934-A (09-94); 78-18938-A (08-98); 72-18940-B (08-98)

02/15/98
20 40 60 80
94 12 14

NEW ORLEANS AFFORDABLE HOME OWNERSHIP, INC.
(Formerly Urban Redevelopment Corporation of New Orleans)

NOTES TO FINANCIAL STATEMENTS--CONTINUED

December 31, 1988

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES--Continued

4. Loans--continued

Management reviews the Corporation's loan portfolio to determine the existence of and extent of which notes are subject to special consideration as to any doubt regarding their collectability. When, in management's judgment, a loan's collectability is determined doubtful, the loan is charged to the Reserve for Loan Losses subject to approval from the funding source if applicable.

Accrual of interest is discontinued on a loan when management believes, after considering economic and business conditions and collection efforts, that the borrower's financial condition is such that collection of interest is doubtful.

5. Provision and Reserve for Loan Losses

Management determines the appropriate level of reserve to be maintained based on an analysis of the portfolio and evaluation of economic factors. Provisions for loan losses are recognized by a reduction of monies due the City of New Orleans.

6. Receivable - grants

The operation considers grants receivable to be fully collectible since the balance consists principally of payments due under governmental contracts. If amounts due become uncollectible, they will be charged to operations when that determination is made.

7. Real Estate Inventories

Real estate inventories are carried at cost not to exceed estimates of net realizable value determined on an individual project basis. The real estate has been acquired to be rehabilitated in accordance with government contracts.

WILL ROGGE, 1 BRADLEY DR
P O BOX 8333
MILLS LA 70001
8333

URBAN HOMEOWNERS CORP OF MO
C/O BO BIRD, P/O AUTHORITY
PO BOX 34503
NEW ORLEANS LA 70138

Dear Customer:

Included in your declaration book and related documents. If you have any questions regarding any of them, please contact your Travelers representative.

AMERICAN NATIONAL INSURANCE COMPANY
 670 THE POLICY REGISTRATION CENTER
 2150 N. ROOSEVELT AVENUE
 MEMPHIS, TN 38103-1120

Ed. 3/30/76
 12/81

ADDRESSEE:

001004 0004 1

LEONARD HENNINGSEN'S HOME OF # 2
 212 N O HORN BITE AVENUE
 P.O. BOX 30318
 NEW ORLEANS LA 70118-0318

PAGE 1

THIS NOTIFICATION OF COVERAGE IS NOT AN INVOICE.

<p>POLICY NO: UP 003600</p> <p>POLICY EFFECTIVE DATE: 05/01/76</p> <p>POLICY EXPIRATION DATE: 03/31/81</p> <p>POLICY ORIGIN EFFECTIVE AS OF: 10/01/76</p> <p>TENANTS: MR & MRS JOSEPH C GLENNARY JR PROPERTY: 2008-2001 NEW ORLEANS ST. NEW ORLEANS LA 70119</p> <p>TOTAL PREMIUM \$ 430.00</p> <p>DEDUCTIBLE \$ 250.00</p> <p>SMALL AREA (NONSTRUCT) LIMIT \$ 41,000</p> <p>OTHER STRUCTURED COVERAGE LIMIT \$ 4,000</p> <p>PLA VALUE REPLACEMENT COVERAGE</p>	<p>RENEWABLE POLICY OF COVERAGE</p> <p>INSURER: AMERICAN MANUFACTURING MUTUAL CO</p> <p>LOAN NO: 750004</p> <p>MORTGAGE CO: LEONARD HENNINGSEN'S HOME OF # 2 212 N O HORN BITE AVENUE P.O. BOX 30318 NEW ORLEANS LA 70118-0318</p> <p>AGENCY: 00-0000 MARTIN THE AGENCY INC 600 BOX 10400 NEW ORLEANS LA 70119</p>	<p>001004</p>
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1520041

Travelers Insurance

A Member of Travelers Group

NEW BUSINESS POLICY. THE TRAVELERS INDEMNITY COMPANY
OF ILLINOIS
Mortgage's Policy
Special Form

MORTGAGE

Page 1 of 2

Location 1 of 1

402-P04

AGENT / POLICY NUMBER
MONTG 921429449 402 1

URBAN HOMEOWNERS CORP OF N O
30 O HOME MORTGAGE AUTHORITY
P O BOX 50019
NEW ORLEANS LA 70110

NAMED INSURED AND LOCUS P O BOX 50019
MAILING ADDRESS 1699 LOUISA STREET NEW ORLEANS LA 70117

The policy period is 12 months from October 26, 1994 to October 26, 1995.

The RESIDENCE PREMISES is located at 1699 LOUISA STREET
NEW ORLEANS LA 70117

COVERAGES	LIMITS OF LIABILITY	PREMIUMS	
A-BUILDING	\$ 50,000	\$ 495	
B-OTHER STRUCTURES	SEE POLICY	INCLUDED	
C-PERSONAL PROPERTY	\$ 50,000	INCLUDED	
D-LIEN OF USE	\$ 11,000	INCLUDED	TOTAL POLICY PREMIUM
E-PERSONAL LIABILITY	\$ 100,000	INCLUDED	\$ 545
F-MEDICAL PAYMENTS	\$ 1,000	INCLUDED	
H-REPLACEMENT COST PROTECTION	SEE POLICY	\$ 0	
W-PERSONAL PROPERTY REPLACEMENT	SEE POLICY	\$ 0	

Serial numbers and descriptions of endorsements forming a part of this policy 2012-1011

Deductible For Loss Caused By: WIND OR HAIL \$ 500
THEFT \$ 500
ALL OTHER PERILS INSURED AGAINST \$ 500

FIRST MORTGAGE, (LOAN NUMBER: 752684)
URBAN HOMEOWNERS CORP OF N O 30 O HOME MORTGAGE AUTHORITY
P O BOX 50019 NEW ORLEANS LA 70110

Alarm System Credit Applies

TO REPORT A CLAIM, Call your Travelers agent or representative or the
Travelers toll-free nationwide claim reporting service at 1-800-CLAIM-25
(1-800-250-4411).

AGENT: MARY HILLMAN & CO INC

PL-4008 SEP 1-85

This document is a contract. Please read it carefully before you sign it.

PG 001 MURDER
PC1143

LA 75245 RIA

DATE SENT 08/08/74
INSURANCE COMPANY

12-24-74

RECEIVED COMMUNICATIONS SECTION
DEPT 19-1700
AUG 13 1974

RECEIVED
MURKIN

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MURKIN
1809 LINDEN ST
NEW GARDENS
CITY OF NEWARK

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NEW GARDENS
CITY OF NEWARK

10 26 74

864 96 04

17 78 2223

RECEIVED COMMUNICATIONS SECTION
DEPT 19-1700

HARRY GALLER, 5 CORPUS
ALTO GALLER, NEWARK, NJ
RETRIP

20001

RE REPLY TO NY TO ACCORDANCE WITH THE REPORT AND OBSERVATIONS OF THE
POLICE AND STATE LAWYER THAT THE ABOVE MENTIONED POLICE WILL CONTACT ON THE
DATE MENTIONED ABOVE AND WILL NOT BE NEARBY.

REPLY AGENCY NO COMMUNICATIONS WITH COMPANY

PLEASE CONTACT YOUR AGENCY TO RE-STATE YOUR CONCERN.

NON-FILED

RECEIVED
MURKIN
1809 LINDEN ST
NEW GARDENS
CITY OF NEWARK

D/L



FLOOD Insurance Program
 P.O. Box 34820, Bethesda, MD 20817-0820

Policy Number: **A-0004-758A-7**
 Code Number: **700000**

Insured Property Location:

2008 LAVERGNE STREET
 NEW ORLEANS LA 70117

Flood Insurance Expiration Notice
 Standard Policy



PROPERTY Name and Billing Address:

ELLEN B. PITMAN
 2008 LAVERGNE STREET
 NEW ORLEANS LA 70117

Amount of Insurance Coverage Under Existing Policy:

Building	\$ 12,200	Contents	\$ 4,000
Automobile	\$ 350	Automobile	\$ 350

*** AGENT COPY - DO NOT MAIL ***

You may choose to renew your policy for a one-year term or for a three-year term. The three-year term offers special savings on the premium cost. In addition, you may choose an inflation option which allows you to obtain a higher amount of insurance to keep pace with the constantly increasing value of your property.

	Current Policy		Total Premium Cost	
	Building	Contents	One-Year Term	Three-Year Term
Current Coverage	12,200	4,000	\$ 292.00	\$ 447.00
Inflation Option	12,200	4,000	\$ 212.00	\$ 448.00
Maximum Available	100,000	100,000		

Premium includes a Federal Flood Service Fee.

Premium reflects 60% credit for community flood compliance.

Please note, the amount of insurance offered in this notice may not be sufficient to fully insure the value of your property. The maximum insurance amounts in these quotes, increasing the amount of insurance may provide replacement cost cover up to the extent of a flood loss (see item 3 on the reverse side). Please contact your agent if you wish to inquire about your eligibility to purchase additional insurance protection or if you have any questions.

Agent/Broker's Name and Billing Address:

WILD BIRD, A WASHINGTON COMPANY
 1000 WILSON
 PO BOX 10000
 GAITHERSBURG VA 20878-0000

TEL: 703-600-6545

Agent's Name and Billing Address:

ELLEN B. PITMAN (copy of HQ)
 2008 LAVERGNE STREET
 PO BOX 34820
 BETHESDA MD 20817-0820

TO -

Please contact your agent if any inaccuracies in this notice is insurance.

00000000000000000000

4620038

Travelers Insurance
a member of Travelers Group

CONTINUATION OF POLICY THE TRAVELERS INDEMNITY COMPANY
 DECLARATIONS OF CONNECTICUT
 Homeowners Policy
 Special Form

PERFORMANCE
 Page 1 of 2
 Location 1 of 1

REFERRED

AGENT / POLICY NUMBER
 W7274 90842334 001 1

512-764
 URBAN HOMEOWNERS CORP OF MO
 C/O MO HOME MTD AUTHORITY
 PO BOX 98519
 NEW ORLEANS LA 70138

NAMED INSURED AND EILEEN BROWN PETERS
 MAILING ADDRESS 2028 LAMARCHE ST NEW ORLEANS LA 70117

The policy period is 12 months from January 19, 1997 to January 19, 1998.

The RESIDENCE PREMISES is located at 2028 LAMARCHE ST
 NEW ORLEANS LA 70117

COVERAGE	LIMITS OF LIABILITY	PREMIUM	
A-BUILDING	\$ 75,000	\$ 450	
B-OTHER STRUCTURES	SEE POLICY	INCLUDED	
C-PERSONAL PROPERTY	\$ 51,000	INCLUDED	
D-LOSS OF USE	\$ 15,000	INCLUDED	TOTAL POLICY PREMIUM
E-PERSONAL LIABILITY	\$ 100,000	INCLUDED	\$ 510
F-MEDICAL PAYMENTS	\$ 2,000	INCLUDED	
H-REPLACEMENT COST PROTECTION	SEE POLICY	INCLUDED	
J-ADDITIONAL PROTECTION	SEE POLICY	\$ 20	
T-PERSONAL INJURY	SEE POLICY	\$ 1	
V-PERSONAL PROPERTY REPLACEMENT	SEE POLICY	\$ 45	

Postal address (and premium) of endorsements forming a part of this policy 3017-0011

Deductible For Loss Caused By: WIND OR HAIL \$ 250
 THEFT \$ 250
 ALL OTHER PERILS INSURED MAXIMUM \$ 250

FIRST MORTGAGEE:

URBAN HOMEOWNERS CORP OF MO C/O MO HOME MTD AUTHORITY
 PO BOX 98519 NEW ORLEANS LA 70138

Alarm System Credit Applied

Coverage for your home has been increased by \$,000 to more adequately reflect the cost to rebuild your home. This adjustment was based on information provided by Marshall & Swift, an independent firm specializing in construction and customer costs. If you need to adjust your limits further, or for any other policy changes, please contact your Travelers representative.

AGENT: HILL MORAN & HAMILTON CO

PL-6448 REV 1-88

FLOOD INSURANCE PREMIUM NOTICE

Dear Paper
Please return this
copy along with
your check to
ensure proper credit.

THE PREMIUM FOR YOUR NATIONAL FLOOD INSURANCE PROGRAM (NFP) STANDARD FLOOD INSURANCE POLICY IS DUE SOON. YOUR INSURANCE AGENT IS NOW PLACING YOUR FLOOD COVERAGE WITH BANKERS INSURANCE COMPANY. YOU SHOULD PROMPTLY PAY THE ENCLOSED PREMIUM NOTICE TO BANKERS INSURANCE COMPANY, AND YOU WILL RECEIVE YOUR NEW POLICY SHORTLY.

The Federal Insurance Administration and Bankers Insurance Company have entered into an arrangement to allow Bankers Insurance Company to issue and service your flood insurance policy. The policy conditions, coverages offered, and rates charged are established by the NFP.

Your agent remains your source of policy and claims related information. If you don't receive a Bankers Insurance Company flood policy within 30 days after your current expiration date, notify your agent immediately.

IMPORTANT - If you are on the required year of the policy then stamped - this is for your records only.
The appropriate year for each policy.

3/14/83

POLICY NO:
9100418965 00

IMPORTANT - THE PREMIUM FOR YOUR FLOOD INSURANCE POLICY IS DUE ON: 5/18/87
THIS POLICY CONTAINS A COMMUNITY RATING SYSTEM CREDIT.

REMIT THE PREMIUM INDICATED FOR THE OPTION SELECTED BELOW.

MAKE CHECK PAYABLE TO: **BANKERS INSURANCE COMPANY.**

P.O. Box 3360 St. Petersburg, FL 33730

PAYER

INSURED PROPERTY LOCATION

URBAN HOMEOWNERS CORP OF MO
C/O NEW ORLEANS HOME MTO AUTO
PO BOX 50519
NEW ORLEANS LA 70150-0519

8718 OLEANDER STREET
NEW ORLEANS LA 70118-3250

OPTION A

AMOUNT OF INSURANCE

FIXABLE PREMIUM

THIS PLAN PROVIDES UP TO \$250,000 OF FLOOD COVERAGE FOR YOUR HOME AND UP TO \$100,000 OF FLOOD COVERAGE FOR YOUR BUSINESS. YOUR PREMIUM WILL BE \$238.00 PER YEAR FOR A ONE YEAR POLICY AND \$689.00 PER YEAR FOR A THREE YEAR POLICY.

BUILDING \$25,000
CONTENTS \$0

FOR A ONE YEAR POLICY: \$238.00
FOR A THREE YEAR POLICY: \$689.00

OPTION B

AMOUNT OF INSURANCE WITH PROPERTY VALUE INCREASE

FIXABLE PREMIUM

THIS PLAN PROVIDES UP TO \$250,000 OF FLOOD COVERAGE FOR YOUR HOME AND UP TO \$100,000 OF FLOOD COVERAGE FOR YOUR BUSINESS. YOUR PREMIUM WILL BE \$268.00 PER YEAR FOR A ONE YEAR POLICY AND \$808.00 PER YEAR FOR A THREE YEAR POLICY.

BUILDING \$27,000
CONTENTS \$0

FOR A ONE YEAR POLICY: \$268.00
FOR A THREE YEAR POLICY: \$808.00

MAXIMUM AMOUNT AVAILABLE - BUILDING \$250,000 CONTENTS \$100,000

INSURER NAME & MAILING ADDRESS

AGENT/ROKER NAME & MAILING ADDRESS

THORNE BRADLY
8718 OLEANDER STREET
NEW ORLEANS LA 70118-3250

SWANSON AND ASSOC INC
303 S BROAD ST
NEW ORLEANS LA 70119

AGENT #: 37-808865

ALLSTATE INSURANCE COMPANY

HOMESOWNERS DECLARATIONS
PREMIUM STATEMENT

NEW PREMIUM PERIOD

Policy
Number: 0 45 674762 03/77FROM MAR 27, 1977 12 01 A.M.
TO MAR 27, 1978 STANDARD
RATEPolicy
Mileage: 303 619200
MOHAM HOMESOWNERS CRSP OF 80 C/O 80
HOME RTG AUTH
PO BOX 50517
NEW ORLEANS LA 70150-0519

TOTAL PREMIUM FOR THE PREMIUM PERIOD STATED IS + 930.00

15% PROTECTIVE DEVICE DISCOUNT APPLIED - HOMESOWNERS PREMIUM
10% 55 AND RETIRED AND 10% RENOVATED HOUSE DISCOUNT APPLIEDPolicy
Mileage:PART 8 ORIGINAL CHANSLER
5014 ALMONASTER AVE
NEW ORLEANS LA 70117LOAN NO.
7880037AGENT - JOCELYN N. BRUSSARD
PHONE - 504 241-5551E9-1 17 03L 553 274837 5 78 8 0500000 3 4 52 0001
000000 40

Office use only

PLEASE NOTE THIS IS NOT A RECEIPT FOR PAYMENT.
YOUR BILL WILL BE MAILED SEPARATELY.

Detach along perforation - Return above portion with your payment in the enclosed envelope.
Please pay in check or money order payable to Allstate.

Fire Insurance Bill

Policy Number: # 00 902794 10120

Premium Period 10/00/95 To 06/30/97 11:59 A.M. Standard Flood

Allstate
Trade in good hands.

Policy Issued To

BEVERLY R LEWIS
2713 TREASURE ST
NEW ORLEANS LA 70120-0809

Due Date October 3, 1995
To Pay In Full \$ 254.00
Minimum Amount Due \$ 254.00

Loan Number:

none: 75200-07

Policy Number Description

00902794 10120 2713 TREASURE ST

Agent And Telephone Number

R. CHRISTINE FLANNERY (504) 383-8018

Payment Option

This is your first bill for your current policy period.

- Please pay \$ 254.00.
- You will receive no more bills until your policy renews or you make a change in coverage resulting in additional premiums.
- Thank you for letting us serve your insurance needs.

Detach along perforation. Return above portion with your payment in the enclosed envelope.
Please make check or money order payable to ALLSTATE.

Homeowners Insurance Bill

Policy Number: 8-85 256748 84/24

Revised Period: 4/24/87 To 4/24/88 (12:01 A.M. Standard Time)

Allstate
Better In Good Hands.

Policy Issued To

CLARENE EMAPIS GREEN
3148 FELICIANA ST
NEW ORLEANS, LA 70105-9214

Due Date April 8, 1987
To Pay In Full \$ 411.00
Minimum Amount Due \$ 411.00

Loan Number: NONE

Policy Number Description

8-85 256748 84/24 3148 FELICIANA ST

Agent And Telephone Number

ROBERT BRIDGEMAN (504) 281-1111

Payment Option

This is your last bill for your current policy period.

• Please pay \$ 411.00.

• You will receive no more bills until your policy renews or you make a change in coverage resulting in additional premiums.

• Thank you for letting us serve your insurance needs.

7520931

ALLSTATE INSURANCE COMPANY

HOMEOWNERS DECLARATIONS
PREMIUM STATEMENT

IF YOU HAVE ANY QUESTIONS,
PLEASE CONTACT OUR MORTGAGE
RELATIONS CENTER, PO BOX
340649, DALLAS TX 75264-0649

Policy
Number

W 48 674752 03/27

Policy
Mailed to

208 614888
URBAN HOMEOWNERS CRGP OF MO C/O MO
HOME RTE AUTH
PO BOX 88037
NEW ORLEANS LA 70188-0377

pd.

THE ADJUSTED ANNUAL PREMIUM IS 4470.00
YOUR POLICY HAS BEEN CHANGED EFFECTIVE ON MAR 27, 1997
FOR THE FOLLOWING REASON

CHANGE IN MORTGAGEE, SERVICING AGENT AND/OR LOAN NUMBER

THERE IS NO CHANGE IN PREMIUM FOR THE CURRENT PREMIUM
PERIOD.

LOAN IS AND RETIRED AND ILS RENOVATED HOUSE DISCOUNT APPLIED
LAW PROTECTIVE SERVICE DISCOUNT APPLIED - HOMEOWNERS PREMIUM.

Policy
Insured

MARY & REGINALD CHARLIER
2114 ALPHASTER AVE
NEW ORLEANS LA 70317

LOAN NO.
7528037

AGENT- JUDITH M. BROUSSARD
PHONE- 804 241-5883

12-1 17 086 841 870027 5 78 X 0301203 3 4 02 1004
030000 40

PLEASE NOTE THIS IS NOT A RECEIPT FOR PAYMENT.

ANY ADJUSTMENTS TO YOUR PREMIUM WILL BE REFLECTED ON YOUR
NEXT SCHEDULED STATEMENT WHICH WILL BE MAILED SEPARATELY.

IN THE MEANTIME, IF YOU HAVE ANY OUTSTANDING OR UNPAID
BILLING STATEMENTS, PLEASE PAY AT LEAST THE MINIMUM
AMOUNT DUE TO ASSURE YOUR POLICY CONTINUES IN FORCE.

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT YOUR AGENT.

NEW HOME MORTGAGE AUTHORITY

LOAN SERVICES
 5700 WOODLAND ST SUITE 100
 NEW ORLEANS, LA 70115

FIRST NATIONAL BANK OF LOUISIANA
 NEW ORLEANS, LOUISIANA
 70115

FOUR HUNDRED SEVENTY AND 00/100 DOLLARS

PAY
 TO THE
 ORDER OF

04/18/1997

AMOUNT
 \$470.00

ALLSTATE INSURANCE COMPANY
 P. O. BOX 648843
 DALLAS, TX 75264-8843

NEW ORLEANS HOME MORTGAGE AUTHORITY
 AUTHORIZED SIGNATURE

001299 6085000029c 1108 31250*

NEW ORLEANS HOME MORTGAGE AUTHORITY
 LOAN SERVICES, L.L.C. DATE PO #

7520029 04/18/1997
 MART CHAMPLER
 LOAN NO# 7520029
 POLICY NO# 3 45 674312

INVOICE AMOUNT
 470.00

VENDOR # 600800183 CHECK # 1299 DATE 04/18/1997 NET 470.00
 ALLSTATE INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY
 LOAN SERVICES, L.L.C. DATE PO #

7520027 04/18/1997
 MART CHAMPLER
 LOAN NO# 7520027
 POLICY NO# 3 45 674312

INVOICE AMOUNT
 470.00

VENDOR # 600800183 CHECK # 1299 DATE 04/18/1997 NET 470.00
 ALLSTATE INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOAN DEFERRED
 PAYMENT DATE 04/15/97
 NEW ORLEANS, LA 70110

TWO THOUSAND TWO AND 00/100 DOLLARS

PAY
 TO THE
 ORDER OF

DATE
 04/18/1997

AMOUNT
 \$202.00

OMHA PROPERTY AND CASUALTY
 FLOOD INSURANCE PROGRAM
 P. O. BOX 72301
 CHARLOTTE, NC 28273-0301

NEW ORLEANS HOME MORTGAGE AUTHORITY

⑆001101⑆ ⑆0250002⑆ 1108 3360⑆

NEW ORLEANS HOME MORTGAGE AUTHORITY
 044 ⑆0000⑆ ⑆110⑆ ⑆

INVOICE AMOUNT
 1300

04/18/1997

100.00

KLARE PETERS
 LOAN NO# 7520310
 POLICY NO# 3-8054-8525-7

VENDOR # 810008110 CHECK # 1303 DATE 04/18/1997 NET 202.00
 OMHA PROPERTY AND CASUALTY

NEW ORLEANS HOME MORTGAGE AUTHORITY
 044 ⑆0000⑆ ⑆110⑆ ⑆

INVOICE AMOUNT
 1300

04/18/1997

202.00

KLARE PETERS
 LOAN NO# 7520310
 POLICY NO# 3-8054-8525-7

VENDOR # 810008110 CHECK # 1303 DATE 04/18/1997 NET 202.00
 OMHA PROPERTY AND CASUALTY

HOMEOWNERS DECLARATIONS
PREMIUM STATEMENT

NEW PREMIUM PERIOD

Policy
Number 0 45 379W79 05/09FROM MAR 9, 1977 TO MAR 9, 1978 10 03 A.D.
STANDARD
RATEPolicy
Mailed to67 810560
URBAN HOMEOWNERS CORP OF NEW
ORLEANS C/O NO HOME HTG AUTH
PO BOX 30537
NEW ORLEANS LA 70160-0537

7520029

TOTAL PREMIUM FOR THE PREMIUM PERIOD STATED IS \$ 764.00

10% SS AND RETERED DISCOUNT APPLIED

Pd.

Policy
Issued toMR HENRY BARRY
4126 BELVED ST
NEW ORLEANS LA 70126AGENT- CATHERINE C. NYTEL
PHONE- 504 879-9711CR-3 17 036 561 292057 4 70 8 0123408 3 9 60 1153
000000 90PLEASE NOTE THIS IS NOT A REQUEST FOR PAYMENT.
YOUR BILL WILL BE MAILED SEPARATELY.

Detach along perforation. Return ABOVE PORTION with your payment in the enclosed envelope.
We will make check or money order payable to ALLSTATE.

Allstate
We're good here.

Homeowners Insurance Bill

Policy Number: 8 88 379879 08100

Premium Period: 5/8/74 To 5/8/74 (12:01 A.M. Standard Time)

Policy Issued To

MRS HENRY DAREY
4328 METRES ST
NEW ORLEANS LA 70114-0408

Due Date April 31, 1987
To Pay in Full \$ 754.00
Minimum Amount Due \$ 754.00

Loan Number: NONE

Policy Number Description

8 88 379879 08100 4328 METRES ST

Agent And Telephone Number

CRIS (DRE) C. HARRIS 754/934-8711

Payment Option

This is your last bill for your current policy period.

* Please pay \$ 754.00.

* You will receive no more bills until your policy renews or you make a change in coverage resulting in additional premiums.

* Thank you for letting us serve your insurance needs.

7520039

ALLSTATE INSURANCE COMPANY

HOMEOWNERS DECLARATIONS
PREMIUM STATEMENT

NEW PREMIUM PERIOD

Policy
Number: D 45 674915 DN/10FROM APR 12- 1997 12 03 A.M.
TO APR 12- 1998 STANDARD
TIMEPolicy
Address: 233 517023
URBAN HOMEOWNERS CRSP OF MO C/O S O
HOME RTG AUTHORITY
P O BOX 88817
NEW ORLEANS LA 70180-0817

TOTAL PREMIUM FOR THE PREMIUM PERIOD STATED IS \$ 243.00

Policy
Insured to:ERIC FREDERICK
2157-65 MAUREPAS ST
NEW ORLEANS LA 70114LOAN NO.
7020023AGENT- JOCELYN M. BROUSSARD
PHONE- 504 291-5553E3-1 17 036 854 17097 5 70 X 0001800 1 9 54 1002
000380 50PLEASE NOTE THIS IS NOT A REQUEST FOR PAYMENT.
YOUR BILL WILL BE MAILED SEPARATELY.

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOANS DEPARTMENT
 1700 BARRACADE STREET
 NEW ORLEANS, LA 70119

FIRST NATIONAL BANK OF OROUSSIPE
 NEW ORLEANS, LOUISIANA
 70119

1590

FOUR HUNDRED ELEVEN AND 00/100 DOLLARS

PAY
 TO THE
 ORDER OF

DATE
04/18/1997AMOUNT
\$411.00

ALLSTATE INSURANCE COMPANY
 P. O. BOX 400649
 DALLAS, TX 75266-0649

NEW ORLEANS HOME MORTGAGE AUTHORITY
 AUTHORIZED SIGNATORY



⑈001298⑈ 0063000029⑈ 1106 33350⑈

NEW ORLEANS HOME MORTGAGE AUTHORITY

INVOICE AMOUNT

752001 04/18/1997

1298
411.00

CLAUDE GREEN
 LOAN NO# 752001
 POLICY NO# 0 40 258740

VENDOR # 80008100 CHECK # 1298 DATE 04/18/1997 NET 411.00
 ALLSTATE INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY

INVOICE AMOUNT

752001 04/18/1997

1298
411.00

CLAUDE GREEN
 LOAN NO# 752001
 POLICY NO# 0 40 258740

VENDOR # 00800101 CHECK # 1298 DATE 04/18/1997 NET 411.00
 ALLSTATE INSURANCE COMPANY



NOTICE OF CANCELLATION

POLICY NUMBER
18-P0-1872-S

DATE CANCELLED
MAY 02 1987

CASH VALUE
\$0.00

REFUND
\$0.00

As this "Cash Refund" shows zero, we have not received the premium payment required to keep this policy in force. Therefore this policy is cancelled effective 10:01 a.m. on May 02, 1987 as required by your state law on the "State Cancellation" shown above. If the full premium has been paid and no other action on the part of the insured, you will receive a Notice of Reinstatement, requiring that your coverage start up under the policy. Otherwise, coverage will end. Please contact your loan servicer with any questions.

HOMEOWNERS SPECIAL FORM POLICY

Agent - ~~MISSISSIPPI~~

18-P0-1872-S M P-3746-P-82 F 8
ERIKS HOMEOWNERS CORP OF NEW
ORLEANS
C/O NEW ORLEANS HOME MORTGAGE
SERVICERS
NEW ORLEANS LA 70119-1507
NEW ORLEANS LA 70119-1507

Insured
GADDES, ADRIAN & DEMETRIA
POINTS
2008 HAWANA ST
NEW ORLEANS LA 70119-1507

Location
2008 HAWANA ST
NEW ORLEANS LA 70119-1507

Loan No: 7520003

Agent: MIRE HEWICK
Telephone: (504) 981-8229 or (504) 833-8485

* POLICY HAS MOVED, PLEASE CONTACT HOMEOWNERS P-3746-P-82

~~ERIKS~~ GADDES, ADRIAN & DEMETRIA POINTS
~~ERIKS~~ 18-P0-1872-S HOMEOWNERS - 3

Loan No: 7520003

PLEASE CALL FOR THE POLICY FOR THE
CANCELLATION PAYABLE TO STATE FUND
MAY 02 1987 \$0.00

2008 HAWANA ST
NEW ORLEANS LA 70119-1507

pd.

228-705823
State Farm Insurance Companies
State Farm Fire and Casualty Company
20 State Farm Tower
Monroe, LA 71208-2001

OFFICE USE ONLY

Prepared: APR 14 1987
M
B
M

PRE-CANCEL \$0.00 \$500

200712300042000 8182024046725823-22



STATE FARM INSURANCE COMPANY
 State Farm Fire and Casualty Co. Inc.
 21 State Farm Plaza
 Bloomington, IL 61710-0001

RENEWAL CERTIFICATE

POLICY INFORMATION		CLASSIFICATION	TERMS AND COVERAGE
1. POLICY NO.	2. RENEWAL DATE	3. CLASSIFICATION	4. RENEWAL TYPE
1000 0000 0000	01/01/00 TO 01/01/01	0000	0000
<p>3-COM-PLA 1 0 1000 0000 0000 0000 0000 0000 1000 0000 0000 0000 0000 0000 1000 0000 0000 0000 0000 0000 1000 0000 0000 0000 0000 0000</p>		<p>Coverages and Limits</p> <p>A. Dwelling 90,000 B. Personal Property 20,000</p> <p>Exclusions Dwelling Personal Property</p> <p>Special Hazard Form 900 Building/Contents Excluded</p>	
5. AGENT	6. AGENT ADDRESS	7. AGENT PHONE	8. AGENT FAX
0000 0000 0000	0000 0000 0000	0000 0000 0000	0000 0000 0000
9. POLICYHOLDER	10. POLICYHOLDER ADDRESS	11. POLICYHOLDER PHONE	12. POLICYHOLDER FAX
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13. POLICYHOLDER TYPE	14. POLICYHOLDER TYPE	15. POLICYHOLDER TYPE	16. POLICYHOLDER TYPE
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65. POLICYHOLDER TYPE	66. POLICYHOLDER TYPE	67. POLICYHOLDER TYPE	68. POLICYHOLDER TYPE
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73. POLICYHOLDER TYPE	74. POLICYHOLDER TYPE	75. POLICYHOLDER TYPE	76. POLICYHOLDER TYPE
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77. POLICYHOLDER TYPE	78. POLICYHOLDER TYPE	79. POLICYHOLDER TYPE	80. POLICYHOLDER TYPE
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81. POLICYHOLDER TYPE	82. POLICYHOLDER TYPE	83. POLICYHOLDER TYPE	84. POLICYHOLDER TYPE
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85. POLICYHOLDER TYPE	86. POLICYHOLDER TYPE	87. POLICYHOLDER TYPE	88. POLICYHOLDER TYPE
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89. POLICYHOLDER TYPE	90. POLICYHOLDER TYPE	91. POLICYHOLDER TYPE	92. POLICYHOLDER TYPE
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93. POLICYHOLDER TYPE	94. POLICYHOLDER TYPE	95. POLICYHOLDER TYPE	96. POLICYHOLDER TYPE
0000 0000 0000	0000 0000 0000	0000 0000 0000	0000 0000 0000
97. POLICYHOLDER TYPE	98. POLICYHOLDER TYPE	99. POLICYHOLDER TYPE	100. POLICYHOLDER TYPE
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AMERICAN INSURANCE GROUP
NEW ORLEANS INSURANCE GROUP

BONDOWNER POLICY

RENEWAL DECLARATION - EFFECTIVE 02/04/79

POLICY NUMBER	DATE	PERIOD	COVERAGE IS PROVIDED BY THE	AGENCY
898 0821443	02/04/78	02/04/79	LA JOINT REINSURANCE PLAN	8900041
NAME(S) OF OWNER AND ADDRESS			AGENT	
JACKSON, HENRIEY PETE 1224 FRANCHES STREET NEW ORLEANS, LA 70118			CALHOUN & BARNES, INC. 1601 ST. CHARLES AVE. NEW ORLEANS LA 70130	

THE PREMISES COVERED BY THIS POLICY IS LOCATED
1224-24 FRANCHES STREET NEW ORLEANS, LA 08188 70118.

BASIC INFORMATION- FRAME CONSTRUCTED IN 1948, PRIMARY RESIDENCE,
PROTECTION CLASS 3, TERRITORY No. FEET FROM HIGHWAY N/A,
1200 SECTION 3 LESS DEDUCTIBLE, 2 FAMILY, SWINE CITY.

COVERAGE AT THE ABOVE DESCRIBED LOCATION IS PROVIDED ONLY WHERE A LIMIT OF
LIABILITY IS SHOWN OR A PREMIUM IS STATED

SECTION & COVERAGE	LIMIT OF LIABILITY	PREMIUM
A. DWELLING	\$60,000	\$593.00
B. OTHER STRUCTURES	\$5,000	
C. PERSONAL PROPERTY	\$30,000	
D. LOSS OF USE	\$10,000	
SECTION 21 COVERAGE		
E. PERSONAL LIABILITY	\$100,000 EACH OCCURRENCE	
F. MEDICAL PAT. TO OTHERS	\$1,000 EACH PERSON	
TOTAL BASIC PREMIUM		\$593.00
TOTAL ANNUAL PREMIUM		\$593.00

POLICY PERIOD- 12:01 AM STANDARD TIME AT THE RESIDENCE PREMISES.

POSTAGE, ~~RECEIVED~~
 LEGAL BONDOWNER'S COPY OF N.O.
 NEW ORLEANS HOME TITLE AUTHORITY
 P O BOX 98100
 NEW ORLEANS, LA 70150

FORMS AND ENDORSEMENTS - 88-0082 04/78, 8878/13/78, 88-8485 8/78

AUTHENTICATED SIGNATURE

01/28/79
1625



FLOOD POLICY DECLARATION

Type of Dwelling

POLICY PERIOD: 6/01/96 to 6/01/97

These Declarations are effective as of: 6/01/96 at 12:01 AM

FIRST MORTGAGE NAME & ADDRESS

 Loan# 7030647
 NEW ORLEANS HOME MFG ASSOCIATE
 PO BOX 98174
 NEW ORLEANS, LA 70119-8515

PRODUCER NAME & ADDRESS

 PRODUCERS, CINC-08703-088
 SHARON E ASSOCIATES
 301 N BRUSH ST
 NEW ORLEANS, LA 70019-8418

PHONE (504)821-0383

POLICY INFORMATION

MORTGAGE TYPE: 1st Mortgage

POLICY TERM: One Year

INSURED PROPERTY ADDRESS

 2287-07 NEW ORLEANS STREET
 NEW ORLEANS, LA 70115

COMPLEXT NAME

NEW ORLEANS/ORLEANS PERIOD

COMPLEXT NUMBER

228707000E

BUILDING DESCRIPTION

 3-4 Family
 One floor
 No basement

BUILDING LOCATED

N/A

Premium

Regular

FLOOD CODE

882

CONSTRUCTION DATE

12/06/74

COVERAGE & RATING INFORMATION

SYSTEM

 Coverage: \$20,000
 Deductible: \$100
 Retail: .668/ .270

COVERAGE

 Coverage: \$/S
 Deductible: \$/S
 Retail: \$/S

PREMIUM PAID

Total: \$294.80

INSURED NAME & ADDRESS

 DEWEYBAY CORP
 2287-07 NEW ORLEANS STREET
 NEW ORLEANS, LA 70115

1ST MORTGAGE

2ND MORTGAGE

This Declaration Page, in conjunction with the policy, constitutes your Flood Insurance Policy. It has been prepared by AIG FICOP, we have signed this declaration and hereby agree to this Insurance Agreement.

Gregory

Audubon Insurance Group Insurance Company

NEW ORLEANS APPOINTEE HOME OWNERSHIP, INC.
(Formerly Urban Renewment's Corporation of New Orleans)

NOTES TO FINANCIAL STATEMENTS--CONTINUED

December 31, 1978

NOTE L - ECONOMIC DEPENDENCY

The Corporation receives a majority of its revenues from funds provided through grants administered by the City of New Orleans. The grant amounts are appropriated each year by the federal and local governments. If significant budget cuts are made at the federal and/or local level, the amount of the funds the Corporation receives could be reduced significantly and have an adverse impact in its operations. Management is not aware of any actions that will adversely affect the amount of funds the Corporation will receive in the next fiscal year.

Account Statement



P.O. Box 19000 Reading, Pa. 19600-4829

INSURANCE PROVIDED BY
FIDELITY AND CASUALTY COMPANY

NAME INSURED
YVONNE BELL BRADLEY
8718 OLIVER ST
NEW ORLEANS, LA 70118

7520044

UNIVERSAL HOMEOWNERS CORP OF NEW
ORLEANS 3200 ORLEANS
HOME MFG AUTH FOR 80619
NEW ORLEANS, LA 70150

AGENT
HUGHES WILMSLEY & COMPANY, INC.
728 BINGO STREET
NEW ORLEANS LA 70130
PHONE: 504-581-0853

POLICY NUMBER: LS 146894571

POLICY PERIOD: 02/19/97 TO 02/19/98 12:01 AM STANDARD TIME

UNIVERSAL SECURITY SPECIAL POLICY BILLING SCHEDULE AS OF 01/16/97

PAYER: UNIVERSAL HOMEOWNERS CORP OF NEW ORLEANS		EFFECTIVE		PREMIUM		DUE DATE		STATUS		AMOUNT	
RENEWAL POLICY	02/19/97	\$	615.00			02/19/97		\$	615.00		
PAYMENT DUE											

CHARGES/CREDITS: \$ 615.00
 CURRENT BALANCE: \$ 615.00

*** IMPORTANT INFORMATION ***

QUESTIONS ABOUT YOUR BILL? CALL CNA'S INFOBILL @ 1-800-249-3063

THE DUE DATE IS THE DATE WHEN THE PAYMENT MUST BE IN OUR OFFICE, NOT THE DATE OF THE POSTMARK. ALLOW 7 DAYS MAIL TIME FOR RECEIPT OF PAYMENT.

WE APPRECIATE YOUR BUSINESS.

002-115762

88800-A-04-780

P 0116

PAYMENT NOTICE - RETURN THIS PORTION

Please use the attached return envelope to mail your payment. Make your check payable to CNA and include your Policy Number on your check.



INSURED: YVONNE BELL BRADLEY

POLICY NO: LS 146894571

PAY IN INSTALLMENTS OF	\$ 615.00
OR PAY IN FULL	\$ 615.00
DUE DATE	02/19/97

CNA
P.O. Box 371306
PITTSBURGH PA 15250-7306

SUPPLEMENTAL INFORMATION

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOAN NUMBER
 7520044
 100 BONDING STREET
 NEW ORLEANS, LA 70114

FIRST NATIONAL BANK OF GEORGIA
 NEW ORLEANS, LOUISIANA
 70102

FORM
 1006

TWO HUNDRED THIRTY SIX AND 00/100 DOLLARS

FILE
 TO THE
 ORDER OF

04/18/1997

PAID BY
 236.00

BARBERS INSURANCE COMPANY
 P. O. BOX 13023
 ST. PETERSBURG, FL 33713

NEW ORLEANS HOME MORTGAGE AUTHORITY
 ENDORSED CHECK # 100

⑈001506⑈ ⑈001000029⑈ 4406 11190⑈

NEW ORLEANS HOME MORTGAGE AUTHORITY
 ENDORSED CHECK # 100

INVOICE NUMBER
 1306

04/18/1997

236.00

YVONNE BRADLEY
 LOAN NO# 7520044
 POLICY NO# P100410000

VENUE # 080000110 CHECK # 1306 DATE 04/18/1997 NET 236.00
 BARBERS INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY
 ENDORSED CHECK # 100

INVOICE NUMBER
 1306

04/18/1997

236.00

YVONNE BRADLEY
 LOAN NO# 7520044
 POLICY NO# P100410000

VENUE # 000000110 CHECK # 1306 DATE 04/18/1997 NET 236.00
 BARBERS INSURANCE COMPANY



STATE FARM INSURANCE COMPANIES

State Farm Fire and Casualty Company
 82 State Farm Drive
 Monroeville, LA 71208-8081

RENEWAL CERTIFICATE

POLICY NUMBER	HOMEOWNERS SPECIAL FORM POLICY	DATE END	PLURIS PER YEAR PREMIUM
18-PC-8873-8	MAR 31 1987 TO MAR 31 1988	MAR 31 1987	\$429.80

P-1258-7832 P H

ORION HOMEOWNERS CORP OF NEW
 ORLEANS
 C/O NEW ORLEANS HOME MORTGAGE
 AUTHORITY
 PO BOX 50039
 NEW ORLEANS LA 70150-0513
 Tel: (504) 584-1111

Insured: GARDNER, ADRIAN B DEMETREA
 POINTS

Location: 3328 HAYMA ST
 NEW ORLEANS LA 70119-1507

Mortgage: NEW ORLEANS HOME MORTGAGE
 Loan No: 7520853

Forms, Options, and Endorsements

Homeowners Policy Form 2
 Replacement Cost Contents
 Anniversary Endorsement

FF-7823
 OPT. RC
 FE-1218-A

Coverages and Limits

Section I

A. Dwelling	\$80,100
Dwelling Extension	0.518
B. Personal Property	60,000
C. Loss of Use	Actual Loss Sustained

Exclusions - Section I

All Losses 500

Section II

L. Personal Liability	\$100,000
Damage to Property of Others	500
M. Medical Payments to Others (Each Person)	5,000

Annual Premium \$429.80
 Amount Due \$429.80

Premium Reductions

Your premium has already been reduced
 by the following:

Home Airt Discount	35.00
Renewal Discount 3+ Years	35.00

Inflation Coverage Index: 105.9

Thanks for being a customer.

Agent: DAVE HILL, SR.

Telephone: (504) 861-4028 or (504) 861-0498

Prepared FEB 13 1987

Give reverse side for important information.
 Please keep this page for your records.

ATTACHMENT II

NEW ORLEANS AFFORDABLE HOUSING OWNERSHIP, INC.
(Formerly Urban Homeowners's Corporation of New Orleans)

NOTES TO FINANCIAL STATEMENTS--CONTINUED

December 31, 1995

NOTE D - DUE TO THE CITY OF NEW ORLEANS--Continued

The corporation engaged an escrow agent to collect all principal and interest relative to the amortized loan program, and remit these monies directly to the City of New Orleans.

NOTE E - INCOME TAXES

The corporation is exempt from corporate income taxes under Section 501(c)(3) of the Internal Revenue Code.

NOTE F - FUND BALANCE

The fund balance (deficit) as of December 31, 1995 consists of the following:

T.H.E.W. Public Facility	\$	61
Urban Homeowners Property		28,757
Urban Homeowners		22,798
Urban Homeowners Hope III		5,198
Urban Youth		3,823
General Fund	(38,483)
Property and Equipment		<u>325,228</u>
		<u>\$ 325,182</u>

NOTE G - ADMINISTRATIVE SUPPORT

The corporation received administrative support for the period January 1, 1995 through December 31, 1995 from the city of New Orleans. The support is not reflected in the financial statements.

NOTE H - BOARD OF DIRECTORS COMPENSATION

The board of directors is a voluntary board; therefore, no compensation was paid to any board member during the period January 1, 1995 through December 31, 1995.

MANAGEMENT'S RESPONSE
TO
AUDIT FINDINGS

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP, INCORPORATED

1408 Canal Street, Suite 215
 New Orleans, Louisiana 70117
 (504) 586-1900
 Fax: (504) 586-1994

TO: Tom Deputy, Director of Housing

FROM: Ron McClain, President

DATE: May 20, 1993

RE: Audit Request for Clearance of NOAH 1992 Audit Finding

**NEW ORLEANS AFFORDABLE HOMEOWNERSHIP AUDIT
 RESPONSES AND REQUEST FOR CLEARANCE**

General Requirements

Page 38 1. Financial Reporting-All Programs

All financial reports during the audit period agreed with the general ledger upon submission to the grantor. Adjustments to the cost reports were made by the City of New Orleans fiscal monitor. However, in certain instances the corporation did not agree with the monitor's adjustments. In these instances, the corporation's accountant did not adjust the general ledger, instead these differences were carried forward until the grant close-out and a final determination by the grantor.

Page 48 2. Allowable Costs/Costs Allocation

The cost were incurred and recorded as such in accordance with the cost allocation approved by the City. (See Exhibit I)

Most specifically with Urban Homeowners Corporation, Property Acquisition and Demolition, the accountants were requested by the Corporation Board to provide additional services, which consisted of research and preparation of a report detailing housing cost per unit, and cost comparisons of construction management firms. In regard to the Mayor's Town, costs were associated with the payroll adjustments, year end W-2's and general close out of unresolved payroll issues with participants at program's end.

Page 41 3. Commingling of Funds

There was no commingling of funds because there is only one funding source, Community Development Block Grant Funds (CDBG). A separate general ledger was maintained for that grant. NOAH has requested and received the waiver to

reduce the number of bank accounts from four (4) to three (3) because there is only one funding source. NOAH maintains a CDBG account, Program Income account, Yearbuild account. This will provide all necessary controls, reduce costs of bank fees and cost of purchasing checks. (See Attachment III)

SPECIFIC REQUIREMENTS

Amortized Loan Program

Page 42 4. Eligibility

With regard to the Rental Rehabilitation Program (RRP), the City issued a statement that the responsibility for performing tenant surveys as well as all other program requirements was clearly that of the program grantee, which was the City of New Orleans. The role played by the Corporation, formerly Urban Homeowners Corporation (UHCNO), was only that of a mortgagee in whose name loans were originated. UHCNO had no operational responsibility for any other program aspects. It certainly was not responsible for collecting tenant income information.

The program requirement to collect and report tenant information to HUD was, in fact, fulfilled by the City's Office of Housing and Urban Affairs (OHUA), now the Division of Housing and Neighborhood Development (DHND). Attached are the Project Completion Reports for the two projects identified in the audit. These documents were submitted to HUD upon completion of these projects. (See Exhibit III A and Exhibit III B)

THE REPORTING CONDITIONS

Page 21 1. Cash

At no time did bank balances exceed FDIC insurance limits. Corporation checks were recorded and date dated in July, 1996. (See Attachment IV)

2. Loans

The Corporation has a loan committee and loan policy and procedure manual since. To say that the corporation does not have a loan committee is inaccurate. In addition, the corporation loans are serviced and maintained by New Orleans Home Mortgage Authority. (See Attachment V)

2. The delinquency rate for the loan portfolio totaled 10%. Loans totaling \$110,100 are 180 days past due.
1. The Corporation does not have a loan committee.

Recommendation

We recommended a loan committee be formulated to address the problems noted above. A formal loan policy and procedures manual should be written, with respect with emphasis placed in collection and disposition of delinquent loans. The loan balances should be reviewed monthly and agreed to the general ledger. By properly maintaining accurate loan balances, the financial statements will be more meaningful. The corporation should accept a policy for non-recognition of interest income on non-performing loans. By adopting a policy not to accrue interest on loans over 90 days past due, the accrued interest reflected on the financial statements will not be overstated.

3. Accounting System

Findings

A review of the accounting system noted the following:

1. Supporting documentation relative to cash receipts and cash disbursements were lacking in some instances.
2. Explanation accompanying the monthly journal entries were inadequate in a number of instances.

Recommendation

All supporting documentation relative to cash receipts and cash disbursements must be maintained to support the entries in the accounting records. Journal entries should be accompanied by full explanation and adequate supporting data.

4. Cash Disbursements

Findings

Vouchers and supporting papers, upon payment, should be marked or cancelled in such a manner as to render them ineffective as a support for further payments.

Recommendations

We recommend the use of a "paid" stamp to be applied to the supporting papers immediately after the signing of the checks issued in payment of the vouchers.



CITY OF NEW ORLEANS

DIVISION OF HOUSING AND NEIGHBORHOOD DEVELOPMENT

MARC H. MORAL
MAYOR

VINCENT E. BRIDGEMAN
EXECUTIVE ASSISTANT
TO THE MAYOR

March 13, 1994

Ms. Valdine M. Trepagnier
Secretary
New Orleans Affordable Homeownership,
Incorporated (NOAH)
2400 Canal Street, Suite 116
New Orleans, LA 70119

Re: Cost Allocation Plan

Dear Ms. Trepagnier:

We are in receipt of the recently submitted cost allocation plan which covered the period January 1, thru December 31, 1994. This allocation plan covers accounting fees for seven (7) administered projects under the program's management. DHND's approval is granted on this plan. Please keep a copy of the plan along with this letter of approval on file for subsequent inspection by the City of New Orleans' fiscal monitor.

Thank you for your cooperation.

Rebuilding New Orleans New, I remain,

Sincerely,


John V. Bessard
Deputy
Director of Housing

TJN:WJA

cc: John V. Bessard
Craig Frazier
Ernie Hurley
Barry Walker
File

LUTHER C. SPEIGHT & COMPANY

A Corporation of Certified Public Accountants



TO: FURSELL DEAN, FISCAL MANAGER

FROM: SAMUEL STEVENS, MANAGER
LUTHER SPEIGHT & CO.

DATE: FEBRUARY 27, 1954

Please find attached our cost allocation for accounting fees allocated to the various projects of Union Homeowner's Corporation for the year ended December 31, 1954.

Based upon our discussion with Mr. Glenn Scott, Sr., this should be sufficient to reverse the disbursed accounting fees for the year then ended.

CC: Vincent T. Sylvain
Glenn Scott, Sr.
Bonita Rivins

ATTACHMENT (2)

SCHEDULE OF DISALLOWED COSTS & PENALTIES
 URBAN HOUSING (PROPERTY ACQUISITION) PROGRAM
 CO 110-043

COST CONTROL STATEMENT DATE	PAYMENT NUMBER	DISALLOWED		LATS	PENALTIES		TOTAL
		ACQUISITION FEES	INSURANCE FEES		DISALLOWED COST	NO BANK RECONCL.	
Oct-88		\$960.00					\$960.00
Apr-88	28	1,188.88					1,188.88
May-88		1,188.88					1,188.88
Apr-88	37	1,188.88					1,188.88
Mar-88	58	1,188.88					1,188.88
Feb-88	28	1,188.88					1,188.88
Jan-88		1,188.87					1,188.87
Dec-87		1,188.87					1,188.87
Nov-87	54	1,188.87					1,188.87
Oct-87	53			\$792.00			792.00
May-84	18			750.00			750.00
Apr-84	17		\$748.88	150.00	\$44.72		\$943.60
Mar-84	16		4,358.50	150.00	258.00		4,766.50
Feb-84	14			1,000.00			1,000.00
Jul-84	13			1,000.00		53,500.00	55,500.00
Dec-83	12			2,800.00			2,800.00
Nov-83	12			1,000.00			1,000.00
		\$8,818.86	\$5,081.25	\$8,000.00	\$500.00	\$3,000.00	\$25,401.11

NEW ORLEANS AFFORDABLE HOUSING, INC.
 (Formerly Urban Homeowner's Corporation of New Orleans)

STATUS OF PRIOR AUDIT FINDINGS - Continued

March 27, 1997

	Unaudited Costs	Resolved	Unresolved	Audit Finding Number
1.	Financial Reporting.		X	1
2.	Allowable cost - All Programs	X		
3.	Allowable Cost Acquisition and transfer of purchased properties.	X		
4.	Allowable Cost Hope III Project.		X (Program prior to 1994 - No purchases in 95 under this program)	
5.	Allowable cost/cost allocation to programs.		X	3
6.	Administrative requires OMB Circular A110 on procurement of professional services.	X		
7.	Commingling of Funds - separate bank accounts for funds.		X	5
8.	Ascertained loan program eligibility.		X	6
9.	Conflict of interest for attorney.	X		
10.	Urban Homeowners Property Acquisition and Demolition Program.	X		
11.	Eligibility - Proof of ownership.	X		

cc: Marlan Kahn, Director of Finance
Courtney Brown, Secretary of Finance
Thomas Dupuy, Director of Hunting
Patell Demas, Fiscal Monitor

NEW ORLEANS AFFORDABLE HOUSING, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

STATUS OF PRIOR AUDIT FINDINGS

March 27, 1987

<u>Reportable Conditions</u>	<u>Resolved</u>	<u>Unresolved</u>	<u> audit Finding Number</u>
1. Cash balances exceed FDIC limit.		X	1
2. Loan balances not in agreement with subsidiary records. Interest for nonperforming loans was accrued. No loan committee or procedures.	X	X	2
3. Payroll tax returns.	X		
4. Minutes prior to 1984.		X	
5. Accounting system.		X	3
6. Cash Disbursements and supporting documents.		X	4
7. Grants Receivable.		X	5
8. Provision for loan losses.	X		

5502

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP INC.

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP INC.
 1800 CANAL, 18TH FLOOR
 NEW ORLEANS, LA 70119

DATE

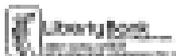
DATE

PAY TO THE ORDER OF

\$

DOLLARS

9000 AFTER 30 DAYS



FOR

REASON

5508

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP INC.

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP INC.
 1800 CANAL, 18TH FLOOR
 NEW ORLEANS, LA 70119

DATE

DATE

PAY TO THE ORDER OF

\$

DOLLARS

9000 AFTER 30 DAYS



FOR

REASON

1049

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP, INC.

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP, INC.
 1800 CANAL, 18TH FLOOR
 NEW ORLEANS, LA 70119

DATE

DATE

PAY TO THE ORDER OF

\$

DOLLARS

9000 AFTER 30 DAYS



FOR

REASON

5586

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP INC.

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP INC.
 1800 CANAL, 18TH FLOOR
 NEW ORLEANS, LA 70119

DATE

PAY TO THE ORDER OF

\$

DOLLARS

9000 AFTER 30 DAYS



FOR

REASON

year ended December 31, 1995, we obtained an understanding of the internal control structure. With respect to the internal control structure, we obtained an understanding of the design of relevant policies and procedures and whether they have been placed in operation, and we assessed control risk in order to determine our auditing procedures for the purpose of expressing our opinion on the financial statements and not to prove an opinion on the internal control structure. Accordingly, we do not express such an opinion.

We noted certain matters involving the internal control structure and its operation that we consider to be reportable conditions under standards established by the American Institute of Certified Public Accountants. Reportable conditions involve matters coming to our attention relating to significant deficiencies in the design or operation of the internal control structure that, in our judgment, could adversely affect the Corporation's ability to record, process, summarize, and report financial data in a manner that is consistent with the assertions of management of the financial statements.

The reportable conditions noted are as follows:

1. Cash

Findings

A review of cash noted the following:

1. The cash balances per the December 31, 1995 bank statements exceeded the FDIC insurance limits by approximately \$44,000.

Recommendations

The corporation should have the financial institution pledge securities with the Federal Reserve system to secure balances in excess of the FDIC insurance limits. When the corporation reorders its checks, they should be stale dated.

2. Loans

Findings

A review of December 31, 1995 loan balances noted the following:

1. The corporation does not maintain a written loan policy and procedural manual.



CITY OF NEW ORLEANS
DIVISION OF HOUSING AND NEIGHBORHOOD DEVELOPMENT

MARC H. MORAN,
Mayor

WINDY E. SYLVAN
Executive Assistant
to the Mayor

March 11, 1987

Mr. Dan McClain
President
New Orleans Affordable Homeowners, Inc.
2400 Canal Street
New Orleans, Louisiana 70119

Re: Audit - Rental Rehabilitation Program

Dear McClain:

This letter is written as a response to the audit of New Orleans Affordable Homeowners, Inc. (formerly Urban Homeowner's Corporation of New Orleans), for the period August 29, 1989 through December 31, 1984. It addresses a finding, which is repeated as follows: "The Corporation is not in compliance with federal requirements relative to rental rehabilitation loans".

With regard to the Rental Rehabilitation Program (RRP), the responsibility for performing tenant surveys as well as all other program requirements was clearly that of the program grantee, which was the City of New Orleans. The role played by the UHCO, was only that of a mortgagee in whose name loans were originated. UHCO had no operational responsibility for any other program aspects. It certainly was not responsible for collecting tenant income information.

The "Criteria" mentioned in the audit stated that "The tenants must be of low or moderate income". While this is true, the program, and not each project, was only required to attain a level of 30% low and moderate income tenants, before HUD could elect to impose administrative conditions, such as collection of tenant and/or income taxes.

Tenant income information was collected through a survey procedure. This information was then compiled and reported to the U.S. Department of Housing and Urban Development (HUD) via a Project Completion Report (HUD Form 4004-B). Some tenants chose not to complete the survey and the RRP lacked a mechanism to compel them to do so. This is why the program's

DEBORAH DOWLEY
Director of Housing

RENITA E. SIMMS
Deputy Executive Assistant

GLORIA M. SCOTT, JR.
Director of Neighborhood
Development

"An Equal Opportunity Employer"

JUN 07 1987
JUN 07 1987 - Suite 300 - New Orleans, LA 70119
(504) 576-2011

Mr. Ron McClain
March 11, 1993
Page 2

mandatory low-income requirement was only 70%. In fact, the programmatic prohibition against the use of rent control as any long-term stipulation that required the owner to rent to lower-income tenants, precluded the likelihood of 100% low-income occupancy.

Nevertheless, the program requirement to collect and report tenant information to HUD was, in fact, fulfilled by the City's Office of Housing and Urban Affairs (OHUA), now the Division of Housing and Neighborhood Development (DHND). Attached are the Project Completion Reports for the two projects identified in the audit. These documents were submitted to HUD upon completion of these projects. The information was collected via tenant survey forms that were filled in by the tenants. These survey forms are on file at DHND.

If you have any questions about this matter, please contact Doug Kahn at 816-1645.

Sincerely,



Thomas Dupont
Director of Housing

THD:K

cc: Herbie Brown
Lynn Ashby

Project Completion Report

Rural Rehabilitation Program
Cash and Management Information (CMI) System

U.S. Department of Housing
and Urban Development
Office of Community Planning
and Development



CMI Report No. 2001-0001 (Rev. 12/92)

See Instructions for this form on HUD-2001-0001.

Submit this form upon the project's 75 percent completion, but no later than 180 days after the final disbursement. If: Rural Rehabilitation Program, P.O. Box 20000, Lynchburg Station, Washington, DC 22204.

Mark the appropriate box:

Original Revised Corrective Transfer Change in Estimate Late

Part A: Project Identification

1. Project/Loan Number (HUD-2001)

2. Project/Loan Support Activity

3. Is Property? (Check appropriate box)

0 7 1 6 0 0 0 0 5 1 8 1 5 1 1 H C 1 2 2 1 0 2 0 8

4. Project Name (Include location) 5. Full Name of Owner

6. State of Owner 7. City

8. Zip Code 9. State of Property Address

10. Project Address (or line) 11. City

12. Project Address (or line) 13. City

14. Project Address (or line) 15. City

16. Project Address (or line) 17. City

18. Project Address (or line) 19. City

20. Project Address (or line) 21. City

22. Project Address (or line) 23. City

24. Project Address (or line) 25. City

26. Project Address (or line) 27. City

28. Project Address (or line) 29. City

30. Project Address (or line) 31. City

32. Project Address (or line) 33. City

34. Project Address (or line) 35. City

36. Project Address (or line) 37. City

38. Project Address (or line) 39. City

40. Project Address (or line) 41. City

42. Project Address (or line) 43. City

44. Project Address (or line) 45. City

46. Project Address (or line) 47. City

48. Project Address (or line) 49. City

50. Project Address (or line) 51. City

52. Project Address (or line) 53. City

54. Project Address (or line) 55. City

56. Project Address (or line) 57. City

58. Project Address (or line) 59. City

60. Project Address (or line) 61. City

62. Project Address (or line) 63. City

64. Project Address (or line) 65. City

66. Project Address (or line) 67. City

Part B: Financial Structure of the Project

1. For Project Income from: Rental Income Other Income

2. Total Rehabilitation Costs: \$ 900,730.00

3. Rental Rehabilitation Costs (Total Rehabilitation Costs less other income): \$ 900,730.00

4. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

5. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

6. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

7. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

8. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

9. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

10. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

11. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

12. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

13. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

14. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

15. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

16. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

17. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

18. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

19. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

20. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

21. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

22. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

23. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

24. Direct Loan Guarantees by: State Guarantees Federal Guarantees Other Guarantees

Part C: Assistance to Tenants

a. No. of tenants assisted with Project	b. No. of households assisted with Project	c. Number of any households responsible to project for any maintenance work or other assistance required	d. Assisted Number (Assistance Type)		
Year Assisted	Assisted to: (a) Public Housing Authority or other	Type of Assistance	Type of Assistance	Type of Assistance	Assisted Number (Assistance Type)
C	D	26	4	29	0, 7, 1, 1, 6, 0, 0, 0, 0, 5, 1

Part D: Characteristics of Households Residing in Project After Rehabilitation

Compare one line for each unit in the project. Enter one mark only in each block. Mark 1. The response must include items not listed in corresponding category if the unit included by each household in 1.

Total Number of Units After Rehabilitation	43
--	----

Unit Characteristics			Household Characteristics						
Number of Persons	Single Occupant	Monthly Rent Exceeding 10% of Gross Family Income	Family Size of 4 or More	Homeless (Previous 12 Months)	Homeless (Previous 12 Months)	Homeless (Previous 12 Months)	Age of Head of Household	Family Size of Household	Other Characteristics
1	2	3	4	5	6	7	8	9	10
1	2	305							
1	2	329							
1	2	375							
1	2	329							
1	1	305	1	1	2		1	1	1
1	2	323							
1	2	305							
1	1	325	1	1	2		4	2	1
1	2	375							
1	2	375							
1	2	323	1	1	2		1	1	1
1	2	305							
1	2	323							
1	2	305	1	1	2		1	1	1
1	2	325	1	1	2		1	1	1
1	2	321	1	1	2		1	1	1
1	2	373							
1	2	325							
1	2	325							
2	2	465							
1	2	325							
1	2	325							

Project Completion Report

Rental Rehabilitation Program
Cash and Management Information (CMI) System

U.S. Department of Housing
and Urban Development
Office of Community Planning
and Development



CMI Approval No. 2008-0002 (By: 10/10)

See instructions to the form on form HUD-9800-001-000

Record this form when the project is 75 percent occupied, but no later than 90 days after the final construction payment, or, Rental Range Program, P.O. Box 20000, 1700 North Moore Street, New Orleans, LA 70009.

Form No. Approved for: Original Reproduction Revision Correcting Agency: Other: Date: 10/11/10

Part A: PROJECT IDENTIFICATION

1. Project Name (Agency/Project):		2. Construction Program Section:		3. Property (Check appropriate code): <input type="checkbox"/> (1) Mixed-Use? <input type="checkbox"/> (2) Single Room Occupancy? <input type="checkbox"/> (3) Cooperative? <input type="checkbox"/> (4) None of the Above	
4. Location (Street Name or Other): Altman 1018 Common Street Suite 1500				5. City/State/Zip: New Orleans LA 70112	
6. Sponsor (Full name and address): 1524 561-5666		7. Name of Firm or Company: Carver 90 Limited Partnership		8. Year: LA 70112	
9. Project Address (or Name): 4524/2528 North Rampart Street		10. City/State/Zip: New Orleans LA 70112		11. Name Number (Date and area): 1380 826-1653	
12. Name: Lynn W. Ashby		13. City/State/Zip: New Orleans LA 70112		14. Name: 1380 826-1653	
15. Address: 1440 Canal Street, Suite 300		16. City/State/Zip: New Orleans LA 70112		17. Name: 1380 826-1653	

Part B: Financial Structure of the Project

1. Set Project Budget parameters:
 (1) Rehabilitation Only (2) Demolition and Rehabilitation (3) Relocation and Rehabilitation
 Total Rehabilitation Costs: \$ 370,000.00

2. Rental Rehabilitation Grant Funds (see also attached Appendix Form (A) - Appendix 1)
 Federal Loan Guarantee: Interest Rate: Amortization Period: No Yes \$
 Section 8: \$
 (1) Defined Payment Loan (DFP) / Section 8 Certificate of the DFP: \$ 185,000.00
 (2) DFP Guarantee: \$
Total Rental Rehabilitation Grant Funds: Total terms (7) max (4): \$ 185,000.00

3. DFP/DFG Funds (see also attached Appendix Form (A) - Appendix 1)
 (1) Defined Loan Guarantee by Section 8 Certificate: Interest Rate: Amortization Period: No Yes \$ 185,000.00
 (2) Grant: \$
 (3) Defined Payment Loan (DFP) / Section 8 Certificate of the DFP: \$ 63,380.00
 (4) DFP Guarantee: \$
Total DFP/DFG Funds: Total terms (7) max (4): \$ 248,380.00

4. Tax Exempt Funds: Interest Rate: Amortization Period: No Yes \$
 5. Other Public Funds (describe source, e.g. State, City, County, etc.): \$
 6. Rental Rehabilitation Program Income: \$
 7. Private Loan Funds (describe source): Interest Rate: Amortization Period: No Yes \$
 8. Other Private Funds (describe source, e.g. other contributions from donors, including governmental entities, etc.): \$
Total Funding (Cash, DFP/DFG and Assistance) Funds: Total terms (7) max (4): \$ 450,350.00

PAULET, MEUNIER and LeBLANC, L.L.P.

Certified Public Accountants

Management Consultants

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH SPECIFIC REQUIREMENTS APPLICABLE TO MAJOR FEDERAL AWARD PROGRAMS

Board of Directors
New Orleans Affordable Homeownership, Inc.

We have audited the financial statements of New Orleans Affordable Homeownership, Inc. (a non-profit corporation) for the year ended December 31, 1998, and have issued our Report thereon dated March 27, 1997.

We have also audited the compliance of New Orleans Affordable Homeownership, Inc. with the requirements governing types of services allowed or unallowed; eligibility; reporting; and claims for reimbursements that are applicable to each of its major Federal award programs, which are identified in the accounting Schedule of Federal Awards, for the year ended December 31, 1998. The management of New Orleans Affordable Homeownership, Inc. is responsible for the corporation's compliance with those requirements. Our responsibility is to express an opinion on compliance with those requirements based upon our audit.

We conducted our audit in accordance with general accepted auditing standards, Government Auditing Standards, issued by the Comptroller General of the United States; and Office of Management and Budget (OMB) Circular A-133, "Audits of Institutions of Higher Education and Other Nonprofit Institutions". Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether material noncompliance with the requirements referred to in the second paragraph occurred. An audit includes examining, on a test basis, evidence about the corporation's compliance with those requirements. We believe that our audit provides a reasonable basis for our opinion.

The results of our audit procedures of the Major Programs: Assisted Loan, Urban Homeowners Property Acquisition and Demolition, and the Urban Youth Corps disclosed that New Orleans Affordable Homeownership, Inc. did not comply with the eligibility requirements. Supporting documentation was inadequate for the



This report is intended solely for the information of management, the City of New Orleans, and the Legislative Auditor of the State of Louisiana. However, this report is a matter of public record, and its distribution is not limited.

James M. McCreary and Associates, Ltd.

New Orleans, Louisiana
March 27, 1997

PALET, MEUNIER and LeBLANC, L.L.P.

*Certified Public Accountants
Management Consultants*

**INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL
STRUCTURE IN ACCORDANCE WITH GSB CIRCULAR A-133**

**Board of Directors
New Orleans Affordable Homeownership, Inc.**

We have audited the financial statements of New Orleans Affordable Homeownership, Inc. (a non-profit corporation) for the year ended December 31, 1995, and have issued a report thereon dated March 27, 1997. We have also audited the compliance of New Orleans Affordable Homeownership, Inc. with requirements applicable to major federal programs and have issued our report thereon dated March 27, 1997.

We conducted our audit in accordance with generally accepted auditing standards, Government Auditing Standards, issued by the Comptroller General of the United States, and Office of Management and Budget (OMB) Circular A-133, "Audits of the Institutions of Higher Education and Other Nonprofit Institutions". These standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement and about whether the organization complied with laws and regulations, noncompliance with which would be material to a major federal program.

In planning and performing the audit for the year ended December 31, 1995, we considered the internal control structure of New Orleans Affordable Homeownership, Inc. in order to determine our auditing procedures for the purpose of expressing our opinion on New Orleans Affordable Homeownership, Inc.'s financial statements and on its compliance with requirements applicable to major programs and to report on the internal control structure in accordance with OMB Circular A-133. This report addresses our consideration of internal control structure policies and procedures relevant to compliance with requirements applicable to federal programs. We have addressed policies and procedures relevant to our audit of the financial statements in a separate report dated March 27, 1997.



The management of New Orleans Affordable Homeownership, Inc. is responsible for establishing and maintaining an internal control structure. In fulfilling this responsibility, estimates and judgments by management are required to assess the expected benefits and related costs of internal control structure policies and procedures. The objectives of an internal control structure are to provide management with reasonable, but not absolute, assurance that assets are safeguarded against loss from unauthorized use or disposition, that transactions are executed in accordance with management's authorization and recorded properly to permit the preparation of financial statements in accordance with generally accepted accounting principles, and that federal awards are managed in compliance with applicable laws and regulations. Because of inherent limitations in any internal control structure, errors, irregularities, or instances of noncompliance may nevertheless occur and not be detected. Also, projection of any evaluation of the structure to future periods is subject to the risk that procedures may become inadequate because of changes in conditions or that the effectiveness of the design and operation of policies and procedures may deteriorate.

For the purpose of this report, we have classified the significant internal control structure policies and procedures used in administering federal award programs in the following categories:

- * Cash
- * Loans
- * Support, receivables, and receipts
- * Expenses for program, supporting services and accounts payable
- * Payroll and related liabilities
- * Property
- * Other liabilities
- * Fund balances
- * Governmental financial assistance programs

GENERAL REQUIREMENTS

SPECIFIC REQUIREMENTS

- | | |
|-----------------------------------|---|
| * Political activity | * Types of services allowed or not allowed |
| * Civil rights | * Eligibility |
| * Financial reports | * Cost allocation |
| * Allowable Costs/Cost principles | * Financial reports and claims for reimbursements |
| * Administrative requirements | |

For all of the internal control structure categories listed above, we obtained an understanding of the design of relevant policies and procedures and determined whether they have been placed in operation, and we assessed control risk.

We performed tests of controls, as required by OMB Circular A-131, to evaluate the effectiveness of the design and operation of internal control structure policies and procedures that we considered relevant to preventing or detecting material non-compliance with specific requirements, general requirements, and requirements governing claims for reimbursements that are applicable to each of the Corporation's major programs, which are identified in the accompanying Schedule of Federal Awards. Our procedures were less in scope than would be necessary to render an opinion on these internal control structure policies and procedures. Accordingly, we do not express such an opinion.

We noted certain matters involving the internal control structure and its operation that we consider to be reportable conditions under standards established by the American Institute of Certified Public Accountants. Reportable conditions involve matters coming to our attention relating to significant deficiencies in the design or operation of the internal control structure that, in our judgement, could adversely affect the Corporation's ability to administer Federal award programs in accordance with applicable laws and regulations.

The reportable conditions noted are as follows:

1. Cash

Findings

A review of cash noted the following:

The cash balances per the December 31, 1995 bank statements exceeded the FDIC insurance limits by approximately \$44,980.

Recommendations

The corporation should have the financial institution pledge securities with the Federal Reserve System to secure balances in excess of the FDIC insurance limits. When the corporation reorders its checks, they should be stale dated.

2. Loans

Findings

A review of December 31, 1995 loan balances noted the following:

1. The corporation does not maintain a written loan policy and procedural manual.

2. The delinquency rate for the loan portfolio totaled 104. Loans totaling \$319,363 are 180 days past due.
3. The corporation does not have a loan committee.

Recommendation

We recommended a loan committee be formulated to address the problems noted above. A formal loan policy and procedures manual should be written, with respect to emphasis placed in collection and disposition of delinquent loans. The loan balances should be reviewed monthly and agreed to the general ledger. By properly maintaining accurate loan balances, the financial statements will be more meaningful. The corporation should accept a policy for non-recognition of interest income on non-performing loans. By adopting a policy not to accrue interest on loans over 90 days past due, the accrued interest reflected on the financial statements will not be overstated.

3. Accounting System

Findings

A review of the accounting system noted the following:

1. Supporting documentation relative to cash receipts and cash disbursements were lacking in some instances.
2. Explanation accompanying the monthly journal entries were inadequate in a number of instances.

Recommendation

All supporting documentation relative to cash receipts and cash disbursements must be maintained to support the entries in the accounting records. Journal entries should be accompanied by full explanation and adequate supporting data. Property inventories should be complete and accurately reflected in the financial statements.

4. Cash Disbursements

Findings

Checks and supporting papers, upon payment, should be marked or cancelled in such a manner as to render them ineffective as a support for further payments.

Recommendations

We recommend the use of a "paid" stamp to be applied to the supporting papers immediately after the signing of the checks issued in payment of the vouchers.

A material weakness is a reportable condition in which the design or operation of one or more of the internal control structure elements does not reduce to a relatively low level that noncompliance with laws and regulations that would be material to a federal program being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions.

Our consideration of the internal control structure policies and procedures used in administering federal awards would not necessarily disclose all matters in the internal control structure that might be reportable conditions and, accordingly, would not necessarily disclose all reportable conditions that are also considered to be material weaknesses as defined above. However, we noted the following matters involving the internal control structure and its operation that we consider to be material weaknesses as defined above. These conditions were considered in determining the nature, timing, and extent of the procedures to be performed in our audit of the financial statements of New Orleans Affordable Homeownership, Inc. for the year ended December 31, 1998, and this report does not affect our report thereon dated March 27, 1999.

The material weaknesses noted are as follows:

5. Grants Receivable

Statement of Condition

The corporation did not maintain a detailed reconciled listing of the grants receivable as of December 31, 1998, although individual grants were listed in the general ledger. The outside accountant had to reconstruct the composition of the grants receivable as of December 31, 1998.

Criteria

The corporation should maintain a reconciled listing of all outstanding receivables.

Effect of condition

The receivables may become uncollectible.

Recommendation

We recommend a listing of all outstanding receivables be reconciled monthly.

This report is intended solely for the information of management, the City of New Orleans, and the Legislative Auditor of the State of Louisiana. However, this report is a matter of public record, and its distribution is not limited.

Robert M. ...

New Orleans, Louisiana
March 13, 1997

PALET, MEUNIER and LeBLANC, L.L.P.

Certified Public Accountants
Management Consultants

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE BASED ON AN AUDIT OF BASIC FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

Board of Directors
New Orleans Affordable Homeownership, Inc.

We have audited the financial statements of New Orleans Affordable Homeownership, Inc. (a non-profit corporation) for the year ended December 31, 1998, and have issued our report thereon dated March 27, 1997.

We conducted our audit in accordance with generally accepted auditing standards and Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform to audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

Compliance with laws, regulations, contracts, and grants applicable to New Orleans Affordable Homeownership, Inc. is the responsibility of New Orleans Affordable Homeownership, Inc.'s management. As part of obtaining reasonable assurance about whether the financial statements are free of material misstatement, we performed tests of New Orleans Affordable Homeownership, Inc.'s compliance provisions of laws, regulations, contracts, and grants. However, the objective of our audit was not to provide an opinion on overall compliance with such provisions. Accordingly, we do not express such an opinion.

Material instances of noncompliance consist of failures to follow requirements, or violations of prohibitions, contained in laws, regulations, contracts, or grants that cause us to conclude that the aggregation of the misstatements resulting from those failures or violations is material to the financial statements. The results of our tests of compliance disclosed the following instance of noncompliance that may be material to the financial statements but for which the ultimate resolution cannot presently be determined. Accordingly, no provision for any liability that may result has been recognized in New Orleans Affordable Homeownership, Inc.'s financial statements.



Audit Requirements

The state of Louisiana requires nonprofit organizations to complete the examination of its financial statements within six months after the year end.

We considered the instance of noncompliance in forming our opinion on whether New Orleans Affordable Homeownership, Inc.'s 1998 financial statements are presented fairly, in all material respects, in conformity with generally accepted accounting principles, and this report does not affect our report dated March 27, 1999, on those financial statements.

This report is intended for the information of management, the City of New Orleans, and the Legislative Auditor of the State of Louisiana. However, this report is a matter of public record, and its distribution is not limited.

New Orleans, Louisiana
March 27, 1997

NEW ORLEANS AFFORDABLE HOUSING, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

STATUS OF PRIOR AUSTF FINDINGS - continued

March 27, 1977

<u>Questioned Costs</u>	<u>Resolved</u>	<u>Unresolved</u>	<u>Refit Finding Number</u>
12. Construction Management Fees.		X	(Litigation Pending)
13. Construction Management Fees.		X	(Litigation Pending)
14. Urban Youth Corps.	X		
15. Eligibility CHOG Program	X		
16. Eligibility HMO Program	X		
17. Urban Youth All Programs		X	(Program discontinued no new records available)

III C: Appearance to Tenants

1. No. of Visits/insp. made with Project	2. No. of Complaints Based upon Project	3. Number of units for which the Rehabilitation or project improvements are visible to surrounding district	4. Project Number assigned by HUD
Year Visited	Year Complaint	Year Rehabilitation	
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

III D: Characteristics of Households Residing in Project After Rehabilitation

Complete one line for each unit in the project. Enter one code only in each blank box. The response codes below their first given to correspond to any key to how the respondent to each household is

Total Number of Units After Rehabilitation
00

Number of Persons in Household	Unit Characteristics			Household Characteristics				
	Apartment	Single-Family	Other	Income of Head of Household	Marital Status of Head of Household	Age of Head of Household	Number of Children in Household	Race of Head of Household
1	0	010	1	1	2	1	1	1
2	0	010	0	0	0	0	0	0
3	0	010	1	1	2	1	1	1
4	0	010	2	2	2	2	2	2
5	0	010	0	0	0	0	0	0
6	0	010	0	0	0	0	0	0
7	0	010	0	0	0	0	0	0
8	0	010	0	0	0	0	0	0
9	0	010	0	0	0	0	0	0
10	0	010	0	0	0	0	0	0
11	0	010	0	0	0	0	0	0
12	0	010	0	0	0	0	0	0
13	0	010	0	0	0	0	0	0
14	0	010	0	0	0	0	0	0
15	0	010	0	0	0	0	0	0
16	0	010	0	0	0	0	0	0
17	0	010	0	0	0	0	0	0
18	0	010	0	0	0	0	0	0
19	0	010	0	0	0	0	0	0
20	0	010	0	0	0	0	0	0
21	0	010	0	0	0	0	0	0
22	0	010	0	0	0	0	0	0
23	0	010	0	0	0	0	0	0
24	0	010	0	0	0	0	0	0
25	0	010	0	0	0	0	0	0
26	0	010	0	0	0	0	0	0
27	0	010	0	0	0	0	0	0
28	0	010	0	0	0	0	0	0
29	0	010	0	0	0	0	0	0
30	0	010	0	0	0	0	0	0
31	0	010	0	0	0	0	0	0
32	0	010	0	0	0	0	0	0
33	0	010	0	0	0	0	0	0
34	0	010	0	0	0	0	0	0
35	0	010	0	0	0	0	0	0
36	0	010	0	0	0	0	0	0
37	0	010	0	0	0	0	0	0
38	0	010	0	0	0	0	0	0
39	0	010	0	0	0	0	0	0
40	0	010	0	0	0	0	0	0
41	0	010	0	0	0	0	0	0
42	0	010	0	0	0	0	0	0
43	0	010	0	0	0	0	0	0
44	0	010	0	0	0	0	0	0
45	0	010	0	0	0	0	0	0
46	0	010	0	0	0	0	0	0
47	0	010	0	0	0	0	0	0
48	0	010	0	0	0	0	0	0
49	0	010	0	0	0	0	0	0
50	0	010	0	0	0	0	0	0

Major Programs: Urban Homeowners Property Acquisition and Demolition and the Urban Youth Corps. In our opinion, the corporation's supporting documentation and proof of eligibility for the programs noted above is necessary for the corporation to comply with the requirements applicable to the above programs.

In our opinion, except for those instances of noncompliance with the requirements applicable to the Major Programs: Ascertained Loan, the Urban Homeowners Property Acquisition and Demolition, and the Urban Youth Corps referred to in the fourth paragraph of this report and identified in the accompanying Schedule of Findings and Questioned Costs, New Orleans Affordable Homeownership, Inc. complied, in all material respects, with the specific requirements referred to in the second paragraph that are applicable to each of its major federal award programs for the year ended December 31, 1998.

This report is intended for the information of management, the City of New Orleans, and the Legislative Auditor of the State of Louisiana. However, this report is a matter of public record, and its distribution is not limited.

Paul M. Mason and *P. Robinson, C.P.A.*

New Orleans, Louisiana
March 27, 1999

PAULET, TRIGUNER and LeBLANC, L.L.P.

Certified Public Accountants
Management Consultants

**INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE
WITH SPECIFIC REQUIREMENTS APPLICABLE TO NONPROFIT
FEDERAL AIDED PROGRAMS TRANSACTIONS**

Board of Directors
New Orleans Affordable Homeownership, Inc.

We have audited the financial statements of New Orleans Affordable Homeownership, Inc. (a non-profit corporation) for the year ended December 31, 1993, and have issued our report thereon dated March 27, 1993.

In connection with our audit of the financial statements of New Orleans Affordable Homeownership, Inc., and with our consideration of the Corporation's control structure used to administer federal programs, as required by Office of Management and Budget Circular A-133, "Audits of Institutions of Higher Education and Other Nonprofit Institutions", we selected certain transactions applicable to the mortgage program for the year ended December 31, 1993.

As required by circular A-133, we have performed auditing procedures to test compliance with the requirements governing types of services allowed or unallowed and eligibility applicable to those transactions. Our procedures were substantially less in scope than an audit, the objective of which is the expression of an opinion on New Orleans Affordable Homeownership, Inc.'s compliance with these requirements. Accordingly, we do not express such an opinion.

Material instances of noncompliance consist of failures to follow the specific requirements referred to in the preceding paragraph that caused us to conclude that the misstatements resulting from these failures are material to New Orleans Affordable Homeownership, Inc.'s 1993 financial statements. The results of our tests of compliance disclosed the material instances of noncompliance that are described in the accompanying Schedule of Findings and Questioned Costs.

The results of our test indicate that, with respect to the items tested, New Orleans Affordable Homeownership, Inc. complied



with those requirements, except as described in the attached schedule. However, the extent of noncompliance noted in our testing indicates that, with respect to nonmajor program transactions not tested by us, there is more than a relatively low risk that New Orleans Affordable Homeownership, Inc. may not have complied with the requirements referred to in the second paragraph. These matters were considered by us in evaluating whether the financial statements are presented fairly in conformity with generally accepted accounting principles.

This report is intended for the information of management, the City of New Orleans, and the Legislative Auditor of the State of Louisiana. However, this report is a matter of public record, and its distribution is not limited.

Patricia A. ...

New Orleans, Louisiana
March 27, 1997

NEW ORLEANS AFFORDABLE HOUSING, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

SCHEDULE OF FINDINGS AND QUESTIONED COSTS

For the period January 1, 1983 through December 31, 1985

QUESTIONED
COSTS

GENERAL REQUIREMENTS

1. Financial Reporting-All
Programs

Statement of Condition:
Financial reports are not
always in agreement with
the general ledger on a
monthly basis. Close-out
reports were submitted at
the exit interviews as evidence
that the year end differences
between the general ledger
and the cost control state-
ments had been resolved.
resolved. In addition, the
reports are not filed
timely.

Criteria:
Financial reports should
be prepared from a complete
and accurate general ledger,
and filed with the grantor
by the 15th working day of
the following month.

Effect of Condition:
Costs reported to the
grantor may be over/under
stated. The grantor
assessed the corporation
\$1,476 in penalties for
for late filing of
financial reports.

NEW ORLEANS AFFORDABLE HOUSING, INC.
(Formerly Urban Renewal's Corporation of New Orleans)

SCHEDULE OF FINDINGS AND QUESTIONED COSTS - Continued

For the period January 1, 1968 through December 31, 1968

QUESTIONED
COSTS

Population and sample size:	Number of <u>Reports</u>
Financial reports filed	12
Sample	12
Reports not in agreement with general ledger	2

2. Allowable Costs/Costs
Allocation

Statement of Condition:
Accounting costs allocated
to programs where there
were no program costs. The
only costs charged to these
programs since inception has
been accounting costs.

Criteria:
The costs must be necessary
and reasonable for the per-
formance of the program.

Effect of Condition:
Unable to determine the cost
that should be attached to
accounting services for an
inactive program. Accounting
services are necessary to
maintain the fiscal monitor-
ing requirement. The cost
associated with this process
when there is no other pro-
gram activity is questioned
as to its reasonableness.

NEW ORLEANS AFFORDABLE HOUSING, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

SCHEDULE OF FINDINGS AND QUESTIONED COSTS - Continued

For the period January 1, 1995 through December 31, 1995

QUESTIONED
____ COSTS ____

Questioned Costs:

Accounting costs charged to
the following inactive
programs:
Urban Homeowners Corporation,
Property, Acquisition and
Demolition
NHF Stage 1 Watch
The Mayors Team
NHF Emergency Home Repair

5,981
1,400
2,975
600

Cause of Condition:

Accounting costs allocated
to inactive programs.

Recommendation:

The allocation of costs should
be reviewed to assure that ac-
counting costs are reasonable
relative to whatever program
benefit is received.

3. Consolidation of Funds

Statement of Condition:

The funding for the Urban
Homeowners Property Acquisi-
tion and Demolition program
in 1995 consists of three
funds. The costs of the
program are not maintained
by fund. Although separate
bank accounts are not main-
tained for all funds they
are maintained for some.

NEW ORLEANS AFFORDABLE HOUSINGSHIP, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

SCHEDULE OF FINDINGS AND QUESTIONED COSTS - Continued

For the period January 1, 1993 through December 31, 1995

QUESTIONED
COSTS

Criteria:

Program costs should be identified by fund, and separate bank accounts should be maintained for each grant.

Effect of Condition:

Corporation not in compliance with grant conditions.

Cause of Condition:

Costs not identified by grant/fund for the Urban Homeowner Property Acquisition and Demolition Program. In addition, separate bank accounts should be maintained for each grant.

Recommendation:

The general ledger should identify costs by grant/fund. In addition, separate bank accounts should be maintained for each grant.

SPECIFIC REQUIREMENTS

Amortized Loan Program

4. Eligibility

Cause of Condition:

The proof of income, insurance coverage and

NEW ORLEANS AFFORDABLE HOUSINGSHIP, INC.
(Formerly Urban Renewal's Corporation of New Orleans)

SCHEDULE OF FINDINGS AND QUESTIONED COSTS - Continued

For the period January 1, 1988 through December 31, 1988

QUESTIONED
COSTS

promissory note for the 1985 amortized loan program relative to the rental rehabilitation loans were inadequate. One loan file was missing at the time of review.

Criteria:

The tenants must maintain adequate insurance and be at below or moderate income.

Effect of Condition:

The corporation is not in compliance with Federal requirements relative to rental rehabilitation loans.

questioned costs:

Population and sample size:

	Number of loans	Dollars	
Population	87	\$1,818,381	
Sample	8	\$ 308,181	
Not in compliance	4	\$ 138,218	
Questioned Costs:			138,218

Cause of Condition:

The corporation failed to maintain tenant's proof of income, obtain insurance and a promissory note.

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

SCHEDULE OF FINDINGS AND QUESTIONED COSTS - Continued

For the period January 1, 1995 through December 31, 1995

QUESTIONED
COSTS

Recommendation:
Obtain tenant's proof of
income, insurance and sign-
ed promissory note relative
to rental rehabilitation
loan.

Total questioned costs

\$ 100,000

PAILET, MEUNIER and LeBLANC, L.L.P.

Chartered Public Accountants
Management Consultants

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH THE GENERAL REQUIREMENTS APPLICABLE TO FEDERAL AWARD PROGRAMS

Board of Directors
New Orleans Affordable Homeownership, Inc.

We have audited the financial statements of New Orleans Affordable Homeownership, Inc. (a non-profit corporation) for the year ended December 31, 1995, and have issued our report thereon dated March 27, 1997.

We have applied procedures to test New Orleans Affordable Homeownership, Inc.'s compliance with the following requirements applicable to its federal programs, which are identified in the accompanying schedule of Federal Awards, for the year ended December 31, 1995.

The general requirements are as follows:

- Political activity
- Civil rights
- Allowable Costs/Cost Principles
- Administrative requirements

Our procedures were limited to the applicable procedures described in the office of Management and Budget's "Compliance Supplement of Audits of Educational Institutions and Other Nonprofit Institutions". Our procedures were substantially less in scope than an audit, the objective of which is the expression of an opinion on New Orleans Affordable Homeownership, Inc.'s compliance with the requirements listed in the preceding paragraph. Accordingly, we do not express such an opinion.

Material instances of noncompliance consist of failures to follow the general requirements that caused us to conclude that the misstatements resulting from these failures are material to the financial statements. The results of our tests of compliance disclosed the material instances of noncompliance that are described in the accompanying Schedule of Findings and Questioned Costs.





11/11/78

 NATIONAL FLOOD INSURANCE PROGRAM
 ROCKVILLE MD 21847-6400

152007

 PREFERRED RISK POLICY
 RENEWAL

POSTAL CODE _____ ISSUE DATE 11/11/78 _____ ENSURED _____

 URBAN HOMEOWNERS COMP OF NEW
 ORLEANS
 P O BOX 20011
 C/O NEW ORLEANS HOME BLDG AUTH
 NEW ORLEANS LA 70118

 EVELYN PAGE WALKER
 8901 BUSH STREET
 NEW ORLEANS LA 70118

 RELATIVES _____
OTHER

 RECEIVED _____
DATE

EXPIRES 12/10/81

 THESE DECLARATIONS ARE EFFECTIVE 12/10/78 10 P.M. STANDARD TIME AT THE PRESCRIBED LOCATION
 GOVERNED BY THE POLICY LOCATED AT THE ABOVE MAILING ADDRESS UNLESS OTHERWISE SPECIFIED HEREIN.

BASIC INFORMATION

CONTINUED DATE	01/01/78	COMMUNITY NAME	NEW ORLEANS/ORLEANS PARISH
BUILDING DESCRIPTION	SINGLE FAMILY	COMMUNITY NUMBER	0000001000
NO. OF FLOORS	ONE	INSURANCE TYPE	REGULAR
BUILDING DESCRIPTION	NONE	CONDO TYPE	NOT A CONDO
CONTINUED LOCATION	LOWEST FLOOR ONLY		

 LOWEST FLOOR ELEVATION N/A BASE FLOOR ELEVATION FLR FINISH ELEVATION SOA

LIMITS OF PROPERTY	BUILDING CONTENTS	\$20,000 \$5,000	DEDUCTIBLE AMOUNTS	BUILDING CONTENTS	\$500 \$500
-----------------------	----------------------	---------------------	-----------------------	----------------------	----------------

RATES AND AMOUNT OF DEDUCTIBLES APPLICABLE FOR BUILDING AND CONTENTS

	BUILDING			CONTENT			DEDUCTIBLE PERCENT	TOTAL PREMIUM
	AMT. OF INS.	RATE	PREMIUM	AMT. OF INS.	RATE	PREMIUM		
BUILDING	20,000	---	---					
CONTENTS	5,000	---	---					

 AGENT LEAN NO. 000001
 AUGUST SHIELDS INS LTD
 C/O BUREAU INSURANCE
 801 GRAYSON ST STE 1700
 NEW ORLEANS LA 70112

PREMIUM SUBTOTAL	
DEDUCTIBLE	
C/O DEDUCTIBLE	
NATIONAL FLOOD INSURANCE	
FEDERAL POLICY FEE	
TOTAL PREMIUM	4118.00

AGENCY NO.	INSURANCE NO.	AGENCY PREFIX	FORM	ISSUE DATE
0000000004		10000 000-1010	INDUR0	

152,000

CONTINUATION
DECLARATION

INSURED: THE TRAVELERS INDEMNITY COMPANY
OF ILLINOIS
Homeowners Policy
Special Form

MOBILE: Page 3 of 6
Location 3 of 3

400-PM

AGENT / POLICY NUMBER
07400 71820001 000 1

URBAN HOMEOWNERS CORP OF N O
C/O N O HOME MFG AUTHORITY
PO BOX 58519
NEW ORLEANS LA 70110

NAME OF INSURED AND MAILING ADDRESS EVELYN PAUL WALKER
8021 BIRCH STREET NEW ORLEANS LA 70110

The policy period is 12 months from April 17, 1996 to April 17, 1997.

The RESIDENCE PREMISES is located at 8021 BIRCH STREET
NEW ORLEANS LA 70110

COVERAGES	LIMITS OF LIABILITY	PREMIUMS
A-DWELLING	\$ 75,000	\$ 487
B-OTHER STRUCTURES	SEE POLICY	INCLUDED
C-PERSONAL PROPERTY	\$ 20,000	INCLUDED
D-LOSS OF USE	\$ 14,000	INCLUDED
E-PERSONAL LIABILITY	\$ 100,000	INCLUDED
F-MEDICAL PAYMENTS	\$ 2,000	INCLUDED
		TOTAL POLICY PREMIUM
		\$ 487
		Reactivation Credit
		Applied

Special numbers (and premiums) of endorsements forming a part of this policy
2017-0010

Insurable For Loss Caused By: FIRE OR THEFT \$ 250
THEFT \$ 250
ALL OTHER PERILS INSURED AGAINST \$ 250

FIRST MORTGAGE: LOAN NUMBER: 7500007
URBAN HOMEOWNERS CORP OF N O C/O N O HOME MFG AUTHORITY
PO BOX 58519 NEW ORLEANS LA 70110

Alarm System Credit Applies

Coverage for your home has been increased by 5.28% to more adequately reflect the risk to rebuild your home. This adjustment was based on information provided by Marshall & Swift, an independent firm specializing in construction and consumer costs. If you need to adjust your limits further, or for any other policy changes, please contact your Travelers representative.

These Declarations continue your insurance for another policy period. They replace any previous Declarations as of the effective date shown for the new policy period.

AGENT: AUGUST BRIDGES INS LTD

Allstate
You're in good hands.

ATTN: Debra

JAMES F WILLIAMS
PCA AGENT
4949 BALLARD AVE
SUITE 120
NEW ORLEANS, LA 70122
(504)241-3000

October 24, 1998

MR (S) J PALGER
3022 PALGER CT
NEW ORLEANS, LA 70122-3839

Re: Hazard Insurance Bill
Policy: 0000000000
Insured: BILLY J PALGER
Last: J00000

To Whom It May Concern:

This is a bill for Hazard Insurance, effective 11 02 98 to 11 02 00.
Please forward \$790.00, to the below listed address:

ALLSTATE INSURANCE CO.
ATTN: JAMES WILLIAMS
4949 BALLARD AVE, SU 120
NEW ORLEANS, LA 70122

Please remit copy of bill with payment.

Sincerely,

:sbs/11



24 Hour a Day Service

REVISED BY ENDORSEMENT 05-06-76

**POLICY DECLARATION
 REVISION**

POLICY TERMS & EFFECTIVE DATES
 05-28-76 TO 05-28-78

POLICY NUMBER
 HL 4-44-51700-4

PREMIUM PAYER
 FIRST MORTGAGEE

LENDER NAME AND ADDRESS
 NEW ORLEANS HOME MFG BLDG

INSURED NAME AND ADDRESS
 THOMAS A SPERTY
 1430-17 W BOCKWINE RD
 NEW ORLEANS LA 70119

ALL SERVICES BY
 NEW ORLEANS LA 70119-1004

LOSS NUMBER: 052000

TELEPHONE 1584 947-8400

PROPERTY DESCRIPTION
 BUILDING

CONTENTS
 HOUSEHOLD CONTENTS LOCATED
 ON SECOND FLOOR AND ABOVE

DEPT LEVEL WITH HO BASEMENT
 1 2 - 4 FAMILY RESIDENCE

NON DETACHED BUILDING

COMMUNITY LOCATION
 NEW ORLEANS-ORLEANS PARISH

COMMUNITY NUMBER CLASS PERCENT
 22 500 0 3 85

BATING INFORMATION- REGULAR PROGRAM

FIN EYE	COST EYE	LOW EYE	BASE EYE	EYE DIFF
42	FRIBR 00	12-01-76		

BUILDING REPLACEMENT COST \$50,000 X MINIMUM DEDUCTIBLE AS OF 10-70

BUILDING AND CONTENTS COVERAGE AND BATING COVERAGE	BEARABLE	TOTAL PREMIUM
BUILDING \$50,000	\$ 1700	4300.00
CONTENTS \$10,000	\$ 1700	314.00
	DEDUCTIBLE DISCOUNT -	500.00
	COMMUNITY DISCOUNT -	310.00
	COVERAGE ADJUSTER	647.00
	TOTAL PREMIUM	4061.00

RATES 15 - 88.00/00.00
 0 - 88.00/00.00

FEDERAL POLICY SERVICE FEE: 300.00
 TOTAL ONE YEAR PREMIUM PAID: 4361.00

INSURED PROPERTY ADDRESS
 1430-17 W BOCKWINE RD
 NEW ORLEANS LA 70119

PREMIUM ADJUSTMENT (PROVISIONS)
 PROVISIONS PAID PREMIUM: 465.00
 TOTAL ADJUSTED PREMIUM: 4826.00

AGENT NAME AND ADDRESS

ENCLOSURE, JOYCELYN
 4700 BELLEME, A-8120
 ALLSTATE INSURANCE COMPANY
 NEW ORLEANS LA 70122 3176
 TELEPHONE 1584 241-5300

ALLSTATE INSURANCE COMPANY

152001

HOMEOWNERS DECLARATIONS
PREMIUM STATEMENT

NEW PREMIUM PERIOD

Policy Number: 0 45 86358 08/01

FROM AGG 7. 1976 12 01 A.M.
TO AGG 7. 1977 STANDARD TIME

Policy Issued to:

233 819223
NEW ORLEANS HOME MORTGAGE
AUTHORITY
425 BARONNE ST
NEW ORLEANS LA 70119-1004

TOTAL PREMIUM FOR THE PREMIUM PERIOD STATED IS + 178.00

RECEIVED JUL 0 1 1977

Policy Issued to:

ESTELLA MOORE
1407 E 17TH PICTY ST
NEW ORLEANS LA 70137

AGENT- JACELYN M. BRUGGARD
PHONE- 584 241-5553

EX-1 BY 026 883 174086 5 70 8 000000 1 7 96 230
000000 00

APPROVED

DO NOT PAY
INSURED HAS BEEN KILLED

ALLSTATE INSURANCE COMPANY
BOLIVATIONS

The above description and the (1) indicate that this is a
non-transferable document and is not to be used as a receipt.

ISSUED ON-24-76

ISSUED ON AUG 24 1976

EXPIRES ON AUG 24 1977

ESTELLA MORRE

12 BL A.R. STARRARD TIRE

3422 S 14TH FERRY ST
NEW ORLEANS LA 70137

BWELLING IS OF FRAME
BY 2 FAMILIES

CONSTRUCTED AND OCCUPIED

Name and
address
of First
Mortgagee

NEW ORLEANS HOME MORTGAGE
AUTHORITY
118 BARBONE ST
NEW ORLEANS LA 70139

The following coverages and limits of liability apply as stated below. If the word "amounted" followed by a
date appears above, the insurance applies only from that date.

POLICY COVERAGES AND LIMITS OF LIABILITY		
A DWELLING PROTECTION - NO REPLACEMENT GUARANTEE		40,000
B OTHER STRUCTURES PROTECTION		1,000
C PERSONAL PROPERTY PROTECTION-ACTUAL CASH VALUE		25,000
D ADDITIONAL LIVING EXPENSE	UP TO 12 MONTHS	
E FAMILY LIABILITY	EACH OCCURRENCE	100,000
F GUEST MEDICAL PAYMENTS	EACH PERSON	1,000
	EACH OCCURRENCE	25,000
G LOSS ASSESSMENTS	EACH OCCURRENCE	1,000

LOSS REDUCTIONS APPLICABLE
B250 ALL PERIL REDUCTIBLE APPLIES TO COVERAGES A-B & C
B250 ALL PERIL REDUCTIBLE APPLIES TO COVERAGE G

SUBJECT TO THE FOLLOWING FORMS AND ENDORSEMENTS
AP1 STANDARD HOMEOWNERS POLICY
APLE LOUISIANA AUTOMATIC ENDORSEMENT
B250-2 STANDARD FIRE PROVISIONS

COUNTERSIGNED BY
AUTHORIZED AGENT - JOCELYN M. BRUNARD

POLICY DECLARATIONS
ORIGINALPOLICY TERM / EFFECTIVE 12100 AM
12/14/74 TO 12/31/74POLICY NUMBER
AL 4-83-104223-1PREMIUM PAYOR
FIRST MORTGAGELOANER NAME AND ADDRESS
NEW ORLEANS HOME HRS AUTO
418 SHAWNEE ST
NEW ORLEANS LA 70113-1044INSURED NAME AND ADDRESS
LOUISE BARNES
2427 PRINCE ST
NEW ORLEANS LA 70119-4047LOAN NUMBER: 743003PROPERTY DESCRIPTION
BUILDINGS
TWO FLOORS WITH BR BRICKWORK
& CONCRETE FLOOR RESIDENCECONTENTS
HOUSEHOLD CONTENTS LOCATED
ON FIRST FLOOR AND ABOVE

NEW DELETED BUILDING

COMMUNITY LOCATION
NEW ORLEANS-ORLEANS PARISHCOMMUNITY NUMBER CLASS PERCENT
02 5025 1 9 45

RATING INFORMATION: REGULAR PROGRAM

PERM DTE	CHGT DTE	LOW ELY	BASE ELY	ELY DIFF
AS	PROR TO 12/31/74			

BUILDING REPLACEMENT COST \$4,000

BUILDING AND CONTENTS COVERAGE	DEDUCTIBLE	TOTAL PREMIUM
BUILDING	\$1,000	\$100.00
CONTENT	\$1,000	\$21.00
RATE 18 - 08.00/00.00		
2 - 08.00/00.00		
	SEVERAL SUBTOTAL:	\$121.00
	DEDUCTIBLE DISCOUNT:	\$0.00
	COMMUNITY DISCOUNT:	\$0.00
	EXPENSE CONSTANT:	\$45.00
	TOTAL WRITTEN PREMIUM:	\$166.00
	FEDERAL POLICY SERVICE FEE:	\$18.00
	TOTAL PREMIUM PAID:	\$184.00

INSURED PROPERTY ADDRESS
2427 PRINCE ST
NEW ORLEANS LA 70119-4147

AGENT NAME AND ADDRESS

WENSON T. LLOYD
1000 W. 15TH STREET
ALLSTATE INSURANCE COMPANY
ORLEANS LA 70119
ORLEANS LA 70119
TELEPHONE (504) 541-1403

THESE DECLARATIONS ARE AS OF DECEMBER 17, 1974

Allstate

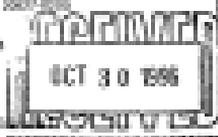
Flood Insurance Program

PO Box 54295, New Orleans, LA 70057-2929

Policy Number: 8-0481-15480-A
Last Number: 154810-A

Insured Property Location:

6117 WOODLAWN ST
NEW ORLEANS LA 70115



Flood Insurance Enrollment Notice

Standard Policy

IMPORTANT: Your Flood Insurance Policy will provide up to \$100,000 of coverage for your property. However, the maximum amount of coverage for the policy will be the lesser of \$100,000 or the actual cash value of the property.

Insured's Name and Mailing Address:

LIVEDIK BARRIS
6117 WOODLAWN ST
NEW ORLEANS LA 70115-4447

Amount of Insurance Coverage Under Existing Policy:

Building:	\$	11,000	Contents:	\$	2,700
Detached:	\$	1,000	Personal:	\$	1,000

You may choose to insure your policy for a one-year term or for a three-year term. The three-year term offers special savings on the premium due. In addition, you may choose an inflation rider which allows you to insure a higher amount of insurance to keep pace with the continuously increasing value of your property.

	Coverage Options		Total Premium Due	
	Building	Contents	One Year Term	Three Year Term
Current Coverage	\$1,000	\$,700	\$ 151.00	\$ 151.00
Inflation Option	\$1,000	\$,800	\$ 158.00	\$ 158.00
Maximum Insured	\$10,000	\$20,000		

Premium includes a Federal Policy Service Fee.

Premium reflects all discounts for automatic flood insurance.

Please note, the amount of insurance offered in this notice may not be sufficient to fully insure the value of your property. The maximum insurable available is listed above. Varying the amount of insurance may provide replacement cost coverage in the event of a flood loss (see item 3 on the reverse side). Please contact your agent or you wish to inquire about your eligibility to purchase additional insurance protection or if you have any questions.

Agent/Insurer's Name and Mailing Address:

JEFFREY T. LAMM
1000 and 10th street
ALLSTATE Insurance Company
601 Two LA 70005

TELE 504-241-1345

Policy's Name and Mailing Address:

NEW ORLEANS HOME POLY 6010

6117 WOODLAWN ST
NEW ORLEANS LA 70115-1000

Please contact your agent if any information in this notice is incorrect.

00000000000000000000

7520012

ALLSTATE INSURANCE COMPANY

HOMEOWNERS DECLARATIONS
PREMIUM STATEMENT

NEW PREMIUM PERIOD

Policy
Number

D 45 563540 07/30

FROM JUL 30 - 1996 12 01 A.M.
TO JUL 30 - 1997 STANDARD
TIME

Policy
Address

888 819888
SPRAN HB CORP OF NEW ORLEANS C/O
NEW ORLEANS HOME HTG AUTH
P O BOX 52517
NEW ORLEANS LA 70152-0517

TOTAL PREMIUM FOR THE PREMIUM PERIOD STATED IS \$ 494.00

IN PROTECTIVE DEVICE DISCOUNT APPLIED - HOMEOWNERS PREMIUM.

Policy
Issued to

MILLIE & JOHNNIE PARKER
4047-45 ST FERMINAND
NEW ORLEANS LA 70126

LOAN NO.
7520018

AGENT - JACELYN M. BROUSSARD
PHONE - 504 241-5553

CR-1 17 DOB 553 074076 5 70 X 0501400 1 9 37 1152
000000 00

00000000

PLEASE NOTE THIS IS NOT A REQUEST FOR PAYMENT.
YOUR BILL WILL BE MAILED SEPARATELY.

Part C: Assistance to Tenants

1. No. of Units Now Leased with Project		2. No. of Subsidized Units with Project		3. Number of Units Now Leased with Project Available to Assist Tenants (Subsidized Units Less Not Permanently Allocated)		4. Applicant Number (Assigned by HUD)	
Total Number	Number of Units with income above \$10,000 a year	Total Available	Number of Units with income above \$10,000 a year			6 7 8 9 0 1 2 3 4 5	
0	0	0	0	10			

Part D: Characteristics of Households Resulting in Project After Penetration

Complete one line for each unit in one project. Enter one value only in each item.
 Note: The apartment used below does not have to correspond in any way to the unit assigned to each household.

Number of Bedrooms	Age of Occupant	Monthly Rent (including income tax) (dollars)	Number of Persons in Household	Household Characteristics				
				Income Source of Head of Household	Household Type	Size of Household	Parent Status of Household	Special Assistance
1-2	18-24	\$0-\$100	1-2	1-2	1-2	1-2	1-2	1-2
1	1	323	1	1	2	2	1	1
2	1	323	2	1	2	2	2	5
3	1	323	2	1	2	2	1	5
2	1	323	2	9	2	2	1	5
3	1	323	2	2	2	2	1	9
2	1	323	2	1	2	2	1	5
2	1	323	2	2	2	2	2	5
2	1	323	2	2	2	4	1	5
2	1	323	1	1	2	2	1	1
2	1	323	1	1	2	4	1	1
2	1	320	2	1	2	1	5	5
2	5	320	2	1	2	2	1	5
2	1	323	2	1	2	2	1	1
3	1	323	2	1	2	2	1	5
2	1	323	1	1	2	2	2	1
2	1	323	1	1	2	2	1	1
2	1	323	2	2	2	2	2	5
2	1	323	2	1	2	2	1	5
2	1	323	2	1	2	2	1	5
2	1	323	2	2	2	2	2	5

7520003

Allstate
 Surety Insurance Company

Printed by agent
 07/28/01 08:00 AM

07/28/01

Display Option : : : : : none
 View : : : : : ALL

Insured: **OLENE LEWIS M/V/S RENT COMPANY** Est No: 0000000000 01/01
 Address: **300 PACIFIC AVE** City: **NEW ORLEANS** State: **LA**
 Name: **J. Lee J. J. - 1420** License: **NO124 - 1200** Exp: **NO** Agent: **NO** Policy

Class : **0401000** "EMPLOYMENT SUMMARY"
 Status : **ACTIVE** "OFFERED"

Policy No:	1015-00+	EXP-STARTS	02/01/01	010-00+	Exp. Plan:	NO PLAN
AMP :	1425.00+	LAPSE CHARGE	01/01/01	010-00+	Exp. Plan:	NO PLAN
Balance:	00.00+	RENEWAL FEE	01/01/01	1425.00+	Exp. Plan:	NO PLAN
Int. Bill:	00.00+	RENEWAL FEE	01/01/01	1425.00+	Exp. Plan:	NO PLAN
Exp. Date:	08-00-01	RENEWAL FEE	01/01/01	1425.00+	Exp. Plan:	NO PLAN
Exp. No.:		RENEWAL FEE	01/01/01	1425.00+	Exp. Plan:	NO PLAN

Pol Type: **STANDARD BONDING - BONDING**
 COVERAGE

GENERAL LIABILITY	10,000	1,000	1,000
COMMERCE	1,000	1,000	1,000
EXCESS LIABILITY AND OTHERS	10,000	1,000	1,000

ENTERED CONTINUE () (F1) BILL (F2) EDIT (F3) BACK SCREEN (F4) VIEW BILL (F5) PRINT

DWELLING 77 POLICY

POSTAGE BILL

ISSUE DATE 05/17/1988	REPLACEMENT OF 001	33464148	DECLARATION PERIODAL EXTENSION
NAME OF INSURED & MAILING ADDRESS		AGENCY & CODE ST-0044	
WILSON ADRIET		EAGLE INSURANCE AGENT INC	
3418 MAGNET STREET		P O BOX 8190	
NEW ORLEANS LA 70117		MONROE LA 70001	
POLICY PERIOD 05/17/1988	THRU 06/13/1988	NO 86713/1887	12 MONTHS
APPL TO REPOSSESSION, RENEWAL, RENEWAL, RENEWAL			

We will provide the insurance described in this policy in return for the premium and consideration with all conditions, exclusions, and limitations of coverage and coverages, and will reserve the right to cancel this insurance at any time for any reason. This policy is subject to the terms, conditions, coverages, rates and forms that are attached to this policy and are available to the insured upon request. This policy will expire, after appropriate notice and under no case. The Declaration Form is subject to any conditions and restrictions any processing Declaration Form for this policy period.

This policy is subject to the General Conditions, Exclusions, and Limitations of Liability in Section 1 and the Schedule attached to this policy. This policy is a contract of insurance. Refer to the schedule form for complete details. Other conditions apply and under applicable.

PREMIUM	PERIOD INSURED ADRIET
\$1.00 FIRE & LIGHTNING	
12.00 EXTENDED COVERAGE	
75.00 COMP PERSONAL LIABILITY (XPI)	

AMOUNT OF LIABILITY	COVERAGES AND EXTENDED COVERAGES	AGENCY & CODE	DECLARATION PERIOD
20,000	3418 MAGNET ST NEW ORLEANS LA 70117, PERMANENT, COVER, 1 FAMIL, 1 STORE, FRAME.		

POSTMASTER:
 EAGLE H O CORP OF S O C/O H O MORE RTO ESTABLISH
 P O BOX 82119
 NEW ORLEANS LA 70150-0219
 LOANS TRUST

POSTOFFICE:
 MELLOW FINANCIAL SERVICES CORP ST
 174 GREENMAN ST SUITE 2000
 DENVER CO 80202-4398
 LOANS 8000940050

DEDUCTIBLE \$ 500 ALL PERILS
 If a covered loss occurs under coverages A, B, or C, we will pay only the part of the loss over the deductible stated. The deductible amount increases in the amount of loss to each declared location.

ELDP0310788	ELD240081081	ELT024102851	DWS-1101933	DW000000101001
DW000000101933	EL78009400511			

TOTAL PREMIUM \$ 288.00 LESS 25.00 MERIT CREDIT TOTAL \$ 263.00

LEHAPATITE INSURANCE COMPANY
P.O. BOX 51248
NEW ORLEANS LA 70113-2128

001 7088020
51-0044

LEHAPATITE INSURANCE COMPANY
A STOCK INSURANCE COMPANY
2024 CANAL STREET
NEW ORLEANS LOUISIANA 70119-6418
PHONE: 584-822-2222

LEHAPATITE INSURANCE COMPANY
1510018
P O BOX 50019
NEW ORLEANS LA 70150-0019

INCLUDED IN YOUR SWELLING FIRE
POLICY. YOU WILL RECEIVE YOUR
BILLING, IF ANY, SEPARATELY.

SWELLING FIRE



PERSONAL LINES POLICY

7520019

**HOMEOWNERS POLICY
NEW DECLARATIONS**
**THE AUTOMOBILE INSURANCE COMPANY OF
HARTFORD, CONNECTICUT 06183
INSURANCE COUNSELORS, INC.**

180

**THIS DECLARATION PAGE, WITH POLICY PROVISIONS FORM
HO-3 (04-93) COMPLETES THIS POLICY.**

POLICY

NO.

1

1. NAMED INSURED AND ADDRESS		DOROTHY L. WASHINGTON 3145 MILAN STREET NEW ORLEANS LA 70130		POLICY NUMBER 200 SH 3700000		POLICY PERIOD From 01-01-98 To 01-01-99 1201 A.M. STANDARD TIME AT THE RESIDENCE PREMISES	
The residence premises covered by this policy is located at the above address unless otherwise stated: No., Street, Apartment City or Town, State, Zip Code							
3. COVERAGE AND LIMITS OF LIABILITY Coverage is provided where a limit of liability is shown.		S E C U R I T Y	A DWELLING \$ 50000	S. FLUO. TYPEN PREMIUM CHARGES		Basic Policy \$ 430.00	
B OTHER STRUCTURES \$ 5010			Other \$ 1.00		\$ 431.00		
C PERSONAL PROPERTY \$ 25010			Schedule Item		TOTAL PREMIUM \$ 431.00		
D LOSS OF USE \$ 15000			COINSURANCE \$.00		CREDITS 12% SECURITY PT		
E PERSONAL LIABILITY (BODILY INJURY AND PROPERTY DAMAGE) EACH OCCURRENCE \$ 30000			THIS IS NOT A BILL. MORTGAGEE WILL RECEIVE A SEPARATE STATEMENT REGARDING THIS TRANSACTION.				
F MEDICAL PAYMENTS TO OTHERS - EACH PERSON \$ 2500							
4. ENFORCEMENTS		S001 LA 01-90 HO-316 (04-91) HA-308 LA 01-90					
6. DEDUCTIBLE - SECTION 1 <small>In case of loss under Section 1 only that part of the loss over the stated deductible is covered.</small>		\$000 DEDUCTIBLE		8. SPECIAL STATE PROVISIONS			
7. SECTION 2 - OTHER INSURED LOCATIONS (No., Street, Apt., Town or City, State, Zip Code)							
9. MORTGAGEE(S) (Name & Address)		LEGAL HOMEOWNERS MORTGAGE P O BOX 50518 NEW ORLEANS LA 70130 LOAN NO. 7020018		10. RATINGS INFORMATION ONLY Dwelling Occupied By 1 FAMILY Construction PRAC Pool APPROVED Territory 30 Protection Class 3 W1 1010 Premium Group Not More Than 50% Paid from Hybrid 30% Paid from Fee Dept.			
11. EXCEPTIONS, IF ANY, TO A, B, C, D OR E (See Handbook Code for Explanation of A-E)							



PAULET, MEUNIER and LeBLANC, LLP

Certified Public Accountants
Management Consultants

**INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL
STRUCTURE BASED ON AN AUDIT OF BASIC FINANCIAL
STATEMENTS PERFORMED IN ACCORDANCE WITH
GOVERNMENT AUDITING STANDARDS**

Board of Directors
New Orleans Affordable Homeownership, Inc.

We have audited the financial statements of New Orleans Affordable Homeownership, Inc. (a non-profit corporation) as of December 31, 1998 and for the year ended December 31, 1998, and have issued our report thereon dated March 27, 1999.

We conducted our audit in accordance with generally accepted auditing standards. Government Auditing Standards, issued by the Comptroller General of the United States. These standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

The management of New Orleans Affordable Homeownership, Inc. is responsible for establishing and maintaining an internal control structure. In fulfilling this responsibility, estimates and judgments by management are required to assess the expected benefits and related costs of internal control structure policies and procedures. The objectives of an internal control structure are to provide management with reasonable, but not absolute, assurance that the assets are safeguarded against loss from unauthorized use or disposition, and that transactions are executed in accordance with management's authorization and recorded properly to permit the preparation of financial statements in accordance with generally accepted accounting principles. Because of inherent limitations in any internal control structure, errors, irregularities, or instances of noncompliance may nevertheless occur and not be detected. Also, projection of any evaluation of the structure to future periods is subject to the risk that procedures may become inadequate because of changes in conditions or that the effectiveness of the design and operation of policies and procedures may deteriorate.

In planning and performing our audit of the financial statements of New Orleans Affordable Homeownership, Inc. for the



NEW ORLEANS AFFORDABLE HOME OWNERSHIP, INC.
(Formerly Urban Homeowner's Corporation of New Orleans)

SCHEDULE OF FEDERAL AWARDS

For the period January 1, 1978 through December 31, 1978

PROGRAM TITLE	FEDERAL CFDA NUMBER	COMMITMENT
Major Program		
U. S. Department of Housing and Urban Development		
Passed through the City of New Orleans		
community development block grant Program Entitlement Grants		
Assisted Loan Programs*	14.318	
Mayor's Rainbow Paint Program	14.318	24,710
Project Nu-coat	14.318	227,679
Urban Homeowner's Corporation		
Property Acquisition and Demolition	14.318	7,379
Urban Homeowner's Program	14.318	44,895
U.N.H.M. Public Facility and Acquisition	14.318	196,949
Other federal awards		
U. S. Department of Housing and Development Passed through the City of New Orleans		
Total Federal Awards		<u>\$ 501,612</u>

* New Orleans Affordable Homeownership, Inc. serves as the fiscal agent for the Assisted Loan Program.

PALET, MEUNIER and LeBLANC, L.L.P.

Certified Public Accountants
Management Consultants

**INDEPENDENT AUDITOR'S REPORT ON
SCHEDULE OF FEDERAL AWARDS**

Board of Directors
New Orleans Affordable Homeownership, Inc.

We have audited the financial statements of New Orleans Affordable Homeownership, Inc. (a non-profit corporation) for the year ended December 31, 1998, and have our report thereon dated March 27, 1999. These financial statements are the responsibility of New Orleans Affordable Homeownership, Inc.'s management. Our responsibility is to express an opinion of these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards, Government Auditing Standards issued by the Comptroller General of the United States, and the provisions of Office of Management and Budget (OMB) Circular A-233, "Audits of Institutions of Higher Education and Other Nonprofit Institutions". Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides basis for our opinion.

Our audit was made for the purpose of forming an opinion on the basic financial statements of the New Orleans Affordable Homeownership, Inc. taken as a whole. The accompanying Schedule of Federal Awards is presented for purposes of additional analysis and is not a required part of the basic financial statements. The information in that schedule has been subjected to the auditing procedures applied in the audit of the basic financial statements taken as a whole.


New Orleans, Louisiana
March 27, 1999

800 N. Causeway Blvd., Suite 700 • Metairie, LA 70002
Telephone (504) 835-0770 • Fax (504) 835-1700

✦ 501 St. Charles Ave., Suite 2600 • New Orleans, LA 70002
Telephone (504) 412-0000 • Fax (504) 497-1700



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International Group of Accounting Firms • Member Firm in Principal Cities

ICCPA SEC Practice Section • AICPA Public Companies Practice Section

NEW DELHI AFFORDABLE HOUSING LIMITED, INC.
(Formerly Union Investment's Corporation of New Orleans)

STATEMENT OF REVENUES, EXPENSES AND CHANGES IN FUND BALANCE-SCHEDULES BY FUND - Continued

For the year ended December 31, 1995

DEPT/ACCT	GRAND TOTAL		THE		PROPERTY		PROPERTY		TOTAL
	NONCONSENTS	CONSENTS	MAINTENANCE	IMPROVEMENTS	SALES	TAXES	AND	EQUIPMENT	
	REVENUE	EXPENSE	REVENUE	EXPENSE	REVENUE	EXPENSE	REVENUE	EXPENSE	
Revenue appropriations	0	0	0	0	0	20,875	0	0	0
Other	1,700	0	0	0	0	0	0	0	0
	<u>1,700</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>20,875</u>	<u>0</u>	<u>0</u>	<u>0</u>
EXPENSES									
Professional services	0	0	0	0	10,480	0	0	0	10,480
Fuel supplies	0	0	0	0	75,000	0	0	0	75,000
Construction and architectural services	0	0	0	0	0	0	0	0	0
Property acquisition	0	0	0	0	0	0	0	0	0
Specialized legal & insurance	0	0	0	0	0	0	0	0	0
Depreciation	0	0	0	0	0	0	0	0	0
Other costs	0	0	0	0	0	1,075	0	0	1,075
	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>75,480</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>75,480</u>
EXCESS OR REVENUES OVER EXPENSES - OTHER THAN OTHER REVENUES	1,700	0	0	0	0	0	0	0	0
Fund balance, beginning of year	0	0	0	0	0	0	0	0	0
Addition of unapplied improvement	0	0	0	0	0	0	0	0	0
Fund balance, end of year	<u>1,700</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

NEW CALHOUN AFFORDABLE HOUSING, INC.
 Property of New Homeowner's Cooperative of New Orleans

STATEMENT OF REVENUES, EXPENSES AND GRANTS SURFACE BALANCE SHEETS BY FUND

For the year ended December 31, 2000

	TOTAL REVENUE PROPERTY TAXES AND CONTRIBUTIONS	PROPERTY TAXES	PROPERTY TAXES CONTRIBUTIONS AND GRANTS	EXPENSES		PROPERTY TAXES CONTRIBUTIONS AND GRANTS	TOTAL	BALANCE FORWARD
				OPERATIONS	DEPRECIATION			
REVENUES								
Grant reimbursements	190,040	0	14,700	1,875	44,005	0	0	0
Other	190,040	0	34,700	1,875	88,010	0	0	0
EXPENSES								
Professional services	1,045	0	16,651	1,035	44,005	0	0	0
Print supplies	0	0	6,125	0	0	0	0	0
Reproduction and professional services	0	0	0	0	0	0	0	0
Property acquisition	0	0	0	0	0	0	0	0
Assessed, legal & insurance	5,607	0	0	0	0	0	0	0
Construction	0	0	0	0	0	0	0	0
Other costs	0	0	0	0	0	0	0	0
	<u>5,607</u>	<u>0</u>	<u>16,776</u>	<u>1,035</u>	<u>44,005</u>	<u>0</u>	<u>0</u>	<u>0</u>
EXCESS OF REVENUES OVER EXPENSES - CAPITAL COSTS REIMBURSED	184,433	0	0	0	23,188	0	0	0
Residuals, beginning of period	0	0	86,730	0	0	0	0	0
Addition of capital improvements	184,433	0	0	0	0	0	0	0
Residuals, end of period	0	0	86,730	0	23,188	0	0	0

Detach along perforation. Return above portion with your payment in the enclosed envelope.
Please make check or money order payable to ALLSTATE.

Allstate
We're in good hands.

Homeowners Insurance Bill

Policy Number: 8 45 902940 07130

Premium Period: 7/28/98 To 7/28/97 (73:00 A.M. Standard Time)

Policy Issued To

WILLIE & JEROME PARSON
4947-45 ST FERDINAND
NEW ORLEANS LA 70126

Due Date July 8, 1998
To Pay In Full \$ 494.00
Minimum Amount Due \$ 494.00

Loan Number:

732803

Policy Number

Description

Agent And Telephone Number

8 45 902940 07130

4947-45 ST FERDINAND

JACQUES DE BROUILLARD (504) 941-5551

Payment Option

This is your last bill for your current policy period.

- Please pay \$ 494.00.
- You will receive no more bills until your policy renews or you make a change in coverage resulting in additional premiums.
- Thank you for letting us serve your insurance needs.

A material weakness is a reportable condition in which the design or operation of one or more of the internal control structures elements does not reduce to a relatively low level the risk that errors or irregularities in amounts that would be material in relation to the financial statements being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions.

Our consideration of the internal control structure would not necessarily disclose all matters in the internal control structure that might be reportable conditions and, accordingly, would not necessarily disclose all reportable conditions that are also considered to be material weaknesses as defined above. However, we noted the following matters involving the internal control structure and its operation that we consider to be material weaknesses as defined above. These conditions were considered in determining the nature, timing, and extent of the procedures to be performed in our audit of the financial statements of New Orleans Affordable Homeownership, Inc. for the year ended December 31, 1995.

The material weaknesses noted are as follows:

3. Grants Receivable

Statement of Condition

The corporation did not maintain a detailed reconciled listing of the grants receivable as of December 31, 1995, although individual grants were listed in the general ledger. The outside accountant had to reconstruct the composition of the grants receivable as of December 31, 1995.

Criteria

The corporation should maintain a reconciled listing of all outstanding receivables.

Effect of Condition

The receivables may become uncollectible.

Recommendation

We recommend a listing of all outstanding receivables be reconciled monthly.



CITY OF NEW ORLEANS
DIVISION OF HOUSING AND NEIGHBORHOOD DEVELOPMENT

MARC H. MORAL
Mayor

VINCENT T. SULLIVAN
Executive Assistant
to the Mayor

March 11, 1997

Mr. Ron McClain
President
New Orleans Affordable Homeowners, Inc.
3408 Canal Street
New Orleans, Louisiana 70019

Re: Audit - Rental Rehabilitation Program

Dear McClain:

This letter is written as a response to the audit of New Orleans Affordable Homeowners, Inc. (formerly Urban Homeowners' Corporation of New Orleans), for the period August 28, 1989 through December 31, 1994. It addresses a finding, which is repeated as follows: "The Corporation is not in compliance with federal requirements relative to rental rehabilitation loans".

With regard to the Rental Rehabilitation Program (RRP), the responsibility for performing tenant surveys as well as all other program requirements was clearly that of the program grantee, which was the City of New Orleans. The role played by the UHCNO, was only that of a mortgagee in whose name loans were originated. UHCNO had no operational responsibility for any other program aspects. It certainly was not responsible for collecting tenant income information.

The "Criteria" mentioned in the audit stated that "The tenants must be of low or moderate income". While this is true, the program, and not each project, was only required to attain a level of 30% low and moderate income tenants, below HUD could elect to impose administrative sanctions, such as reduction of current and/or future grants.

Tenant income information was collected through a survey procedure. This information was then compiled and reported to the U.S. Department of Housing and Urban Development (HUD) via a Project Completion Report (HUD Form 4804-11). Some tenants chose not to complete the survey and the RRP lacked a mechanism to compel them to do so. This is why the program's

THOMAS DEWITT
Director of Housing

HELEN E. DENNIS
Deputy Executive Assistant

GLENN M. SCOTT, III
Director of Policy Studies &
Development

"An Equal Opportunity Employer"

3408 Canal Street - Suite 202 - New Orleans, LA 70019

(504) 581-1111

Mr. Russ McClain

March 11, 1997

Page 3

mandatory low-income requirement was only 70%. In fact, the programmatic prohibitions against the use of rent control or any long-term regulation that required the owner to rent to low-income tenants, precluded the likelihood of 100% low-income occupancy.

Nevertheless, the program requirement to collect and report tenant information to HUD was, in fact, satisfied by the City's Office of Housing and Urban Affairs (OHUA), now the Division of Housing and Neighborhood Development (DHND). Attached are the Project Completion Reports for the two projects identified in the audit. These documents were submitted to HUD upon completion of these projects. The information was collected via tenant survey forms that were filled in by the tenants. These survey forms are on file at DHND.

If you have any questions about this matter, please contact Doug Kahn at 826-1648.

Sincerely,



Thomas Dugan
Director of Housing

TDMK

cc: Fernie Davis
Lynn Ashley

ATTACHMENT III (B)

Project Completion Report

Local Rehabilitation Program
Cost and Management Information (CM) System

U.S. Department of Housing
and Urban Development
Office of Community Planning
and Development



CMR Report No. HOU-000 (Rev. 10/79)

See instructions for this form on form HUD-60014-A.

Indicate the location and project's "Mortgage category" by marking with "X" above the final mortgage record, in "Mortgage Detail Program," H.C. Box 20007, L'Angeles Plaza Station, Washington, DC 20007.

Mark the appropriate box:
 Original
 Reissue
 Change
 Transfer
 Change
 Other

Part A: Project Identification

1. Project Name (as per title block)		2. Market Area (as per HUD-60014-A)		3. Priority (mark applicable box)	
0 7 3 4 0 0 0 0 3 1 R 2 1 R 6 1 2 2 0 2 0 0				<input type="checkbox"/> (1) Stand Alone <input type="checkbox"/> (2) Single Room Occupancy <input type="checkbox"/> (3) Cooperative <input checked="" type="checkbox"/> (4) None of the Above	
4. Name of Beneficiary	5. Full Name of Beneficiary	6. City	7. State	8. Zip	9. Mailing Address
	Estate of Frederick J. Murray	NJ			
	Deil Murray Montpelier, Vermont	New Orleans	LA	70112	
10. Project Address (see instructions)	11. Name of Financial Institution	12. City	13. State	14. Zip	15. Mailing Address
	2545 Louisiana Highway	AAA			
	3800 Phillip Street	New Orleans	LA	70130	
	Lynn M. Ashley				
	2400 Canal Street, Suite 300	New Orleans	LA	70119	

Part B: Financial Statement of the Project

1. For Project Completion only:
 Rehabilitation Only Acquisition and Rehabilitation Refinancing and Rehabilitation

2. Total Rehabilitation Costs: \$ 930,776.00

3. Federal Rehabilitation Credit Funds (mark applicable boxes):

<input type="checkbox"/> (1) Direct Loan (please specify below)	Amount	Interest Rate	Term	\$
<input type="checkbox"/> (2) Direct				\$
<input checked="" type="checkbox"/> (3) Deferred Payment Loan (DPL) (Specify Category of the DPL)	10 yrs, deferred, forgiveness			304,500.00
<input type="checkbox"/> (4) Other (please specify)				\$
Total Federal Rehabilitation Credit Funds				\$ 304,500.00

4. CMHC Funds (mark applicable boxes):

<input checked="" type="checkbox"/> (1) Direct Loan (please specify below)	Interest Rate	Amortization Period	\$
<input type="checkbox"/> (2) Direct	5%	15	681,977.00
<input checked="" type="checkbox"/> (3) Deferred Payment Loan (DPL) (Specify Category of the DPL)			124,893.00
<input type="checkbox"/> (4) Other (please specify)			\$
Total CMHC Funds			\$ 196,270.00

5. Total Federal Funds	Interest Rate	Amortization Period	\$
6. Other Funds (please specify below)			\$
7. Federal Rehabilitation Program Income			\$
8. Federal Loan Funds (please specify program)	Interest Rate	Amortization Period	\$
9. Other Federal Funds (please specify program)			\$
10. Total Financing (Federal and other)			\$ 930,776.00

Part C: ADEQUACY TO PROJECT

1. No. of Households Used with Project	2. No. of Households Used with Project	3. Number of very low-income households in project area (percentage of total very low-income households in area)	4. Project Number (Alphabetically)
0	26	0	0711610 D1D1D1S11

Part D: Characteristics of Households Residing in Project After Rehabilitation

Complete one line for each unit in the project. Enter one code only in each blank.
 Note: The responses used below show not more than one condition in any way which do not comply with household's

Total Number of Units After Rehabilitation
 47

BIB Characteristics			Residence Characteristics					
1. Number of Units in Project	2. Unit Number	3. Building Code	4. Access to Project Area (Y or N)	5. Income Source of Head of Household	6. Head of Household (Y or N)	7. Size of Household	8. Income Source of Household	9. Race
1	2	325						
1	2	325						
1	2	325						
1	2	325						
1	1	325	1	1	2	1	1	1
1	2	325						
1	2	325						
1	1	325	1	1	2	4	2	1
1	2	325						
1	2	325						
1	2	325	1	1	2	1	1	1
1	2	325						
1	2	325	1	1	2	1	1	1
1	2	325	1	1	2	1	1	1
1	2	325						
1	2	325						
1	2	325						
2	2	400						
1	2	325						
1	2	325						

Project Completion Report

U.S. Department of Housing
and Urban Development
Office of Community Planning
and Development



PHAS Approval No. PHAS-000 (Final Entry)

Capital Rehabilitation Program
Cash and Management Information (CMI) System

See Instructions for this form on Form HUD-600 H-A.

Complete this information for the project's 12-month completion, but no later than
90 days after the final disbursement request, in: Federal Rental Program,
CJ Act 20000, L'Enfant Plaza Station, Washington, DC 20002

Must be submitted by:

Original Submission Renewal Resubmission Change of Status **PHAS 12/15/01**

PH A: Project Identification

1. Project/Local Agency Number		2. Priority - (see instructions)	
3. Project Name (As Listed on Form)		<input type="checkbox"/> (1) Mixed Use? <input type="checkbox"/> (2) Single Room Occupancy? <input type="checkbox"/> (3) Condo/Co-op? <input type="checkbox"/> (4) None of the Above	
4. Address: 1810 Common Street Suite 1580		5. City/State/Zip New Orleans LA 70112	
6. Phone Number (Institutional) (504) 581-1444		7. Name of Firm/Proprietor Carver 50 Limited Partnership	
8. Project address (if diff. from 4.) 4524/2526 North Rampart Street		9. City/State/Zip New Orleans LA 70017	
10. Person completing this form for the loan Lynn W. Ashley		11. Phone Number (Institutional) (504) 822-1432	
12. Address 7482 Canal Street, Suite 300		13. City/State/Zip New Orleans LA 70117	

Part B: Financial Structure of the Project

1. (a) Rehabilitation - Only (b) Acquisition and Rehabilitation (c) Refinancing and Rehabilitation

2. Total Rehabilitation Cost: \$ 310,000.00

3. Federal Rehabilitation Grant Funds (which are assumed to be used for the following):

<input type="checkbox"/> (a) Direct Loan (please see the "Interest Rate" and "Amortization Period" rows)	\$ 0
<input type="checkbox"/> (b) Direct	\$ 0
<input checked="" type="checkbox"/> (c) Deferred Payment Loan (DPL) (please see instructions on DPL)	\$ 185,000.00
<input type="checkbox"/> (d) Direct Guaranty	\$ 0
Total Federal Rehabilitation Grant Funds	Total Items (1) thru (4) \$ 185,000.00

4. Other Funds, loans and securities (except as noted in 3. (a) through (d)):

<input checked="" type="checkbox"/> (a) Developmental (please see the "Interest Rate" and "Amortization Period" rows)	\$ 105,000.00
<input type="checkbox"/> (b) Grant	\$ 0
<input checked="" type="checkbox"/> (c) Deferred Payment Loan (DPL) (please see instructions on DPL)	\$ 43,000.00
<input type="checkbox"/> (d) Other Securities	\$ 0
Total Other Funds	Total Items (1) thru (4) \$ 148,000.00

5. Tax Exempt Funds	Interest Rate	Amortization Period	\$ 0
6. Other Funds (Funds (please see instructions on 3. (a) through (d)) - please see instructions on the instructions on 3.)			\$ 0
7. Federal Rehabilitation Program Income			\$ 0
8. Private Loan Funds (please see instructions)	Interest Rate	Amortization Period	\$ 0
9. Other Private Funds (please see instructions on 3. (a) through (d)) for other, including contributions from a partner			\$ 0
Total Financing Costs (Rehabilitation and Acquisition/Refinancing)			Total Items (1) thru (9) \$ 433,000.00



ALLSTATE INSURANCE COMPANY
 10010000
 00000000

Home Office
 Westborough, IL

Contract Date: 4/21/96
 Policy Number: 00000000 01 / 15

This request is subject to policy terms and is effective only if the policy stated above is currently in force.

 Policyholder's Signature

000000 00 / 00 00 04 / 00 / 00

 Agent's Signature

00000 000 000 000 0000
 Agent # Location Agent's Phone #

00000-0

1.3. Attachment to Terms

a) Characteristics with respect to:		b) No. of Characteristics from each category	c) Weighted average based on the number of Characteristics in each category	d) Weight number assigned by user
1.3.1.1	Number of 2021 and 2022 projects in each category	1	1	1
1.3.1.2	Number of 2021 and 2022 projects in each category	2	2	2
1.3.1.3	Number of 2021 and 2022 projects in each category	3	3	3
1.3.1.4	Number of 2021 and 2022 projects in each category	4	4	4
1.3.1.5	Number of 2021 and 2022 projects in each category	5	5	5
1.3.1.6	Number of 2021 and 2022 projects in each category	6	6	6
1.3.1.7	Number of 2021 and 2022 projects in each category	7	7	7
1.3.1.8	Number of 2021 and 2022 projects in each category	8	8	8
1.3.1.9	Number of 2021 and 2022 projects in each category	9	9	9
1.3.1.10	Number of 2021 and 2022 projects in each category	10	10	10

b) Characteristics of Characteristics Resulting in Project After Participation appears one line for each unit in the project. (Use one code only in each block)

c) The separate total below each row tends to correspond in any way to how the unit occupied by each household is

Unit No.	Unit Characteristics			Miscellaneous Characteristics				
	Bedroom	Bathroom	Number of Rooms	Number of Rooms	Number of Rooms	Number of Rooms	Number of Rooms	Number of Rooms
1	1	1	2	1	2	2	2	5
2	1	1	2	1	2	2	1	6
3	1	1	2	1	2	2	2	5
4	1	1	2	1	2	2	1	6
5	1	1	2	1	2	2	2	5
6	1	1	2	1	2	2	2	5
7	1	1	2	1	2	2	1	6
8	1	1	2	1	2	2	2	5
9	1	1	2	1	2	2	1	6
10	1	1	2	1	2	2	2	5
11	1	1	2	1	2	2	2	5
12	1	1	2	1	2	2	2	5
13	1	1	2	1	2	2	2	5
14	1	1	2	1	2	2	2	5
15	1	1	2	1	2	2	2	5
16	1	1	2	1	2	2	2	5
17	1	1	2	1	2	2	2	5
18	1	1	2	1	2	2	2	5
19	1	1	2	1	2	2	2	5
20	1	1	2	1	2	2	2	5
21	1	1	2	1	2	2	2	5
22	1	1	2	1	2	2	2	5
23	1	1	2	1	2	2	2	5
24	1	1	2	1	2	2	2	5
25	1	1	2	1	2	2	2	5
26	1	1	2	1	2	2	2	5
27	1	1	2	1	2	2	2	5
28	1	1	2	1	2	2	2	5
29	1	1	2	1	2	2	2	5
30	1	1	2	1	2	2	2	5
31	1	1	2	1	2	2	2	5
32	1	1	2	1	2	2	2	5
33	1	1	2	1	2	2	2	5
34	1	1	2	1	2	2	2	5
35	1	1	2	1	2	2	2	5
36	1	1	2	1	2	2	2	5
37	1	1	2	1	2	2	2	5
38	1	1	2	1	2	2	2	5
39	1	1	2	1	2	2	2	5
40	1	1	2	1	2	2	2	5
41	1	1	2	1	2	2	2	5
42	1	1	2	1	2	2	2	5
43	1	1	2	1	2	2	2	5
44	1	1	2	1	2	2	2	5
45	1	1	2	1	2	2	2	5
46	1	1	2	1	2	2	2	5
47	1	1	2	1	2	2	2	5
48	1	1	2	1	2	2	2	5
49	1	1	2	1	2	2	2	5
50	1	1	2	1	2	2	2	5



ALLSTATE INSURANCE COMPANY
 LANSING, MI
 SHELBOURNE

Home Office
 WESTBROOK, CT

Policyholder Name: 612176
 Policy Number: 24143344 01 / 15

Insured : CLYDE LARRY HYDA KEVIN JOHNSON
 Address : 221 PACIFIC AVE
 City : NEW ORLEANS LA. LA Zip Code: 70114
 Home Phone No.: 504 - 837 - 1212

OTHER INTERESTED PARTIES

First Mortgage

Loan Number: T20803

Name : NEW ORLEANS HOME MORTGAGE

Address:

Address: 514 PINEWOOD ST

City : NEW ORLEANS

LA. Zip Code: 70112

Conditions respecting Rider - Each INSURANCE AS MAY BE FOUND BY THIS SERVICE REQUEST:

1. Is afforded in reliance by the Company on the statements made by the insured;
2. Shall be effective on the date, and at the time stated, but up to event sooner than such date and time;
3. Is subject to the terms, conditions and coverages of the Company's policy form, and of the forms and endorsements approved for use with such policy;
4. Is limited to a period of thirty (30) days, beginning with the effective date hereof and expires at noon A.M. Standard Time with respect to the designated property insurance policy on the last day of such limited period provided, however, that the Company may extend insurance such coverage by mailing to the insured, at the address stated, written notice of expiration of this Service Request.



U.S. Department of Housing and Urban Development

New Orleans Office, Southeast Region
 Hilda Papp Federal Building
 501 Magazine Street, 7th Floor
 New Orleans, Louisiana 70130-2009

February 21, 1987

Marc M. Morial, Mayor
 City of New Orleans
 1380 Perdido Street
 New Orleans, LA 70112

Dear Mayor Morial:

Subject: HOME Program Audit NO. 85-FW-255-1087

Thank you for meeting with me on the evening of February 13, 1987 and your letter of the same date. We appreciate your commitment to resolve the findings of the Home Program Audit inherited by your Administration.

The Department accepts your proposed resolution of the audit regarding the remaining \$8,780,000 of ineligible costs. When we receive the agreement from the City providing the details of the five year payment plan along with the up-front payment, we will recommend clearance of the findings.

The required method of transferring the funds from the City General Fund to the City's HOME Investment Trust Fund Treasury Account is directly via wire transfer. The funds transferred will immediately be available for eligible HOME Program activities for use and benefit of the citizens of New Orleans.

It is important that we expedite this matter as much as possible. My staff remains available as always to assist the City in any way needed. Just let me know.

Once again, thank you for your personal attention to this matter and your continued work toward a final resolution.

I am available to you or your staff at 580-7213 ext. 3087.

Sincerely,

Gregory W. Hamilton, Director
 Community Planning & Development

cc: Vincent Sylwain
 Thomas French
 Thomas Sapoty



U.S. Department of Housing and Urban Development

New Orleans Office, Southeast Region
Felix Hugo Federal Building
501 Magazine Street, 9th Floor
New Orleans, Louisiana 70112-1099

FEB 14 1987

Ms. Yvonne French
Executive Assistant to the Mayor
Room 3810
1300 Perdido St.
New Orleans, LA 70112

Dear Ms. French:

Subject: HOME Program Audit No. 85-FW-255-1807

In our letter to the Mayor of New Orleans dated February 11, 1987 concerning the subject audit, it was indicated that a total of \$3,750,000 of ineligible costs remains to be repaid to the HOME and CHOG programs by the City. Our letter also accepted the city's proposed resolution of the audit, which included the submission of a five year repayment plan along with an up-front payment.

Upon closer scrutiny of HOME audit, a total of \$2,382,881 of ineligible costs remains to be paid by the City. A detail reconciliation of this amount is as follows:

Total Ineligible Costs Per Audit-	\$ 300,151
Total Unsupported Costs Per Audit-	4,125,800

Total Ineligible Costs	= 4,602,951
Less Payment Made by City	= 1250,070

Total Remaining Amount To Be Paid by The City	= \$ 4,382,881

The repayment plan and up-front payment to be submitted by the City should be based on the \$4,382,881.

We apologize for this oversight and hope it does not hinder the City's efforts to submit an acceptable repayment plan along with an up-front payment.

If you have any questions, please contact me or my staff at 584-7212.

Sincerely,



Thomas Dupont, Hamilton
Director, Community
Planning and
Development Division

cc: Vincent Sylvain
Thomas Dupont

New Orleans must repay \$63 million to HUD

The city must repay the federal government for the cost of a \$100 million HUD program to build 1,000 public housing units in New Orleans. The city must repay the federal government for the cost of the program, which was approved in 1974. The city must repay the federal government for the cost of the program, which was approved in 1974.

The city must repay the federal government for the cost of the program, which was approved in 1974. The city must repay the federal government for the cost of the program, which was approved in 1974.

Homes: Improper spending

Construction costs were inflated in 1974, according to a report by the House of Representatives. The report says that the cost of construction in 1974 was 10 percent higher than in 1973. This inflation was caused by a combination of factors, including a shortage of materials and labor.

The report also says that the cost of construction in 1974 was 10 percent higher than in 1973. This inflation was caused by a combination of factors, including a shortage of materials and labor.

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The city must repay the federal government for the cost of the program, which was approved in 1974. The city must repay the federal government for the cost of the program, which was approved in 1974.

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ALLSTATE FIRE INSURANCE COMPANY

HOMEOWNERS DECLARATIONS
PREMIUM STATEMENT

NEW PREMIUM PERIOD

Policy
Number

0 01 774264 07/05

FROM JUL 5, 1976 TO JUL 5, 1977 30 01 A.M.
STANDARD
TIME

Policy
Issued to

000 070076
NEW ORLEANS HOME MORTGAGE
AUTHORITY
138 BARBOUR ST
NEW ORLEANS LA 70113-2004

TOTAL PREMIUM FOR THE PREMIUM PERIOD STATED IS + 452.00

NO PROTECTIVE DEVICE DISCOUNT APPLIED - HOMEOWNERS PROVIDED

Policy
Issued to

YARETTA SANDERS
3002 MONTAN ST
NEW ORLEANS LA 70114

LOAN NO.
7400001

AGENT- CHARLES D. GLENN JR
PHONE- 504 241-6637

EP-1 17 DEC 1973 314076 6 70 X 0000000 3 7 85 1201
000000 40

Other use only

PLEASE NOTE THIS IS NOT A REQUEST FOR PAYMENT.
YOUR BILL WILL BE MAILED SEPARATELY.

PREFERRED RISK POLICY DECLARATIONS
SERIALPOLICY TERM / EFFECTIVE 12/01 AM
12/01/86 TO 12/01/87POLICY NUMBER
AL 0-00-000407-0PREMIUM NAME
FIRST MORTGAGELENDER NAME AND ADDRESS
BIM BILKINS HOME MFG UNIT
C/O MARINE ST
BIM BILKINS LA 70113-1894INSURED NAME AND ADDRESS
BIMBOLA LAGERS
3308 HUNTER ST
NEW ORLEANS LA 70126

LEAD NUMBER: 752000

PROPERTY DESCRIPTION
BUILDING
ONE FLOOR WITH HE BASEMENT
A SINGLE FAMILY RESIDENCECONTENTS
HOUSEHOLD CONTENTS LOCATED
ON FIRST FLOOR ONLY

HOW ELIGIBLE BUILDING

COMMUNITY LOCATION
NEW ORLEANS-ORLEANS PARISHCOMMUNITY NUMBER CLASS PERCENT
02 5005 C 10 90

DATING INFORMATION: BUREAU PROGRAM

FIN DRG	AFTER	CERT DTE	LOW ELY	BASE ELY	ELW CORR
0	AFTER	12-01-74			

EXCLUDES AND CONTENTS COVERAGE AND RATING

BUILDING 500.000
CONTENT 25.000

Deductible

5000
5000TOTAL
PREMIUM5100.00
50.00

NORMAL	5100.00
DEDUCTIBLE (BUILDING)	-
DEDUCTIBLE (CONTENT)	-
EXPERIENCE ADJUSTMENT	500.00

TOTAL WRITTEN PREMIUM: 5600.00
FEDERAL POLICY SERVICE FEE: 500.00INSURED PROPERTY ADDRESS
3308 HUNTER ST
BIM BILKINS LA 70114

TOTAL PREMIUM PAID: 6100.00

AGENT NAME AND ADDRESS

OSWALD, CHARLES S. JR.
7000 LAKE FOREST, #8
NEW ORLEANS LA 70127
TELEPHONE (504) 245-8800

CERTIFICATE OF INSURANCE WRITING
 AT LOUISIANA, LOUISIANA THROUGH 1988, INC
 7026 CANAL ST
 NEW ORLEANS, LA 70119

ADDITIONAL INTEREST COPY

ACCOUNT NUMBER 11002
 POLICY NUMBER 00110001

08/01/1988

HOMEOWNERS DECLARATIONS

POLICY WILL BE ISSUED TO THE AGENT

POLICY NO. 11/01/1988 POLICY TYPE HOMEOWNERS POLICY NUMBER 00110001 POLICY TYPE HOMEOWNERS POLICY NUMBER 00110001	GENERAL AGENT'S NAME 001100 FULLER JOHNSON DEWEY & PIT P O BOX 6666 NEW ORLEANS LA 70183-6666
---	---

THIS POLICY IS SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY AND THE DECLARATIONS. THE POLICY IS SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY AND THE DECLARATIONS. THE POLICY IS SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY AND THE DECLARATIONS.

DESCRIPTION	DESCRIBED LOCATION AND COVERAGE	AMOUNT OF INSURANCE	TERMINATION
	DESCRIBED LOCATION: 231 WEST PARK COURT NEW ORLEANS LA 70114		
	PRIMARY, OWNER, 1 FAMILY, 1-STORY, SEAS OF CONSTRUCTION 1980, FRAME, PROTECTION CLASS 03, TERRITORY 30, WITHIN CITY LIMITS		
	MORTGAGED: NEW ORLEANS HOME MORTGAGE AGENT PO BOX 60519 NEW ORLEANS LA 70183-0519 LOAN #: 7820003		
		NO FLAT CANCELLATION SHORT RATE BASIS OF COMPANY RATES	
A	DWELLING	48,400	421
B	OTHER STRUCTURES	4,000	19CL
C	PERSONAL PROPERTY	12,120	19CL
D	LOSS OF USE	4,000	19CL
E	PERSONAL LIABILITY - EACH OCCURRENCE	20,000	19CL
F	MEDICAL PAYMENTS - EACH PERSON	500	19CL
	FORMS 800008 0401 MODIFIED COVERAGE FORM 800009 0401 LOSS SETTLEMENT 800495 0401 HOME DAY CARE BUSINESS-NO LIABILITY 000000/LIMITED PROPERTY COVERAGE 800003 0205 INTENTIONAL ACT OR INJURY EXCLUSION 117000 0401 POSITIVE OR NEGATIVE DAMAGE EXCL 100100 0100 SPECIAL ENDORSEMENT & WARRANTIES 100110 0000 100 JACKET		
		IN THE EVENT OF A TOTAL LOSS, THE PREMIUM WILL BE REFUND RATED.	

DECLARATIONS - HOMEOWNERS 1100

In case of a loss under Section 1, we shall pay the part of the loss over the deductible amount.

This Declaration Page contains all policies and operating declarations. Each bears the same policy number as this policy.

Paul E. Collier

AGENCY: 00110001

SUPPLEMENTAL HOMEOWNERS DECLARATIONS

CONTAINS	DESCRIBE LOCATION AND COVERAGE	AMOUNT OF RETENTION	PREMIUM
	1000217 0394 APERTURES EXCLUSIONS ENDORSEMENT		
	100100 1100 SPECIAL PROVISIONS		
	0772 1100 STANDARD FINE POLICY		
	PLACEMENT FEE		30.00
	PREMIUM TAX		20.00
	TOTAL PREMIUM		470.00

HOMEWORKERS

INSURANCE BROKERS & REALTORS
2020 CANTAL ST
PO BOX 5228
NEW ORLEANS LA 70183-2285

7520002

NEW ORLEANS HOME MORTGAGE SMTH
PO BOX 5228
NEW ORLEANS LA 70183-2285

ii) C) Assistance to Tenants

No. of Tenants (and who is exempt)	No. of Tenants (and who is exempt) who are 65 or over	No. of Tenants (and who is exempt) who are 65 or over and have no other accommodation available to them	No. of Tenants (and who is exempt) who are 65 or over and have no other accommodation available to them and are in receipt of a grant from the Housing Department	Project Number (as per the H.C.C.)
0	0	0	0	11

iii) Characteristics of Households Residing in Project After Rehabilitation

Complete one line for each unit in the project. Enter one code only in each field.
 Note: The separate code below three and four is concerned in any way to New 24 units occupied by each household in

Total Number of Units After Rehabilitation
 100

Unit Characteristics				Household Characteristics				
Number of Adults	Number of Children	Number of Persons in Family (including those in separate units)	Number of Persons in Family (excluding those in separate units)	Number of Persons in Family (including those in separate units)	Number of Persons in Family (excluding those in separate units)	Number of Persons in Family (including those in separate units)	Number of Persons in Family (excluding those in separate units)	Number of Persons in Family (including those in separate units)
2	1	313	2	1	1	2	2	5
2	1	314	2	1	2	2	1	5
2	1	315	2	1	2	2	2	5
2	1	316	2	1	2	2	1	5
2	2	317	2	1	2	2	2	5
2	1	318	1	1	2	2	2	5
2	1	319	1	1	2	2	1	5
2	1	320	1	1	2	2	2	5
2	1	321	2	1	2	2	1	5
2	1	322	2	1	2	2	2	5
2	1	323	2	1	2	2	2	5
2	1	324	2	1	2	2	2	5
2	1	325	2	1	2	2	2	5
2	1	326	2	1	2	2	2	5
2	1	327	2	1	2	2	2	5
2	1	328	2	1	2	2	2	5
2	1	329	2	1	2	2	2	5
2	1	330	2	1	2	2	2	5
2	1	331	2	1	2	2	2	5
2	1	332	2	1	2	2	2	5
2	1	333	2	1	2	2	2	5
2	1	334	2	1	2	2	2	5
2	1	335	2	1	2	2	2	5
2	1	336	2	1	2	2	2	5
2	1	337	2	1	2	2	2	5
2	1	338	2	1	2	2	2	5
2	1	339	2	1	2	2	2	5
2	1	340	2	1	2	2	2	5
2	1	341	2	1	2	2	2	5
2	1	342	2	1	2	2	2	5
2	1	343	2	1	2	2	2	5
2	1	344	2	1	2	2	2	5
2	1	345	2	1	2	2	2	5
2	1	346	2	1	2	2	2	5
2	1	347	2	1	2	2	2	5
2	1	348	2	1	2	2	2	5
2	1	349	2	1	2	2	2	5
2	1	350	2	1	2	2	2	5
2	1	351	2	1	2	2	2	5
2	1	352	2	1	2	2	2	5
2	1	353	2	1	2	2	2	5
2	1	354	2	1	2	2	2	5
2	1	355	2	1	2	2	2	5
2	1	356	2	1	2	2	2	5
2	1	357	2	1	2	2	2	5
2	1	358	2	1	2	2	2	5
2	1	359	2	1	2	2	2	5
2	1	360	2	1	2	2	2	5
2	1	361	2	1	2	2	2	5
2	1	362	2	1	2	2	2	5
2	1	363	2	1	2	2	2	5
2	1	364	2	1	2	2	2	5
2	1	365	2	1	2	2	2	5
2	1	366	2	1	2	2	2	5
2	1	367	2	1	2	2	2	5
2	1	368	2	1	2	2	2	5
2	1	369	2	1	2	2	2	5
2	1	370	2	1	2	2	2	5
2	1	371	2	1	2	2	2	5
2	1	372	2	1	2	2	2	5
2	1	373	2	1	2	2	2	5
2	1	374	2	1	2	2	2	5
2	1	375	2	1	2	2	2	5
2	1	376	2	1	2	2	2	5
2	1	377	2	1	2	2	2	5
2	1	378	2	1	2	2	2	5
2	1	379	2	1	2	2	2	5
2	1	380	2	1	2	2	2	5
2	1	381	2	1	2	2	2	5
2	1	382	2	1	2	2	2	5
2	1	383	2	1	2	2	2	5
2	1	384	2	1	2	2	2	5
2	1	385	2	1	2	2	2	5
2	1	386	2	1	2	2	2	5
2	1	387	2	1	2	2	2	5
2	1	388	2	1	2	2	2	5
2	1	389	2	1	2	2	2	5
2	1	390	2	1	2	2	2	5
2	1	391	2	1	2	2	2	5
2	1	392	2	1	2	2	2	5
2	1	393	2	1	2	2	2	5
2	1	394	2	1	2	2	2	5
2	1	395	2	1	2	2	2	5
2	1	396	2	1	2	2	2	5
2	1	397	2	1	2	2	2	5
2	1	398	2	1	2	2	2	5
2	1	399	2	1	2	2	2	5
2	1	400	2	1	2	2	2	5

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP INC.

5508

1301 AMERICAN ROAD, SUITE 200
 NEW ORLEANS, LA 70112

FAS

TO THE

ORDER OF

DATE _____

1971
 101

5

DOLLARS ONLY

PAID AFTER 90 DAYS



FOR

LIBERTY BANK OF NEW ORLEANS
 1301 AMERICAN ROAD, SUITE 200
 NEW ORLEANS, LA 70112

BY

TREASURER

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP INC.

5508

1301 AMERICAN ROAD, SUITE 200
 NEW ORLEANS, LA 70112

FAS

TO THE

ORDER OF

DATE _____

1971
 101

5

DOLLARS ONLY

PAID AFTER 90 DAYS



FOR

LIBERTY BANK OF NEW ORLEANS
 1301 AMERICAN ROAD, SUITE 200
 NEW ORLEANS, LA 70112

BY

TREASURER

NEW ORLEANS AFFORDABLE HOMEOWNERSHIP, INC.

1049

1301 AMERICAN ROAD, SUITE 200
 NEW ORLEANS, LA 70112

FAS

TO THE

ORDER OF

DATE _____

1971
 104

5

DOLLARS ONLY

PAID AFTER 90 DAYS



NEW ORLEANS AFFORDABLE HOMEOWNERSHIP INC.

5508

1301 AMERICAN ROAD, SUITE 200
 NEW ORLEANS, LA 70112

FAS

TO THE

ORDER OF

DATE _____

5

DOLLARS ONLY

PAID AFTER 90 DAYS



FOR

LIBERTY BANK OF NEW ORLEANS
 1301 AMERICAN ROAD, SUITE 200
 NEW ORLEANS, LA 70112

BY

TREASURER

ATTACHMENT V

Section 303. Compliance with Applicable Mortgage Loan Terms. The Servicer shall be responsible for compliance with the terms of the Mortgage Loan and related Mortgage and Mortgage Note and all applicable provisions of local, state or federal law.

Section 304. Compliance with Truth-in-Lending. The Servicer shall comply with the relevant and applicable requirements of any applicable state, territory, possession, or federal laws, rules or truth in lending.

Section 305. Notices of Changes in Servicer's Organization or Bankruptcy. The Servicer shall immediately notify the Mortgagee of any contemplated major changes in its organization such as resignation of key management personnel, mergers or consolidations, changes of name or corporate charter, etc. A Servicer shall immediately notify the Mortgagee if such Servicer shall voluntarily file a petition under the Federal Bankruptcy Acts or under any state bankruptcy or insolvency act or an answer in an involuntary proceeding admitting insolvency or inability to pay debts, or if such Servicer shall fail to obtain a vacation or stay of involuntary proceedings brought for the reorganization, dissolution or liquidation of Servicer, or if Servicer shall be adjudged a bankrupt, or if a trustee or receiver shall be appointed for such Servicer or such Servicer's property, or if such Servicer shall make an assignment for the benefit of such Servicer's creditors, or if such Servicer shall be put on probation or its activities restricted in any manner whatsoever by any agency of the federal or state government.

Section 306. Conflicts of Interest; Servicer's Access to Privileged Information. Through normal Servicing activities, including the servicing of delinquencies, the Servicer sometimes obtain privileged information concerning Mortgages and mortgaged properties. Such privileged information shall not be used by a Servicer or by its officers, employees, agents or affiliates, in any way which can be construed to represent a conflict of interest or an unfair advantage to the user. All such information shall be used in a manner consistent with any applicable laws or regulations regarding disclosure of credit information. No property which secures a Mortgage Loan may be acquired by a Servicer or by its officers, employees, agents or affiliates, unless the Servicer has informed Mortgagee, and Mortgagee does not object to such acquisition.

Section 307. Degree of Care. The Servicer shall use at least the same degree of care in servicing the Mortgage Loans as its employees use in servicing mortgage loans on its own behalf or on behalf of FHBA or FHLMC. To this end, the Servicer shall promptly notify the Mortgagee of any knowledge it may acquire as to any of the following:

- (i) The vacation of, or any change in the possession of, the mortgaged premises relating to any Mortgage Loan;

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOANS SERVICES
 25 PONTCHARTRAY STREET
 NEW ORLEANS, LA 70119

FIRST NATIONAL BANK OF GEORGIA
 NEW ORLEANS BRANCH
 1119 CANAL

1267
 1267

FOUR HUNDRED EIGHTY NINE AND 00/100 DOLLARS

DATE

TO THE
 ORDER OF

LAFAYETTE INSURANCE COMPANY
 P.O. BOX 50348
 NEW ORLEANS, LA 70119

DATE

10/25/1996

AMOUNT

\$489.00

NEW ORLEANS HOME MORTGAGE AUTHORITY
 25 PONTCHARTRAY STREET, NEW ORLEANS, LA 70119

001267 *0860000296 489 000000*

NEW ORLEANS HOME MORTGAGE AUTHORITY
 (NEW ORLEANS BRANCH)

DATE 10/25/1996

INVOICE # 1267
 489.00

NONRESIDENT INSURANCE PREMIUM
 ANDREY FLEURY
 LOAN NUMBER: 7528058
 POLICY NUMBER: 88699433

VENUE # 800000113 CHECK # 1267 DATE 10/26/1996 NET 489.00
 LAFAYETTE INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY
 (NEW ORLEANS BRANCH)

DATE 10/26/1996

INVOICE # 1267
 489.00

NONRESIDENT INSURANCE PREMIUM
 ANDREY FLEURY
 LOAN NUMBER: 7528058
 POLICY NUMBER: 88699433

VENUE # 800000113 CHECK # 1267 DATE 10/26/1996 NET 489.00
 LAFAYETTE INSURANCE COMPANY

INDEPENDENT INSURANCE ASSOCIATES, INC.

718 BARDONE STREET
NEW ORLEANS, LA 70112TEL: 504/586-1000
FAX: 504/586-1000POLICY NO:
PLEUAM1

DU

DATE
10/25/90

POLICY: 800698433

HOME

* R E M I T *
*****New Orleans Home Htg. Authority
618 Baronne Street
New Orleans, LA 70112

CUSTOMER: Ms. Audrey Fleury

Insurance Dept.

Re: Audrey Fleury

***** I N V O I C E *****

10/16/90-LAFAYETTE 800698433 HOMEOWNERS 8 1943 H. SALVEZ 8497.

PLEASE REMIT THE PREMIUM OF \$490.00 PAYABLE TO LAFAYETTE INS. COMPANY &
P.O. BOX 8206 NEW ORLEANS LOUISIANA 70180

INDEPENDENT INSURANCE ASSOCIATES, INC.

110 BARKANE STREET
NEW ORLEANS, LA 70113

TEL: 504/586-1000
FAX: 504/586-9800

FLORIANI

DAI

DATE
10/25/96

POLICY: 80688433 HOME
EXP: 11/16/96 EXP: 11/16/97

M E M O

Agency code: 87-0002
Change date: 10/25/96

Lafayette/United Fire
P. O. Box 53265
New Orleans, LA 70153-0265

CUSTOMER: Ms. Audrey Fleury

PLEASE AMEND FIRST MORTGAGE AS FOLLOWS:

URBAN HOMEOWNERS
C/O NEW ORLEANS HOME MORTGAGE AUTHORITY
608 BARKANE STREET
NEW ORLEANS LA 70113

Dianna Mispard



Below is a replica of the stamp now used by W&A on vouchers and supporting papers, upon payment, to render such documents as ineffective as a support for further payment. The "PAID" stamp is applied to the supporting documents immediately after the signing of the checks issued in payment of the vouchers. The blank space is filled with the date of payment and the applicable check number.

PAID

ATTACHMENT VI

should notify the Mortgagee, the FHA, VA or PMI carrier as required, and, in accordance with Section 14 of the Servicing Agreement, return to the Mortgagee the original Mortgage File documents.

When during foreclosure the Mortgagor offers to pay an amount less than the full delinquency (including advances, legal costs, etc.), the Servicer will ascertain the amount of foreclosure costs and expenses that have been or will be incurred if the offer is accepted. The Servicer may decline without the Mortgagor's concurrence, but shall obtain the Mortgagor's approval prior to accepting. The Servicer's recommendation shall include a recommendation whether foreclosure action should be continued or should be dismissed and, if dismissed, how the remaining delinquency will be cured.

If there exists the possibility of sale of a property during foreclosure, the Servicer shall so advise the Mortgagor and shall make a determination as to the feasibility of satisfying the Mortgage Note and accreting any advances, legal fees or other costs incurred during foreclosure.

appraisal is unobtainable and the Servicer's estimate of the value in an "as is" condition shall be provided by the Servicer. An appraisal is not required under this Section if the maximum bid recommended by the Servicer is sufficient to recover the total indebtedness.

For an FHA or VA mortgage, the Servicer shall conform with all bidding instructions of FHA or VA. If the VA upset price is not received by the Servicer as of the date of the sale, the sale should be postponed. When VA does not set an upset price, the Servicer must submit a current appraisal of the property and a recommended maximum bid for the Mortgagee's approval which must be obtained prior to the sale.

Section 602. Property Management Responsibilities During Foreclosure. In the event that foreclosure proceedings are initiated, whether by the Servicer or otherwise, then unless and until otherwise directed by the Mortgagee from the date of the commencement thereof until the termination thereof and disposition of the Servicer interest in the mortgaged premises, the Servicer shall manage and protect the mortgaged premises under foreclosure in such manner and to such extent as are customary in the proper management by mortgage Servicers of property in the City of New Orleans, Louisiana, including but limited to (i) attending to insurance on the premises, (ii) inspecting, managing, and supervising repairs to and maintenance of the premises, (iii) protecting the property against vandals and the elements in the event the property is vacant and (iv) rendering to the Mortgagee of such reports as the Mortgagee may require.

Section 603. Foreclosure Monitoring. The Servicer shall incorporate in its internal procedures a thorough and effective system for monitoring foreclosure progress. Such system should assure that each procedural step of a foreclosure case is completed within a reasonable time period.

As part of its monitoring system, the Servicer should have the ability to identify the status of each case, and should maintain well documented and complete records on all field counsel. Such documentation should include, among other things, notations of oral conversations, records of all requests to field counsel to correct delays or other delinquencies, reports from field counsel explaining delays, and any other documentation of all interactions with field counsel or explaining delays or difficulties.

Section 604. Reinstatement. Even though foreclosure proceedings may have been initiated, proposals providing for reinstatement in full, including advances, legal fees, and all delinquencies, etc., may be accepted by Servicer, and may not be declined without Mortgagee's concurrence.

If the offer is accepted, upon receipt of good funds, Servicer shall take action to prevent additional foreclosure costs and expenses from being incurred. Servicer

underinsured cause, the Servicer may expend its own funds toward the restoration of the property if it shall obtain the written consent of the Special Hazard Insurer and determine (i) that such restoration will increase the proceeds of liquidation of the Mortgage Loan to the Authority, after reimbursement to the Servicer for such expenses, and (ii) that such expenses will be recoverable to it either through Liquidation Proceeds (respecting which it shall have priority for purposes of withdrawal from the Receipts Account pursuant to Section 403 of this Guide) or through Insurance Proceeds (respecting which it shall have similar priority.) The Servicer shall be responsible for all other costs and expenses incurred by it in any such proceedings or in connection with the preservation of all insurance policies respecting the Mortgage Loans; provided that it shall be entitled to withdrawal thereof (as well as its normal servicing compensation under Section 200 of this Guide) to the extent, but only to the extent, that withdrawals from the Receipts Account with respect thereto are permitted under Section 403 of this Guide.

(b) The Servicer shall promptly notify the Mortgagee in the case of a default under any Mortgage Loan giving rise to a claim under any mortgage insurance or guarantee with respect to such Mortgage Loan. Unless notified otherwise by the Mortgagee within ten days after giving notice of default to the Mortgagee as aforesaid, the Servicer promptly shall take all actions necessary and proper to obtain the full benefits of any mortgaged insurance or guaranty in accordance with all applicable provisions of law, rules and regulations issued and to be issued, including those of the Authority, and shall keep the Mortgagee fully informed of such actions. The Servicer will attend to part of the services to be rendered by it under this Guide, all papers and data required in connection with the application for Insurance Proceeds with respect to such Defaulted Mortgage Loan. The Servicer shall receive no compensation in addition to that provided in Section 200 of this Guide for its services pursuant to this Subsection 600 (b).

Section 601. Bidding Instructions. The Servicer shall issue bidding instructions to its employee, agent or the attorney attending the foreclosure sale unless otherwise directed by the Mortgagee.

With respect to conventional mortgages, Servicer shall conform to all bidding instructions and requirements of the mortgage insurer and obtain the Mortgagee's approval of the maximum bid when the maximum bid recommended by the Servicer will not recover the total indebtedness as permitted under applicable law. If the maximum bid is sufficient to recover the total indebtedness, the Mortgagee's approval of a maximum bid is required as above, a request for maximum bid approval must be accompanied by an appraisal stating the value of the mortgaged premises is an "as is" condition. If repairs to the property are necessary, an appraisal stating the estimated value after any necessary or desirable repairs which should be made and stating the cost of such repairs shall be furnished. If the Servicer is unable to obtain an appraisal, a written statement as to the reason the

NOTICE OF CANCELLATION

POLICY NUMBER
EQ-1411-1

DATE CANCELED
APR 15 1997

PREM DUE
APR 15 1997

AMOUNT DUE
\$404.00

An actual "Last Payment" check, which we have not received, the premium payment required to keep this policy in effect. Therefore, the policy is canceled effective 11:59 P.M. on the date shown by your date stamp on the "Last Payment" check above. If the full premium has been paid and accepted before or on the date of cancellation, you will receive a Notice of Reinstatement, certifying that your coverage continues under this policy. Otherwise, coverage will end. Please contact your State Farm agent with any questions.

HOMEOWNERS SPECIAL FORM POLICY

Payer - Mortgage

18-12-1411-1 M O 1888-F490 F 4
STATE FARM INSURANCE CO
PO BOX 0811200
PO BOX 0811200 HOME BTC 48TH
PO BOX 0811200
NEW ORLEANS LA 70188-0811

18-12-1411-1 M O 1888-F490 F 4

Insured:
WRITS, MARY L
2824 PORTIN STREET
NEW ORLEANS LA 70115-0847

Location:
2824-04 PORTIN STREET
NEW ORLEANS LA

Loan No: T82087

Agent: BOSTON INSURANCE AGENCY INC
Telephone: (804) 285-0218 or (804) 626-0807

IF YOU HAVE MOVES, PLEASE CONTACT YOUR AGENT. P-1888-F490

WRITS, MARY L
18-12-1411-1 HOMEOWNER PR - 3

Loan No: T82087

PLEASE RETURN THIS PART WITH YOUR CHECK WHEN PAYING FOR A LATE FINE.	
PREM DUE	PLEASE PAY THIS AMOUNT
MAR 15 1997	\$404.00

2824-04 PORTIN STREET
NEW ORLEANS LA

3309784 014
State Farm Insurance Companies
State Farm Fire and Casualty Company
33 State Farm Drive
Moline, IL 61201-0801

OFFICE USE ONLY

Prepared: MAR 04 1997

PRE CANCEL	\$404.00	0401
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M
B
M

100710108864488 0182015214111823220

(1) The Servicer should review each Mortgage Loan not later than the 15th day after a payment has become due;

(2) The Servicer should mail a late notice not later than the 15th day of delinquency;

(3) The Servicer should mail a second late notice 5 days after mailing the first late notice, if the loan is still delinquent;

(4) The Servicer should make a telephone contact 5 days following the second notice;

(5) If a satisfactory response is not obtained, the Servicer should make a personal contact, and continue to follow with notices, letters, telephone calls, and personal contacts, until the account is current.

(b) Mortgage Notes having two delinquent monthly payments:

The Servicer is expected to make every effort to effect arrangements to liquidate the delinquency. Unless the Mortgagor is permanently absent or other unusual circumstances exist, the Servicer should, by this time, have held a face to face interview with the Mortgagor to establish: (1) the reason for the continued default, (2) whether the reason is temporary or permanent, and (3) the attitude of the Mortgagor toward the debt. This requires the determination of all sources of income and the existence of any other debts. Junior lienholders, if any, should also be contacted to determine if they are willing to cure the delinquency.

Promptly after the due date of the second unpaid installment, the Servicer should inspect the mortgaged premises and notify the Mortgagee of its findings. If exterior wastage has occurred, Servicer shall take all reasonable steps to inspect the interior of the Housing Unit located upon such mortgaged premises and immediately after such inspection, notify Mortgagee of waste suffered, committed or threatened in respect to such mortgaged premises. Thereupon, the Servicer shall take such further or additional action with respect thereto as the Mortgagee may direct, including but not limited to: (i) foreclosure, (ii) allowing a definite period for the Mortgagor to bring the Mortgage Note current or sell his property to realize any equity or (iii) taking other appropriate action.

The Servicer shall be familiar with and satisfy all applicable requirements of FHA, VA and PMI codes. The Servicer shall have adequate controls to assure the timely filing of all notices to the

On any date the Servicer may, prior to any transfer of moneys in the Receipts Account to the Trustee, withdraw moneys from the Receipts Account to:

- (i) Reimburse itself from Insurance Proceeds and Liquidation Proceeds for amounts expended by it with respect to the related Mortgage Loan pursuant to Section 600 of this Guide in good faith in connection with the restoration of property damaged by an uninsured or under-insured cause; and
- (ii) Reimburse itself from Insurance Proceeds for Insurance Expenses, and pay itself from Insurance Proceeds and Liquidation Proceeds any unpaid servicing compensation on the related Mortgage Loan, such payment being limited to the amount, if any, by which Proceeds received in connection with the liquidation of the Defaulted Mortgage Loan is, after the deduction of Insurance Expenses and any amounts deducted pursuant to subsection (i) above, in excess of the principal balance of such Mortgage Loan together with accrued and unpaid interest thereon.

Since, in connection with withdrawals pursuant to subsections (i) through (ii) above, inclusive, the Servicer's entitlement thereto shall be limited to collections or other recoveries on the related Mortgage Loan, the Servicer shall keep and maintain separate records on each Mortgage Loan for the purpose of justifying any such reimbursement.

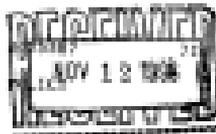
Section 405. Release of Mortgage Files. Upon the payment in full of any Mortgage Loan serviced by it, the Servicer will promptly notify the Mortgagee by delivering to Mortgagee a Servicing Officer's Certificate (which Certificate shall include a statement to the effect that all amounts received in connection with such effect that all amounts received in connection with such payment which are required to be deposited in the Receipts Account pursuant to Section 403 of this Guide have been so deposited) requesting delivery to the Servicer of the Mortgage Note and related Mortgage. Upon receipt of such Servicing Officer's Certificate, the Mortgagee shall, on behalf of Authority, endorse the Mortgage Note without increase or warranty to the Servicer and deliver the Mortgage Note and related Mortgage to the Servicer.

Section 406. Annual Statements to Mortgagees. In addition to the mortgage payment books or packets of monthly payment coupons or monthly statements provided to each Mortgagee in accordance with Section 400 of this Guide, each Servicer shall provide the Mortgagee, without charge, (i) an annual statement of the Escrow Account relating to the respective mortgaged property, setting forth in summary form the balance of the account at the beginning of the year, the total amount deposited into the account by the Mortgagee during the year, the amount and nature of disbursements made therefrom for the account of the Mortgagee

ASSURANCE INDEMNITY GROUP
F.W. WASHINGTON INDEMNITY GROUP

MEMORANDUM

GENERAL DECLARATION " " EFFECTIVE 10/15/66



POLICY NUMBER	DATE	TERMINATION DATE	COVERAGE IS PROVIDED BY THE	ADDRESS
FWP OCTOBER	10/15/66	10/26/67	LA JOINT REINSURANCE PLAN	MEMPHIS
PLACES COVERED AND EXCLUDED			RATES	
GAIRES BERRY AND SONS 2226 FORESTALL NEW ORLEANS LA 70117			JOHN W BURGESS & CO INC 108 MARINERS BLVD SUITE 1 P O BOX 9000 MEMPHISVILLE LA 70470	

THE PREMISES COVERED BY THIS POLICY IS LOCATED
2226 FORESTALL NEW ORLEANS, LA 70117.

BUILDING INFORMATION- FRAME, CONSTRUCTED IN 1900, PRIMARY RESIDENCE,
PROTECTION CLASS 3, TERRITORY 36, FEET FROM HYDRAUL S/A,
\$200 SECTION 2 LOSS DEDUCTIBLE, 2 PARTS, INSIDE CITY.

COVERAGE AT THE ABOVE DESCRIBED LOCATION IS PROVIDED ONLY WHERE A LIMIT OF
LIABILITY IS SHOWN OR A PREMIUM IS STATED

SECTION & COVERAGE	LIMIT OF LIABILITY	PREMIUMS
A. BELLING	\$40,000	\$480.00
B. OTHER STRUCTURES	\$4,000	
C. PERSONAL PROPERTY	\$24,000	
D. LOSS OF USE	\$9,000	
SECTION II COVERAGE		
E. PERSONAL LIABILITY	\$100,000 EACH OCCURRENCE	
F. MEDICAL PAY TO OTHERS -	\$1,000 EACH PERSON	
	TOTAL BASIC PREMIUM - - - - -	\$480.00
	TOTAL ANNUAL PREMIUM - - - - -	\$480.00

POLICY PERIOD- 12:00 AM STANDARD TIME AT THE RESIDENCE PREMISES.

MORTGAGE #75218094
NEW ORLEANS HOME MTC AUTHORITY
618 BARDOUX ST
NEW ORLEANS, LA

TR113

FORMS AND ENDORSEMENTS - 80-8000 04/61.

[Handwritten Signature]

AUTHORIZED SIGNATURE

10/18/66
DATE

are in arrears and the amount of such arrearage. Such monthly statement shall further indicate whether the collections from any Mortgagor, as deposited in the Escrow Account (as hereinafter defined), relating to such mortgaged property, have been deficient in fully and promptly paying all taxes, assessments and insurance premiums on such mortgaged property, if applicable to the mortgage loan serviced. Such monthly statement shall comply, in all respects, with the provisions of Section 201 of this Guide.

Section 402. Mortgage File. The Mortgaged File relating to each Mortgage Loan to be serviced by Servicer shall be delivered to Servicer by the Mortgagee promptly after the receipt thereof by the Mortgagee. The Servicer shall, at its own expense, maintain such Mortgage File until that date which is three years after the date the Mortgage Loan is fully paid or otherwise terminated and shall make all such Mortgage Files available for inspection by the Mortgagee at such reasonable times and in such reasonable manner as the Mortgagee.

Section 403. Receipts Account. The Servicer shall establish and maintain for the Mortgagee a segregated trust or custodial account in a New Orleans Bank, secured in the manner required by the laws of Louisiana for deposit of public funds (the "Receipts Account"). All funds held in the Receipts Account shall conform in all respects to any applicable rules and regulations of any federal or private agency or entity insuring or guaranteeing any of the Mortgage Loans.

Upon 30 days written notice, the Mortgagee may direct the Servicer to transfer such Receipts Account to another bank (or banks) or other financial institution (or institutions) designated by Mortgagee. Each Receipts Account shall be established and maintained in a manner which complies with the applicable rules and regulations of the Federal Deposit Insurance Corporation or the Federal Savings and Loan Insurance Corporation, as may be applicable.

The Servicer shall deposit all payments and collections received by it with respect to the Mortgage Loans, including Insurance Proceeds and Liquidation receipt of such payments and collections. All funds deposited by the Servicer in the Receipts Account shall not be disbursed by the Servicer except in accordance with Section 406 of this Guide.

Section 404. Permitted Withdrawals from the Receipts Account. On the twentieth day of each calendar month the Servicer shall transfer to the Mortgagee, by wire transfer or a check drawn on a New Orleans Bank, all moneys in the Receipts Account, specifying in writing at the time of such transfer the amounts representing payments in respect of principal, interest and prepayments on Mortgage Loans. If any such date of transfer would fall on a Saturday, Sunday or legal holiday in the City of New Orleans, Louisiana, such transfer shall be made at the opening of business on the next succeeding business day.

Allstate

7520059

The Allstate Insurance Company
 Home Indemnity Program
 P.O. Box 21000
 Baltimore, MD 21211-0100
 Tel. 800-521-6000

POLICY DECLARATIONS
GENERAL

POLICY TERMS / EFFECTIVE DATE IN
 02/24/78 TO 02/24/78

POLICY NUMBER
 AL 8-80-842291-1

PREMIUM TYPE
 FIRST PREMIUM

LENDER NAME AND ADDRESS
 NEW ORLEANS HOME FID FUTA

OWNER NAME AND ADDRESS
 BARRY S BERRY H OWENS
 2028 PERDUE ST
 NEW ORLEANS LA 70117

418 SMOKE ST
 NEW ORLEANS LA 70113-1894

TELEPHONE (504) 943-2844

PROPERTY DESCRIPTION
 BUILDING

CONTENTS

ONE FLOR WITH NO BASEMENT
 A TOWNHOMER RESIDENCE

NON ELEVATED BUILDING

COMMUNITY LOCATION
 NEW ORLEANS-ORLEANS PARISH

COMMUNITY NUMBER CLASS PERCENT
 22 5284 0490 E 3 00

RATING INFORMATION: REGULAR PROGRAM

FOR THE	START DATE	LEM ELY	BASE ELY	SLR SOFF
AS	PROR TO	12/31/74		

BUILDING REPLACEMENT COST 228,800 * WINDUPR DEDUCTIBLE AS OF 10-78

BUILDING AND CONTENTS COVERAGE AND ENDING **DEDUCTIBLE** **TOTAL PREMIUM**

BUILDING	COVERAGE	DEDUCTIBLE	TOTAL PREMIUM
BUILDING	228,800	4750	9200.00
CONTENTS	(4)	(4)	90.00

WARRANTY - 00 48-00 00	GENERAL SUBTOTAL:	4750.00
0 - 00 35-00 00	DEDUCTIBLE DISCOUNT:	-
	COMMUNITY DISCOUNT:	-
	COPYING DISCOUNT:	945.00

TOTAL WRITER'S PREMIUM: 4750.00
FEDERAL POLICY SERVICE FEE: 500.00

INSURED PROPERTY ADDRESS
 2028 PERDUE ST
 NEW ORLEANS LA 70117

TOTAL PREMIUM PAID: 5200.00

AGENT NAME AND ADDRESS

BOBBIANNE JOYCELYN
 4049 BELLEVUE A-8122
 ALLSTATE INSURANCE COMPANY
 NEW ORLEANS LA 70118 2100
 TELEPHONE (504) 941-3551

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOAN OFFICE
 400 PINEBARK STREET
 NEW ORLEANS, LA 70112

NEW ORLEANS HOME MORTGAGE AUTHORITY
 NEW ORLEANS, LOUISIANA
 70112

1279
 1279

SEVEN HUNDRED FIFTY AND 00/100 DOLLARS

#

NO
 0000

01/24/1997

MOVEL 00

ALLSTATE INSURANCE COMPANY
 FLOOD INSURANCE PROGRAM
 P. O. BOX 78300
 CHARLOTTE, NC 28273-0300

NEW ORLEANS HOME MORTGAGE AUTHORITY
 400 PINEBARK STREET
 NEW ORLEANS, LA 70112

001279 00650000290 1106 33350*

NEW ORLEANS HOME MORTGAGE AUTHORITY

NEW ORLEANS HOME MORTGAGE AUTHORITY
 400 PINEBARK STREET
 NEW ORLEANS, LA 70112

INVOICE AMOUNT
 1279
 395.00

0883718643 01/24/1997

FLOOD INSURANCE FOR
 HARRY & KENNEDY CHANDLER
 LOAN NUMBER: 7830037

POLICY NUMBER: 0884623094

0884623094 01/24/1997

320.00

FLOOD INSURANCE FOR
 HARRY & KENNEDY CHANDLER
 LOAN NUMBER: 7830037

POLICY NUMBER: 8-80-882309-4

VENDOR # 088008107 CHECK # 1279 DATE 01/24/1997 NET 715.00

ALLSTATE INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY

NEW ORLEANS HOME MORTGAGE AUTHORITY
 400 PINEBARK STREET
 NEW ORLEANS, LA 70112

INVOICE AMOUNT
 1279
 395.00

0883718643 01/24/1997

FLOOD INSURANCE FOR
 HARRY & KENNEDY CHANDLER
 LOAN NUMBER: 7830037

POLICY NUMBER: 0884623094

0884623094 01/24/1997

320.00

FLOOD INSURANCE FOR
 HARRY & KENNEDY CHANDLER
 LOAN NUMBER: 7830037

POLICY NUMBER: 8-80-882309-4

VENDOR # 088008107 CHECK # 1279 DATE 01/24/1997 NET 715.00

ALLSTATE INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY

1400 BARRACADE
 510 BARRACADE STREET
 NEW ORLEANS, LA 70114

FEDERAL RESERVE BANK OF COLOMBIA

NEW ORLEANS, LOUISIANA
 70114

3302
1502

FIVE HUNDRED NINETY NINE AND 80/100 DOLLARS

PAY TO THE ORDER OF

ALLSTATE INSURANCE COMPANY
 P. O. BOX 860849
 DALLAS, TX 75266-8849

04/18/1997

599.00

ALLSTATE INSURANCE COMPANY
 P. O. BOX 860849
 DALLAS, TX 75266-8849

NEW ORLEANS HOME MORTGAGE AUTHORITY

00130 2# 00850000290 4406 11150

NEW ORLEANS HOME MORTGAGE AUTHORITY

INVOICE AMOUNT

7520061 04/18/1997
 ONLINE TRAILER
 LOAN NO# 7520068
 POLICY NO# 0 45 483290

1302
599.00

VENDOR # 008600183 CHECK # 1382 DATE 04/18/1997 NET 599.00
 ALLSTATE INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY

INVOICE AMOUNT

7520061 04/18/1997
 ONLINE TRAILER
 LOAN NO# 7520068
 POLICY NO# 0 45 483290

1302
599.00

VENDOR # 008600183 CHECK # 5302 DATE 04/18/1997 NET 599.00
 ALLSTATE INSURANCE COMPANY

ALLSTATE FIRE INSURANCE COMPANY

HOMEOWNERS DECLARATIONS
PREMIUM STATEMENT

NEW PREMIUM PERIOD

Policy
Number

Q 45 443270 02/01

FROM MAY 7, 1977 12 01 A.M.
TO MAY 7, 1978 STANDARD
TIMEPolicy
Address to328 643270
URBAN HOMEOWNERS CORP OF NEW
ORLEANS C/O HO BURE BDC BETH
P O BOX 30337
NEW ORLEANS LA 70160-0337

TOTAL PREMIUM FOR THE PREMIUM PERIOD STATED IS \$ 579.00

5% PROTECTIVE DEVICE DISCOUNT APPLIED - HOMEOWNERS PREMIUM.

Policy
Address toHEIDI J HIGAN B
JOYCELH CLEMAN
8732 PRITCHARD PL
NEW ORLEANS LA 70118LOAN NO.
7120045AGENT- WILBERT FISHER JR
PHONE- 524 240-2468[15-1 27 026 515 010007 9 70 X 0121000 3 4 58 1001
000000 40]

02/01/78

PLEASE NOTE THIS IS NOT A REQUEST FOR PAYMENT.
YOUR BILL WILL BE MAILED SEPARATELY.

NEW ORLEANS HOME MORTGAGE AUTHORITY
P. O. BOX 50519
NEW ORLEANS, LOUISIANA 70150-0519

June 13, 1995

Mrs. Idella Tate
1309-81 Congress Street
New Orleans, Louisiana 70117

YOUR MORTGAGE LOAN PAYMENT IS PAST DUE
A LATE CHARGE IS NOW ASSESSED

Your Mortgage Loan payment with the City of New Orleans has exceeded the time limit for payment and a Late Charge has been assessed against your account. Late Charge is a penalty for failure to pay as you agreed. Please remit your payment with this coupon within the next two (2) days. If not received, a collector will be assigned to collect your payment(s) and additional fees and charges may occur.

LOAN NUMBER: P12587

TOTAL PM DUE:	211.82
ESCROW DUE:	.88
LATE CHARGE DUE:	12.72
UNPAID LATE CHARGES:	.88
OTHER FEES DUE:	.88
SUBSIDIZED AMOUNT: -	.88
PARTIAL FUNDS: -	145.56

TOTAL FUNDS DUE:	78.68
-------------------------	--------------

ATTACHMENT IV

mortgage insurer as well as notices and reports to the Mortgagee. Copies of all notices sent to the mortgage insurer shall be sent to the Mortgagee.

Section 502. Acceleration. Where a Mortgagee is chronically in default and the Servicer has exhausted all reasonable means of inducing the mortgagee to make timely payments, the Servicer should, subject to the provisions of Sections 500-504 of this Guide, recommend acceleration of the maturity of the Mortgage Note in accordance with its terms. The basis for the recommendation must be fully substantiated in the report. If the Mortgagee approves and maturity is accelerated, any proposal subsequently made by the Mortgagee for reinstatement and payment of a lesser amount than the full amount of the indebtedness should be referred to the Mortgagee.

Section 503. Abandonment. With respect to FHA/VA Mortgages where the mortgaged premises have been abandoned, the Servicer should immediately send a notice of default or notice of intent to foreclose to the FHA or VA, regardless of the extent of the delinquency. Waiver of the normal thirty (30) day waiting period should be requested from the VA when appropriate. In all cases of abandonment, the Servicer should attempt to locate the Mortgagee and ascertain the reasons for abandonment, and take such proper action as is necessary for the protection of the property to avoid waste, damage, and vandalism (including obtaining, where necessary, a vacancy permit on the hazard insurance policy).

The Servicer should immediately report to the Mortgagee the full results of its investigation and include a recommendation of the action that should be taken. The Servicer shall also comply with the applicable requirements of the FHA, VA or PHH carrier. No later than 30 days after sending the required demand letter to the Mortgagee, the Servicer shall advise the Mortgagee of its findings and recommend disposition of the Mortgage. The Servicer shall not assign any Mortgage without the Mortgagee's express authorization.

VI. PROCEDURES FOR REALIZATION UPON DEFAULTED MORTGAGE LOANS

Section 508. General. (a) The Servicer shall foreclose upon in the name of Mortgagee or otherwise compassionately convert the ownership of properties securing such of the Mortgage Loans as come into and continue in default and as to which no satisfactory arrangements can be made for collection of delinquent payments. In connection with such foreclosure or other conversion, the Servicer shall, consistent with Sections 500-507 of this Guide, follow such practices and procedures as it shall deem necessary or advisable and as shall be normal and usual in its general mortgage servicing activities. The foregoing is subject to the provision that, in the case of damage to mortgaged property from an uninsured or

COMMERCIAL AVIATION

MT 0007134 20

07 05 94

LIBRARY HEADQUARTERS CORP OF N O
3418 ORLEANS HOME MTO AUTHORITY
PO BOX 50018
NEW ORLEANS , LA 70112

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOAN SERVICES
 140 BONDING STREET
 NEW ORLEANS, LA. 70114

FIRST NATIONAL BANK OF COMMERCE
 NEW ORLEANS, LOUISIANA
 70139

1284
 1284

TWO HUNDRED FIFTY FOUR AND 00/100 DOLLARS

PAY

TO THE
ORDER OF

ALLSTATE INSURANCE COMPANY
 P. O. BOX 660649
 DALLAS, TX 75266-0649

DATE

09/30/1996

AMOUNT

254.00

NEW ORLEANS HOME MORTGAGE AUTHORITY
 APPROVED SIGNATURE

001254 00650000190 4406 33350*

NEW ORLEANS HOME MORTGAGE AUTHORITY

INVOICE # DATE PO #

7520049 09/30/1996

FIRE INSURANCE PREMIUM FOR
 STERELY LEWIS
 LOAN NUMBER: 7520049
 POLICY NUMBER: 0 45 962764

INVOICE AMOUNT
 254.00

VENDOR # 000000181 CHECK # 1284 DATE 09/30/1996 NET 254.00
 ALLSTATE INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY

INVOICE # DATE PO #

7520049 09/30/1996

FIRE INSURANCE PREMIUM FOR
 STERELY LEWIS
 LOAN NUMBER: 7520049
 POLICY NUMBER: 0 45 962764

INVOICE AMOUNT
 254.00

VENDOR # 000000181 CHECK # 1284 DATE 09/30/1996 NET 254.00
 ALLSTATE INSURANCE COMPANY

ALLSTATE INSURANCE COMPANY

RESIDENTIAL FIRE
PREMIUM STATEMENT

NEW PREMIUM PERIOD

Policy
Number

D 45 982784 10/30

FROM OCT 30- 1996 12 DL A.M.
TO OCT 30- 1997 STANDARD
TERRPolicy
Applied to241 656439
URBAN HOMEOWNERS CORP OF NEW
ORLEANS C/O NHPA
PO BOX 58537
NEW ORLEANS LA 70160-8537

TOTAL PREMIUM FOR THE POLICY PERIOD STATED IS \$ 259.00

SEE THE ATTACHED DECLARATIONS PAGE TO THE LEFT FOR A
DESCRIPTION OF YOUR COVERAGES AND LIMITS OF LIABILITYPolicy
Applied toBEVERLY R LEWIS
2713 TREASURE ST
NEW ORLEANS LA 70122AGENT- R. CHRISTINE PLENER
PHONE- 504 282-7210

ED-1	17	DL	SSL	225106	4	60	4	2563400	1	1	4000	1
											000000	40

Office use only

PLEASE NOTE THIS IS NOT A REQUEST FOR PAYMENT.
YOUR BILL WILL BE MAILED SEPARATELY.

ALLSTATE INSURANCE COMPANY
DECLARATIONS

The above description and limits of coverages are subject to the actual terms and conditions of the applicable policy.

ISSUED 09-11-96

7528049

0 96 780709 10/30

BEGINS ON OCT 30, 1996

ENDS ON OCT 30, 1997

BERNIE R LEWIS

12 01 A.M. STANDARD TIME

2712 TREASURY ST
NEW ORLEANS LA 70118

BUILDING DESCRIPTION - 1 FAMILY, 1 STORY,
COMPOSITION ROOF, FRAME CONSTRUCTION,
PERMANENT OCCUPANCY

Name and
Address
of first
mortgagee

URBAN HOMEOWNERS CORP OF NEW
ORLEANS C/O MORNA
PO BOX 50324
NEW ORLEANS LA 70150

The following coverages and limits of liability apply as shown below. If the word "amount" followed by a date appears above, the insurance applies only from that date.

ITEM DESCRIPTION AND LIMITS OF LIABILITY	ANNUAL PREMIUMS
BUILDING	\$40,000 4254.00

COVERAGES PROVIDED - FIRE AND EXTENDED COVERAGE

REFER TO THE ATTACHED FORMS FOR A DESCRIPTION OF THE PERILS PROVIDED UNDER EACH COVERAGE

THIS POLICY IS SUBJECT TO DEDUCTIBLE PROVISIONS - REFER TO THE PROVISIONS OF YOUR POLICY FOR PERILS AFFECTED

SUBJECT TO THE FOLLOWING FORMS AND ENDORSEMENTS
AUS648 ALLSTATE FIRE POLICY
AUS713 SUPPLEMENT PAGE
SWS-3/1/78) BASIC FORM
SWS-1108 OPERATORY ENDORSEMENT
SWS-8/31/78) 8008 SPECIAL LOSS REP. CL.

COUNTERSIGNED BY
AUTHORIZED AGENT - R. CHRISTINE FLEMING



FD00 Insurance Program
 100 New York Avenue, Baltimore, MD 21202-3000

Policy Number: 8-000-450708-0
 Loan Number: 762887

Insured Property Location:

2712 BRADSHAW STREET
 NEW BELLEVUE LA 70057

Placed Issuer— Expiration Notice

Standard Policy

IMPORTANT: Your first Allstate policy will expire on 06/30/76. To insure your policy, please follow the instructions on the return portion of this notice.

Insurer's Name and Mailing Address:

GENERAL LIENS
 2712 BRADSHAW STREET
 NEW BELLEVUE LA 70057

Amount of Insured Coverage Under Existing Policy:

Building	\$ 20,000	Contents	\$ 10,000
Automobile	\$ 500	Automobile	\$ 500

You may choose to upgrade your policy for a one-year term or for a three-year term. The three-year term offers special savings in the premium rate. In addition, you may choose an addition option which allows you to select a higher amount of insurance to keep pace with the potentially increasing value of your property.

	Coverage Option		Total Premium for	
	Building	Contents	One-Year Term	Three-Year Term
Current Coverage	\$0,000	\$0,000	\$ 175.00	\$ 585.00
Maximum Option	\$10,000	\$0,000	\$ 275.00	\$ 715.00
Maximum Available	\$20,000	\$10,000		

Premium includes a Federal Policy Service Fee.

Premium option with credit for payments filed simplifies.

Please note, the amount of insurance offered in this notice may not be sufficient to fully insure the value of your property. The Maximum Available coverage is noted above. Increasing the amount of insurance may provide replacement cost coverage in the event of a total loss (see item 7 on the reverse side). Please contact your agent if you wish to inquire about your eligibility to purchase additional insurance protection or if you have any questions.

Agent/Broker's Name and Mailing Address:

PLUMER, S. OWENS, INC.
 7017 LAMAR, SUITE 400
 ALLIANCE INSURANCE COMPANY
 NEW BELLEVUE LA 70057-2452

TEL. # 804-445-5124

Agent's Name and Mailing Address:

BRAN BROTHERS, INC. OF LA
 PO BOX 202117
 NEW BELLEVUE LA 70057-0217

Please contact your agent if any information in this notice is incorrect.

(04/73-14 0000-000)

LOAN SERVICES
REQUESTION FOR CHECKS

LS - 1993

NAME OF PAYEE ALLSTATE FLOOD INSURANCE PROGRAM

ADDRESS OF PAYEE P. O. BOX 70389

CITY, STATE, ZIP CODE CHARLOTTE, NC 28273-2308

AMOUNT OF CHECK \$ 275.00 DATE NEEDED 02-27-99

REASON FOR DISBURSEMENT

FLOOD INSURANCE PREMIUM FOR BEVERLY LEWIS

LOAN NUMBER: 7520889

POLICY NUMBER: 0-80-853818-5

DATE RECEIVED 02-26-99 REQUESTED BY D.M.J.
Deletha M. Johnson, Loan Services

APPROVED BY:  Rodney S. Johnson, Sr., CHIEF FINANCIAL OFFICER

ACCOUNTING DISTRIBUTION CHECK AUDIT

NAME OF ACCOUNT ACCT # AMT CHECK#

INSURANCE EXPENSE 8230 CHECK DATE

INVENTORY

BUDGET ANALYSIS

DECREASING BALANCE \$

NEW ORLEANS HOME MORTGAGE AUTHORITY

1844 BROADWAY
 15th FLOOR SUITE 1500
 NEW ORLEANS, LA 70112

FIRST NATIONAL BANK OF COMMERCE
 600 Poydras Street
 70112

1256

1256

TWO HUNDRED SEVENTY NINE AND 00/100 DOLLARS

PAY

TO THE
ORDER OF

ALLSTATE INSURANCE COMPANY
 P. O. BOX 70320
 CHARLOTTE, NC 28272-2300

DATE

09/30/1996

AMOUNT

279.00

NEW ORLEANS HOME MORTGAGE AUTHORITY
 AUTHORIZED SIGNATURE

⑈004256⑈ ⑆065000027⑆ 1256 33330⑈

NEW ORLEANS HOME MORTGAGE AUTHORITY

INVOICE # DATE PO #

752049 09/30/1996

FLOOD INSURANCE PREMIUM FOR

BEVERLY LEWIS

LOAN NUMBER: 752049

POLICY NUMBER: 0-88-651918-5

INVOICE AMOUNT

279.00

VENDOR # 00000107 CHECK # 1256 DATE 09/30/1996 NET 279.00
 ALLSTATE INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY

INVOICE # DATE PO #

752049 09/30/1996

FLOOD INSURANCE PREMIUM FOR

BEVERLY LEWIS

LOAN NUMBER: 752049

POLICY NUMBER: 0-88-651918-5

INVOICE AMOUNT

279.00

VENDOR # 00000107 CHECK # 1256 DATE 09/30/1996 NET 279.00
 ALLSTATE INSURANCE COMPANY

POLICY DECLARATIONS
RENEWALPOLICY TERM / EFFECTIVE 10-01 AM
10-01-76 TO 10-31-77POLICY NUMBER
44 2-20-103918-0PREMIUM RAYER
FIRST MORTGAGEELENDER NAME AND ADDRESS
URBAN HOUSING CORP OF MOINSURED NAME AND ADDRESS
BENTLEY LEWIS
2722 TREASURE STREET
NEW ORLEANS LA 70122PO BOX 54514
NEW ORLEANS LA 70130-0514

LOAN NUMBER: 730694

TELEPHONE (504) 945-6699

PROPERTY DESCRIPTION
BUILDING
NEW FLOOR WITH NO BALCONY
& SINGLE FAMILY RESIDENCECONTENTS
HOUSEHOLD CONTENTS LOCATED
ON FIRST FLOOR ONLY

NON ELIMATED BUILDING

COMMUNITY LOCATION
NEW ORLEANS-POLKARD PARISHCOMMUNITY NUMBER CLASS PERCENT
27 5284 000 0 0

RATING INFORMATION: REGULAR PROGRAM

FOR ONE	COST DTS	LOW ELY	BASE ELY	ELF BOFF
40	FROM TO	10-31-76		

BUILDING REPLACEMENT COST \$48,000 * MINIMUM DEDUCTIBLE AS OF 10-01

BUILDING AND CONTENTS COVERAGE AND RATING	COVERAGE	DEDUCTIBLE	TOTAL PREMIUM
BUILDING	\$28,000	\$ 0.00	\$124.00
CONTENTS	\$20,000	\$ 0.00	\$79.00
RATES: 0 - \$8.00/100.00		ANNUAL EXISTENTIAL	\$210.00
1 - \$8.75/100.00		DEDUCTIBLE DISCOUNT	-\$80.00
		COMMUNITY DISCOUNT	-\$21.00
		EXPENSE CREDIT	-\$45.00
		TOTAL WRITTEN PREMIUM	\$64.00
		FEDERAL POLICY SERVICE FEE	\$10.00
		TOTAL PREMIUM PAID	\$74.00

CHIEF PROPERTY ADDRESS
2722 TREASURE STREET
NEW ORLEANS LA 70122

AGENT NAME AND ADDRESS

CLARENCE B. CHRISTIAN
7017 CANAL STREET #10
NEW ORLEANS, LOUISIANA
ALLSTATE INSURANCE COMPANY
NEW ORLEANS LA 70130 5455
TELEPHONE (504) 283-4310

NEW ORLEANS HOME MORTGAGE AUTHORITY
MEMBER SERVICES
400 BARRACADE STREET
NEW ORLEANS, LA 70114

FIRST NATIONAL BANK OF CRENSHAW
NEW ORLEANS, LOUISIANA
11 11 1997

SERVICES RENDERED FIFTY FOUR AND 80/100 DOLLARS

PAID
TO THE
ORDER OF

04/18/1997

AMOUNT
\$754.00

ALLSTATE INSURANCE COMPANY
P. O. BOX 480648
DALLAS, TX 75288-0648

NEW ORLEANS HOME MORTGAGE AUTHORITY
BY: 

#0000011# 006 00000 290 1408 33350*

NEW ORLEANS HOME MORTGAGE AUTHORITY
MEMBER SERVICES
400 BARRACADE STREET
NEW ORLEANS, LA 70114

SERVICE AMOUNT
1297
754.00

7928820 04/18/1997
HILDA DARRY
LOAN NO# 3520025
POLICY# 0 45 375073

MEMOR # 800000160 CHECK # 1297 DATE 04/18/1997
ALLSTATE INSURANCE COMPANY

NET 754.00

NEW ORLEANS HOME MORTGAGE AUTHORITY
MEMBER SERVICES
400 BARRACADE STREET
NEW ORLEANS, LA 70114

SERVICE AMOUNT
1297
754.00

7930028 04/18/1997
HILDA DARRY
LOAN NO# 7928820
POLICY# 0 45 378810

MEMOR # 000800103 CHECK # 1297 DATE 04/18/1997
ALLSTATE INSURANCE COMPANY

NET 754.00

Detach along perforation. Return above portion with your paper to the enclosed envelope.
Please make check or money order payable to ALLSTATE.



Homeowners Insurance Bill

Policy Number: 0 45 490290 05/88

Premium Period: 01/01/88 To 03/31/88 (12:01 A.M. Standard Time)

Policy Issued To

OSNE, J MAGAN
& JEFFLYN COUSMAN
8702 PRITCHARD PL
NEW ORLEANS LA 70118-0081

Loan Number: 1100088

Due Date April 21, 1988
To Pay In Full \$ 299.00
Minimum Amount Due \$ 299.00

Policy Number Description

0 45 490290 05/88 8702 PRITCHARD PL

Agent And Telephone Number

WILBERT HENRIK JR (504) 582-3333

Payment Option

This is your last bill for your current policy period.

- Please pay \$ 299.00.
- You will receive no more bills until your policy renews or you make a change in coverage resulting in additional premiums.
- Thank you for letting us serve your insurance needs.

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOAN OFFICE
 854 MONROE STREET
 NEW ORLEANS, LA 70112

FIRST NATIONAL BANK OF COMMERCE
 NEW ORLEANS, LOUISIANA
 784-000

1247
 1247

PAY SEVEN HUNDRED SIXTY TWO AND 00/100 DOLLARS

TO THE ORDER OF (DATE) AMOUNT
 07/30/1986 *****762.00

REPUBLIC UNDERWRITERS
 P. O. BOX 930973
 DALLAS TX 75391-0973

NEW ORLEANS HOME MORTGAGE AUTHORITY
 854 MONROE STREET, LA 70112

⑆001247⑆ 60630000296 4406 33350⑆

NEW ORLEANS HOME MORTGAGE AUTHORITY
 AN SERVICE

1247

INVOICE #	DATE	PO #	INVOICE AMOUNT
	07/30/1986		762.00
HOMEOWNERS INSURANCE PREMIUM			
POLICY# 8387174			
JAMES TURNER			
LOAN NO. 7528852			

VENDOR #	118	CHECK #	1247	DATE	07/30/1986	NET	762.00
REPUBLIC UNDERWRITERS							

NEW ORLEANS HOME MORTGAGE AUTHORITY
 AN SERVICE

1247

INVOICE #	DATE	PO #	INVOICE AMOUNT
	07/30/1986		762.00
HOMEOWNERS INSURANCE PREMIUM			
POLICY# 8387174			
JAMES TURNER			
LOAN NO. 7528852			

VENDOR #	118	CHECK #	1247	DATE	07/30/1986	NET	762.00
REPUBLIC UNDERWRITERS							

4116

LOAN SERVING
REQUESTION FOR CHECKS

LS - 1883

NAME OF
PAYEE REPUBLIC UNDERWRITERS INS. CO.

ADDRESS OF PAYEE P. O. BOX 918873

CITY, STATE, ZIP CODE DALLAS, TEXAS 75291-0873

AMOUNT OF CHECK \$ 762.08 DATE NEEDED 05-02-98

REASON FOR DISBURSEMENT

HOMEOWNERS INS. PREM. FOR JAMES TURNER

LOAN NUMBER: 7526852

POLICY NUMBER: 0087174

DATE RECEIVED 05-28-98 REQUESTED BY: D. M. J.
Debra M. Johnson, Loan Servicer

APPROVED BY: [Signature]
Rodney B. Lefloch, Sr., CHIEF FINANCIAL OFFICER

ACCOUNTING DISTRIBUTION		CHECK AUDIT	
NAME OF ACCOUNT	ACCT #	AMT	CHECK#
INSURANCE	8220		
			CHECK DATE
			INVENTORY

BUDGET ANALYSIS

DECREASING BALANCE \$

INSURANCE POLICY NUMBER
TURNER, DR JAMES A 011 0017174 00

Pay From
FULL PAY
REPLACEMENT

Special Messages

Beneficiary
WELLS FARGO BANK CORP OF N C
CAREY CALDWELL HOME RTE RUTHERFORD
PO BOX 7010
BOX 7010, SA 27014

Beneficiary Information
CONSTRUCTION OR CONSTRUCTION RELATED RESIDENCY TYPE
TRADITIONAL 1000 1 FARMER
11 PROTECTIVE CLASS

Additional Remarks

Loan Payment

Additional Remarks

Foreign Insurance Co.

Issue Date 01/01/94
01/01/94 00 07 13 00 00

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOAN SERVICES
418 BROADWAY STREET
NEW ORLEANS, LA. 70111

FIRST NATIONAL BANK OF COMMERCE
NEW ORLEANS, LOUISIANA
540-000

1276

1276

TWO HUNDRED SEVENTYSEVEN AND 00/100 DOLLARS

PAY

TO THE
ORDER OF

DATE

12/05/1996

AMOUNT

\$277.00

THE TRAVELERS
FLOOD INSURANCE PROGRAM
P. O. BOX 78102
CHARLOTTE, NC 28272-0302

NEW ORLEANS HOME MORTGAGE AUTHORITY
FIRST NATIONAL BANK OF COMMERCE

⑈005276⑈ ⑈005500002⑈C ⑈1405 55550⑈

NEW ORLEANS HOME MORTGAGE AUTHORITY
NEW ORLEANS, LA. 70111

INVOICE AMOUNT

1276

DATE 12/05/1996

277.00

FLOOD INSURANCE PREMIUM FOR
JAMES A. TURNER
LOAN NUMBER: 7820012
POLICYS 2-8698-8713-B

VENUE # 000100120 CHECK # 1276 DATE 12/05/1996 NET 277.00
THE TRAVELERS

NEW ORLEANS HOME MORTGAGE AUTHORITY
NEW ORLEANS, LA. 70111

INVOICE AMOUNT

1276

DATE 12/05/1996

277.00

FLOOD INSURANCE PREMIUM FOR
JAMES A. TURNER
LOAN NUMBER: 7820012
POLICYS 2-8698-8713-B

VENUE # 000100120 CHECK # 1276 DATE 12/05/1996 NET 277.00
THE TRAVELERS

NEW ORLEANS HOME MORTGAGE AUTHORITY

LEAS SERVICE
118 BAYOU DRIVE
NEW ORLEANS, LA 70112

UNIT IN FULL PAY OF CONTRACT
NEW ORLEANS, LOUISIANA
44-1000

1309

ONE THOUSAND THREE HUNDRED AND 04/100 DOLLARS

PAY

TO THE
ORDER OF

DATE 04/18/1997

AMOUNT \$1,020.04

GALLODORO INSURANCE AGENCIES
817 EAST JUDEN PEREE DRIVE
CHARLOTTE, LA 70043

NEW ORLEANS HOME MORTGAGE AUTHORITY
BY 

001309 00610000294 4406 33350*

NEW ORLEANS HOME MORTGAGE AUTHORITY

INSTRUMENT NO. 1 DATE 1997 NO. 8

INVOICE AMOUNT 1309

750053 04/18/1997
SARLINE SHARP
4100 S. JOHNSON STREET
GENERAL LIABILITY \$200,000
LOAN NO. 7530053

1,020.04

VENUE # 800088130 CHECK # 1309 DATE 04/18/1997 NET 1,020.04
GALLODORO INSURANCE AGENCIES

NEW ORLEANS HOME MORTGAGE AUTHORITY

INSTRUMENT NO. 1 DATE 1997 NO. 8

INVOICE AMOUNT 1309

750053 04/18/1997
SARLINE SHARP
4100 S. JOHNSON STREET
GENERAL LIABILITY \$200,000
LOAN NO. 7530053

1,020.04

VENUE # 800088130 CHECK # 1309 DATE 04/18/1997 NET 1,020.04
GALLODORO INSURANCE AGENCIES

Gallodoro
Insurance Agencies, Inc.
 407 EAST JUDGE FOSTER DRIVE
 CHALMETTE, LOUISIANA 70002
 504 271-4811 - 504 294 271-4811

April 3, 1997

Deletha Johnson
 N.O. Home Mortgage Authority
 418 Perouse Street
 New Orleans, La. 70112

Earline Sharp
 4108 South Johnson Street
 New Orleans, La. 70125

Invoice for General Liability \$500,000

Premium.....\$1,029.94

15

Detach along perforation. Return above portion with your payment in the enclosed envelope.
Please make check or money order payable to—ALLSTATE.

Homeowners Insurance Bill

Policy Number: E-45 226288 02/78

Premium Period: 2/78/27 To: 2/78/28 (12:01 A.M. Standard Time)

Allstate
Totals in good hands.

Policy Issued To

LEOLA SIMPS WHITE
1705 TREASURE ST
NEW ORLEANS, LA. 70116-1705

Due Date February 24, 1978
To Pay in Full \$ 482.00
Minimum Amount Due \$ 482.00

Loan Number: 0027020850

Policy Number **Description**

E-45 226288 02/78 1705 TREASURE ST

Agent And Telephone Number

WILDONE JOHNSON SR (504) 383-0031

Payment Option

This is your last bill for your current policy period.

- Please pay it now.
- You will receive no more bills until your policy renews or you make a change in coverage resulting in additional premiums.
- Thank you for letting us serve your insurance needs.

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOUISIANA
 818 CANAL STREET
 NEW ORLEANS, LA 70112

FIRST NATIONAL BANK OF LOUISIANA
 NEW ORLEANS, LOUISIANA
 70112

1227

PAY THREE HUNDRED FIFTY SIX AND 00/100 DOLLARS

TO THE
ORDER OF

DATE

AMOUNT

06/13/1994

*****356.00

LAFAYETTE INSURANCE COMPANY

P.O. BOX 53285

NEW ORLEANS

LA 70119-8000

NEW ORLEANS HOME MORTGAGE AUTHORITY

818 CANAL STREET

⑆001227⑆ 00650000390 6606 33350⑆

NEW ORLEANS HOME MORTGAGE AUTHORITY

(NON-SERIALIZED)

1227

INVOICE # DATE PO #

INVOICE AMOUNT

06/13/1994

356.00

Borrowers Insurance for

RAYMOND CARTER.

LOAN NO. 752085C

POLICY NO. 60-490-435

INVOICE # 111 CHECK # 1227 DATE 06/13/1994 NET

NET

356.00

LAFAYETTE INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY

(NON-SERIALIZED)

1227

INVOICE # DATE PO #

INVOICE AMOUNT

06/13/1994

356.00

Borrowers Insurance for

RAYMOND CARTER.

LOAN NO. 752085C

POLICY NO. 60-490-435

INVOICE # 111 CHECK # 1227 DATE 06/13/1994 NET

NET

356.00

LAFAYETTE INSURANCE COMPANY

NEW ORLEANS HOME MORTGAGE AUTHORITY

1400 BAYVIEW DRIVE
 140 BAYVIEW STREET
 NEW ORLEANS, LA 70112

FIRST NATIONAL BANK OF COMMERCE
 NEW ORLEANS, LOUISIANA
 70112

1988

1288

ONE HUNDRED FIFTY FIVE AND 00/100 DOLLARS

PAY

TO THE
ORDER OF

OMAHA PROPERTY AND CASUALTY
 P. O. BOX 70001
 CHARLOTTE, NC 28273-0001

DATE

10/25/1988

AMOUNT

145.00

NEW ORLEANS HOME MORTGAGE AUTHORITY
 FIRST NATIONAL BANK OF COMMERCE (PRINTED AND)

⑈001266⑈ ⑈0050000029⑈ ⑈005 33350⑈

NEW ORLEANS HOME MORTGAGE AUTHORITY

2641 BAYVIEW DRIVE

DATE

PO #

10/25/1988

FLOOD INSURANCE PREMIUM

RAYMOND CARTER

LOAN NUMBER: 7510088

POLICY NUMBER: 3-0037-0074-B

INVOICE AMOUNT

145.00

VENDOR # 000000110 CHECK # 1088 DATE 10/25/1988 NET 145.00
 OMAHA PROPERTY AND CASUALTY

NEW ORLEANS HOME MORTGAGE AUTHORITY

2641 BAYVIEW DRIVE

INVOICE #

DATE

PO #

10/25/1988

FLOOD INSURANCE PREMIUM

RAYMOND CARTER

LOAN NUMBER: 7500888

POLICY NUMBER: 3-0037-0074-B

INVOICE AMOUNT

145.00

VENDOR # 000000110 CHECK # 1088 DATE 10/25/1988 NET 145.00
 OMAHA PROPERTY AND CASUALTY

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOAN SERVICES
 800 CANAL STREET
 NEW ORLEANS, LA 70112

FIRST NATIONAL BANK OF COMMERCE
 NEW ORLEANS, LOUISIANA
 143 000

1987

FOUR HUNDRED SIXTY FOUR AND 00/100 DOLLARS

PAY

TO THE
ORDER OFDATE
04/16/1997AMOUNT
\$464.00

STATE FARM INSURANCE CO.
 22 STATE FARM DRIVE
 MERICK, LA 71368-3801

NEW ORLEANS HOME MORTGAGE AUTHORITY
 AUTHORIZED SIGNATURE



⑈001305⑈ ⑈066000079⑈ ⑈106 ⑈3350⑈

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOAN SERVICES

DATE

NO. #

INVOICE AMOUNT

732007 04/16/1997

1305

MARY L. WATTE

464.00

LOAN NO# 732007

POLICY NO# 38-82-1411-1

VENDOR # 080003115 CHECK # 1305 DATE 04/16/1997 NET 464.00
 STATE FARM INSURANCE CO.

NEW ORLEANS HOME MORTGAGE AUTHORITY

LOAN SERVICES

DATE

NO. #

INVOICE AMOUNT

732007 04/16/1997

1305

MARY L. WATTE

464.00

LOAN NO# 732007

POLICY NO# 38-82-1411-1

VENDOR # 080003115 CHECK # 1305 DATE 04/16/1997 NET 464.00
 STATE FARM INSURANCE CO.

