

22ND JUDICIAL DISTRICT COURT FOR THE PARISH OF ST. TAMMANY

STATE OF LOUISIANA

NO: 2015-12954

DIVISION: B

STATE OF LOUISIANA-DIVISION OF ADMINISTRATION,
OFFICE OF COMMUNITY DEVELOPMENT,
DISASTER RECOVERY UNIT -
HAZARD MITIGATION GRANT PROGRAM

FILED

JUL 20 2015

VS.

CARLTON VANNOR, JR.

MALISE PRIETO - CLERK
Deputy *Stacie Hodder*

**PETITION FOR DECLARATORY JUDGMENT AND FOR
JUDGMENT TO RECOVER HAZARD MITIGATION
GRANT PROGRAM FUNDS**

NOW INTO COURT, through undersigned counsel, comes Petitioner, the State of Louisiana, Office of Community Development, Disaster Recovery Unit - Hazard Mitigation Grant Program (hereinafter "HMGP"), which respectfully files this Petition for Declaratory Judgment and for Judgment to Recover Hazard Mitigation Grant Program Funds. In support, HMGP respectfully represents:

1.

The Defendant in this case is Carlton Vannor, Jr., a major domiciliary of St. Tammany Parish, who voluntarily participated in HMGP to mitigate his home after Hurricane Katrina.

2.

HMGP is a mitigation program funded by FEMA and is administered by the State of Louisiana, the grantee. HMGP assists homeowners whose homes were damaged as a result of Hurricanes Katrina and Rita. It also helps homeowners in coastal Louisiana protect their homes from damage, which may occur in future natural disasters, by elevating their homes, reconstructing safer structures, or installing individual mitigation measures. The State of Louisiana serves as the funding vehicle by which FEMA funds are awarded to eligible homeowners.

3.

Defendant executed Voluntary Participation Agreement (hereinafter "VPA") on April 20, 2010 to participate in HMGP and to receive HMGP grants. Defendant also agreed to comply with all HMGP guidelines, which includes using HMGP funds for their intended purpose.

Exhibit A.

4.

FEMA Grant Funds in the total amount of \$19,331.00 (hereinafter "FEMA Grant Funds") were paid to Defendant by HMGP, \$7,500.00 on or about August 13, 2010 and \$11,831.00 on or about September 7, 2010 for the specific purpose of Individual Mitigation Measures and Elevation Measures (hereinafter "IMM/Elevation") at his home located at 37660 Desoto Street, Slidell, LA 70458. *Exhibit B (in globo)*.

5.

Photographs dated April 10, 2015 show that although the FEMA Grant Funds were received, Defendant's home was not mitigated. *Exhibit C (in globo)*.

6.

Three (3) separate collection letters were mailed to Defendant. The first letter dated November 25, 2013 was sent to Defendant at 37660 Desoto Street, Slidell, LA 70458, which was the address submitted by Defendant when he applied for the HMGP grant. The letter was sent by Certified Mail 7012 3460 0000 1289 9268 and the return receipt was signed on November 29, 2013. *Exhibit D (in globo)*.

7.

The second letter dated March 21, 2014 was mailed to Defendant. *Exhibit E (in globo)*.

8.

The third letter dated April 13, 2015 was sent to Defendant at P. O. Box 2995, Slidell, LA 70459 by Certified Mail 7014 0510 0001 1417 0846 and the Return Receipt was signed on April 16, 2015. *Exhibit F (in globo)*.

9.

Defendant has failed to respond to the letters and has failed to return the funds to the State.

10.

Defendant's failure to return the FEMA Grant Funds has resulted in Defendant owing to HMGP the FEMA Grant Funds, which must be recovered by HMGP, the State program charged with distributing FEMA funds for mitigation projects.

11.

HMGP must account to FEMA for all funds issued to homeowners. Failure of HMGP to recover the FEMA Grant Funds from Defendant will result in reimbursement to FEMA being required by the State of Louisiana.

12.

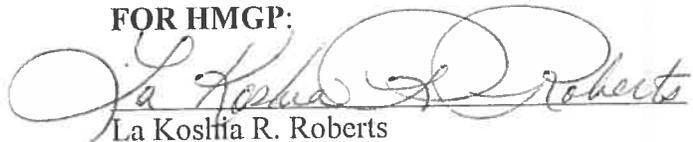
HMGP requests that the debt of \$19,331.00, owed by Defendant to HMGP, be recognized and that judgment in favor of HMGP be granted, directing Defendant to return and pay the FEMA Grant Funds to the State, in full.

ALL PREMISES CONSIDERED, WHEREFORE, HMGP PRAYS:

- a. That this Honorable Court declare that Defendant, Carlton Vannor, Jr., is non-compliant with the Voluntary Participation Agreements signed by him;
- b. That this Honorable Court declare that Defendant, Carlton Vannor, Jr., is indebted to HMGP in the amount of \$19,331.00 because of his failure to mitigate his home according to his agreement to abide by HMGP guidelines, including using HMGP funds for their intended purpose;
- c. That Defendant, Carlton Vannor, Jr., be ordered to return the \$19,331.00 HMGP grant to HMGP, in full;
- d. That there be judgment rendered herein in favor of HMGP and against Defendant, Carlton Vannor, Jr., in the full sum of \$19,331.00;
- e. That Defendant, Carlton Vannor, Jr., be assessed all costs and fees associated with this matter; and
- f. That the Court grant such other relief as is just and proper.

Respectfully submitted:

FOR HMGP:



La Koshia R. Roberts
Bar Roll No. 26715

State of Louisiana, through
its Division of Administration
2021 Lakeshore Drive, Suite 100
New Orleans, Louisiana 70122
Telephone: (504) 284-4022
Facsimile: (504) 284-4091
LaKoshia.Roberts@la.gov

**PUBLIC ENTITY/FEE EXEMPT
(La.R.S. 13:4521 and 13:5112)**

T. Randolph Richardson (Special Counsel)
Bar Roll No. 11245
Law Office of T. Randolph Richardson
1010 Common Street, Suite 3000
New Orleans, LA 70112
Phone: 504-212-4163
Fax: 504-581-7083
Email: trichar994@aol.com

22ND JUDICIAL DISTRICT COURT FOR THE PARISH OF ST. TAMMANY

STATE OF LOUISIANA

NO: 2015-12954

DIVISION: B

STATE OF LOUISIANA-DIVISION OF ADMINISTRATION,
OFFICE OF COMMUNITY DEVELOPMENT,
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VS.

JUL 20 2015

CARLTON VANNOR, JR.

MALISE PRIETO - CLERK
Deputy *Sladec Moxilan*

VERIFICATION

CONSIDERING THE FOREGOING PETITION FOR RECOVERY OF HAZARD
MITIGATION GRANT PROGRAM FUNDS:

I, CRAIG P. TAFFARO, JR., Director of the State of Louisiana's Hazard Mitigation
Grant Program, declare under penalty of perjury that the representations made in the foregoing
Petition are true and correct to the best of my knowledge, belief and understanding.

THUS DONE ON THIS 14th DAY OF July 2015 IN NEW ORLEANS,
LOUISIANA.

CPTJ

Craig P. Taffaro, Jr.

La Koshia Reconda Roberts

La Koshia Reconda Roberts

Notary Public
Bar Roll No. 26715
My Commission expires at death.

PLEASE SERVE:

CARLTON VANNOR, JR.
37660 DESOTO STREET
SLIDELL, LA 70458

2015-12954 B

OCD-DRU
HAZARD MITIGATION PROGRAM
VOLUNTARY PARTICIPATION AGREEMENT (VPA)

Complete and return this form by mail to:

OCD-DRU HMGP Program
P. O. Box 1089
Hammond, LA 70404-1089

APR 19 2010

FILED

JUL 20 2015

Road Home # 06HH 132800

MALISE PRIETO-CLERK
Deputy Shadie Nollan

SECTION 1: Mitigation ELECTION (check one)

I/We have sold the home that was damaged during the storm and therefore will not be participating in the OCD-DRU HMGP Award Program.

I/We am not interested in receiving an OCD-DRU HMGP Award

IF YOU CHECKED EITHER OF THE ABOVE: SIGN BELOW AND RETURN THIS FORM, OTHERWISE CONTINUE.

CARLTON VANNOR JR
Applicant or Co-Applicant NAME

LV-1
Applicant or Co-Applicant SIGNATURE

4/20/2010
Date

Applicant or Co-Applicant NAME

Applicant or Co-Applicant SIGNATURE

Date

Home Phone: (504) 296-3002

Cell Phone: (504) 939-9358

Are you signing as an agent with Power of Attorney (POA) for an applicant? YES NO If signing as agent with Power of Attorney:

Agent NAME (person with POA)

Agent SIGNATURE

Date

I/WE AM/ARE INTERESTED IN RECEIVING AN OCD-DRU HMGP AWARD. IF YOU CHECK THIS BOX, YOU NEED TO MEET ALL CRITERIA IN SECTION 2.

SECTION 2: PROGRAM ELIGIBILITY

A homeowner must meet ALL of the following criteria to be considered for the OCD-DRU HMGP Award:

- a. Applicant is eligible for Road Home Program benefits as part of the Homeowner Assistance Program. (NOTE: Even if a homeowner received a zero award letter from Road Home, that homeowner may still be eligible for money through the OCD-DRU HMGP.
- b. Homeowner selected *Road Home* Option 1 – "Keep Our Home".
- c. Homeowner still owns the home that was eligible for *Road Home* benefits.
- d. The structure is located in a FEMA designated ABFE area or the mitigation activity is deemed cost beneficial according to FEMA guidelines. (IMMs are not required to undergo a cost benefit analysis since FEMA has determined all IMMs to be globally cost beneficial for this grant.
- e. Homeowner agrees to comply with all OCD-DRU HMGP guidelines.

06HH132800

CARLTON VANNOR

04/19/2010

VPA



04/19/2010 2106HH1328002222210



SECTION 3: I AM INTERESTED IN PARTICIPATING IN THE FOLLOWING PROGRAM/S:

Pilot Reconstruction

Elevation

Individual Mitigation Measures (IMM)

APR 19 2010

SECTION 4: VPA STATEMENT OF COMPLIANCE

This Agreement of Voluntary Participation is made on 04/20/2010 (date). I/We are the owner of the following property, eligible for Road Home assistance and damaged by Hurricane Katrina and/or Rita at the following municipal address:

37660 Desoto St. Slidell LA, St Tammany 70458 (the "Property").
Street City Parish ZIP

I/We currently plan to participate in the OCD-DRU HMGP Program. I/We understand that participation in OCD-DRU HMGP Program and understand that:

- The program is voluntary in nature;
- I/We are under no obligation to participate;
- I/We may drop out of the program at any time before receiving an award;
- The program reimburses cost of mitigation measures, homeowner must complete measures and request reimbursement from OCD-DRU's HMGP;
- Due to limited funding, IMM will be serviced on a "first come, first serve" basis until all funding is exhausted.

I/We understand that before cost will be reimbursed that an OCD-DRU HMGP Covenant must signed, which requires the property owner to obtain and maintain flood insurance. The OCD-DRU HMGP will be recorded with Conveyance Records in the parish where the property is located.

For Pilot Reconstruction Projects:

- Property owner has been notified that the reconstructed structure total square footage cannot exceed 10% of the total square footage of the original structure on or before the date of the event for which funding is authorized.
- Property owner has been notified that the maximum award amount is \$100,000, less duplication of benefits.
- Property owner confirms that the information described in the preceding paragraphs has been explained and the information is understood.

CARLTON VANNOR JR
Applicant or Co-Applicant NAME

[Signature]
Applicant or Co-Applicant SIGNATURE

4/20/2010
Date

Applicant or Co-Applicant NAME

Applicant or Co-Applicant SIGNATURE

Date

Are you signing as an agent with Power of Attorney (POA) for an applicant? YES NO If signing as agent with Power of Attorney:

Agent NAME (person with POA)

Agent SIGNATURE

Date

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MALISE PRIETO-CLERK
Deputy *Stacie Moxley*

OSRA Vendor Search

Page 1 of 1



- Vendor Search
- Vendor History
- Account Receivable
- Invoice
- Payment Report
- Published and Proposed Vendors
- Entity Status
- Entity Address Report
- Vendor Training Manual

[Home](#)
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[Payments](#)
[Payee Search](#)
[Payee Details](#)
[Request Options](#)

Sort the information below by clicking on the column headers. Click on the agency number below for contact information.

Payee Remittance Address:
 3766Q DESOTO ST
 SLIDELL, LA 70458

Check/EFT Number: EP 00000512237
Check/EFT Date: 08/19/2010
Status Change Date: 08/13/2010
 Status: Cleared

Check/EFT Line Details:
 (Click on agency for contact information)

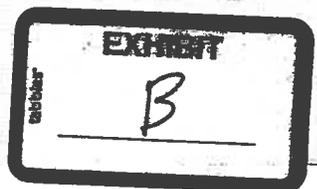
Check/EFT Total: 7,500.00

Total Number of Lines: 1

Agency	Document ID	Ref Doc ID	Invoice #	Comments	Line Amount
107	PY000039808		HM0500002290	08/11/2010	7,500.00

[data calendar \(ev\)](#)
[Help Desk](#)
[6555 24 hrs](#)
[Sign Off/Sign On](#)
[Contacts](#)

https://www.prd.iloa.louisiana.gov/vendorsearch/detail.cfm?chade_number=00000512237



8/8/2010

Office of Statewide Reporting and Accounting Policy

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[New Louisiana #](#)

Vendor Search

Vendor Locations

Payment

Help

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Vendor Locations

Payment

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Vendor Search

Vendor Locations

Sort the information below by clicking on the column headers. Click on the agency number below for contact information.

Payee Reimburse Address:

37660 PEGOTD ST
SLIDELL, LA 70498

Check/EFT Number: #F08000516164

Check/EFT Date: 09/07/2010
Status Change Date: 09/07/2010
Status: Cleared

Check/EFT line Details:
(click on agency for contact information)

check/EFT Total: 11,831.00

Agency	Document ID	Ref Doc ID	Invoice #	Comments	Line Amount
107	PA00004702				11,831.00

[Total Number of Lines: 1](#)
[Help Desk](#)
[EASB SA and CS](#)
[Search OSRAP](#)
[Contact](#)

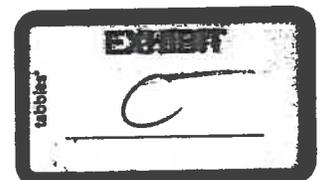
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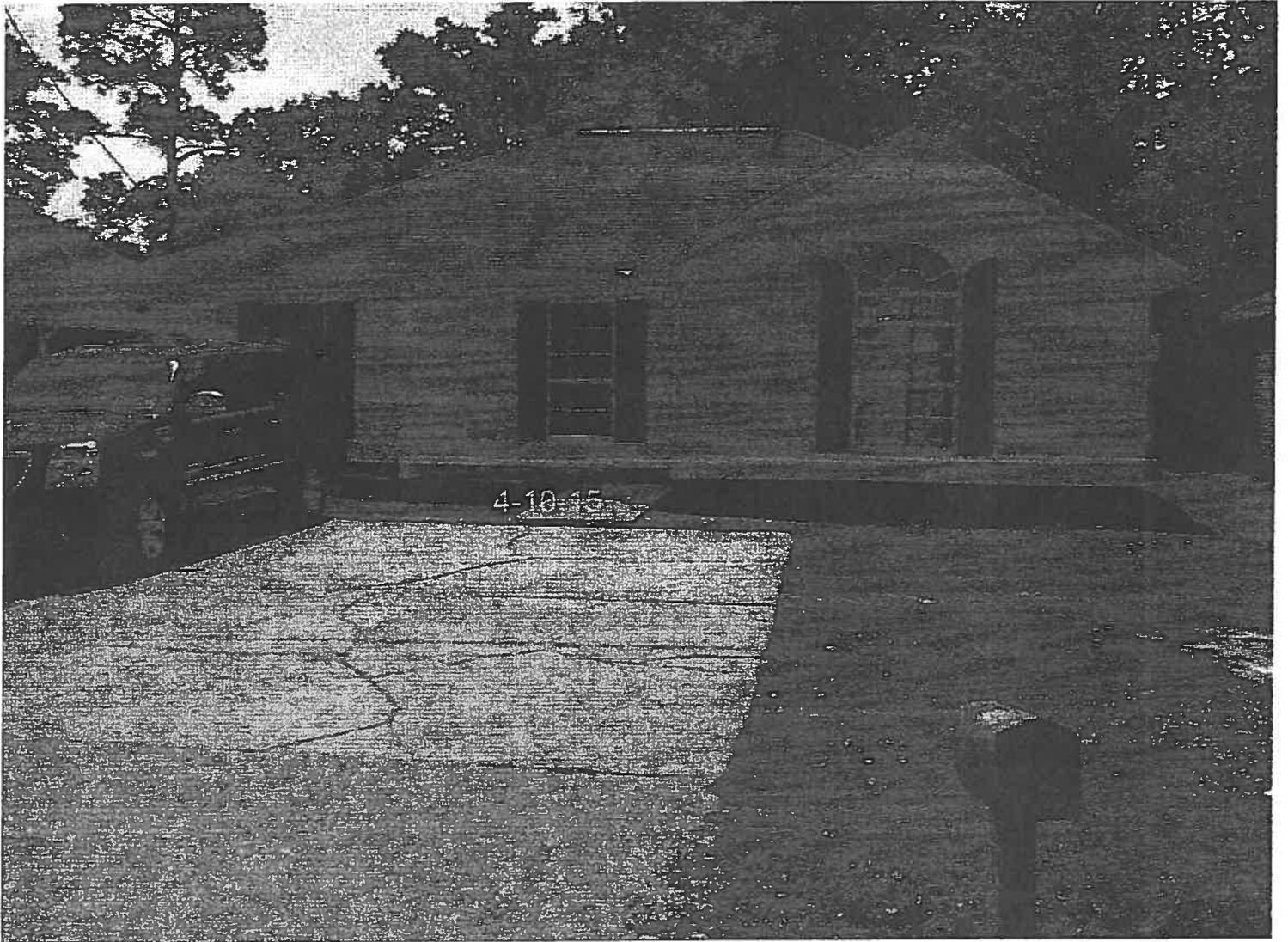
JUL 20 2015

MALISE PRIETO-CLERK
Deputy *Saddie Hordani*

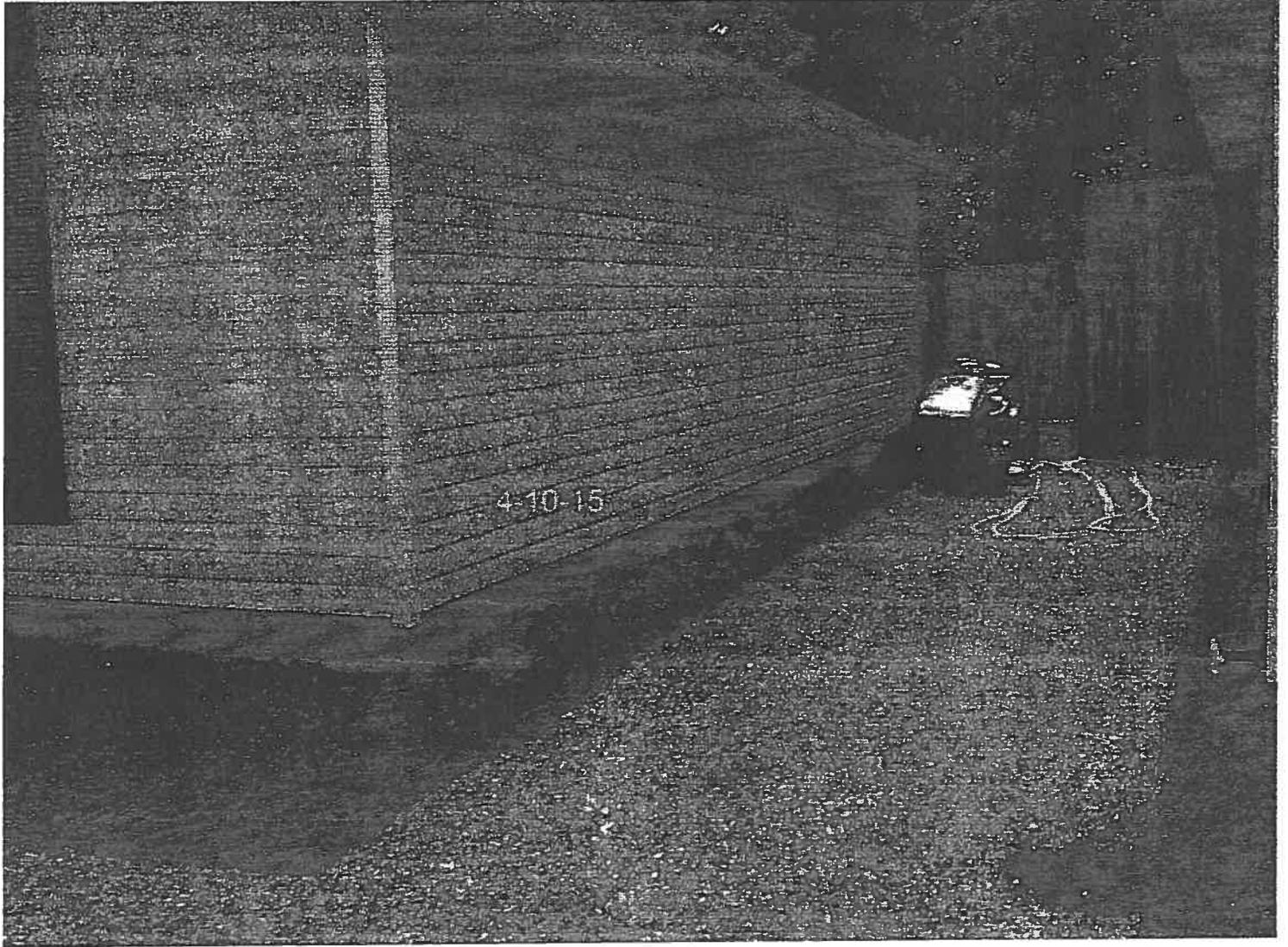
4-10-15

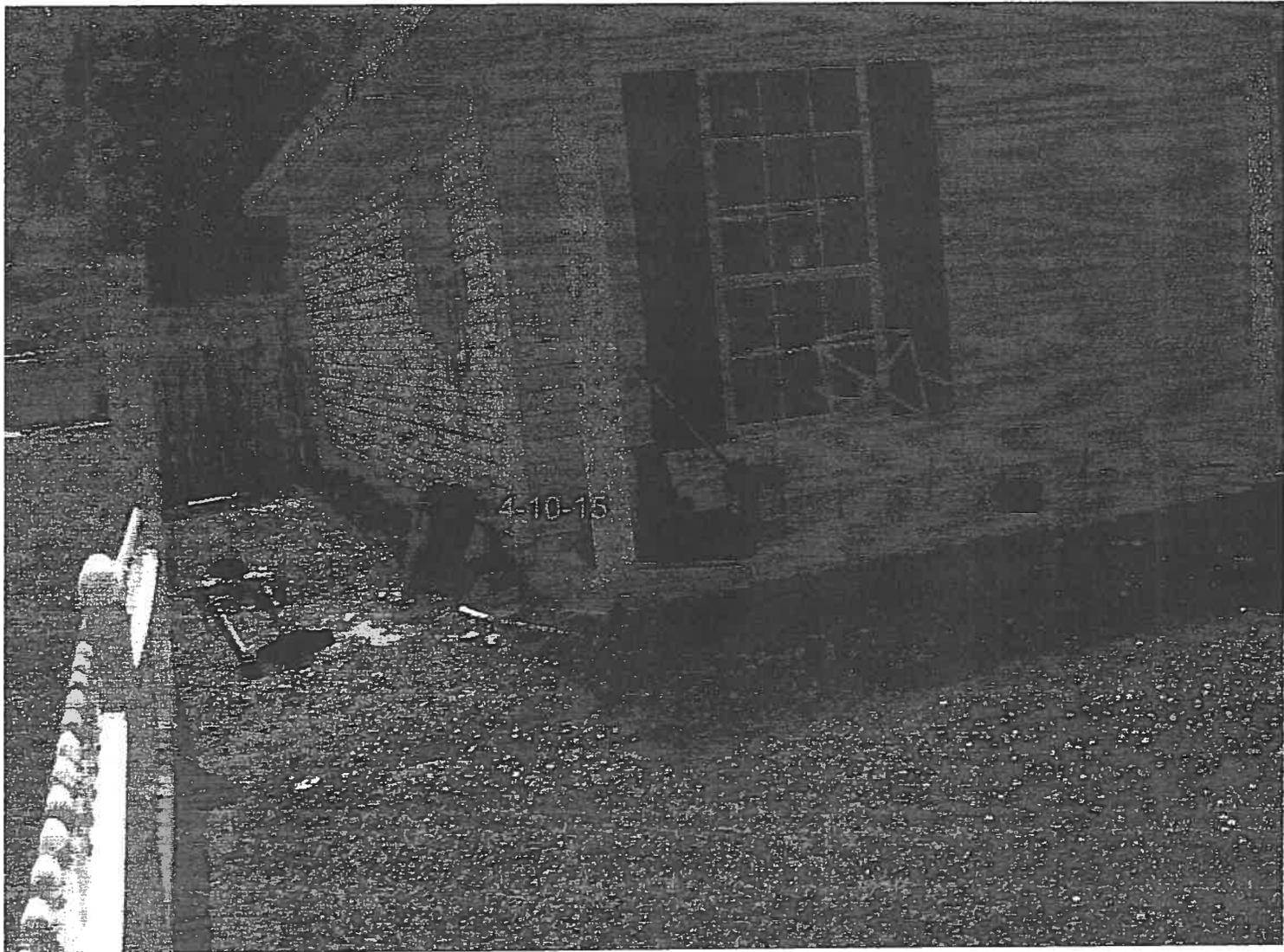


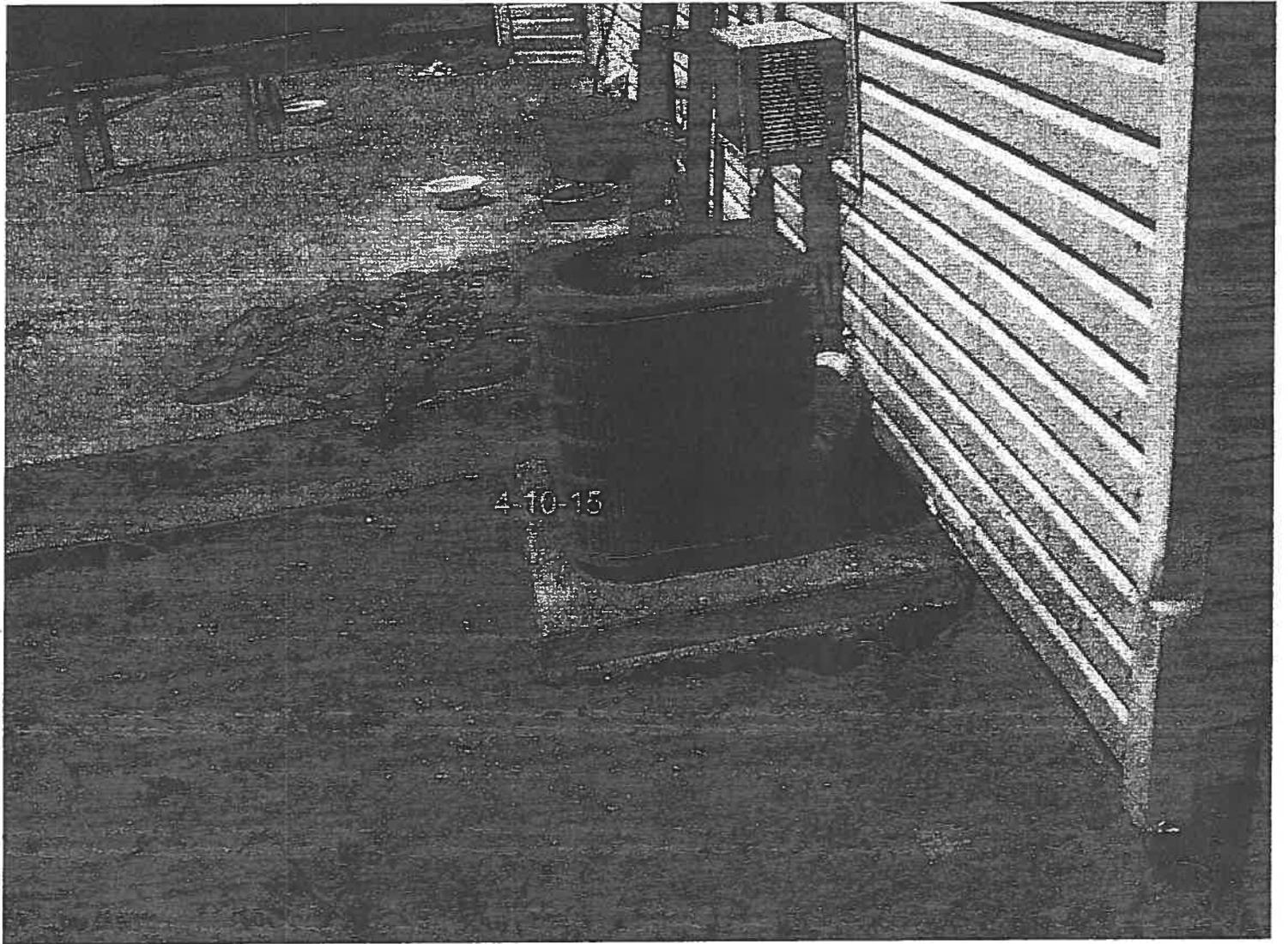




4-10-15









United States
Department of Justice

Office of the Inspector General
Washington, D.C. 20535

Report No. OIG-01-001

April 10, 1995

Dear Sir:

Reference is made to your letter of April 10, 1995.

Enclosed for you are two copies of the report.

Very truly yours,

William J. Clinton
Inspector General

4-10-95

Enclosure

Very truly yours,
William J. Clinton
Inspector General

cc: [illegible]



State of Louisiana
HAZARD MITIGATION GRANT PROGRAM

P.O. Box 5098 • BATON ROUGE, LA 70821-5098 • TOLL FREE (877) 824-8312 • FAX 225-336-0846 •
 hazardmitigation@mitigatela.org

November 25, 2013

Road Home ID: 06HH132800

MR CARLTON VANNOR JR
 37660 DESOTO ST
 SLIDELL, LA 70458

2015-12954 B

FILED

JUL 20 2015

MALISE PRIETO-CLERK
 Deputy *Jadine Hoplan*

SUBJECT: Verification of Mitigation Grant Funds

Dear MR CARLTON VANNOR JR:

A review has been completed on your Hazard Mitigation grant file in order to confirm you received the correct amount of grant funds. The grant requires that the homeowner meet specific requirements listed in the Alternative Payment Option Affidavit and Agreement. Failure to satisfy the conditions listed in the Alternative Payment Option Affidavit and Agreement and the OCD-DRU HMGP Covenant will place you in default of this agreement. In hopes that your input may prevent the need to seek a return of grant funds, please review the information below for accuracy and provide additional documentation as necessary.

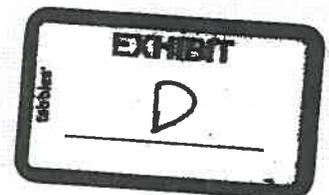
Our review has determined that the following apply to your grant(s).

- Grant funds were not used for the purposes intended and/or in accordance with the policies of the Hazard Mitigation Grant Program.

Due to the determination noted above, your grant values have been adjusted:

HMGP Grant Funds Received		Adjusted HMGP Values	
Elevation Grant	\$19,331.00	Elevation Grant	\$0.00
Individual Mitigation Measures (IMM)	\$0.00	Individual Mitigation Measures (IMM)	\$0.00
Reconstruction Grant	\$0.00	Reconstruction Grant	\$0.00
Total HMGP Funds Received	\$19,331.00	Total Hazard Mitigation Benefit	\$0.00

Based on the calculations above, our records indicate that the overpayment of your Hazard Mitigation Grant 06HH132800 is \$19,331.00.



Please understand that the State of Louisiana remains committed to ensuring that your application was processed in an accurate and fair manner, and in accordance with all governing laws, rules, and policies. We have assigned a case manager in our office, to work with you in connection with this request for input.

If you believe that the reason(s) stated above for the change of your grant amount is wrong, we need you to provide information for our consideration that shows the above finding is incorrect. Please return ATTACHMENT 1 (page 3 of this letter) with all supporting documentation to OCD for a final review.

Your response must be postmarked within thirty (30) days of the date at the top of this notification letter. If you have additional questions regarding this letter, please call 504-284-4020 or send email to charlotte.griffin@mitigate.la.gov for assistance.

If you agree with the finding that an overpayment has occurred, you can return the funds as provided in Attachment 1. If you are unable to provide a full payment at this time, please contact your case manager for further instructions.

We appreciate your assistance in connection with this request. Failure to respond will be interpreted as your confirmation of this calculation and determination, and may result in additional collection activities.

Sincerely,

Office of Community Development - HMGP



OCD-DRU HMGP is a federally-funded program. Providing false or misleading information in an attempt to fraudulently obtain HMGP funds is a federal violation and will be prosecuted to the full extent of the law. Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willfully making false or fraudulent statements to any department of the United States Government. Because the HMGP program is a federally-funded program, applicants are subject to Title 18, Section 1001 of the U.S. Code.

The Office of Community Development (Disaster Recovery Unit) does not discriminate on the basis of race, color, national origin, sex, age, religion or disability, and provides, upon request, reasonable accommodation, including auxiliary aids and services, to afford an individual with a disability an equal opportunity to participate in all services, programs and activities. Any persons requiring special needs assistance should contact a Call Center Specialist, at (877) 824-8312 at least five business days prior to any scheduled meeting. The TDD number for the hearing impaired is 1-800-845-5277. Additional information regarding the use of the Louisiana Relay service can be found at the following link: <http://www.hawaiirelay.com/relayinfo/howto.htm>

Attachment 1

THIS FORM MUST BE SIGNED BY THE BELOW NAMED APPLICANT AND RETURNED BY MAIL TO THE OFFICE OF COMMUNITY DEVELOPMENT ON OR BEFORE December 30, 2013.

Road Home ID: 06HH132800

MR CARLTON VANNOR JR
37660 DESOTO ST
SLADELL, LA 70458

Case Manager:

Please select one (1) option below. This form must be returned within thirty (30) days of the date on this letter.

- I have elected to return the overpayment to the Office of Community Development, Disaster Recovery Unit. I have enclosed my certified check, made payable to "Louisiana Division of Administration - DRU", in the amount of \$19,331.00 mailed to:

Division of Administration
Office of Community Development
Hazard Mitigation Grant Program
Finance Department
P.O. Box 706
Baton Rouge, Louisiana 70821

- I agree with the finding that an overpayment has occurred but cannot make full payment at this time. Please have my case manager contact me. My proposed repayment plan is attached.
- I disagree with the finding of an overpayment of my Hazard Mitigation grant and have enclosed supporting documents. The following factors used to calculate my award are incorrect:

PRINTED NAME: _____ Date _____

SIGNATURE: _____

- I am not the primary applicant for this case. If checked, please state your relationship:

English

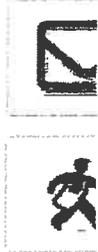
Customer Service

USPS Mobile

Register / Sign In



USPS Tracking™



Tracking Number: 7012346000012899268

Product & Tracking Information

Avi

Postal Product:

Features:
Certified Mail™

DATE & TIME	STATUS OF ITEM	LOCATION
November 29, 2013 , 12:35 pm	<u>Delivered</u>	SLIDELL, LA 70458
Your item was delivered at 12:35 pm on November 29, 2013 in SLIDELL, LA 70458.		
November 28, 2013 , 6:35 am	Departed USPS Facility	NEW ORLEANS, LA 70113
November 27, 2013 , 10:59 pm	Arrived at USPS Facility	NEW ORLEANS, LA 70113
November 26, 2013 , 8:21 pm	Departed USPS Facility	BATON ROUGE, LA 70826
November 26, 2013 , 8:00 pm	Arrived at USPS Facility	BATON ROUGE, LA 70826

Track Another Package

Mana



State of Louisiana
HAZARD MITIGATION GRANT PROGRAM

P.O. Box 5098 • BATON ROUGE, LA 70821-5098 • TOLL FREE (877) 824-8312 • FAX 225-330-0846 •
 hazardmitigation@mitigatela.org

2015-12954 B

FILED

«Date»

«App_First_Name» «App_Last_Name»
 «Mailing_Address»
 «Mailing_City», «Mailing_State» «Mailing_Zip»
 Road Home ID: «App_ID»

JUL 20 2015

MALISE PRIETO-CLERK
 Deputy *Jaddie Nodlan*

SUBJECT: Final HMGP Collection Attempt

Dear «App_First_Name» «App_Last_Name»:

The Hazard Mitigation Grant Program has previously informed you of the need to reconcile the grant funds that were disbursed to you for your specific mitigation activity. The Program has previously sent you correspondence regarding the need to reconcile these funds. Because you have not responded, either through the return of grant funds or by providing satisfactory proof of completion of the funded mitigation activity, you are hereby notified that the Hazard Mitigation Grant Program is required to pursue collection of all funds.

You should be aware that the Hazard Mitigation Grant Program will use all available resources to recoup the grant funds disbursed to you including, but not limited to, collection agency services, wage garnishments, civil action, and income tax return liens.

This is the last correspondence you will receive from the Program in an attempt to collect these funds. Your file will then be referred to the appropriate agencies for collection efforts as well as review for potential criminal violations. All future correspondence will be directly from the appropriate collection agency.

A table has been attached describing the grant funds received and the related activity for those funds.

You may stop the above actions by immediately contacting the Hazard Mitigation Grant Program at (504) 284-4020 to make acceptable repayment arrangements. Once your file has been referred for collection, your ability to reconcile the funds directly with the Program will end.

Respectfully,

Craig P. Taffaro, Jr.
 Director, Hazard Mitigation Grant Program
 and Recovery Coordination

Enclosure

OCD-DRU HMGP is a federally-funded program. Providing false or misleading information in an attempt to fraudulently obtain HMGP funds is a federal violation and will be prosecuted to the full extent of the law. Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. Because the HMGP program is a federally funded program, applicants are subject to Title 18, Section 1001 of the U.S. Code.

The Office of Community Development Disaster Recovery Unit does not discriminate on the basis of race, color, national origin, sex, age, religion or disability, and provides, upon request, reasonable accommodation, including auxiliary aids and services, to afford an individual with a disability an equal opportunity to participate in all services, programs and activities. Any persons requiring special needs assistance should contact a Call Center Specialist, at (877) 824-8312 at least five business days prior to any scheduled meeting. The TDD number for the hearing impaired is 1-800-846-5277. Additional information regarding the use of the Louisiana Relay service can be found at the following link: http://www.hamiltonrelay.com/states/la_howto.htm.

AN EQUAL OPPORTUNITY EMPLOYER





State of Louisiana
HAZARD MITIGATION GRANT PROGRAM

P.O. Box 5098 • BATON ROUGE, LA 70821-5098 • TOLL FREE (877) 824-8312 • FAX 225-330-0846 •
 hazardmitigation@mitigatela.org

Our review has determined that the following apply to your «Grant_Type» grant(s):

HMGP Grant Funds Received		Adjusted HMGP Values	
Elevation Grant	«Elevation Gross Paid»	Elevation Grant	«Elevation Adjusted»
Individual Mitigation Measures (IMM)	«IMM Gross Paid»	Individual Mitigation Measures (IMM)	«IMM Adjusted»
Reconstruction Grant	«Recon Gross Paid»	Reconstruction Grant	«Recon Adjusted»
Total HMGP Funds Received	«Gross Paid»	Total Hazard Mitigation Benefit	«Net Amount»

Based on the calculations above, our records indicate that the overpayment of your Hazard Mitigation Grant «App_ID» is «Net Amount».

Confirmed by: *Sage King*
Monny Allward

App ID	App First Name	App Last Name	Mailing Address	Mailing City	Mailing State	Mailing Zip
06HH196492	MELISSA	ADAMS	5125 Senac Drive	Metairie	LA	70003
06HH174539	JULIO	ALEGRIA	230 27th	Kenner	LA	70062
06HH068852	GLENN	ALEXIS	5010 PRESS DR	NEW ORLEANS	LA	70126
06HH023672	JEANNE	ALLEN	3336 Thilly Dr.	Kenner	LA	70085
06HH155204	LOUBERTHA	ALLEN	1933 PACE BLVD	NEW ORLEANS	LA	70114
06HH157524	REGINALD	ALLEN	2116 South Village Green Street	Harvey	LA	70058
06HH178676	JAMES	ALLEN	3248 BLOOMINGDALE CT	NEW ORLEANS	LA	70126
06HH088426	ANTHONY	ALMERICCO	2921 BUFFON ST	CHALMETTE	LA	70043
06HH061793	GEORGE	ALONZO	5013 SENAC DR	METAIRIE	LA	70003
06HH068138	MARCO	ALVAREZ	1700 HORTON RD	ALBERTVILLE	AL	35950 2564
06HH051905	THARISE	ANDERSON	5808 Milladon avenue	Marrero	LA	70072
06HH074522	VANESSA	ANDERSON	673 E NIAGARA CIR	GREYNA	LA	70056
06HH074448	JAMES	ANDERSON	1700 St. Maurice Ave.	NEW ORLEANS	LA	70117
06HH133970	JOANA	ANDERSON	P.O. BOX 1162	MCDONOUGH	GA	30253
06HH080046	LEAH	AUGUSTINE	3852 PEACHTREE CT	New Orleans	LA	70131
06HH015615	DORRELL	BACHEMIN	2038 HEATHER LANE	SLIDELL	LA	70461
06HH130149	ESTELL	BADGER	1644 MARINE ST	Marrero	LA	70072
06HH006345	PAULINE	BANKS	3106 MONROE STREET	NEW ORLEANS	LA	70118
06HH097405	PAUL	BANKS	2552 RIDGECREST RD	MARRERO	LA	70072 5373
06HH023830	MONIQUE	BARCONEY	3214 Camellia Avenue	Houma	LA	70363
06HH051289	CORNELIA	BARDALES	4114 Saint Elizabeth Dr	Kenner	LA	70065 1843
06HH015414	FELICIA	BARNES	P.O. Box 3056	Slidell	LA	70461 7045
06HH046648	SHAMARIE	BARNETT	329 PAT DR	AVONDALE	LA	70094
06HH024796	WILBERT	BASTIAN	5705 BACCICH ST	New Orleans	LA	70122
06HH101679	JUANITA	BATISTE	5818 Louis Prima West Drive	New Orleans	LA	70128
06HH148866	EARL	BATTLE	1100 MARTIN DR	MARRERO	LA	70072
06HH039940	REGINALD	BEACO	2601 ARTS ST	NEW ORLEANS	LA	70117 5529
06HH008134	MELANIE	BECNEL	3820 Red Cedar Lane	Harvey	LA	70058 1607
06HH023696	MICHAEL	BELL	8541 Morrison Rd	New Orleans	LA	70127
06HH104779	BETTY	BENDER	PO BOX 1544	SLIDELL	LA	70458
06HH063216	JOSEPH	BENOIT	102 W SEGURA ST	ERATH	LA	70533
06HH054058	PATRICIA	BICKHAM	5044 CLAYTON DR	BATON ROUGE	LA	70805
06HH106358	GEORGE	BICKHAM	4942 LURLINE STREET	NEW ORLEANS	LA	70127
06HH1225286	MILDRED	BIRDEN	9461 CABILDO LN	WESTWEGO	LA	70094



06HH021310	ANTIONETTE	TUCKER	318 Cumberland	River Ridge	LA	70123
06HH018079	MAJOR	TYLER	4455 REYNES STREET	New Orleans	LA	70126
06HH008631	ERIC	VALTEAU	320 wallace dr.	New Orleans	LA	70122
06HH132800	CARLTON	VANNOR	P.O.BOX 2995	SLIDELL	LA	70459
06HH018985	KERBERT	VAUGHN	14000 WIMBLEDON LOOP	LITTLE ROCK	AR	72210 6760
06HH172137	LUCILLE	VINNETT	PO BOX 425	New Sarry	LA	70078
06HH034903	BETTY	WADE	4012 PARIS AVE	NEW ORLEANS	LA	70122
06HH015295	KVAME	WALKER	2514 ARCADIA RIDGE LN	KATY	TX	77449
06HH142814	CASSANDRA	WALL	7726 John Newcombe Ave	BATON ROUGE	LA	70810
06HH132064	AYANNA	WALLACE	PO BOX 56	WESTWEGO	LA	70096
06HH066269	JANE	WALLACE-COLEMAN	9200 OLIVE ST.	NEW ORLEANS	LA	70118
06HH016917	SHAWNELL	WARE	7311 Camberley Drive	NEW ORLEANS	LA	70128
06HH116464	GWENDOLYN	WARNER	1712 Westminster Blvd	New Orleans	LA	70072
06HH050393	DARNELL	WARREN	PO BOX 6041	NEW ORLEANS	LA	70174
06HH044842	FLORENCE	WASHINGTON	180 CARITA DRIVE	WESTWEGO	LA	70094
06HH063178	GLORIA	WASHINGTON	918 MELROMENE AVE	NEW ORLEANS	LA	70130
06HH074400	JACQUELINE	WASHINGTON	8300 Palmetto St. Apt. 205	NEW ORLEANS	LA	70118
06HH095611	BETTY	WASHINGTON	1419 Galler St	New Orleans	LA	70117
06HH119932	GWENDOLYN	WASHINGTON	685 Bannernood Drive	Gretna	LA	70056
06HH211355	URSULA	WASHINGTON	6609 PEONY ST.	NEW ORLEANS	LA	70131
06HH022756	BERNARD	WATERS	3900 Hamilton St.	New Orleans	LA	70118
06HH155653	KEVIN	WELLS	3857 mercer lane	Harvey	LA	70058
06HH027488	ETHEL	WHITE	4120 TULANE DR	KENNER	LA	70065
06HH066682	KELLI	WILKERSON	47 HONEYSUCKLE LN	NEW ORLEANS	LA	70128
06HH008061	LYNNETTE	WILLIAMS	1810 BELT LINE RD APT 165	GARLAND	TX	75044
06HH024499	LEO	WILLIAMS	4036 Palge Janette Drive	Harvey	LA	70058
06HH184569	RHONDA	WILLIAMS	3724 MORRISWOOD DRIVE	HARVEY	LA	70058
06HH077100	SANDRA	WILSON	304 FEDERAL DR	AVONDALE	LA	70094
06HH110411	THURSTON	WRIGHT	10710 TINEIL RD	NEW ORLEANS	LA	70127
06HH058310	ANTHONY	YOUNG	7324 GENTRY RD	MARRERO	LA	70072
06HH170477	DARLENE	ZERINGUE	6221 RIVER RD	WAGGAMAN	LA	70094



State of Louisiana

HAZARD MITIGATION GRANT PROGRAM

2021 LAKESHORE DRIVE, SUITE 100, NEW ORLEANS, LA 70122 • PHONE: 504-284-4020

April 13, 2015

FILED

06HH132800
CARLTON VANNOR
P.O.BOX 2995
SLIDELL LA 70459

2015-12954 B

JUL 20 2015

MALISE PRIETO-CLERK
Deputy *J. Adria Yezlan*

Re: Collection of Outstanding Debt in the Amount of **\$19,331.00**

Dear CARLTON VANNOR:

This letter is pursuant to your agreement to voluntarily participate in the State of Louisiana's Hazard Mitigation Grant Program ("HMGP") and to comply with all HMGP and Federal Emergency Management Agency ("FEMA") rules and guidelines, which includes the proper use of Federal grant funds for the mitigation of your home located at 37660 DESOTO STREET SLIDELL.

You have been notified on multiple occasions via demand letters about your debt owed to HMGP in the amount of **\$19,331.00**. However, you have continuously disregarded these notices. You have also been given the opportunity to execute a re-payment agreement which would allow you to satisfy your debt within an agreed upon timeframe and at an agreed monthly amount. However, as of this date, you have failed to and/or refused to execute a re-payment agreement.

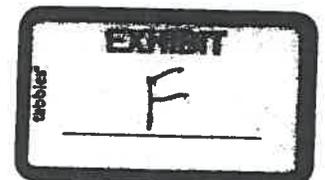
If payments have been paid pursuant to a payment agreement, then you should immediately contact the Program to verify the amount currently owed to the Program.

Please know that litigation and/or prosecution will be instituted against you for the collection of your unresolved debt.

Sincerely,

La Koshia R. Roberts

La Koshia R. Roberts
Attorney for HMGP



U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

OFFICIAL USE

7014 0510 0001 1416 8287

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

132 800

Sent To:	<i>Sandy Carter Vainor</i>
Street, Apt. No., or PO Box No.	<i>P.O. Box 2995</i>
City, State, ZIP+4	<i>Slidell, LA 70459</i>

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece or on the front if space permits. 	<p>A. Signature </p> <p>B. Received by (Printed Name) CARTER HOV</p> <p>C. Date of Delivery 7/20/15</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <small>If YES, enter delivery address below.</small></p>
<p>1. Article Addressed to:</p> <p>Carter Hov P.O. Box 2995 Sisdell, LA 70459</p>	<p> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number <small>(transfer from service label)</small></p>	<p>7014 0510 0001 1416 8287</p>
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

182-800

