

CIVIL DISTRICT COURT FOR THE PARISH OF ORLEANS

STATE OF LOUISIANA

2015 AUG 18 P 2:54

NO: \_\_\_\_\_

DIVISION: \_\_\_\_\_

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

VS.

MARGUERITE A. DOYLE-JOHNSTON

---

**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 Marguerite A. Doyle-Johnston, a major domiciliary of Orleans Parish, who voluntarily participated in HMGP to mitigate her 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 a Voluntary Participation Agreement (hereinafter "VPA") on December 3, 2010 to participate in HMGP and to receive HMGP grant funds. Defendant also

agreed to comply with all HMGP guidelines, which include using HMGP funds for their intended purpose. *Exhibit A.*

4.

FEMA grant funds in the amount of \$54,047 (hereinafter "FEMA grant funds") were paid to Defendant by HMGP on or about April 1, 2011 (in the amount of \$33,779.38) and on or about May 20, 2011 (in the amount of \$20,267.62) for the specific purpose of Reconstruction of her home located at 2524 Desire Street, New Orleans, Louisiana 70127. *Exhibit B.*

5.

Photographs dated March 19, 2015 show that although the FEMA grant funds were received, Defendant's home was not reconstructed. *Exhibit C (in globo).*

6.

Three (3) separate collection letters were mailed to Defendant. The first letter dated December 16, 2014 was sent by Certified Mail 7014 0510 0000 6493 7872 and informed Defendant that the FEMA grant funds had to be returned to the State of Louisiana. Said letter was marked "Unclaimed" and returned to HMGP. *Exhibit D (in globo).*

7.

The second letter dated February 25, 2015 was mailed to Defendant. *Exhibit E (in globo).*

8.

The third letter dated March 16, 2015 was mailed to Defendant. *Exhibit F (in globo).*

9.

The fourth letter dated April 13, 2015 was mailed to Defendant. *Exhibit G (in globo).*

10.

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

11.

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

12.

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 by the State of Louisiana.

13.

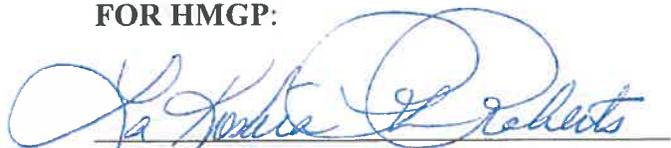
HMGP requests that the debt of \$54,047 owed by Marguerite A. Doyle-Johnston to HMGP be recognized and that judgment in favor of HMGP be granted, directing Defendant to return and pay the FEMA grant funds to the State, in full.

**ALL PREMISES CONSIDERED, WHEREFORE, HMGP PRAYS:**

- a. That this Honorable Court declare that Defendant, Marguerite A. Doyle-Johnston, is non-compliant with the Voluntary Participation Agreement signed by her;
- b. That this Honorable Court declare that Defendant, Marguerite A. Doyle-Johnston, is indebted to HMGP in the amount of \$54,047 because of her failure to reconstruct her home according to her agreement to abide by HMGP guidelines, including using HMGP funds for their intended purpose;
- c. That Defendant, Marguerite A. Doyle-Johnston, be ordered to return the \$54,047 HMGP grant to HMGP, in full;
- d. That there be judgment rendered herein in favor of HMGP and against Defendant, Marguerite A. Doyle-Johnston, in the full sum \$54,047;
- e. That Defendant, Marguerite A. Doyle-Johnston, 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:**



LaKoshia 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, Louisiana 70112  
Telephone: 504-212-4163  
Facsimile: 504-581-7083  
trichar994@aol.com

CIVIL DISTRICT COURT FOR THE PARISH OF ORLEANS

STATE OF LOUISIANA

NO: \_\_\_\_\_

FILED  
2015 AUG 18 P 2:54  
DIVISION: \_\_\_\_\_

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

VS.

MARGUERITE A. DOYLE-JOHNSTON

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 17<sup>th</sup> DAY OF August 2015 IN NEW ORLEANS,  
LOUISIANA.

  
\_\_\_\_\_  
Craig P. Taffaro, Jr.

  
\_\_\_\_\_  
La Koshia Reconda Roberts  
Notary Public  
Bar Roll No. 26715  
My Commission expires at death.

PLEASE SERVE:

MARGUERITE A. DOYLE-JOHNSTON  
2524 DESIRE. STREET  
NEW ORLEANS, LOUISIANA 70117

**OCD-DRU** FILED  
**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

Road Home # 06HH 023996

**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.**

Applicant or Co-Applicant NAME	Applicant or Co-Applicant SIGNATURE	Date
--------------------------------	-------------------------------------	------

Applicant or Co-Applicant NAME	Applicant or Co-Applicant SIGNATURE	Date
--------------------------------	-------------------------------------	------

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

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.

06HH023996 MARGUERITE DOYLE-JOHNSTON  
 VPA



X X 0 6 H H 0 2 3 9 9 6 X X X X X 1 0

Page 1 of 2

EXHIBIT

A

tabbles





Office of Statewide Reporting and Accounting Policy

NFOlouisiana

Logoff

Payee Locations

Payee Search

Payments

Help

- Vendor Search
- About Us
- Other Useful Links
- Accounts Receivable
- Forms
- Request Report
- Payee Search
- OSRAP
- OSRAP
- OSRAP

### Payee Detail

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

**Payee Remittance Address:**  
 3710 BUNKERHILL DR  
 NEW ORLEANS, LA 70002

**Check/EFT Number:** AD 00003965777  
**Check/EFT Date:** 04/01/2011  
**Status Change Date:** //  
**Status:** Outstanding

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

**Check/EFT Total:** 33,779.38

Total Number of Lines : 1

Agency	Document ID	Ref Doc ID	Invoice #	Comments	Line Amount
107	PVG00047823		HMO300087729	09HH023896	33,779.38

ISIS Calendar (CY)

Help Desk

GASB 34 and 35

Search OSRAP

Contacts

09HH023896

MARGUERITE DOYLE-JOHNSTON

Printout from OSRAP



X X 0 6 H H 0 2 3 9 9 6 X X X X X 7 5

[https://wwwprd.doa.louisiana.gov/vendsearch/detail.cfm?check\\_number=00003965777](https://wwwprd.doa.louisiana.gov/vendsearch/detail.cfm?check_number=00003965777)





DIVISION OF ADMINISTRATION - OFSS  
P.O. BOX 94095  
BATON ROUGE LA 70804

CHECK  
NUMBER: 004014  
May 20, 2011

84-13  
654

PAY TO THE  
ORDER OF:

MARGUERITE DOYLE-JOHNSTON  
AND NEW BEGINNINGS ENTERPRISES LLC  
3710 BUNKER HILL DR  
METAIRIE LA 70002

\*\*\* VOID AFTER 180 DAYS \*\*\*

AMOUNT  
\$20,267.62

Twenty Thousand Two Hundred Sixty-Seven And 62/100 Dollars



*Paul W. Thain*

Authorized Signatures

JPMorgan Chase Bank, Baton Rouge, LA

⑈004014⑈ ⑆065400137⑆

936393784⑈

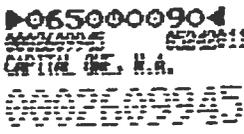
ENDORSE HERE

*M. Magueta*  
NEW ORLEANS, LA 70112  
DBA - ONLY COMES IN ACTION

10080418286

06500080  
HIBERNIA NATIONAL BANK  
KENNER, LA 70065

PAY TO THE ORDER OF  
RESERVED FOR FINANCIAL INSTITUTIONAL USE



FEDERAL RESERVE BOARD OF GOVERNORS REG. CC

Listed below are the security features provided on this document which meet's and/or exceeds industry guidelines.

Security Features:	Description / Fraud Indicator:
Security Watermark	Reflective, white opaque ink readable when held at an angle, viewed under UV light, or rubbed with coin
Microprinting	Reduced lines of type on front sides of check appear as a solid line until viewed under magnification.
Chemical Denaturation	Colored staining on either or both sides of check indicate possible chemical alteration
Invisible Fluorescent Fibers	Visible fibers on surface of check
Toner Retention Treatment	Resonance visible under UV light
Advisory Icon	Icon located on face of check that alerts handler that the document contains security features.



State of Louisiana

**HAZARD MITIGATION GRANT PROGRAM**

Box 5094 • BATON ROUGE, LA 70821-5094 • TOLL FREE (877) 824-4113 • FAX (504) 386-0846 • [hazmitigation@dnr.louisiana.gov](http://hazmitigation@dnr.louisiana.gov)

Time of Observation: 10:45 AM  
Weather Conditions: \_\_\_\_\_

10.1 Check-In Observation

Applicant ID: 0644 023996

Damaged Property Address: 2844 DESIRE ST NO. 70117

Date of Plans: \_\_\_\_\_

Foundation Type:  Open  Slab  Slab Separation

Check List for Check-In Milestone

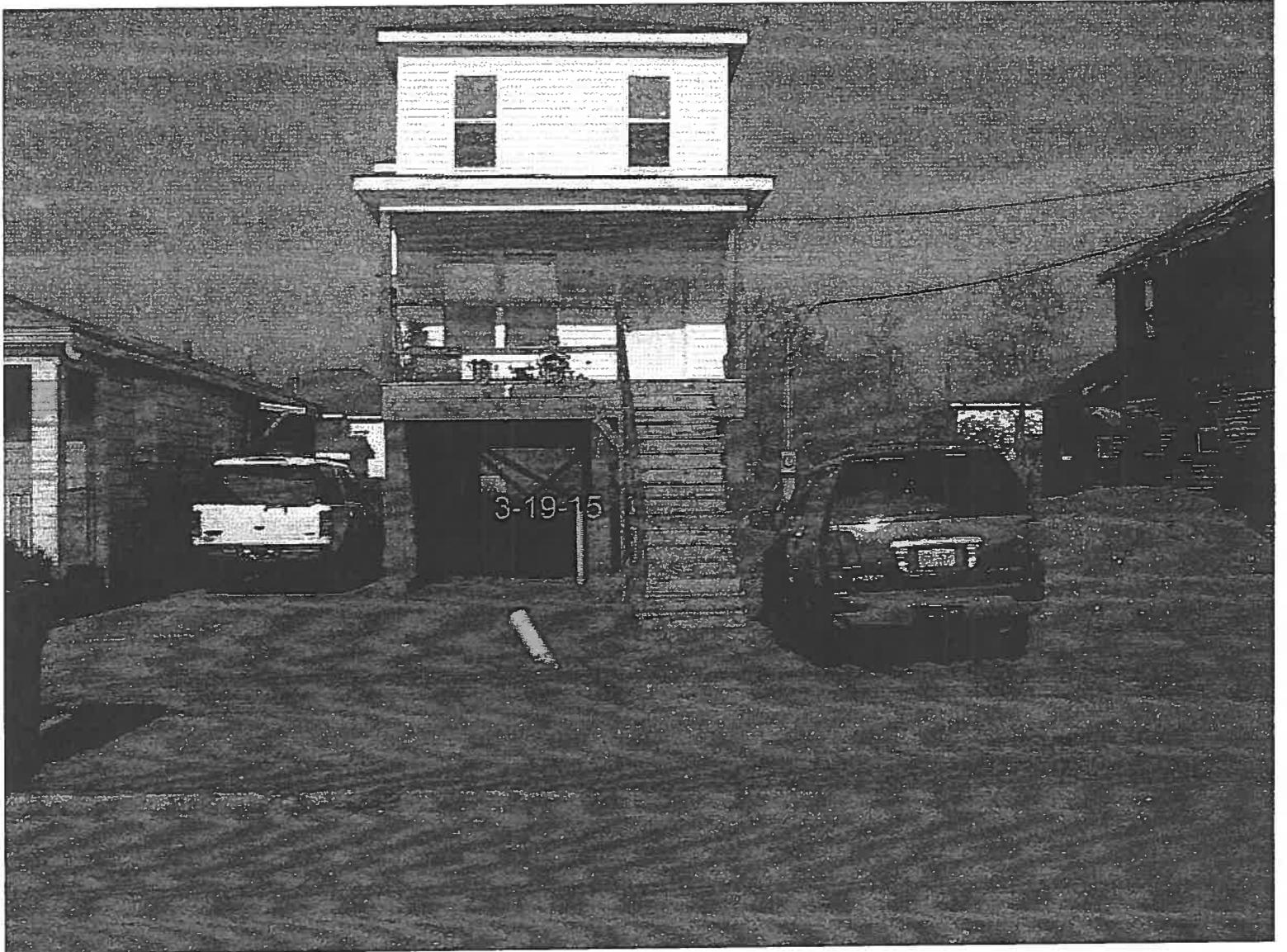
- General Site Condition
- Type of Slab
- Which MO Project is Closest to 8-19-15
- Contractor Activity
- Take Photographs

General Site Condition: \_\_\_\_\_

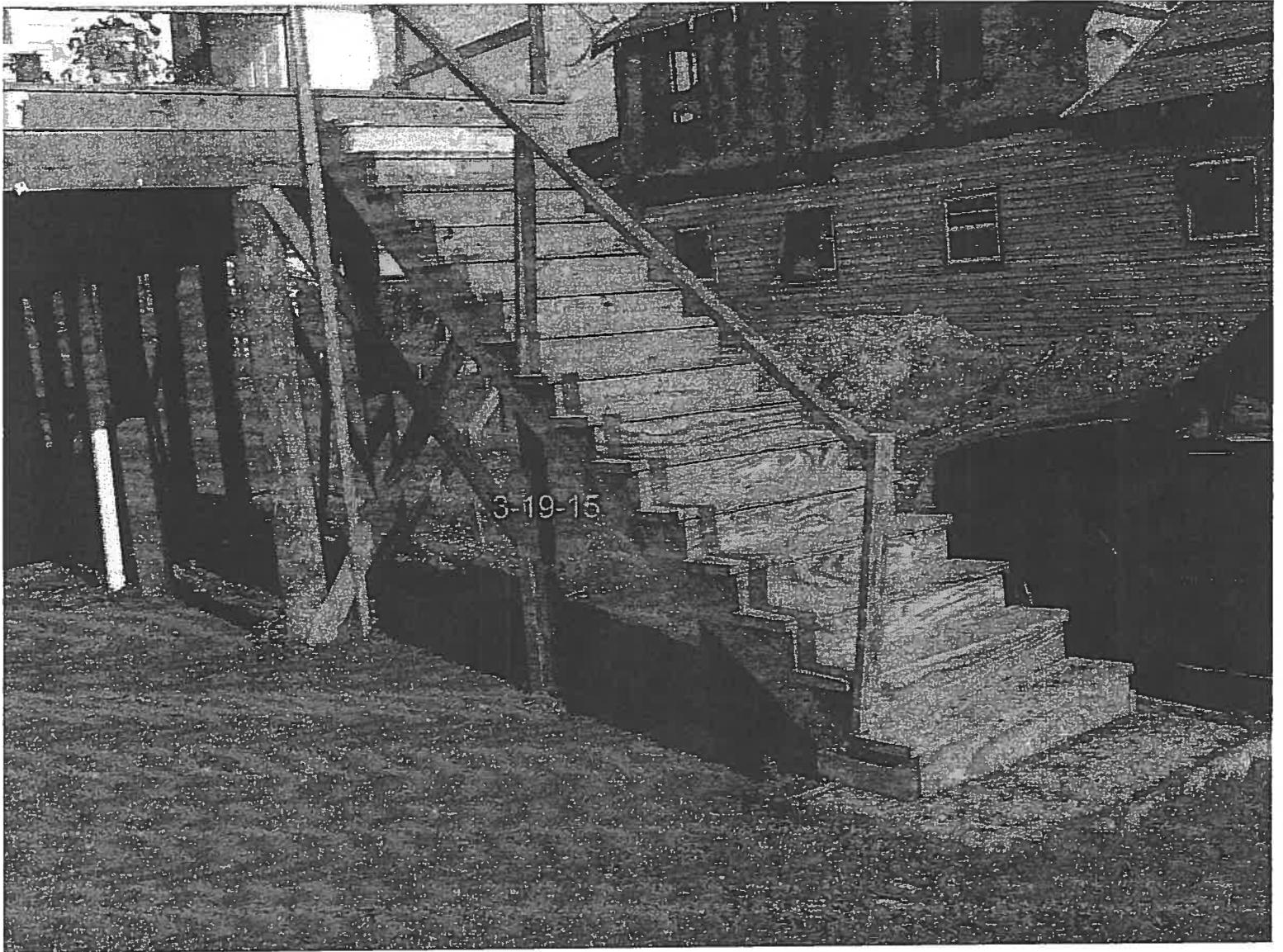
Determine which Milestone Observation the Project is closest to: \_\_\_\_\_

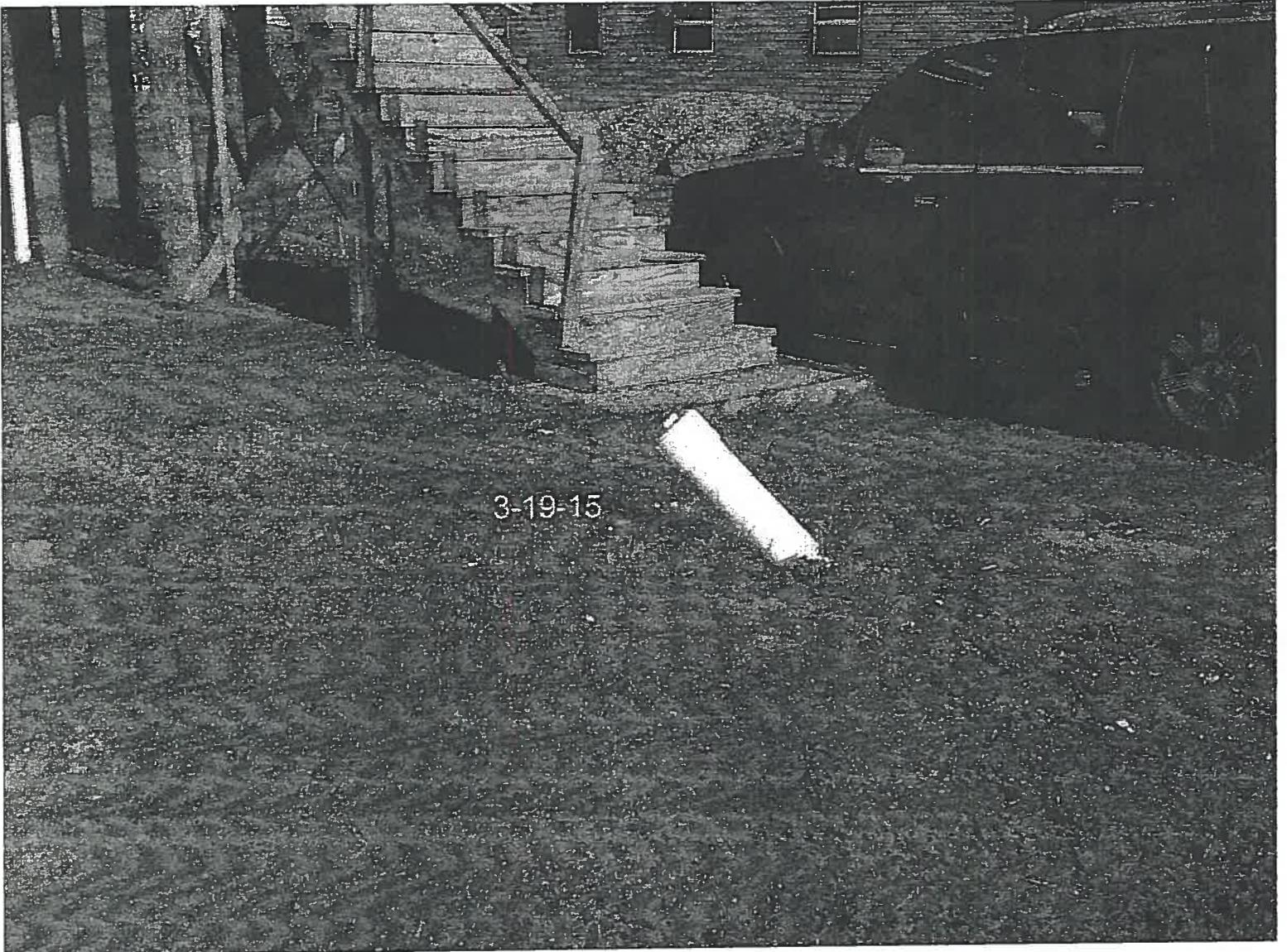
Is the contractor currently working, does the site appear to have recent activity? \_\_\_\_\_

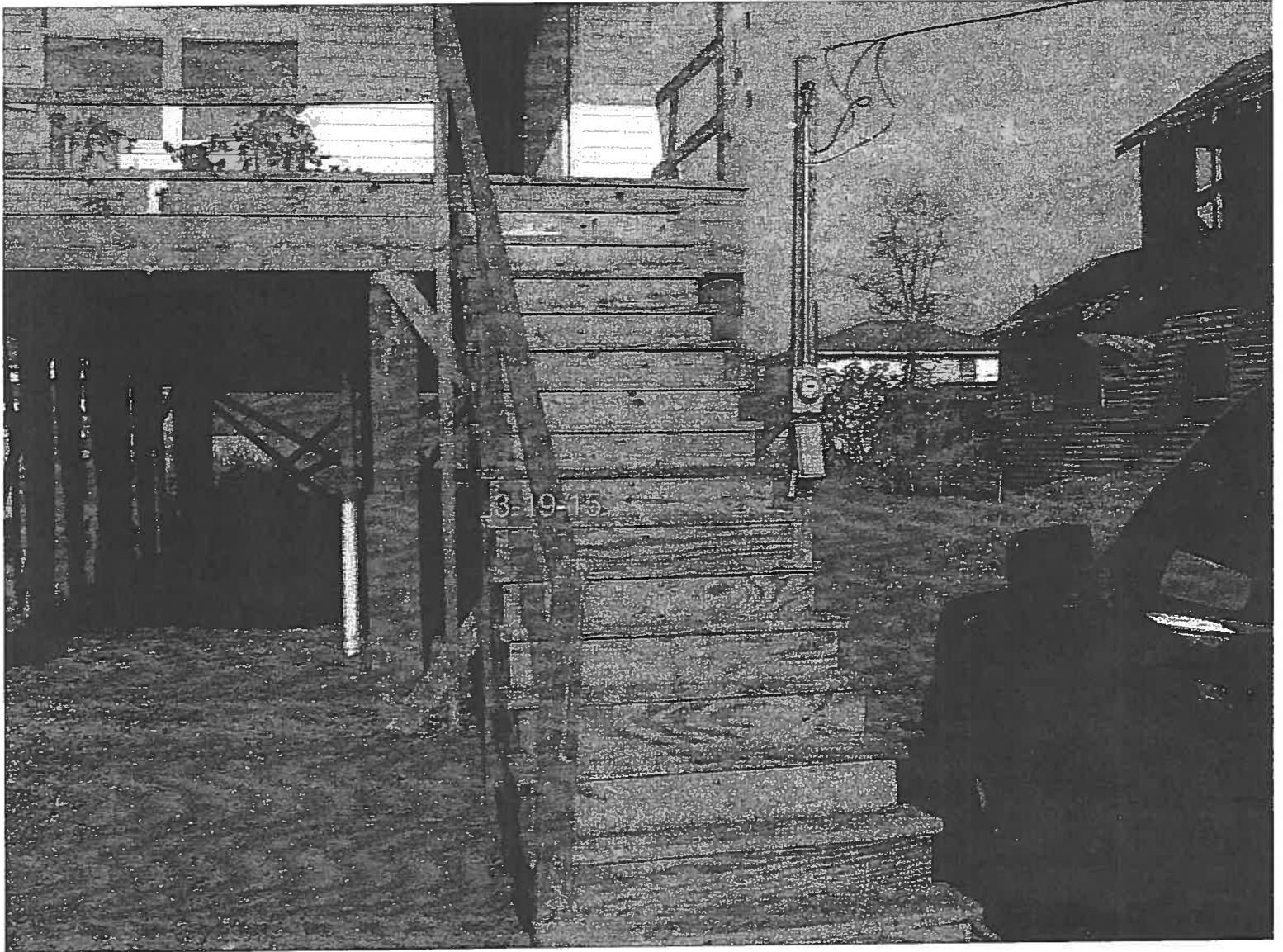
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**EXHIBIT**  
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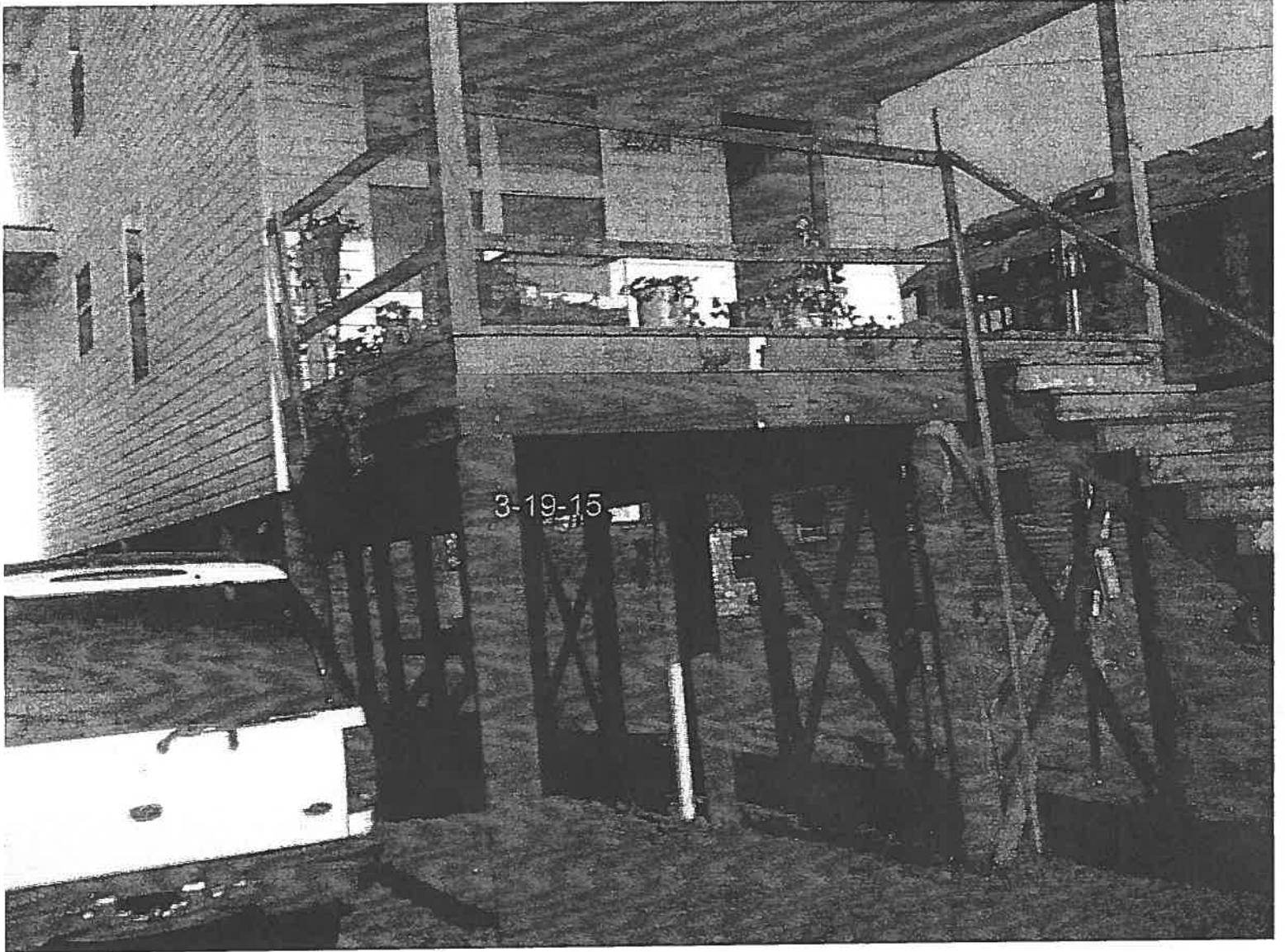


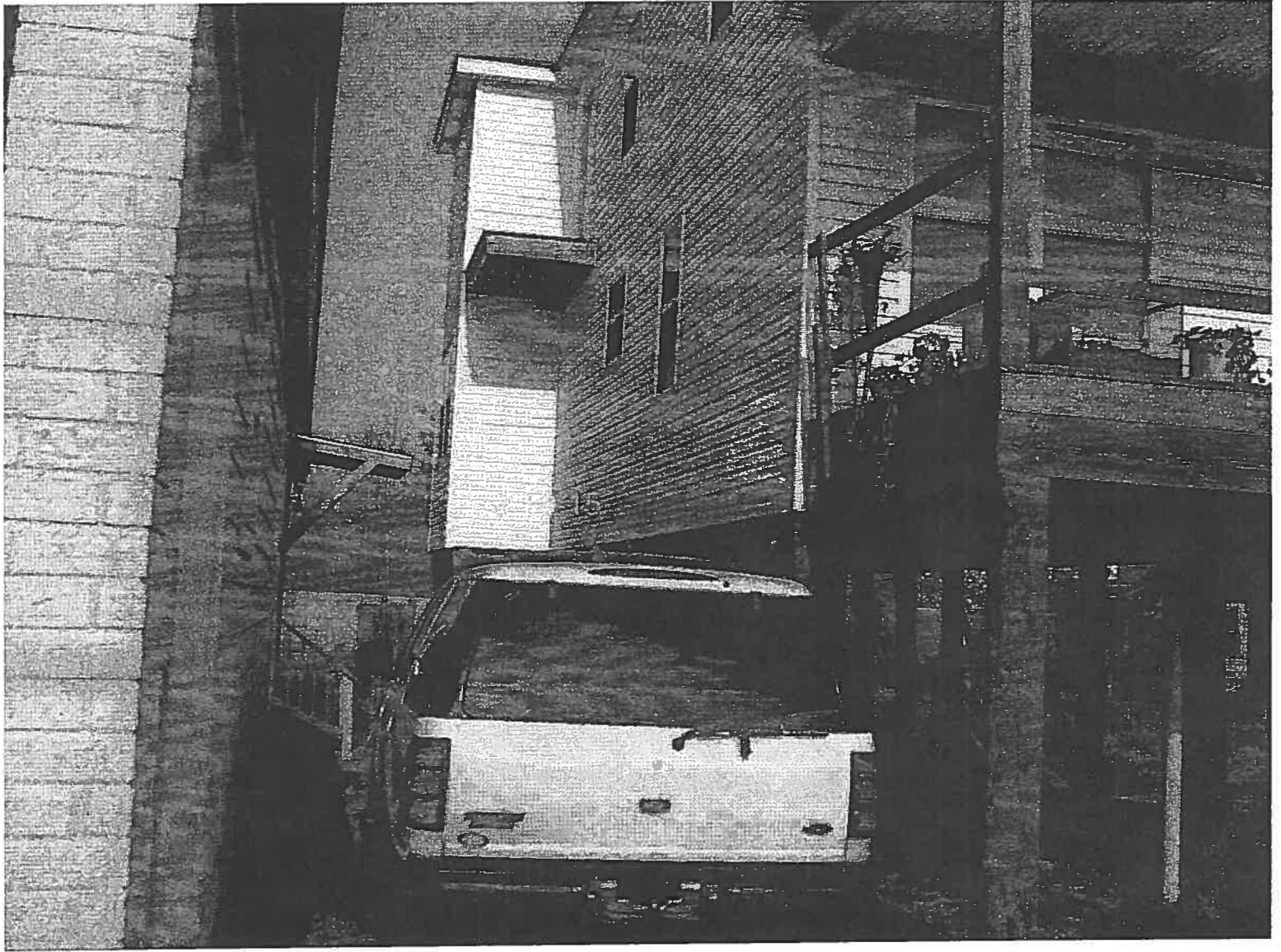


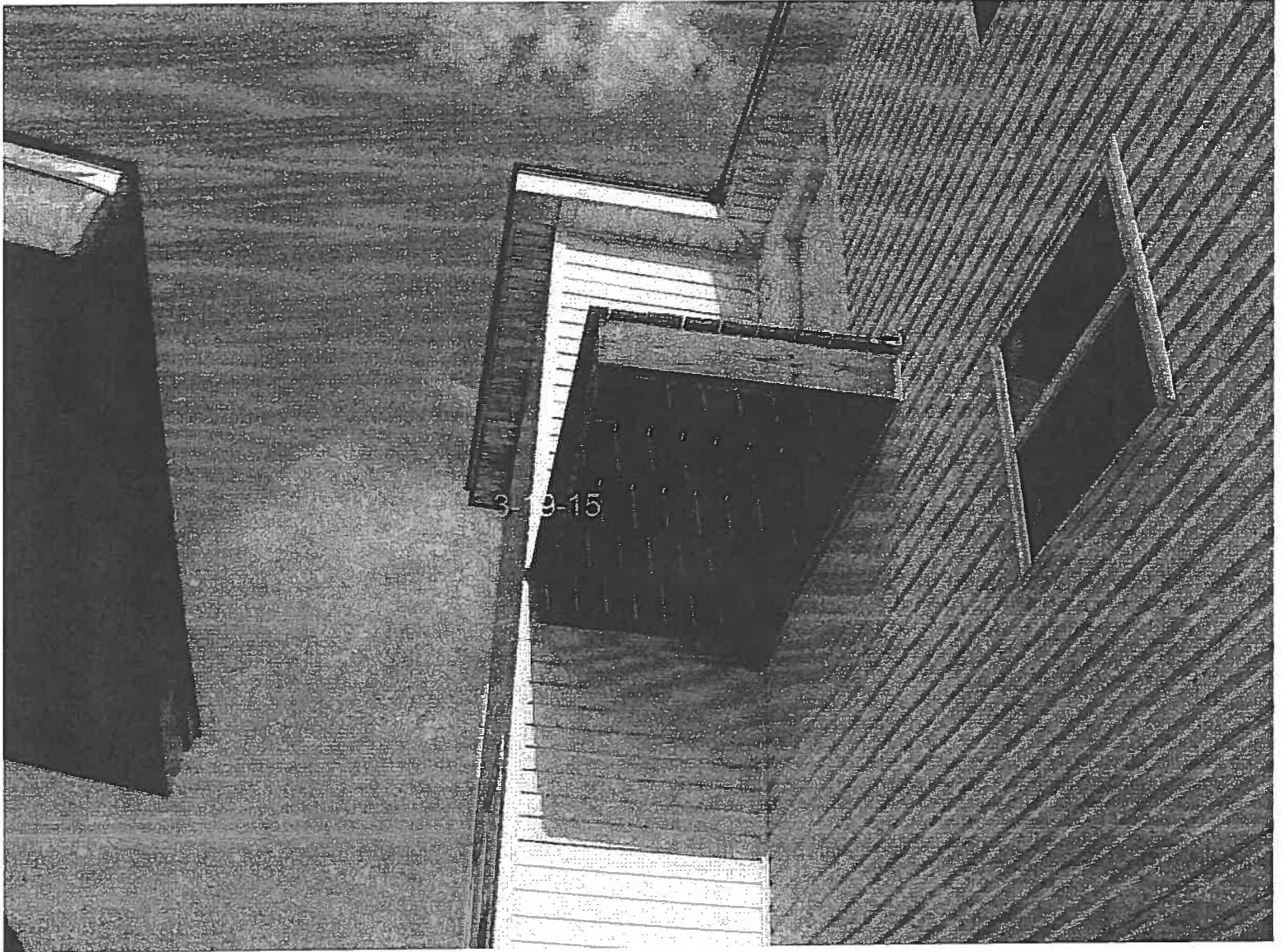








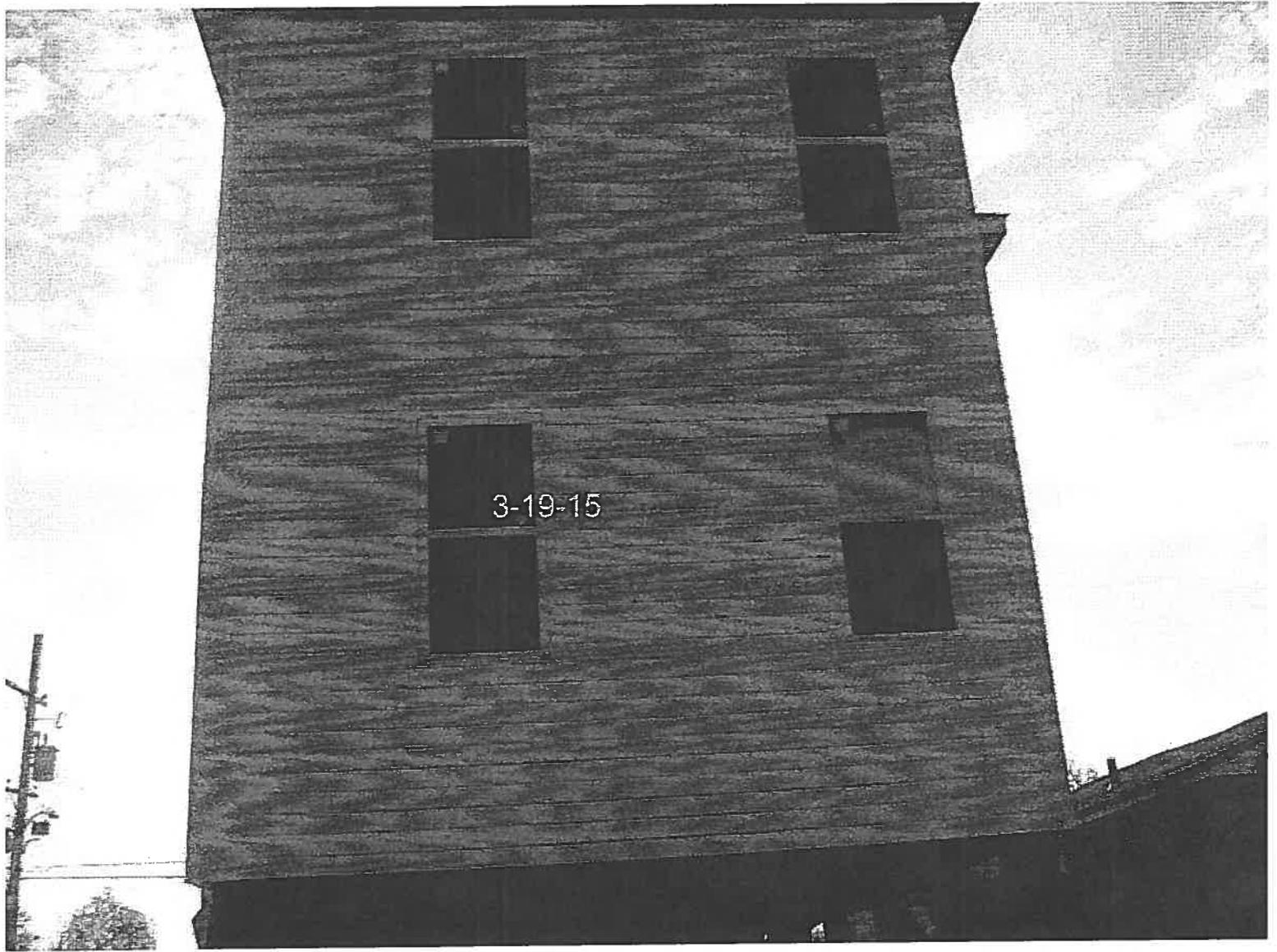




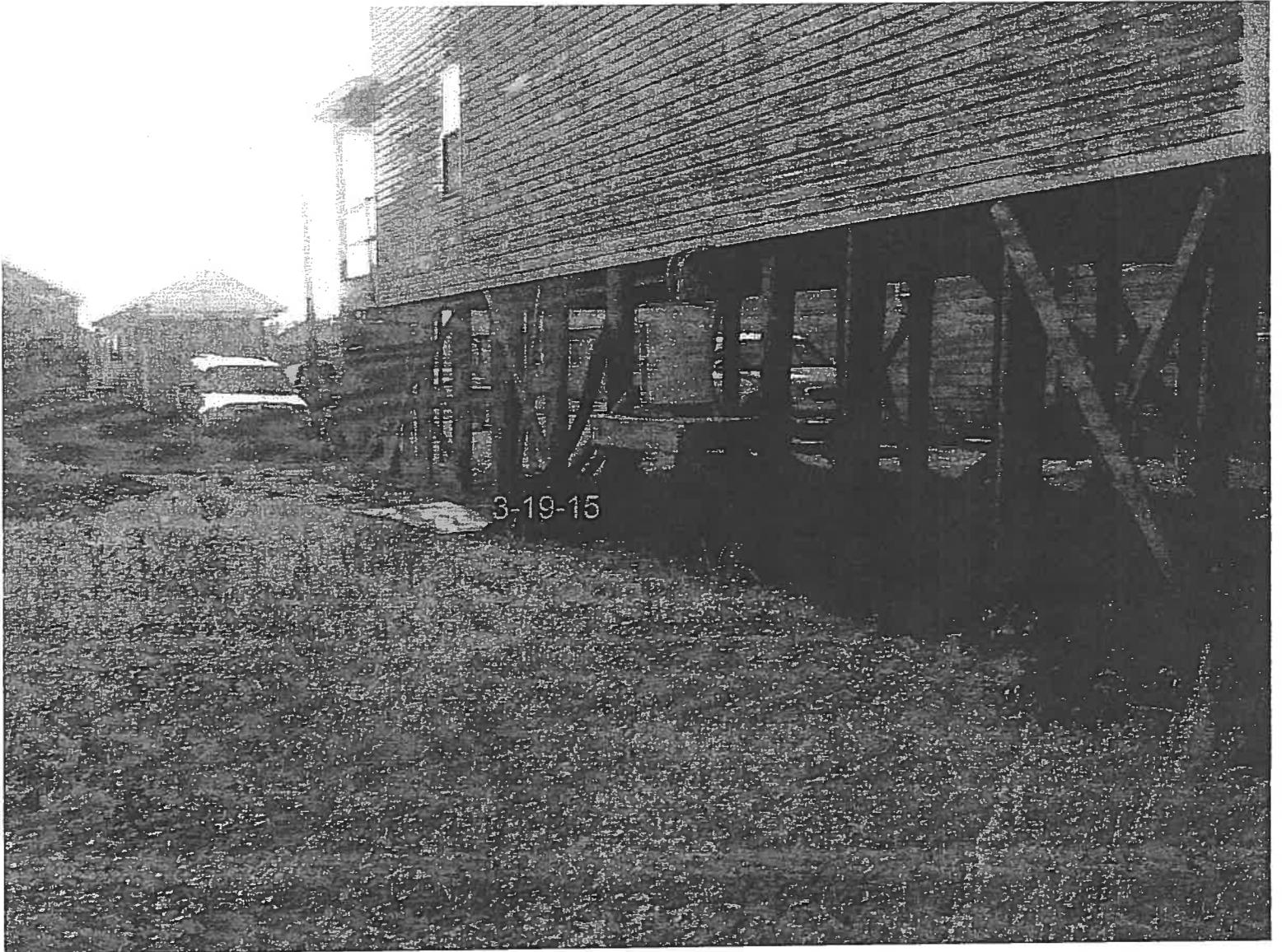


3-19-15

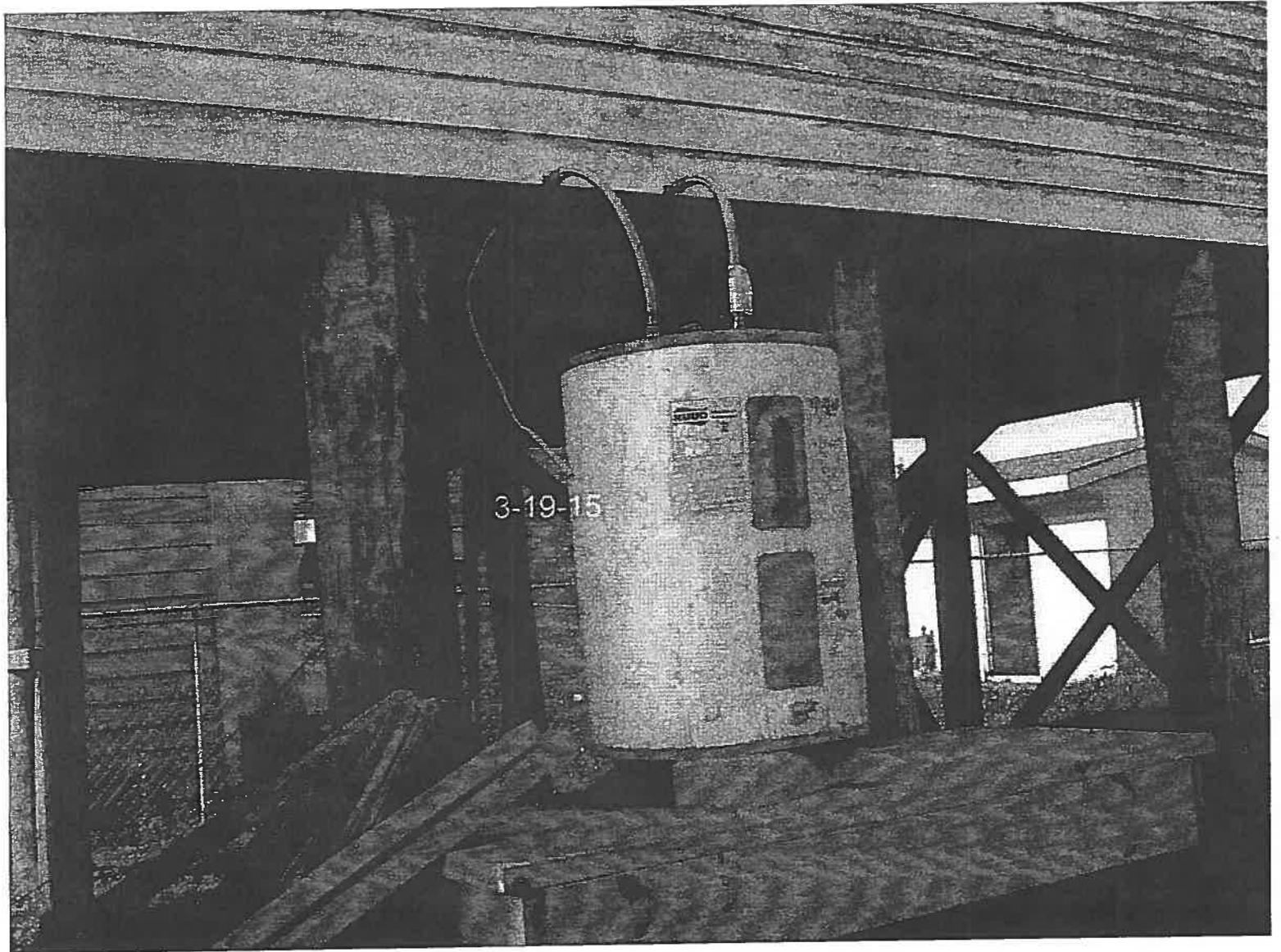


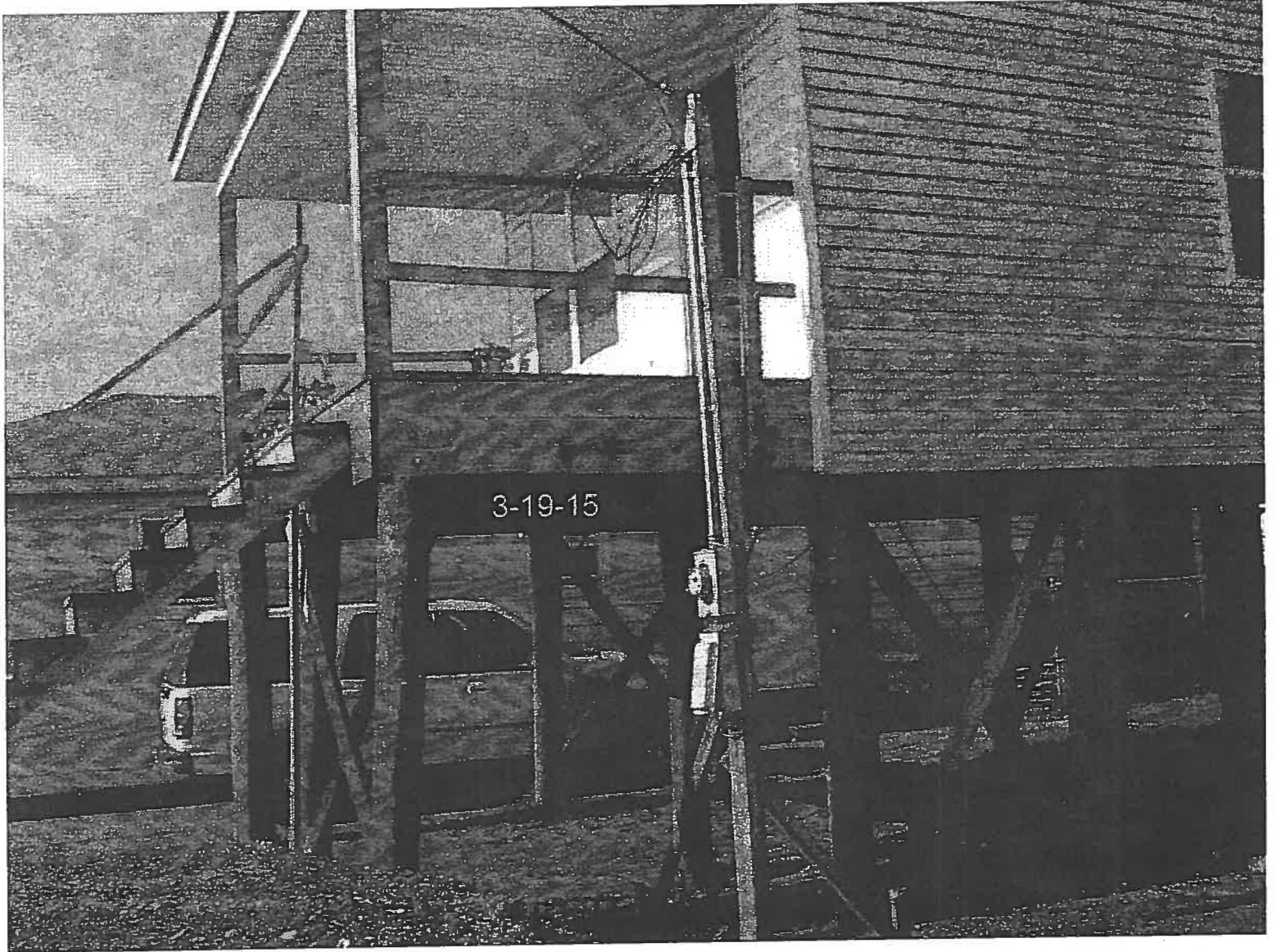




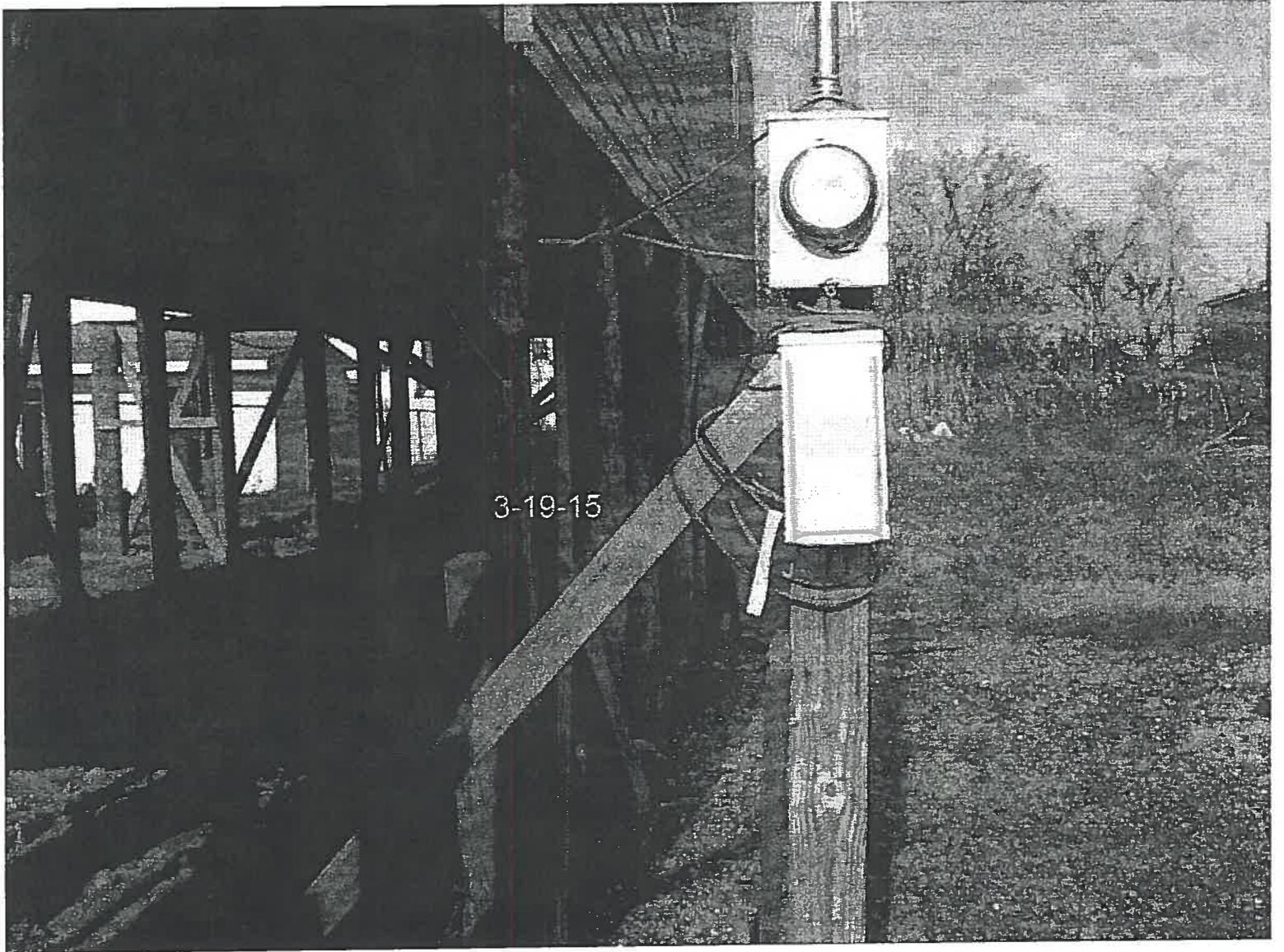


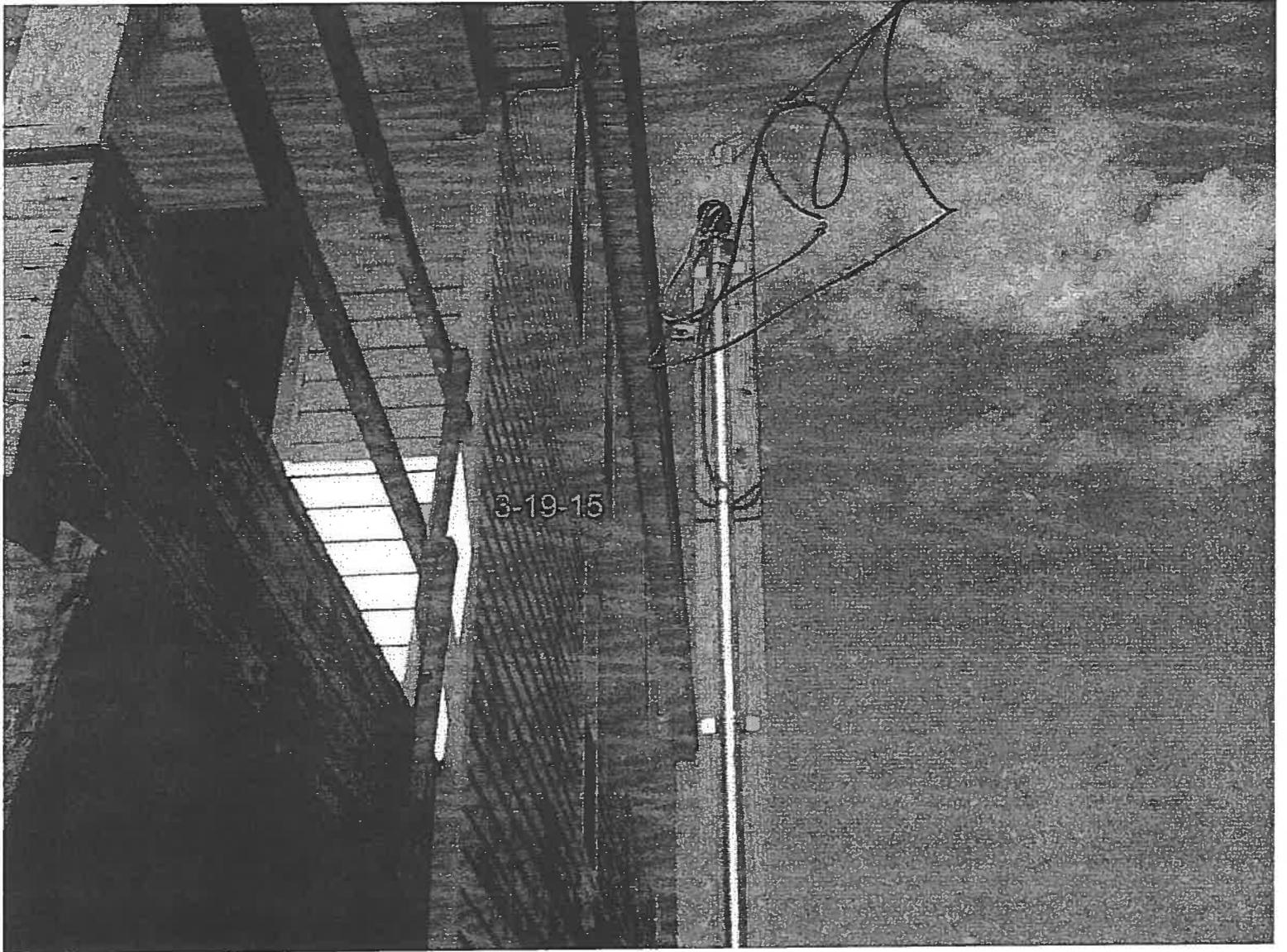


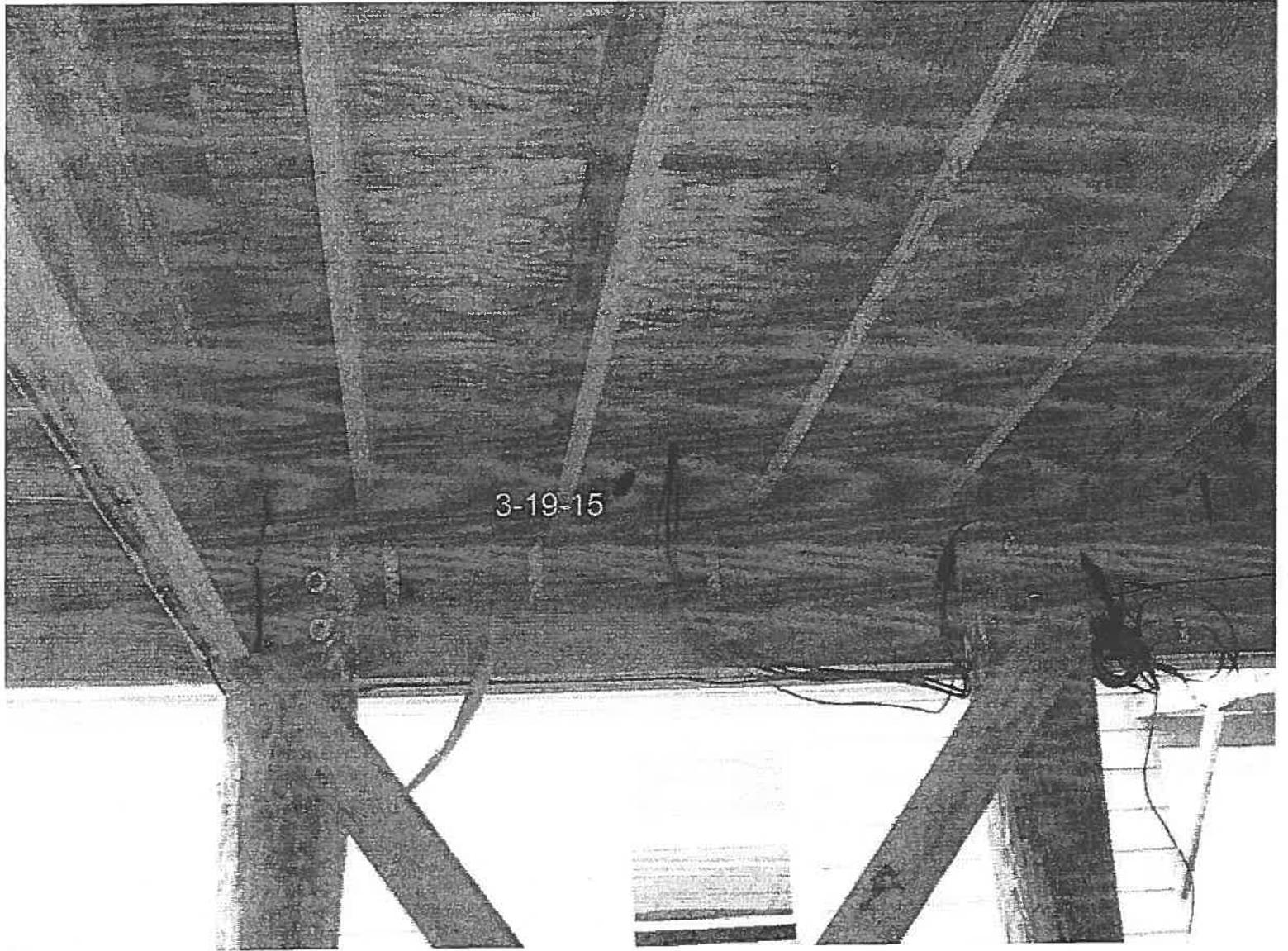


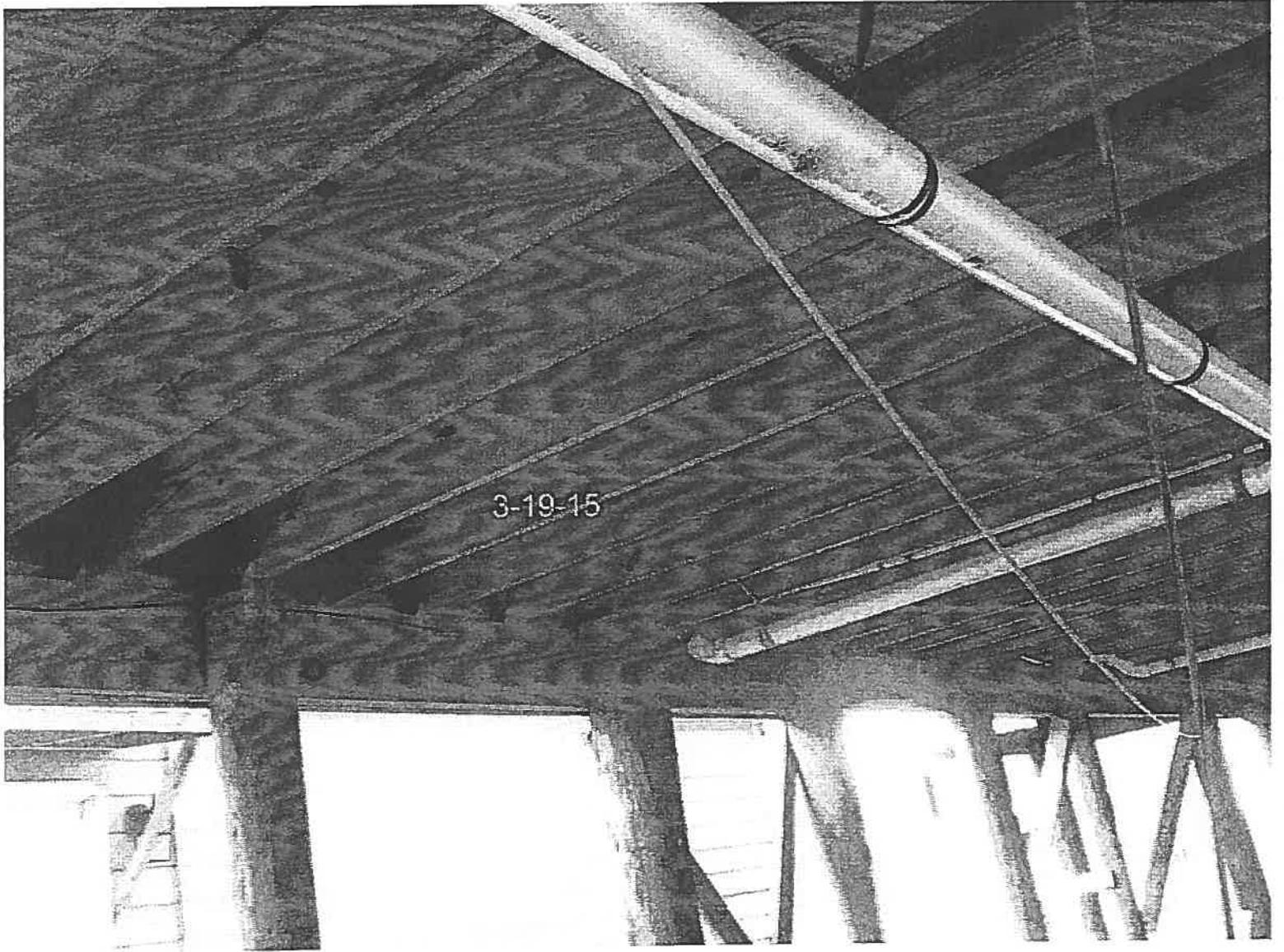






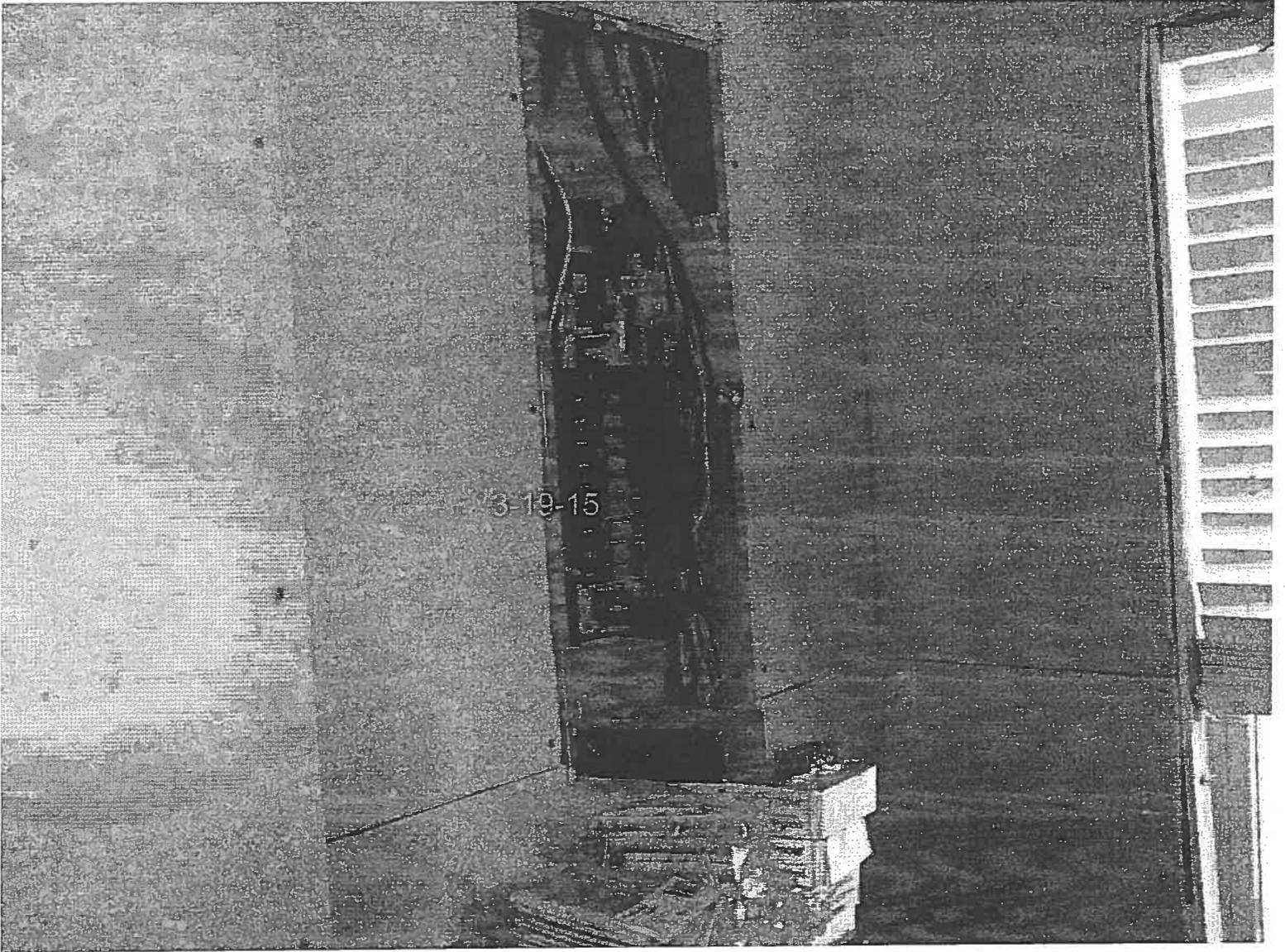


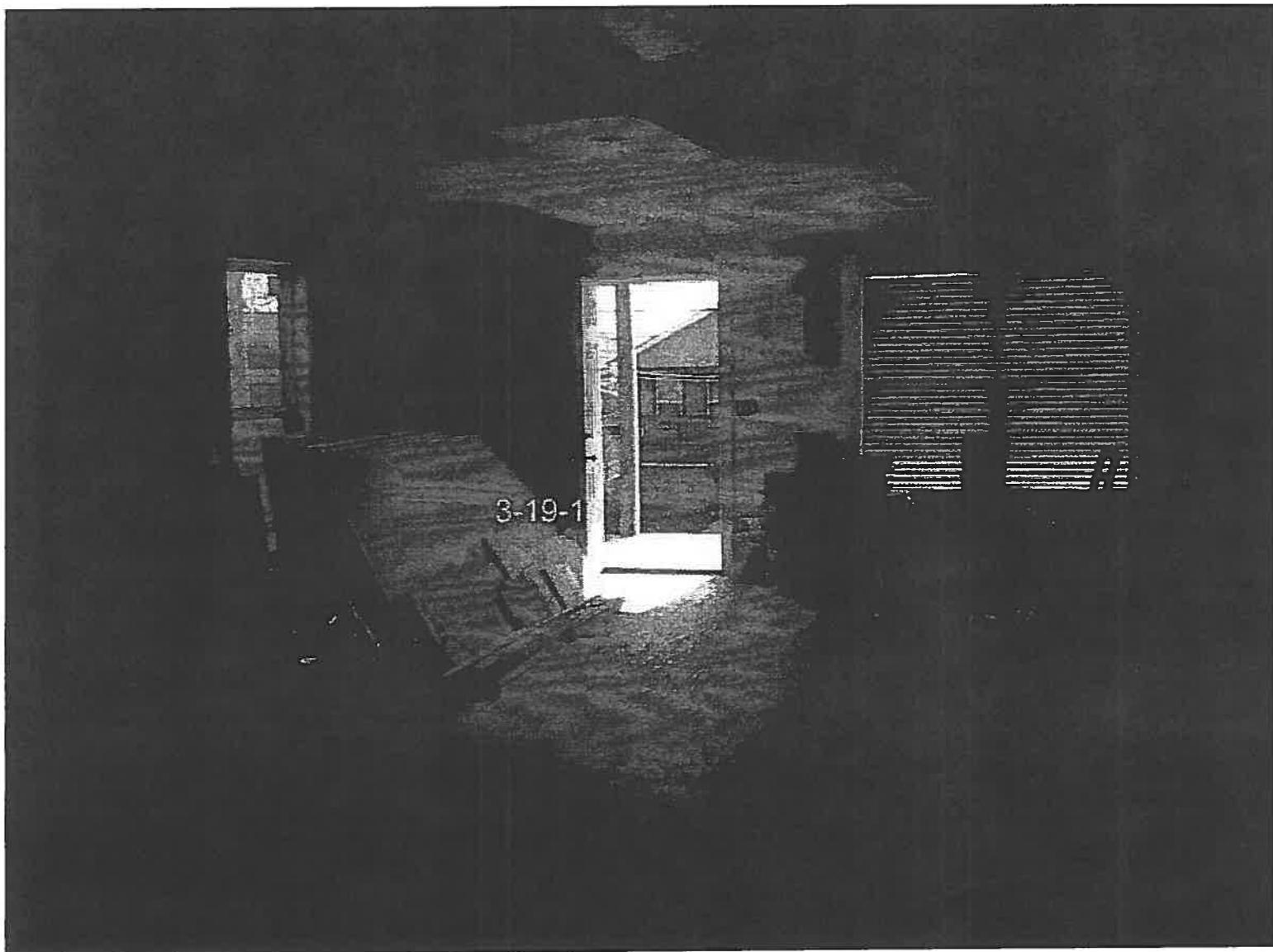


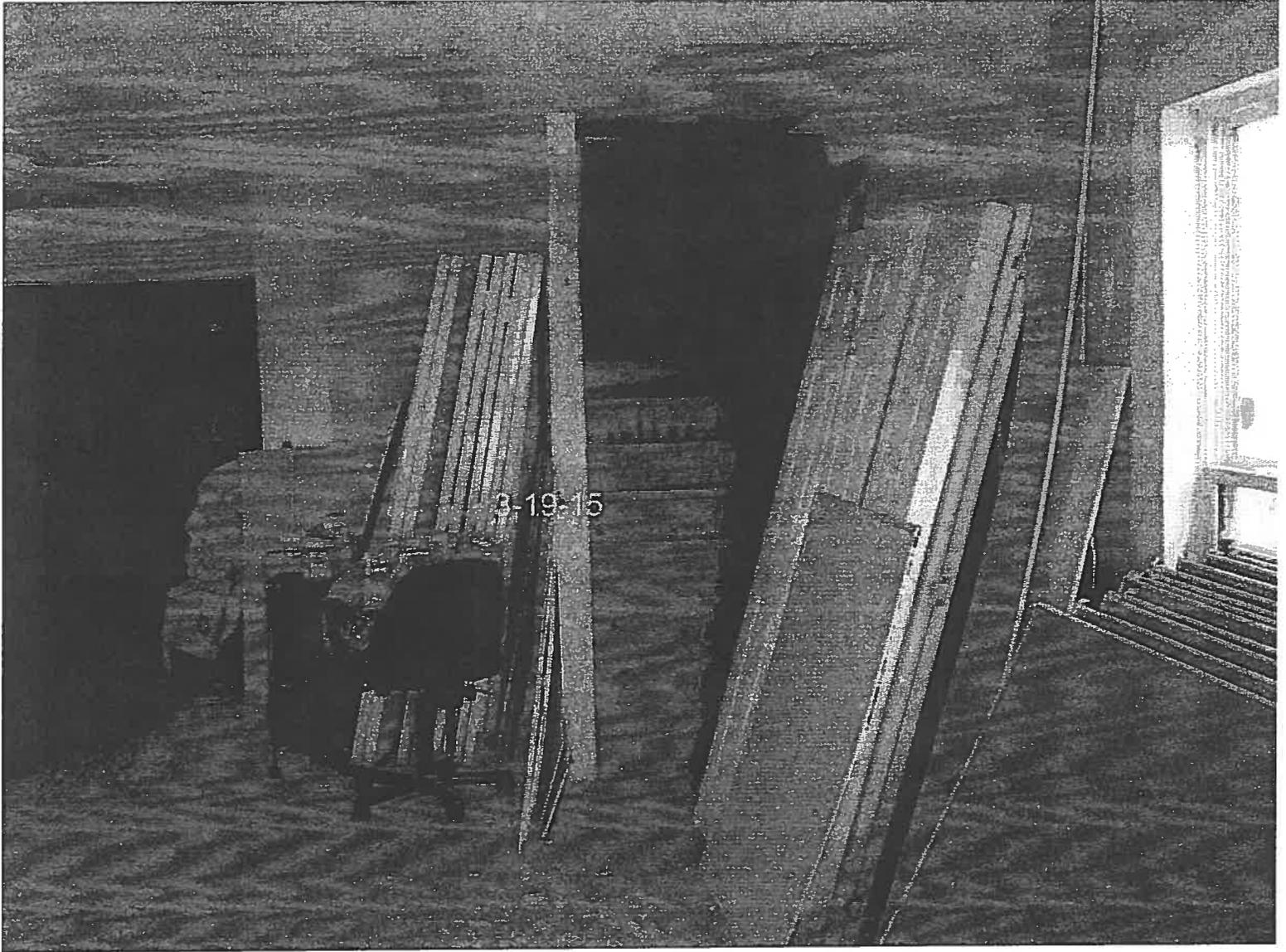


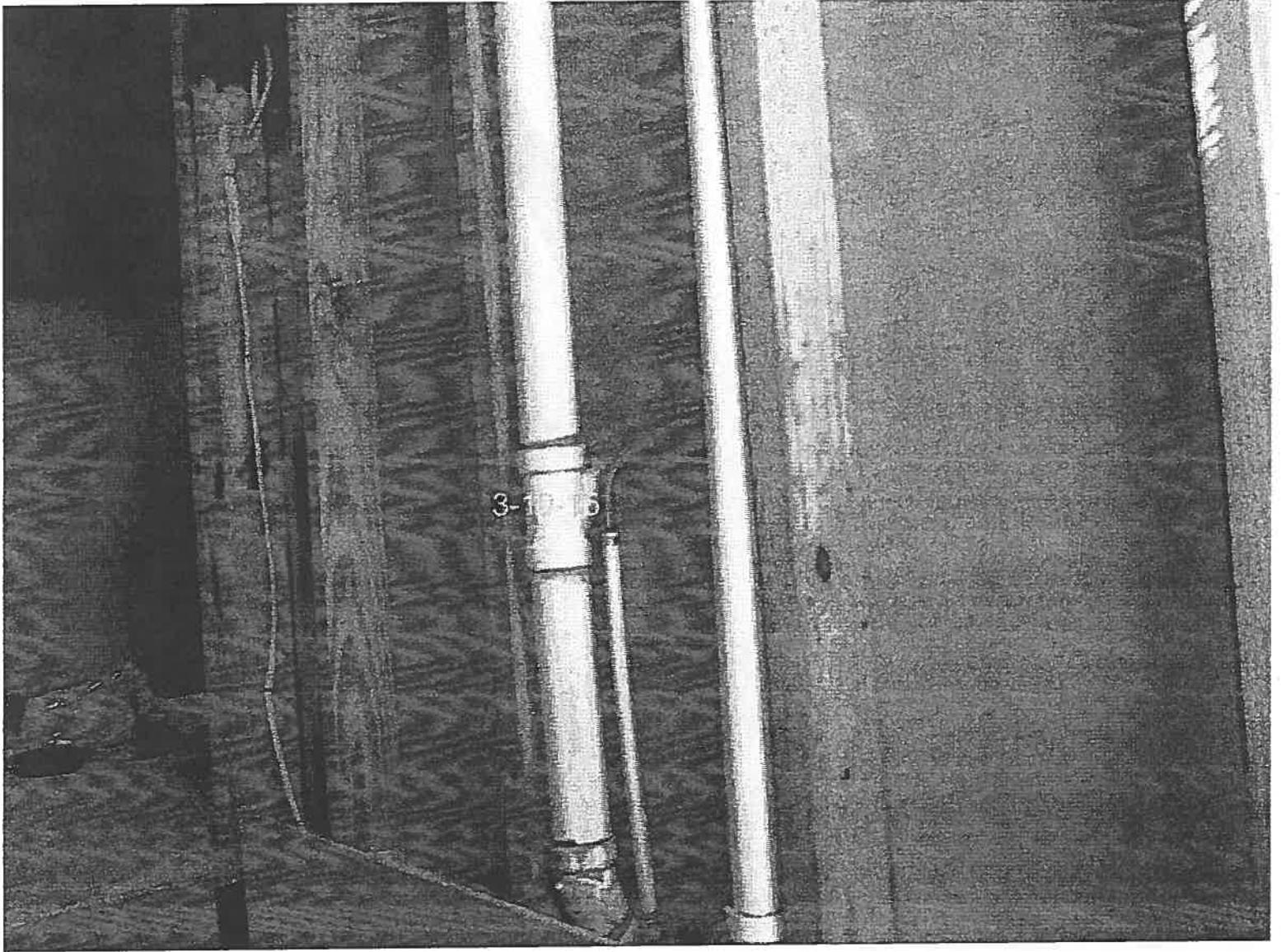


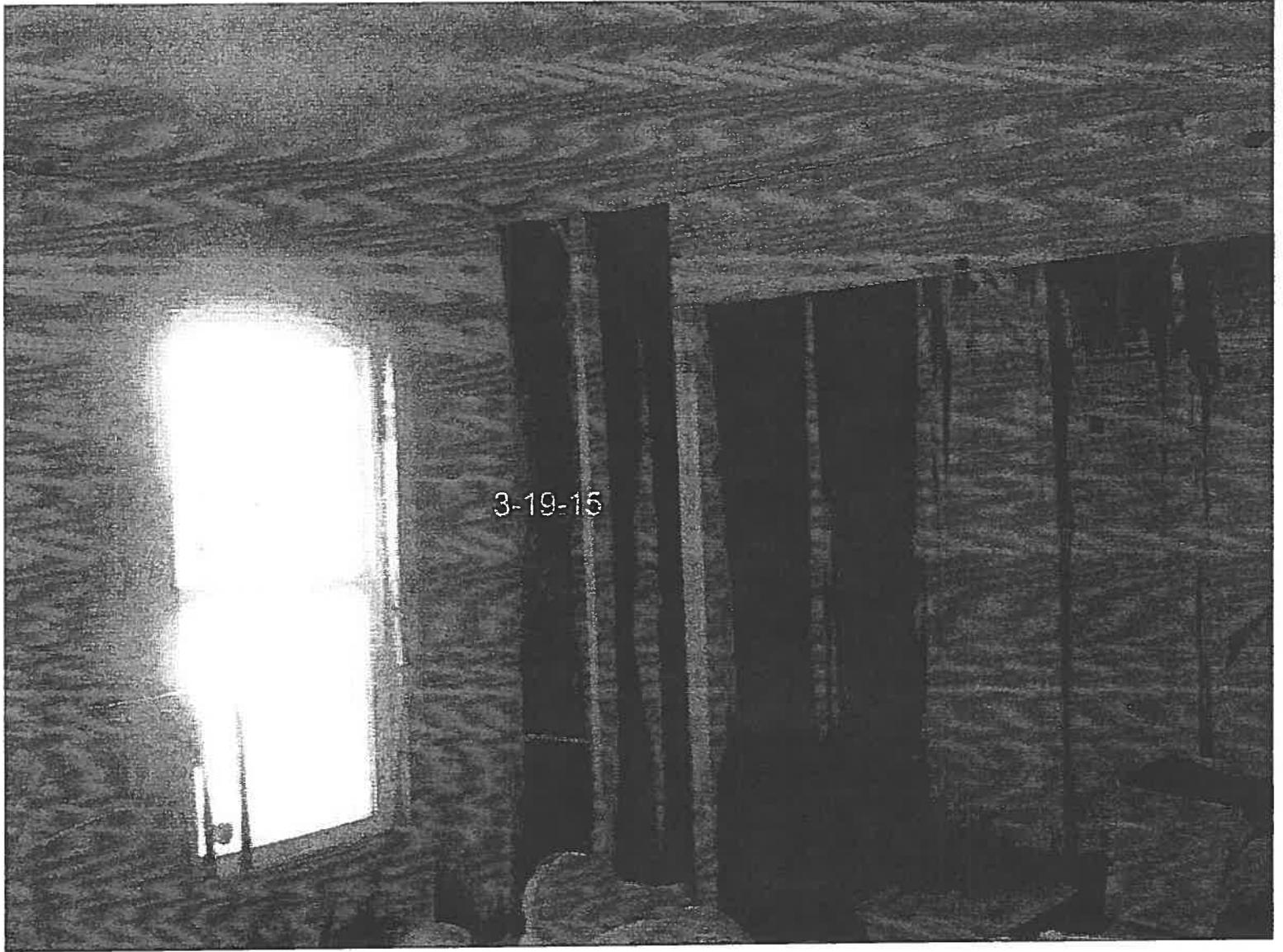


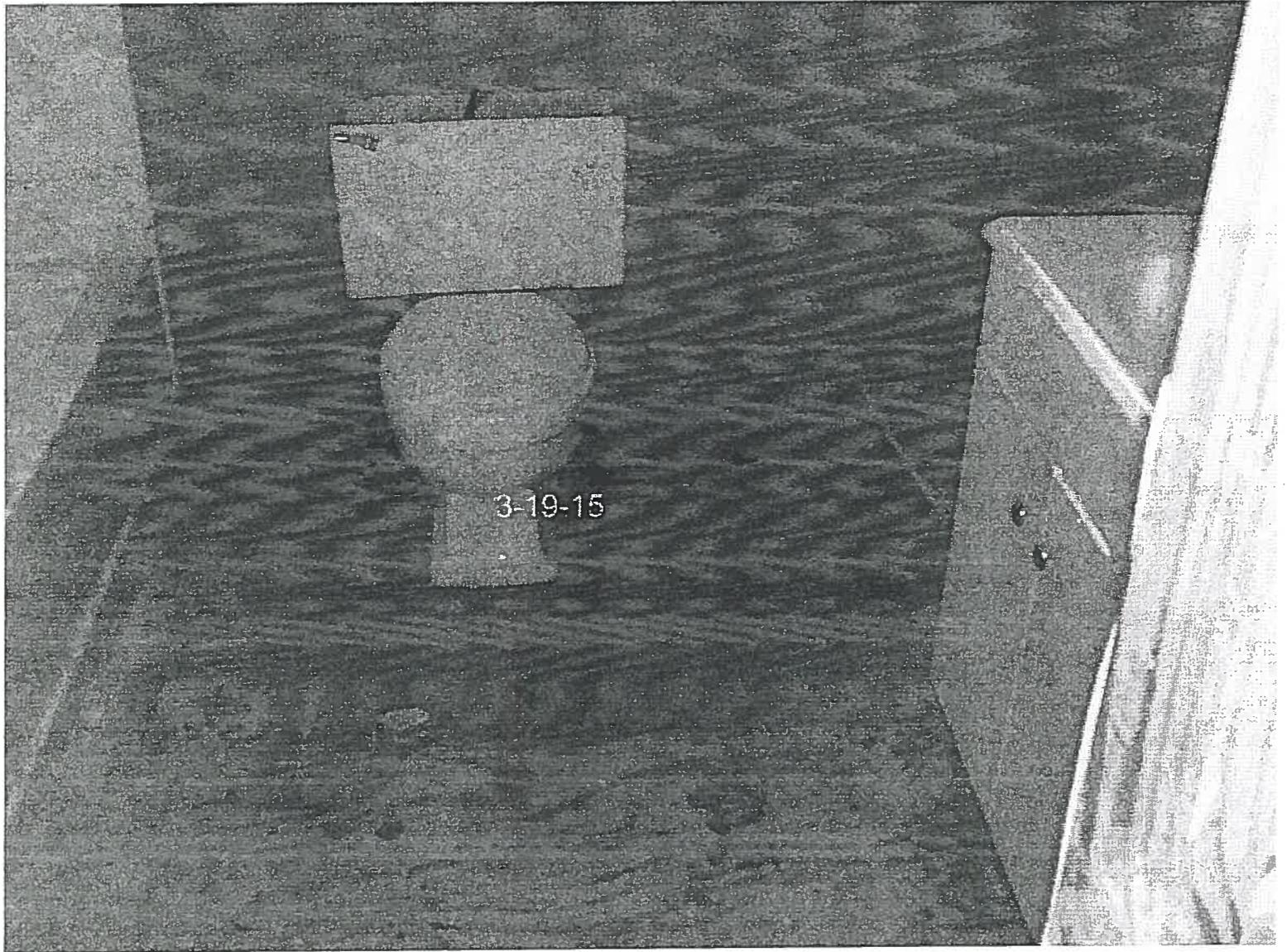


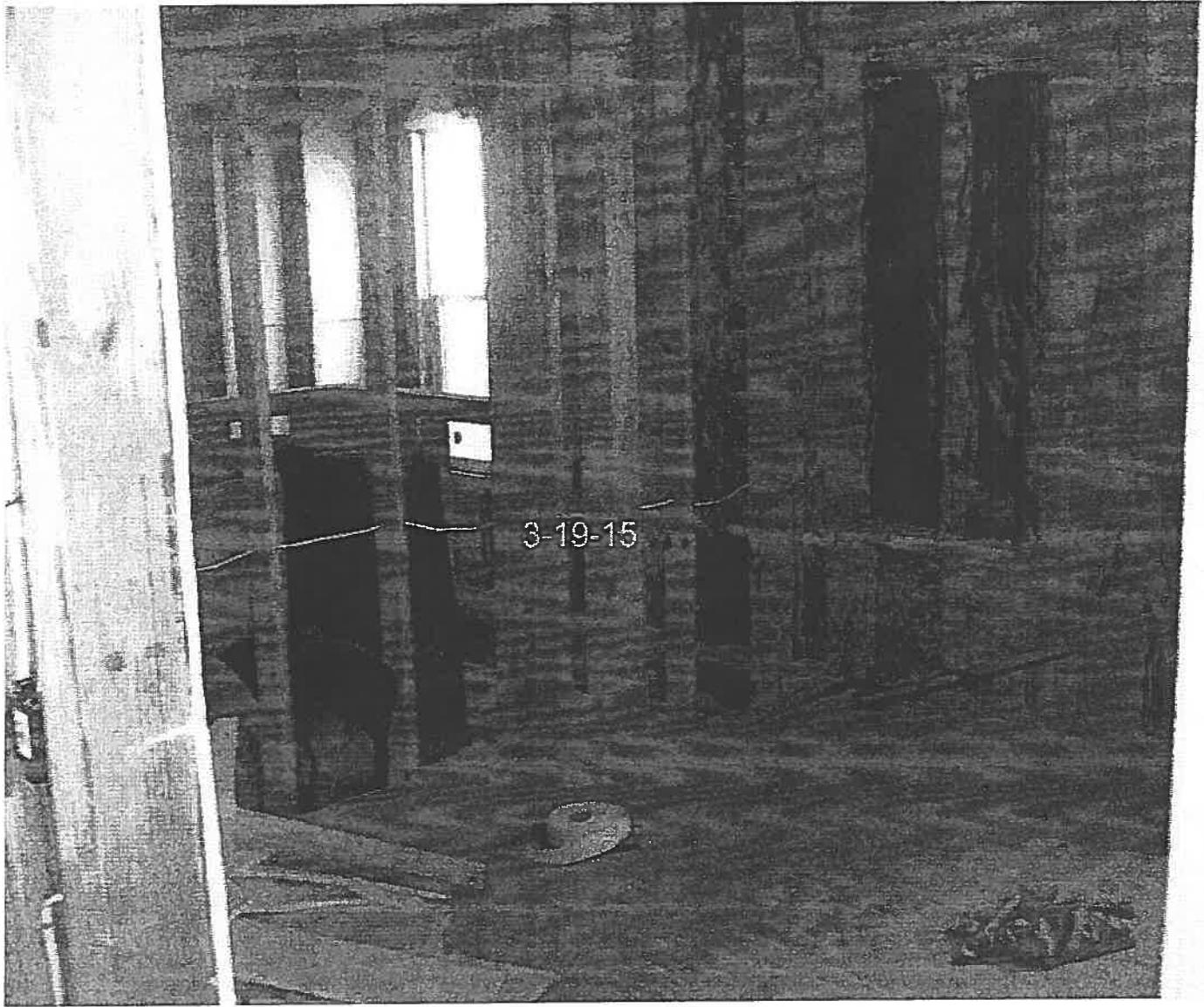












3-19-15





THE UNIVERSITY OF CHICAGO  
MILWAUKEE UNIVERSITY OF EDUCATION

RECEIVED  
MAY 10 1916

TO THE UNIVERSITY OF CHICAGO  
FROM THE MILWAUKEE UNIVERSITY OF EDUCATION

AMOUNT \$100.00  
DATE MAY 10 1916

PAID TO THE UNIVERSITY OF CHICAGO  
BY THE MILWAUKEE UNIVERSITY OF EDUCATION

FOR THE PURCHASE OF BOOKS  
AND SUPPLIES

RECEIVED BY THE UNIVERSITY OF CHICAGO  
MAY 10 1916

AMOUNT \$100.00  
DATE MAY 10 1916

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MAY 10 1916



# 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

12/16/2014

Road Home ID: 06HH023996

MARGUERITE DOYLE-JOHNSTON  
2524 DESIRE STREET  
NEW ORLEANS, LA 70117

**SUBJECT: Verification of Mitigation Grant Funds**

Dear MARGUERITE DOYLE-JOHNSTON:

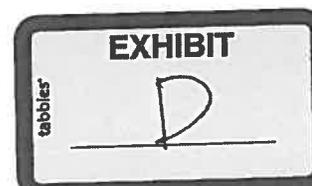
A review has been completed on your Hazard Mitigation grant file in order to confirm you received the correct amount of grant funds. The grant requires that the homeowner meet specific requirements listed in the Alternative Payment Option Affidavit and Agreement. Failure to satisfy the conditions listed 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 Reconstruction grant(s):

HMGP Grant Funds Received		Adjusted HMGP Values	
Elevation Grant	\$ 0.00	Elevation Grant	\$ 0.00
Individual Mitigation Measures (IMM)	\$ 0.00	Individual Mitigation Measures (IMM)	\$ 0.00
Reconstruction Grant	\$54,047.00	Reconstruction Grant	\$54,047.00
<b>Total HMGP Funds Received</b>	<b>\$54,047.00</b>	<b>Total Hazard Mitigation Benefit</b>	<b>\$54,047.00</b>

Based on the calculations above, our records indicate that the overpayment of your Hazard Mitigation Grant 06HH is \$54,047.00

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 Rhonda Laurent, 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 fifteen (15) 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 [rhonda.laurent@la.gov](mailto:rhonda.laurent@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

Attachment 1

THIS FORM MUST BE SIGNED BY THE BELOW NAMED APPLICANT AND RETURNED BY MAIL TO THE OFFICE OF COMMUNITY DEVELOPMENT, DISASTER RECOVERY UNIT HMGP ON OR BEFORE 15 DAYS FROM 12/16/2014.

Road Home ID: 06HH023996

Applicant Name: MARGUERITE DOYLE-JOHNSTON  
Address: 2524 DESIRE STREET

Rhonda Laurent:

Please select one (1) option below. This form must be returned within fifteen (15) days of the date on this letter.

- I have elected to return the overpayment to the Office of Community Development, Disaster Recovery Unit HMGP. I have enclosed my certified check, made payable to "**Louisiana Division of Administration - HMGP**", in the amount of \$54,047.00 mailed to:

Division of Administration  
Office of Community Development  
Hazard Mitigation Grant Program  
2021 Lakeshore Drive, Ste. 100  
New Orleans, LA 70122

- I agree with the finding that an overpayment has occurred but cannot make full payment at this time. Please review my proposed repayment plan which 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:

---

**SENDER: COMPLETE THIS SECTION**

- 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 mail piece, or on the front if space permits.

1. Article Addressed to:

Marguerite Doyle Johnston  
2524 Desire Street  
New Orleans, LA  
70117

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X  
 Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Certified Mail  Priority Mail Express™
- Registered  Return Receipt for Merchandise
- Insured Mail  Collect on Delivery

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number

(Transfer from service label)

7014 0510 0000 6493 7872

PS Form 3811, July 2013

Domestic Return Receipt

LA Office of Community Development  
Disaster Recovery Unit  
Hazard Mitigation Grant Program  
P.O. Box 5098  
Baton Rouge, LA 70821-5098

**RECEIVED**  
JAN 20 2015

*6/w 12/18/09  
2200*

*1-1*

*3333333333*

**CERTIFIED MAIL™**



7014 0510 0000 6493 7872



1000  
70117  
U.S. POSTAGE  
PAID  
NEW ORLEANS, LA  
DEC 16 27 14  
PM/DJMT  
\$5.49  
00032605-14

RETURN RECEIPT  
REQUESTED

7011704949 C  
7082105098

NIXIE 708 DE 1009 0001/06/15  
RETURN TO SENDER  
UNCLAIMED  
UNABLE TO FORWARD  
BC: 70821509898  
\*0365-00044-16-41



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

February 25, 2015

Road Home ID: 06HH023996

MARGUERITE DOYLE-JOHNSTON
3710 Bunker Hill Dr.
Metairie, LA 70002

SUBJECT: Verification of Mitigation Grant Funds

Dear MARGUERITE DOYLE-JOHNSTON:

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 Reconstruction grant(s):

Table with 4 columns: HMGP Grant Funds Received, Adjusted HMGP Values, and rows for Elevation Grant, Individual Mitigation Measures (IMM), Reconstruction Grant, and Total HMGP Funds Received.

Based on the calculations above, our records indicate that the balance of your Hazard Mitigation Grant 06HH023996 is \$54,047.00



Please understand that the State of Louisiana remains committed to ensuring that your grant was processed in an accurate and fair manner, and in accordance with all governing laws, rules, and policies. We have assigned Rhonda Laurent, 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 fifteen (15) days of the date at the top of this notification letter. If you have additional questions regarding this letter, please call 504-284-4109 or send email to rhonda.laurent@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

Attachment 1

THIS FORM MUST BE SIGNED BY THE BELOW NAMED APPLICANT AND RETURNED BY MAIL TO THE OFFICE OF COMMUNITY DEVELOPMENT, DISASTER RECOVERY UNIT HMGP ON OR BEFORE 15 DAYS FROM 02/25/2015.

Road Home ID: 06HH023996

Applicant Name: MARGUERITE DOYLE-JOHNSTON  
3710 Bunker Hill Dr.  
Metairie, LA 70002

Attention: Rhonda Laurent

Please select one (1) option below. This form must be returned within fifteen (15) days of the date on this letter.

- I have elected to return the overpayment to the Office of Community Development, Disaster Recovery Unit HMGP. I have enclosed my certified check, made payable to "Louisiana Division of Administration - HMGP", in the amount of \$54,047.00 mailed to:

Division of Administration  
Office of Community Development  
Hazard Mitigation Grant Program  
2021 Lakeshore Drive, Ste. 100  
New Orleans, LA 70122

- I agree with the finding that an overpayment has occurred but cannot make full payment at this time. Please review my proposed repayment plan which 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:

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PRINTED NAME: \_\_\_\_\_ Date \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

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

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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

3/16/2015

MARGUERITE A DOYLE-JOHNSTON  
3710 BUNKER HILL DR  
METAIRIE, LA 70002

Road Home ID: 06HH023996

**SUBJECT: Final HMGP Collection Attempt**

Dear MARGUERITE A DOYLE-JOHNSTON,

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. **If you fail to return the \$54,047.00 owed to the State within five (5) calendar days 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) 284-4067 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,

A handwritten signature in black ink, appearing to read "C. Taffaro".

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](http://www.hamiltonrelay.com/states/la_howto.htm).

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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 Reconstruction grant(s) because **the applicant provided no proof of payment and performed no mitigation activity:**

HMGP Grant Funds Received		Adjusted HMGP Values	
Elevation Grant	\$ 0.00	Elevation Grant	\$ 0.00
Individual Mitigation Measures (IMM)	\$ 0.00	Individual Mitigation Measures (IMM)	\$ 0.00
Reconstruction Grant	\$ 54,047.00	Reconstruction Grant	\$ 54,047.00
<b>Total HMGP Funds Received</b>	<b>\$ 54,047.00</b>	<b>Total Hazard Mitigation Benefit</b>	<b>\$ 54,047.00</b>

**Based on the calculations above, our records indicate that the overpayment of your Hazard Mitigation Grant 06HH023996 is \$54,047.00**

Payment should be delivered to the following address:

State of Louisiana  
Hazard Mitigation Grant Program  
2021 Lakeshore Drive, Suite 100  
New Orleans, La. 70122

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State of Louisiana

**HAZARD MITIGATION GRANT PROGRAM**

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

April 13, 2015

06HH023996  
MARGUERITE DOYLE-JOHNSTON  
3710 BUNKER HILL DR  
METAIRIE LA 70002

Re: Collection of Outstanding Debt in the Amount of **\$54,047.00**

Dear MARGUERITE DOYLE-JOHNSTON:

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 2524 DESIRE STREET NEW ORLEANS.

You have been notified on multiple occasions via demand letters about your debt owed to HMGP in the amount of **\$54,047.00**. 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  
Attorney for HMGP

