

Louisiana Community Development Block Grant -- Program Beneficiary Form

1 Name of Grantee _____
 2 Contract Number _____
 3

4 FY / Type _____
 5 Comments _____

6	Name of Activity	
7	(Income Levels)	Persons
8	Total--All Income Levels	
9	LMI Percentage	
10	Extremely Low Income	
11	Low Income	
12	Moderate Income	
13	Above Income	
14	(Racial Groups) American Indian or Alaskan Native	Total
		Hispanic
15	Asian	Total
		Hispanic
16	Black or African American	Total
		Hispanic
17	Native Hawaiian or Pacific Islander	Total
		Hispanic
18	White	Total
		Hispanic
19	American Indian and White	Total
		Hispanic
20	Asian and White	Total
		Hispanic
21	Black and White	Total
		Hispanic
22	American Indian and Black	Total
		Hispanic
23	Other Multi-racial	Total
		Hispanic
24	Total--All Racial Groups	Total
		Hispanic
25	Disabled Persons	
26	Disabled Head of HH	
27	Female-Headed Households	
28	Elderly-Occupied Households	
29	Total Occupied Households	

30	Rehabilitation Loans and Grants			
31	Persons		Households	
	Owner	Renter	Owner	Renter
32				
33				
34				
35				
36				
37	Persons		Owner	Renter
38				
39				
40				
41				
42				
43				
44				
45				
46				
47				
48				
49	Disab. Pers			
50	Disabled Head of HH			
51	Fem. Headed O/R HH			
52	Elderly-Occupied HH			
53	Total HH			

54	Source(s) for determining beneficiary data:	
55	We certify that to the best of our knowledge and belief the beneficiary data on this form is correct. For those projects involving utility line connections on private property, the household information reflects only households physically connected to the system with LCDBG funds. For Economic Development projects, the engineer's signature is not required.	
56	Signature, Chief Elected Official	Date
57	Signature, Grant Consultant	Date
58	Signature, Engineer/Architect	Date