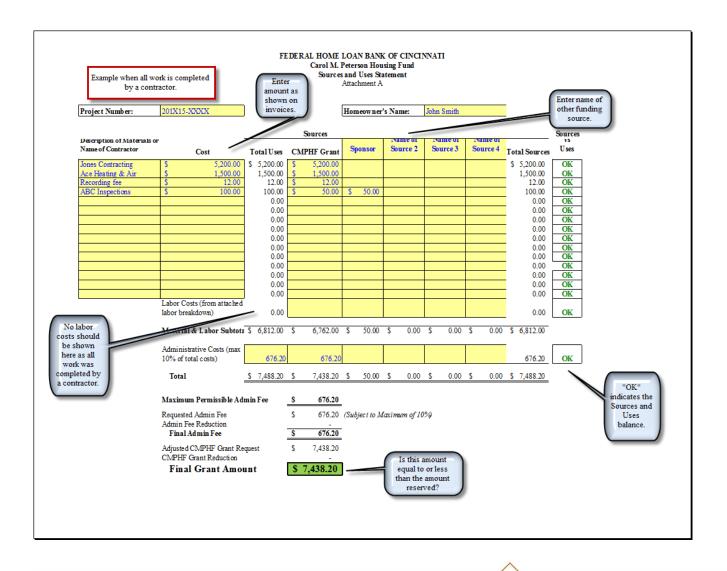
# **CMPHF Example Attachment A**

## All Work Completed by a Contractor





### FE DERAL HOME LOAN BANK OF CINCINNATI Carol M. Peterson Housing Fund Sources and Uses Statement

Labor Breakdown

Homeowner:

This spre	adsheet should be
blank	as all work was
complete	d by a contractor.

Date	Name	# of hours	Hourly Wage	Total Amount Paid	Description of Work Completed
Date	Name	nours	wage	ram	Description of Work Completed
				\$ 0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
				0.00	
	Total Labor Cost			\$ 0.00	

This labor breakdown should ONL Ybe used if the Sponsor's employees complete the work. Do not use this form if all work was completed by a contractor. Do not use this form if all robest oversight or travel as a labor cost. Those costs must be included in the admin fee.

### Invoice

### Jones Contracting

100 Main Street Anywhere, TN 12121

Date	7/1/14
Invoice#	1234
Account#	
Terms	
Due Date	7/15/14
Project	Smith

### Invoice for:

John Smith 202 West Sycamore Street Anywhere, TN 12121

The invoice must show the homeowner's name and/or property address.

Description	Qty	Rate	Am ount
Fear off and replace roof with asphalt	1000		
shingles.		\$5,000.00	\$5,200.00
		Total	\$5,200.00



### Invoice

### Ace Heating & Air 400 Music Road

Anywhere, TN 12121

Date	8/15/14
Invoice#	1234
Account#	
Terms	
Due Date	9/1/14
Project	Smith

### Invoice for:

John Smith 202 West Sycamore Street Anywhere, TN 12121

The invoice must show the homeowner's name and/or property address.

Description	Qty	Rate	Am ount
Replace HVAC system		\$1,500.00	\$1,500.00
	14	Total	\$1,500.00
	14		Amount shown on Attachmen

### Invoice

## ABC Inspections, Inc.

455 Alamo Road Anywhere, TN 12121

Date	9/15/14
Invoice#	1234
Account#	
Terms	
Due Date	9/30/14
Proj ect	Smith

### Invoice for:

John Smith 202 West Sycamore Street Anywhere, TN 12121

The invoice must show the homeowner's name and/or property address.

Description	Qty	Rate	Am ount
Final inspection		\$100.00	\$100.00
		Total	\$100.00

