

**ATTACHMENT 1**

**2009/2010 CDBG Units of Service Proposed**

**Step 2.** from CDBG Application for Funds

E) Please estimate the number of persons or households to be served by your program. To be eligible, at least 51% of your total City of Riverside clients must be of low to moderate income. Is your count by:

\_\_\_ Persons or \_\_\_ households?

Number of City low/moderate persons/households served annually. \_\_\_\_\_

Number of total City residents/households served annually. \_\_\_\_\_

***RETURN COMPLETED:*** Please complete and submit this form, together with all other required documents by ***no later than Friday, June 19, 2009*** to:

**City of Riverside Development Department  
3900 Main Street, 5<sup>th</sup> Floor  
Riverside, CA 92522  
Attention: Maurice L. Oliva**