

	DESCRIPTION	ROLL NO.	ODOMETER
PARCEL NO. A-3-20	WASHINGTON, CLEO 3217 N. VANCOUVER		
PARCEL NO. E-3-8	WASHINGTON, KATHRYN 2648 N. KERBY		
PARCEL NO. A-3-6	WEDGE, RAYMOND D. 242 N. COOK		
PARCEL NO. R-10-9	WESLEY, ROOSEVELT 535 N. MORRIS		
PARCEL NO. R-10-9	WHITCOMB, SCOTT 535 N. MONROE		
PARCEL NO. A-3-12	WHITE, CARMEN 253 N. FARGO		
PARCEL NO. A-2-4	WHITE, DOUGLAS & EVELYN (HAUGHT, EVELYN) 3100 N. GANTENBEIN		
PARCEL NO. A-3-2	WHITE, LOUISE 216 N. COOK		
PARCEL NO. RS-4-9	WILLIAMS, ALONZO 7 N. RUSSELL		
PARCEL NO. E-4-1	WILLIAMS, ALTON & BENNIE 2653 N. GANTENBEIN		
PARCEL NO. A-3-18	WILLIAMS, T.C. 203 N. FARGO		
PARCEL NO. RS-4-9	WILLIAMS, THEO 7 N. RUSSELL		
PARCEL NO. E-4-8	WOODS, E. JAMESSETTA 323 N. RUSSELL		
PARCEL NO. A-2-9	WOODS, WILLIAM H. JR. 3117 N. VANCOUVER		
PARCEL NO. A-3-3	WOODWARD, NEBBIE • 3227 N. GANTENBEIN		
PARCEL NO. A-3-8	WRIGHT, WILLIAM R. 30 N. KNOTT		
PARCEL NO. A-4-4	YARBOROUGH, MRS. BOBBIE 252 N. IVY		
PARCEL NO. A-3-7	YOUNG, DAVE 248 N. COOK		

TENANT

RESIDENTIAL RELOCATION RECORD

RELOCATION WORKER JC PROJECT NO. Ore. R-20 PARCEL A-3-6

NAME WEDGE, Raymond D. ADDRESS 242 N. Cook APT NO. _____

PHONE _____ INITIAL INTERVIEW _____ SEX M W X NW AGE 27

U.S. CITIZEN _____ ALIEN _____ VETERAN _____ SERVICEMAN _____ DATE ON SITE Nov. 1970

FAMILY COMPOSITION

Name	Relation	Age
<u>Yuri Thomas</u>		<u>30</u>

Employer: Name Valley Decorating \$ 324.
 Address _____
 MCM Caseworker _____
 Social Security _____
 VA. Fed. Mult Co. _____
 Pension: Name _____
 Other: Name _____
(Yuri) Swan Island \$ 320
 TOTAL MONTHLY INCOME _____

Rent 65.00, Inc. Heat Water Gas Gar Elec Unfurn Furn No. Rms 5

ELIGIBILITY FOR PUBLIC HOUSING: (yes or no)
 Over 62 Disabled(Soc.Sec.def.) Income below limits Assets below limits

221 CERTIFICATE OF ELIGIBILITY: Date delivered _____ by _____

Notify in case of accident:
 Name _____ Address _____ Phone _____

Information Statement given to _____ on _____ by _____

Notice to move given to _____ on _____ by _____

Payments: Amount \$ _____ Check No. _____ Date delivered _____ Moved by self (or)
 moved by moving company _____ (Phone) _____

REMOVED FROM CASELOAD: (Date) _____

Refused assistance _____

Relocated in: _____

Low-rent public housing _____

Other perm. public housing _____

Standard priv. rent hsg. _____

Sub-standard priv. rent hsg. with refusal of further aid _____

Standard sales housing _____

Sub-standard sales hsg. _____

Out-of-town _____

Address unknown, abandoned _____

Evicted, no further assistance _____

Other (explain) _____

REMAINING ON CASELOAD: _____

Address unknown, tracing _____

Evicted, further assistance contemplated _____

Temporarily relocated by LPA within project: _____

Address _____

outside project: _____

Address _____

FAMILY REFUSED ADDITIONAL ASSISTANCE.
 Date _____ Worker _____

RELOCATION REFERRALS:

Address	Inspection Certified By	Date
<u>451 N.E. 12th</u>		
<u>1678 N.E. Buffalo</u>		

NEW ADDRESS: _____ Zip _____ Phone _____

DATE

NOTES

C/W

2/22/71

Survey: 2 single men. Will rent house N. or NE area, close to work, 2 bedrooms, \$100.00/mo.

WSJ

Tenant

Should be 2 separate files

(f)

RESIDENTIAL RELOCATION RECORD

RELOCATION WORKER _____ PROJECT NO. B-20 PARCEL A 3-6

NAME Wedge, Raymond D. ADDRESS 242 N Cook APT NO. —

PHONE _____ INITIAL INTERVIEW _____ SEX M W X NW AGE 27

U.S. CITIZEN _____ ALIEN _____ VETERAN _____ SERVICEMAN _____ DATE ON SITE Nov '70

FAMILY COMPOSITION

Name	Relation	Age
<u>Yurl Thomas</u>	<u>—</u>	<u>30</u>

out 7/1

Employer: Name Valley Decorating \$ 324
 Address _____
 MCW Caseworker _____
 Social Security _____
 Va. Fed. Mult Co. _____
 Pension: Name _____
 Other: Name (Yurl) Swan Island 320
 TOTAL MONTHLY INCOME _____

Rent 65.00, Inc. Heat _____ Water _____ Gas _____ Gar _____ Elec _____ Unfurn _____ Furn _____ No. Rms 5

ELIGIBILITY FOR PUBLIC HOUSING: (yes or no)
 Over 62 _____ Disabled (Soc. Sec. def.) _____ Income below limits _____ Assets below limits _____

221 CERTIFICATE OF ELIGIBILITY: Date delivered _____ by _____
 Notify in case of accident:

Name _____ Address _____ Phone _____

Information Statement given to _____ on _____ by _____
 Notice to move given to _____ on _____ by _____

Payments: Amount \$ _____ Check No. _____ Date delivered _____ Moved by self _____ (or)
 moved by moving company _____ (Phone) _____

REMOVED FROM CASELOAD: (Date) _____

Refused assistance _____
 Relocated in:
 Low-rent public housing _____
 Other perm. public housing _____
 Standard priv. rent. hsg. _____
 Sub-standard priv. rent hgs. with refusal of further aid _____
 Standard sales housing _____
 Sub-standard sales hsg. _____
 Out-of-town _____
 Address unknown, abandoned _____
 Evicted, no further assistance _____
 Other (explain) _____

REMAINING ON CASELOAD:

Address unknown, tracing _____
 Evicted, further assistance contemplated _____
 Temporarily relocated by LPA _____
 within project: _____ address _____
 outside project: _____ address _____

FAMILY REFUSED ADDITIONAL ASSISTANCE:
 Date _____ Worker _____

RELOCATION REFERRALS:

Address	Inspection Certified By	Date

NEW ADDRESS: _____ Zip _____ Phone _____

HOUSING RESOURCES SURVEY

**RELOCATION ASSISTANCE NEEDS OF RESIDENTS OF
EMANUEL HOSPITAL PROJECT AREA**

(To be filled in for each dwelling unit in the Project Area)

Analyst WJG Date of survey 2/22/71 Tabulator _____ Date tabulated _____
 Dwelling Unit No. 4 Structure No. 3 Census Block No. 23 Census Tract No. 22A
 Street Address 242 N. Cook Apartment No. _____

A. Status Of Relocation Assistance Needs At This Dwelling Unit:

1. Assistance may be needed, yes X, no _____
2. Why no assistance may be needed
 - a. _____ Vacant
 - b. _____ Will be vacated on the following date _____
 - c. _____ Other reasons _____

*2 single men -
house was just robbed -
completely cleaned out*

B. Residents Of This Dwelling Unit Who May Need Relocation Assistance:

	<u>Name</u>	<u>Family relation</u>	<u>Age</u>	<u>Sex</u>	<u>Occupation</u>
1.	<u>Raymond D. Wedge</u>	<u>Head of household</u>	<u>27</u>		
2.	<u>Yure Thomas</u>		<u>30</u>		
3.					
4.					
5.					
6.					
7.					
8.					
9.					

C. Family Income And Extent Of Travel To Locations Of Employment:

1. Jobholders in this household, employers and location of jobs: Distance

<u>Names of jobholders</u>	<u>Names of employers</u>	<u>Street address where jobs are located to work</u>	<u>Distance</u>
<u>Raymond</u>	<u>Valley Decorating</u>	<u>Swan Island</u>	<u>15 blocks</u>
<u>Yure</u>			

2. Monthly income from jobs and from all other sources received by persons in this household:

<u>Names of persons in this household who have income from any source</u>	<u>Amount of income per month</u>		
	<u>In month before this survey</u>	<u>In an average month during 1970</u>	
<u>Raymond</u>	<u>\$ 324</u>		<u>\$65</u>
<u>Yure</u>	<u>320</u>		
Total family or household income per month	\$ 644	\$ 644	

D. Characteristics Of Replacement Housing Needs Expected To Be Sought:

1. Location (indicate approximate cross streets) N or NE close to wlk.
2. Transportation, number of autos owned 2, use bus _____, walk _____
3. Will rent house , apartment _____, expect to pay rent, including utilities, at \$ 100 per mo. (Furniture is owned, yes , no _____, stove and refrigerator owned, yes , no _____)
4. Will buy house in price range \$ _____, down payment of \$ _____, monthly payment of \$ _____
5. If now buying this house, how much are payments on contract or mortgage monthly \$ _____
6. Size of unit to be sought, number of bedrooms 2, kitchen , dining room _____, living room , number of bathrooms 1, total sq. ft. in dwelling unit _____
7. Other characteristics W O B I M

date on site about 3 months