AWARD NUMBER: 39-42-B10578

DATE: 04/26/2013

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 12/31/2013

QUARTERLY PERFORMANCE PRO	OGRES	SS REPORT	FOR PUBLIC COM	PUTER CENTERS		
General Information						
Federal Agency and Organizational Element to Which Report is Submitted 2	. Award	Identification I	Number	3. DUNS Number		
Department of Commerce, National Telecommunications and Information Administration	39-42-B	10578		048782569		
4. Recipient Organization						
Toledo-Lucas County Public Library 325 N Michigan St	treet, To	oledo, OH 436	04-6614			
5. Current Reporting Period End Date (MM/DD/YYYY)		6. Is this the la	st Report of the Award	Period?		
03-31-2013			• Yes	No		
7. Certification: I certify to the best of my knowledge and l purposes set forth in the award documents.	belief th	at this report is	correct and complete	for performance of activities for the		
7a. Typed or Printed Name and Title of Certifying Official			7c. Telephone (area co	ode, number and extension)		
Margaret Danziger			419-259-5260			
			7d. Email Address			
Deputy Director			margaret.danziger@	toledolibrary.org		
7b. Signature of Certifying Official			7e. Date Report Subm	itted (MM/DD/YYYY):		
Submitted Electronically			04-26-2013			

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Project Indicators (This Quarter)

- 1. Please describe significant project accomplishments completed during this quarter (600 words or less).
- A. Federal, local, and matching funds have been expended, objectives met, and Toledo-Lucas County Public Library will apply for early close out at the end of the January-March 2013 quarter. B. Kent Branch had 16,063 log-ins compared with 14,916 during the same time period in 2012. C Kent customers used assistive technology 3 times, while 37 customers used the Cybermobile's assistive tech this quarter. D. The Cybermobile introduced computers to 57 preschoolers at a local YMCA day care, 6 students who were 100 years old or older in senior complexes, 11 students with mild dementia, 22 special needs students, and 33 adults with macular degeneration. E. The Cybermobile partnered with Toledo Hospital ProMedica Human Resources Dept. to provide computer training for support staff. In addition, ProMedica trained its staff on resume writing and applying for internal jobs. See attachments.
- 2. Please provide the percent complete for the following key milestones in your project. Write "0" in the Percent Complete column and "N/A" in the Narrative column if your project does not include this activity. If you provided additional milestones in your baseline report, please insert them at the bottom of the table. Figures should be reported cumulatively from award inception to the end of the most recent reporting quarter. Please provide a narrative description if the percent complete is different from the target provided in your baseline plan (300 words or less).

		Percent	Narrative (describe your reasons for any variance from the baseline
	Milestone	Complete	plan or any other relevant information)
2.a.	Overall Project	100	
2.b.	Equipment / Supply Purchases	-	Progress reported in Question 4 below
2.c.	Public Computer Centers Established	-	Progress reported in Question 4 below
2.d.	Public Computer Centers Improved	-	Progress reported in Question 4 below
2.e.	New Workstations Installed	-	Progress reported in Question 4 below
2.f.	Existing Workstations Upgraded	-	Progress reported in Question 4 below
2.g.	Outreach Activities	-	Progress reported in Question 4 below
2.h.	Training Programs	-	Progress reported in Question 4 below
2.i.	Other (please specify):	-	Progress reported in Question 4 below

3. Please describe any challenges or issues faced during this past quarter in achieving planned progress against the project milestones listed above. In particular, please identify any areas or issues where technical assistance from the BTOP program may be useful (600 words or less).

None.

4. Please provide actual total numbers to date or typical averages for the following key indicators, as specified in the question. Write "0" in the Total column and "N/A" in the Narrative column if your project does not include this activity. Unless otherwise indicated below, figures should be reported <u>cumulatively</u> from award inception to the end of the most recent reporting quarter. Please provide a narrative explanation if the total is different from the target provided in your baseline plan (300 words or less).

	Indicator	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
49	New workstations installed and available to the public	141	130 available at Kent Branch; 11 on the Cybermobile
	Average users per week (NOT cumulative)	166	105 at Kent; 61 on the Cybermobile
4.c.	Number of PCCs with upgraded broadband connectivity	130	100%
4 1	Number of PCCs with new broadband wireless connectivity	51	100%
4.e.	Number of additional hours per week existing and new PCCs are open to the public as a result of BTOP funds	26	6 at Kent; 20 on the Cybermobile

5. Training Programs. In the chart below, please describe the training programs provided at each of your BTOP-funded PCCs.

	Length of Program (per hour	Number of Participants per	Number of Training Hours per
Name of Training Program	basis)	Program	Program

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Kent basic comp/Internet	1	562	562
Kent GED	1	660	660
Kent health/bus/genealogy	1	33	33
Kent partners training	1	63	63
Kent open lab	1	45	45
Cybermobile basic comp/ Internet	1	388	388
Cybermobile GED	2	21	42
Cybermobile open lab	1	388	388

Add Training Program

Remove Training Program

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Project Indicators (Next Quarter)

1. Please describe significant project accomplishments planned for completion during the next quarter (600 words or less).

Toledo-Lucas County Public Library expects to close out at the end of the first quarter of 2013. Deadline for close out documentation is June 30, 2013.

2. Please provide the percent complete anticipated for the following key milestones in your project as of the end of the next quarter. Write "0" in the second column if your project does not include this activity. Figures should be reported cumulatively from award inception to the end of the next reporting quarter. Please provide a narrative description if the planned percent complete is different from the target provided in your baseline plan (300 words or less).

	Milestone	Planned Percent Complete	Narrative (describe reasons for any variance from baseline plan or any relevant information)
2.a.	Overall Project	100	
2.b.	Equipment / Supply Purchases	-	Milestone Data Not Required
2.c.	Public Computer Centers Established	-	Milestone Data Not Required
2.d.	Public Computer Centers Improved	-	Milestone Data Not Required
2.e.	New Workstations Installed	-	Milestone Data Not Required
2.f.	Existing Workstations Upgraded	-	Milestone Data Not Required
2.g.	Outreach Activities	-	Milestone Data Not Required
2.h.	Training Programs	-	Milestone Data Not Required
2.i.	Other (please specify):	-	Milestone Data Not Required

3.	Please describe any	challenges or	issues anticipated durin	g the next quarter t	hat may impact plai	nned progress aga	ainst the project	
mi	lestones listed above	e. In particular	, please identify any area	as or issues where	technical assistance	e from the BTOP p	rogram may be use	fu
(60	00 words or less).							

None.

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Public Computer Center Budget Execution Details

Activity Based Expenditures (Public Computer Centers)

1. Please provide details below on your total budget, cumulative actual expenditures (for the period ending the current quarter), and cumulative anticipated expenditures (for the period ending next quarter) for each line item, including detailed disbursements of both matching funds and federal funds from project inception through end of this quarter (actual) or next quarter (anticipated). Actual and anticipated figures should be reported cumulatively from award inception to the end of the applicable reporting quarter.

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Budget for Entire Project			Actuals from Project Inception through End of Current Reporting Period			Anticipated Actuals from Project Inception through End of Next Reporting Period			
Cost Classification	Total Cost (plan)	Matching Funds (plan)	Federal Funds (plan)	Total Cost	Matching Funds	Federal Funds	Total Costs	Matching Funds	Federal Funds
a. Personnel	\$135,133	\$40,540	\$94,593	\$135,133	\$40,540	\$94,593	\$135,133	\$40,540	\$94,593
b. Fringe Benefits	\$39,188	\$11,756	\$27,432	\$39,188	\$11,756	\$27,432	\$39,188	\$11,756	\$27,432
c. Travel	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
d. Equipment	\$586,964	\$176,089	\$410,875	\$287,531	\$86,259	\$201,272	\$287,531	\$86,259	\$201,272
e. Supplies	\$0	\$0	\$0	\$299,433	\$89,830	\$209,603	\$299,433	\$89,830	\$209,603
f. Contractual	\$177,383	\$53,216	\$124,167	\$177,383	\$53,216	\$124,167	\$177,383	\$53,216	\$124,167
g. Construction	\$2,103,015	\$630,905	\$1,472,110	\$2,103,015	\$630,905	\$1,472,110	\$2,103,015	\$630,905	\$1,472,110
h. Other	\$49,253	\$14,775	\$34,478	\$49,253	\$14,775	\$34,478	\$49,253	\$14,775	\$34,478
i. Total Direct Charges (sum of a through h)	\$3,090,936	\$927,281	\$2,163,655	\$3,090,936	\$927,281	\$2,163,655	\$3,090,936	\$927,281	\$2,163,655
j. Indirect Charges									
k. TOTALS (sum of i and j)	\$3,090,936	\$927,281	\$2,163,655	\$3,090,936	\$927,281	\$2,163,655	\$3,090,936	\$927,281	\$2,163,655

2. Program Income: Please provide the program income you listed in your application budget and actuals to date through the end of the reporting period.

a. Application Budget Program Income: \$0	b. Program Income to Date: \$0
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