U.S. DEPARTMENT OF COMMERCE										2. Award or Grant Number 40-50-M09059			
Performance Progress Report											4. Report Date (MM/DD/YYYY) 10-16-2012		
	c <b>ipient Name</b> f Oklahoma									6. Reporti 09-30-2012	ng Period End Date:		
	eet Address Lincoln Boulevard,												
	<b>y, State, Zip Code</b> ma City, OK 73105-4801												
7a. Project / Grant Period Start Date: (MM/DD/YYYY) 01-01-2010		7b. End Date: (MM/DD/YYYY) 12-31-2014		8. Designa N/A	8. Designated Entity on Behalf of: N/A								
9. Lis	t the individual projects in ye	our approved	project plan							I	-		
	Project Type (Data Collection, Capacity Building, Technical Assistance, etc.)		Project Name (if different from Project Ty			ype)	Amount Amount		Total Feder Amount expen- of this repor	ded at the end	Percent of Total Federal Funding amount expended		
1	Data Collection	SBDD - State of Oklahoma				3,815	3,815,185 1,9		2,313	51			
2	N/A		N/A				0		0		0		
3	N/A		N/A				(	0 0		)	0		
4	N/A		N/A				(	0		)	0		
5	N/A	N/A				0		0		0			
_	ersonnel If the project is not fully staf	fed, describe	how any lack of sta	affing ma	ay impact the p	projec	t's timeline a	nd when the	project will be f	ully staffed.			
10b. \$	Staffing Table												
Job Title						F	FTE % Project(s) Assi		ned	Change			
Broadband Mapping Project Coordinator							50	Data Collecti	on		No Change		
Add Row Remove Row													

11. Subcontracts (Vendors a										
11a. Subcontracts Table - Inclu	de all subcontractors. Ti	ne totals from this table equ	ual the "Su	ubcontractor	Total" for the	Program Bud	get Worksheet (0		2, 3, and 4)	
Name Subcontra Purpose		Type (Vendor/Subrec)	RFP Issued (Y/N)	ed Executed Start		End Date Total Federal Funds Allocated		Total Matching Funds Allocated	Project and % Assigned (Example: Data Collection 75	
The Sanborn Map Company Data Collection		Vendor	Yes	Yes	01/18/2010	12/31/2014	2,829,863	154,463	Data Collection	100
			Add Ro			Rer	nove Row			
There have been no challenge	s encountered with the S	Sanborn Map Company.								
12. Budget worksheet		act for your optime oward	uhich is th		n filo. Only lia	t motobing fu	ada that the Dan	antmont of Con	amaraa haa alraa	du approvad
Columns 2, 3, and 4 will match your current project Project Budget Element		Federal	Approved Matching Funds		unds	Total Budget	Federal Federal Funds Expended	Ap Match	proved	dy approved. Total Funds Expended
Personnel Salaries		\$340,750	\$383,773		\$	5724,523	\$142,774 \$		62,827	\$205,601
Personnel Fringe Benefits		\$102,300	\$144,869		9	5247,169	\$59,223	\$	25,131	\$84,354
Travel		\$0		\$0		\$0	\$0		\$0	\$0
Equipment		\$0		\$0		\$0	\$0		\$0	\$0
Materials / Supplies		\$48,000		\$0		\$48,000	\$0		\$0	
Subcontracts Total		\$2,829,863	\$	54,463		2,984,326	\$1,578,316		68,445	\$1,646,761
Construction		\$0	\$0			\$0	\$0		\$0	\$0
Other		\$445,266	\$423,76		9	6869,034	\$162,000 \$4		423,768	\$585,768
Total Direct Costs		\$3,766,179	\$1,106		\$	4,873,052	\$1,942,313	\$	580,171	\$2,522,484
Total Indirect Costs		\$49,006	\$0			\$49,006	\$0		\$0	\$0
Total Costs		\$3,815,185	\$1	,106,873	\$	4,922,058	\$1,942,313	\$!	580,171	\$2,522,484

13. Hardware / Software									
13a. List any hardware/software purchased during this reporting period.									
Ν/Α									
13b. Please note any hardware/software that has yet to be purchased and explain why it has not been purchased.									
N/A									
14. SBI PPR Project Attachment (Skip question 14b if Data Collection is your only project).									
14a. Complete a SBI PPR Project Data Collection Attachment and attach it to the PPR.									
14b. Complete a SBI PPR Attachment for each additional funded project and attach it to the PPR.									
15. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purpose									
set forth in the award documents.									
15a. Typed or Printed Name and Title of Authorized Certifying Official	15c. Telephone (area code, number, and extension)								
Richard Clark	4055224971								
	15d. Email Address								
	richard.clark@osf.ok.gov								
	15e. Date Report Submitted								
15b. Signature of Authorized Certifying Official	(MM/DD/YYYY)								
Submitted Electronically	10-19-2012								