	2. Award or Grant Number 60-50-M09067		
	4. Report Date (MM/DD/YYYY) 10-31-2012		
Recipient Name Office of the Governor - American Sa	6. Reporting Period End Date: 09-30-2012		
3. Street AddressA.P. Lutali Executive Office Building,5. City, State, Zip Code			
Pago Pago, AS 96799 7a. Project / Grant Period Start Date: (MM/DD/YYYY) 02-15-2010	7b. End Date: (MM/DD/YYYY) 02-14-2015	8. Designated Entity on Behalf of: Office of the Governor	

9. List the individual projects in your approved project plan

	Project Type (Data Collection, Capacity Building, Technical Assistance, etc.)	Project Name (if different from Project Type)	Total Federal Funding Amount	Total Federal Funding Amount expended at the end of this reporting period	Percent of Total Federal Funding amount expended
1	Data Collection	Am Samoa SBI Project	1,900,496	562,061	30%
2	N/A				
3	N/A				
4	N/A				
5	N/A				
6	N/A				

10. Personnel

10a. If the project is not fully staffed, describe how any lack of staffing may impact the project's timeline and when the project will be fully staffed.

Within American Samoa's proposed Corrective Action Plan, eliminating the 100% FTE position from the program was favored, as percentages of the duties of the project has been split up among members of the staff, with exisiting salaries, to be used as in-kind matching for the project. As of July 2012 no federal funds have been expended towards the salary of the individual who was originally hired for the 100% FTE management of the project. As of October 2012, that employee no longer works with the agency.

10b. Staffing Table							
Job Tit		FTE %	Project(s) Assigned	Change			
N/A			0	N/A	New to Project		
	Add Row	Remove R	ow				

11. Subcontracts

11a. Subcontracts Table - Include all subcontractors. The totals from this table equal the "Subcontracts Total" from the Program Budget Worksheet (Q. 12, Column 2, 3, and 4)

Name	Subcontract Purpose	RFP Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated	Project and % A (Example: Data Colle	
Broadmap, LLC	Data Collection	No	Yes	08/01/2010	02/14/2015	1,189,480	90,000	Data Collection	100
TBD	Data Collection	No	No	02/15/2010	02/14/2015	205,135	0	Data Collection	100
					Add Daw	Damaya Da		_	

Add Row Remove Row

11b. Describe any challenges encountered with vendors or subrecipients.

The only major challenge was getting the vendor paid on time, these payments have started again, after some internal issues were resolved.

12. Budget worksheet

Columns 2, 3, and 4 will match your current project budget for your entire award, which is the SF-424A on file. Only list matching funds that the Department of Commerce has already approved.

Project Budget Element	Federal Funds Awarded	Approved Matching Funds	Total Budget	Federal Funds Expended	Approved Matching Funds Expended	Total Funds Expended
Personnel Salaries	\$242,530	\$29,670	\$272,200	\$9,455	\$6,065	\$15,520
Personnel Fringe Benefits	\$21,100	\$2,581	\$23,681	\$1,896	\$741	\$2,637
Travel	\$35,280	\$0	\$35,280	\$0	\$0	\$0
Equipment	\$79,667	\$0	\$79,667	\$0	\$0	\$0
Materials / Supplies	\$53,901	\$152,446	\$206,347	\$0	\$0	\$0
Subcontracts Total	\$1,394,615	\$90,000	\$1,484,615	\$550,710	\$11,260	\$561,970
Construction	\$0	\$0	\$0	\$0	\$0	\$0
Other	\$0	\$0	\$0	\$0	\$0	\$0
Total Direct Costs	\$1,827,093	\$274,697	\$2,101,790	\$562,061	\$18,066	\$580,127
Total Indirect Costs	\$73,403	\$8,216	\$81,619	\$0	\$0	\$0
Total Costs	\$1,900,496	\$282,913	\$2,183,409	\$562,061	\$18,066	\$580,127
% of Total	87	13	100	97	3	100

13. Hardware / Software

13a. List any hardware/software purchased during this reporting period.

None

13b. Please note any hardware/software that has yet to be purchased and explain why it has not been purchased.

Vendor has already purchased hardware and software, it will be shipped to the American Samoa Government upon completion.

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)				
Andrew D Berquist	684-633-3648				
Load IT Draiget Manager	15d. Email Address				
Lead IT Project Manager	Andrew.Berquist@itd.as.gov				
15b. Signature of Authorized Certifying Official	15e. Date Report Submitted (MM/DD/YYYY)				
Submitted Electronically	01-14-2013				