RECIPIENT NAME: AWARD NUMBER: DATE:

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 12-31-2010

## QUARTERLY PERFORMANCE PROGRESS REPORT FOR BROADBAND INFRASTRUCTURE PROJECTS

General Information						
Federal Agency and Organizational Element to Which Report is Submitted Department of Commerce/NTIA	2. Award Identification Number		3a.	<b>3a. DUNS Number</b> 831358234		
Department of Commerce/IVIII/	N110DIX3370004			<b>EIN</b> 27049674	11	
4. Recipient Organization (Name and complete addi	ress including cou	ntry, congression	al district, and	zip code)		
North Georgia Network Cooperative, Inc. 6135 State Hwy 115, Clarkesville, GA 30523-00	95 USA					
5. Current Reporting Period End Date (MM/DD/YYY	Y)	6. Is this the last	Report of the	Award Period?		
06/30/2010						
7. Certification: I certify to the best of my knowledg purposes set forth in the award documents.	e and belief that th	is report is correc	ct and complet	e for performance	of activities for the	
7a. Typed or Printed Name and Title of Certifying O	fficial	7c. Te	elephone (area	code, number and	l extension)	
Lee Ann Roy Grants Management Advisor		706-8	64-2196			
		7d. Er	mail Address			
		laroy	@windstream	ı.net		
7b. Signature of Certifying Official		7e. Da	7e. Date Report Submitted (MM/DD/YYYY):			
Lee Ann Roy		07/30	07/30/2010			

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### **Project Indicators (This Quarter)**

1. Please describe significant project accomplishments completed during this quarter (150 words or less).

Completed, submitted draft Environmental Assessment by Special Award Condition deadline; Initiated site acquisition activities for planned CPOP locations.

2. Please provide the percent complete for the following key milestones in your project. Write "N/A" in the second column if your project does not include this activity. If you provided additional milestones in your baseline plan, please insert them at the bottom of the table. Unless otherwise indicated in the instructions, 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 (100 words or less).

	Milestone	Percent Complete	Narrative (describe reasons for any variance from baseline plan or subsequent written updates provided to your program officer)
2a.	Overall Project	20	
2b.	Environmental Assessment	70	
2c.	Network Design	60	
2d.	Rights of Way	60	
2e.	Construction Permits and Other Approvals	0	
2f.	Site Preparation	0	
2g.	Equipment Procurement	15	
	Network Build (all components - owned, leased, IRU, etc)	0	
2i.	Equipment Deployment	0	
2j.	Network Testing	0	
2k.	Other (please specify):	0	

3. To the extent not covered above, 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 (150 words or less).

4. Please report the following information regarding network build progress. Write "N/A" in the second column if your project does not include this activity. Unless otherwise indicated in the instructions, figures should be reported cumulatively from award inception to the end of the most recent reporting quarter. Please provide a narrative description if the total is different from the target provided in your baseline plan (100 words or less).

Indicator	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
New network miles deployed	0	
New network miles leased	0	
Existing network miles upgraded	0	
Existing network miles leased	0	
Number of miles of new fiber (aerial or underground)	0	
Number of new wireless links	0	
Number of new towers	0	
Number of interconnection points	0	

For questions 5 and 6 please include information relating to agreements that you are negotiating or have entered into, or that your subrecipient, contractor or subcontractor is negotiating or entered into.

5a. If applicable, please provide the following information with regard to agreements with broadband wholesalers and/or last mile providers as a result of your project.

Indicators	
Number of signed agreements with broadband wholesalers or last mile providers	0
Number of agreements currently being negotiated with broadband wholesalers or last mile providers	1
Average term of signed agreements	0

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5b. Please list the names of the wholesale and last mile providers with whom you have signed agreements. Providers:
N/A
5c. What wholesale services are being provided by this project? Please describe below. As an attachment to this report, please provide pricing plans (in \$ per month) associated with each wholesale service provided by your product. Wholesale services description:  N/A
5d. If you have designated a third party to operate all or a portion of your network, please provide the name and contact information for this third party, indicate if this entity is a subrecipient, contractor, and/or subcontractor, and describe with specificity the portion of your network this third party operates (150 words or less).
N/A
6. Please provide the data according to the type of subscriber. Write "N/A" if your project does not pass or serve a particular subscriber.

6. Please provide the data according to the type of subscriber. Write "N/A" if your project does not pass or serve a particular subscriber type. Unless otherwise indicated in the instructions, figures should be reported cumulatively from award inception to the end of the most recent reporting quarter. Please provide a narrative description if the total is different from the target provided in your baseline plan (100 words of less).

			Narrative (describe your reasons for any variance from the baseline plan or any other
Subscriber Type	Access Type	Total	relevant information)
	Providers with signed agreements receiving new access	0	
Broadband Wholesalers or Last Mile	Providers with signed agreements receiving improved access	0	
Providers	Providers with signed agreements receiving access to dark fiber	0	
	Please identify the speed tiers that are available and the number of subscribers for each	0	
	Total subscribers served	0	
	Subscribers receiving new access	0	
Community Anchor Institutions (including Government institutions)	Subscribers receiving improved access	0	
	Please identify the speed tiers that are available and the number or subscribers for each	0	
	Entities passed	0	
	Total subscribers served	0	
Residential / Households	Subscribers receiving new access	0	
Residential / Households	Subscribers receiving improved access	0	
	Please identify the speed tiers that are available and the number of subscribers for each	0	
	Entities passed	0	
	Total subscribers served	0	
Puoinsess	Subscribers receiving new access	0	
Businesses	Subscribers receiving improved access	0	
	Please identify the speed tiers that are available and the number of subscribers for each	0	

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7. Please describe any special offerings you may provide (150 word N/A	ds or less).	
8a. Have your network management practices changed over the las	st quarter?    No	○ Yes
8b. If so, please describe the changes (150 words or less). N/A		
9. Community Anchor Institutions: Using the table below, please provide a list by service area of the coconnected to your network as a result of BTOP funds. Unless other cumulatively from award inception to the end of the most recent cal providing broadband service to the anchor institution. Finally, provusing BTOP-funded infrastructure (100 words or less).	rwise indicated in the lendar year.  Also ind	instructions, figures should be reported icate whether your organization is currently
	Are you also the broadband	

Institution Name	Service Area (town or county)	Type of Anchor Institution (as defined in your baseline)	Are you also the broadband service provider for this institution? (Yes / No)	Narrative description of how anchor institutions are using BTOP-funded infrastructure
N/A				

#### Project Indicators (Next Quarter)

1. Please describe significant project accomplishments planned for completion during the next quarter (150 words or less).

Finalize routes and POP sitings; Receive Environmental FONSI; complete site acquisition activities; begin equipment procurement; significant progress on securing ROW; complete IRU agreements with two providers

2. Please provide the percent complete for the following key milestones in your project. Write "N/A" in the second column if your project does not include this activity. If you provided additional milestones in your baseline plan, please insert them at the bottom of the table. Unless otherwise indicated in the instructions, 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 (100 words or less).

	Milestone	Planned Percent Complete	Narrative (describe reasons for any variance from baseline plan or any other relevant information)
2a.	Overall Project	25	
2b.	Environmental Assessment	100	
2c.	Network Design	80	
2d.	Rights of Way	70	
2e.	Construction Permits and Other Approvals	0	
2f.	Site Preparation	20	
2g.	Equipment Procurement	25	
2h.	Network Build (all components - owned, leased, IRU, etc.)	3	
2i.	Equipment Deployment	5	
2j.	Network Testing	0	
2k.	Other (please specify):	0	

3. Please describe any challenges or issues anticipated during the next quarter that may impact 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 (150 words or less).

Approval of subrecipient status for EMC partners; receipt of FONSI

## **Infrastructure Budget Execution Details**

## **Activity Based Expenditures (Infrastructure)**

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.

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. Administrative and legal expenses	\$1,628,75(	\$325,750	\$1,303,00( +	\$258,817	\$51,763	\$207,053	\$411,616	\$82,323	\$329,293
b. Land, structures, right-of- ways, appraisals, etc.	\$4,110,896	\$822,179	\$3,288,717 +	\$2,500	\$500	\$2,000	\$36,000	\$7,200	\$28,800
c. Relocation expenses and payments	\$250,000	\$50,000	\$200,000	\$0	\$0	\$0	\$0	\$0	\$0
d. Architectural and engineering fees	\$557,000	\$111,400	\$445,600	\$0	\$0	\$0	\$0	\$0	\$0
e. Other architectural and engineering fees	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
f. Project inspection fees	\$517,050	\$103,410	\$413,640	\$0	\$0	\$0	\$0	\$0	\$0
g. Site work	\$20,113	\$4,022,7	\$16,091			\$0	\$250,000	\$50,000	\$200,000
h. Demolition and removal	\$37,500	\$7,500	\$30,000	\$0	\$0	\$0	\$0	\$0	\$0
i. Construction	\$269,450	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
j. Equipment	\$14,660	\$2,932,12	\$11,728.7	\$0	\$0	\$0	\$1,088,7	\$217,752	\$871,008
k. Miscellaneous	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
I. SUBTOTAL (add a through k)	\$42,145,53	\$8,375,217	\$33,500,87	\$261,317	\$52,263	\$209,053	\$1,786,376	\$357,275	\$1,429,101
m. Contingencies	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTALS (sum of I and m)  2. Program Income: Please provi	\$42,145,53	. , ,	. , ,	, ,	\$52,263	\$209,053	\$1,786,376	, , ,	\$0

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:	b. Program Income to Date:
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