| U.S. DEPARTMENT OF COMMERCE   |                           |          |   |        |   |        |                                | 2. Award Or Grant Number<br>60-50-M09067  |  |  |
|---|---------------------------|----------|---|--------|---|--------|--------------------------------|---|--|--|
| Performance Progress Report   |                           |          |   |        |   |        |                                | 4. Report Date (MM/DD/YYYY)<br>12-20-2010 |  |  |
| 1. Recipient Name 6. Designated Entity On Behalf Of: Office of the Governor - American Samoa Office of the Governor                       |                           |          |   |        |   |        |                                |   |  |  |
| 3. Street Address   |                           |          |   |        |   |        | 8. Final Rep                   | ort?                                      | 9. Report Frequency  |  |
| A.P. Lutali Executive Office Building, Utulei 3rd Floor,  |                           |          |   |        |   |        | Yes                            | <ul><li>Quarterly</li></ul>               |  |  |
| 5. City, State, Zip Code Pago Pago, AS 96799  |                           |          |   |        |   |        |                                |   | <ul><li>Semi Annual</li><li>Annual</li><li>Final</li></ul> |  |
| 7. Project / Grant P  |                           | 7a.      |   | 7b     |   |        | 9a. If Other, please describe: |   |  |  |
| Start Date: (MM/<br>02-15-2010  | /DD/YYYY)                 | End E    | Date: (MM/DD/YYYY)                        |        | eporting Period End Date -30-2010       | N/Δ    |                                |   |  |  |
| 10. Broadband   | l Manning                 |          | -2013                                     | 03     | -30-2010                                |        |                                |   |  |  |
| 10a. Provider Table   | ΙΝαρριτίς                 | J        |   |        |   |        |                                |   |  |  |
| Number of<br>Providers Identified   | Number of<br>Providers Co | ontacted | Number of Agreemer<br>Reached for Data Sh | nts    | Number of Partial<br>Data Sets Received |        |                                |   | lumber of  |  |
| 2   | 2                         | macied   | 0   | iailig |   | 0<br>0 |                                | Data Sets Verified                        |  |  |
| 10c. Have you encountered challenges with any providers that indicate they may refuse to participate in this project?                     |                           |          |   |        |   |        |                                |   |  |  |
| 10i. If verification activities have not been initiated please provide a projected time line for beginning and completing such activities |                           |          |   |        |   |        |                                |   |  |  |
| Q4 2010 and Q1 2011   |                           |          |   |        |   |        |                                |   |  |  |
| Staffing  10j. How many jobs have been created or retained as a result of this project?   |                           |          |   |        |   |        |                                |   |  |  |
| 0   |                           |          |   |        |   |        |                                |   |  |  |

| 10k. Is the project currently fully staffed? Yes No 10l. If no, please explain how any lack of staffing may impact the project's time line and when the project will be fully staffed |                                |                     |                               |               |            |                              |                    |        |           |                         |
|---|--------------------------------|---------------------|-------------------------------|---------------|------------|------------------------------|--------------------|--------|-----------|-------------------------|
| Time line moves forward as scheduled with an acting Project Manager, via the Department of Information Technology   |                                |                     |                               |               |            |                              |                    |        |           |                         |
| 10m. When fully staffed, how many full-time equivalent (FTE) jobs do you expect to create or retain as a result of this project?  |                                |                     |                               |               |            |                              |                    |        |           |                         |
| 2   |                                |                     |                               |               |            |                              |                    |        |           |                         |
| 10n. Staffing Table   |                                |                     |                               |               |            |                              |                    |        |           |                         |
| Job Title   |                                |                     |                               |               |            |                              |                    |        |           | Date of Hire            |
| Project Manager   |                                |                     |                               |               |            |                              |                    |        | 0         | 01/03/2011              |
| GIS Specialist/Instruct   | or                             |                     |                               |               |            |                              |                    | 100    |           | 02/15/2011              |
|   |                                | Add Row             |                               | Remove        | e Ro       | w                            |                    |        |           |                         |
| Sub Contracts   |                                |                     |                               |               |            |                              |                    |        |           |                         |
| 10o. Subcontracts Table   |                                | 1                   |                               |               |            | ı                            |                    |        |           |                         |
| Name of Subcontractor   | Purpose of Subcontract         | RFP Issued<br>(Y/N) | Contract<br>Executed<br>(Y/N) |               |            | End Date                     | Federal            | Funds  | ı         | n-Kind Funds            |
| Broadmap, LLC   | Mapping & Planning             | N                   | N                             | 12/08/2010    | )          | 03/31/2012                   | 800,640 0          |        | 0         |                         |
|   |                                |                     |                               |               |            | Add I                        | Add Row Remove Row |        |           | nove Row                |
| Funding   |                                |                     |                               |               |            |                              |                    |        |           |                         |
| 10p. How much Federal   | funding has been expend        | ed as of the end    | of the last of                | quarter? \$0  | )          | 10q.                         | How muc            | h Rema | ains?     | \$1,900,496             |
| 10r. How much matching  | funds have been expend         | led as of the end   | d of last qua                 | rter? \$0     | )          | 10s.                         | How muc            | h Rema | ains?     | \$282,913               |
| 10t. Budget Worksheet   |                                |                     |                               |               |            |                              |                    |        |           |                         |
| Mapping Budget Elemer   | Federal<br>nt Funds<br>Granted | Proposed<br>In-Kind | I .                           | otal<br>idget | E          | Federal<br>Funds<br>Expended | Matchin<br>Expe    |        | S         | Total Funds<br>Expended |
| Personal Salaries   | \$242,530                      | \$29,670            | \$27                          | 72,200        |            | \$0                          |                    | 0      |           | \$0                     |
| Personnel Fringe Benefi   | ts \$21,100                    | \$2,581             | \$2                           | 3,681         |            | \$0 \$                       |                    | 50     | +         | \$0                     |
| Travel  | \$35,280                       | \$0                 | \$3                           | 5,280         |            | \$0 \$                       |                    | 50     |           | \$0                     |
| Equipment   | \$79,667                       | \$0                 | \$3                           | 5,280         |            | \$0                          | \$0                |        | $\dagger$ | \$0                     |
| Materials / Supplies  |                                |                     | \$152,446 \$20                |               | 6,347 \$0  |                              | \$0                |        |           | \$0                     |
| Subcontracts Total  |                                |                     | \$90,000 \$1,                 |               | 84,615 \$0 |                              | \$0                |        | $\dagger$ | \$0                     |
| Subcontract #1  | contract #1 \$0                |                     |                               | \$0           |            | \$0                          | \$0                |        |           | \$0                     |
| Subcontract #2  | Subcontract #2 \$0             |                     |                               | \$0           |            | \$0                          |                    | \$0    |           | \$0                     |
| Subcontract #3  | ract #3 \$0                    |                     | \$0                           |               | \$0        |                              | \$0                |        |           | \$0                     |
| Subcontract #4  | #4 \$0                         |                     |                               | \$0           | \$0        |                              | \$0                |        |           | \$0                     |
| Subcontract #5  |                                |                     | \$0                           |               | \$0        |                              | \$0                |        |           | \$0                     |
| Construction  |                                |                     |                               | \$0           |            | \$0                          |                    | \$0    |           | \$0                     |
| Other \$0   |                                | \$0                 |                               | \$0           |            | \$0                          |                    | \$0    |           | \$0                     |
| Total Direct Costs  |                                |                     |                               | \$0 \$0       |            | \$0                          | \$0                |        | $\top$    | \$0                     |
| Total Indirect Costs  | \$73,403                       | \$8,216             | \$8                           | \$81,619      |            | \$0                          |                    | \$0    |           | \$0                     |
| Total Costs   | sts \$1,900,496                |                     | \$21                          | 18,913        |            | \$0                          |                    | \$0    |           | \$0                     |

| Mapping Budget Element | Federal<br>Funds<br>Granted | Proposed<br>In-Kind | Total<br>Budget | Federal<br>Funds<br>Expended | Matching Funds<br>Expended | Total Funds<br>Expended |
|------------------------|-----------------------------|---------------------|-----------------|------------------------------|----------------------------|-------------------------|
| 6 Of Total             | 86                          | 13                  | 0               | 0                            | 0                          | 0                       |
|                        |                             |                     |                 |                              |                            |                         |
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|                        |                             |                     |                 |                              |                            |                         |

| Hardware / Software   |
|---|
| 10u. Has the project team purchased the software / hardware described in the application?   |
| 10v. If yes, please list  |
| N/A   |
| 10w. Please note any software / hardware that has yet to be purchased and explain why it has not been purchased   |
| The hardware will be purchased by the vendor via their contract, to avoid complications with the local office of procurement will be purchased directly from the OEM vendor (ESRI) and licensed to the Department that purchases it.  |
| 10x. Has the project team purchased or used any data sets? Yes No   |
| 10y. If yes, please list  |
| N/A   |
| 10z. Are there any additional project milestones or information that has not been included? Yes •No   |
| 10aa. If yes, please list   |
| N/A   |
| 10bb. Please describe any challenge or obstacle that you have encountered and detail the mitigation strategies the project team is employing  |
| Continued difficulty coordination data discussion and getting data from the providers.  |
| 10cc. Please provide any other information that you think would be useful to NTIA as it assesses your Broadband Mapping Project This grant award is under the Office of the Governor, via memorandum of understanding being managed through the Department of Commerce - at the time had the best TGIS team, but focused on Coastal Management (NOAA). ASG hopes to work with the NTIA to reprogram/reshape the amended award to reflect a change in the MOU to the IT Department, where the program will be housed through the life of the grant and thereafter. |
| 11. Broadband Planning  |
| 11a. Please describe progress made against all goals, objectives, and milestones detailed in the approved Project Plan. Be sure to include a description of each major activity / milestone that you plan to complete and your current status   |
| Progress is pending the signing of the contract with the vendor, which should take place in early November.   |
| 11b. Please describe any challenge or obstacle that you have encountered and detail the mitigation strategies the project team is employing   |
| Lack of Project Manager & lack of executed contract has delayed this.   |
| 11c. Does the Project Team anticipate any changes to the project plan for Broadband Planning?   |
| 11d. If yes, please describe these anticipated changes. Please note that NTIA will need to approve changes to the Project Plan before they can be implemented   |
| ASG & the Vendor (Broadmap, LLC) will provide the NTIA with a change proposal once the contract is finalized.   |
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## **Funding**

11e. How much Federal funding has been expended as of the end of the last quarter? \$0

11g. How much matching funds have been expended as of the end of last quarter?

11f. How much Remains?

11h. How much Remains?

\$0

\$0

11i. Planning Worksheet

| 9                         |                             |                     |                 |                              |                            |                         |
|---------------------------|-----------------------------|---------------------|-----------------|------------------------------|----------------------------|-------------------------|
| Planning Budget Element   | Federal<br>Funds<br>Granted | Proposed<br>In-Kind | Total<br>Budget | Federal<br>Funds<br>Expended | Matching Funds<br>Expended | Total Funds<br>Expended |
| Personal Salaries         | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Personnel Fringe Benefits | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Travel                    | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Equipment                 | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Materials / Supplies      | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Subcontracts Total        | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Subcontract #1            | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Subcontract #2            | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Subcontract #3            | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Subcontract #4            | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Subcontract #5            | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Construction              | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Other                     | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Total Direct Costs        | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Total Indirect Costs      | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| Total Costs               | \$0                         | \$0                 | \$0             | \$0                          | \$0                        | \$0                     |
| % Of Total                | 0                           | 0                   | 0               | 0                            | 0                          | 0                       |
| i                         |                             |                     | !               | !                            | !                          | !                       |

## **Additional Planning Information**

11j. Are there any additional project milestones or information that has not been included?

N/A

11k. Please describe any challenge or obstacle that you have encountered and detail the mitigation strategies the Project Team is employing

N/A

11I. Please provide any other information that you think would be useful to NTIA as it assesses your Broadband Mapping Project

N/A

| Certification: I certify to the best of my knowledge and belief that this report is correct an set forth in the award documents. | nd complete for performance of activities for the purpose                              |
|--|--|
| 12a. Typed or Printed Name and Title of Authorized Certifying Official   | 12c. Telephone (area code, number, and extension)                                      |
| Andrew D Berquist  | 684-633-5566   |
| IT & Communications Specialist   | 12d. Email Address Andrew.Berquist@DOC.AS  |
| 12b. Signature of Authorized Certifying Official   | 12e. Date Report Submitted (Month, Day, Year)  |
| Submitted Electronically   | 12-21-2010   |
|  | Performance Progress Report OMB Approval Number: 0660-0034 Expiration Date: 08/31/2010 |