

**U.S. DEPARTMENT OF COMMERCE**

**Performance Progress Report**

2. Award Or Grant Number

60-50-M09067

4. Report Date (MM/DD/YYYY)

01-30-2011

1. Recipient Name

Office of the Governor - American Samoa

6. Designated Entity On Behalf Of:

Office of the Governor

3. Street Address

A.P. Lutali Executive Office Building, Utulei 3rd Floor,

8. Final Report?

Yes

No

9. Report Frequency

Quarterly

Semi Annual

Annual

Final

5. City, State, Zip Code

Pago Pago, AS 96799

7. Project / Grant Period  
Start Date: (MM/DD/YYYY)

02-15-2010

7a. End Date: (MM/DD/YYYY)

02-14-2015

7b. Reporting Period End Date:

12-31-2010

9a. If Other, please describe:

N/A

**10. Broadband Mapping**

10a. Provider Table

Number of Providers Identified	Number of Providers Contacted	Number of Agreements Reached for Data Sharing	Number of Partial Data Sets Received	Number of Complete Data Sets	Number of Data Sets Verified
2	2	0	2	0	2

10b. Are you submitting the required PROVIDER DATA by using the Excel spreadsheet provided by the SBDD grants office?  Yes  No

10c. Have you encountered challenges with any providers that indicate they may refuse to participate in this project?  Yes  No

10d. If so, describe the discussions to date with each of these providers and the current status

N/A

10e. If you are collecting data through other means (e.g. data extraction, extrapolation, etc), please describe your progress to date and the relevant activities to be undertaken in the future

The contract is planning a few more physical visits to the Territory in the future to assist with local staff's collection of CAI data and physical follow ups with the ISP. This should happen in Q1 or Q2.

10f. Please describe the verification activities you plan to implement

Verification by 3rd Party Data sets.

10g. Have you initiated verification activities?  Yes  No

10h. If yes, please describe the status of your activities

N/A

10i. If verification activities have not been initiated please provide a projected time line for beginning and completing such activities

Q1 2011

**Staffing**

10j. How many jobs have been created or retained as a result of this project?

1

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  
 The impact should be minimal, the project currently needs a full time coordinator, it would expedite the process flow of the project and allow for better local data collection and liaisoning with the internet providers if a full time person was in this job.

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	FTE %	Date of Hire
Acting Project Coordinator (Lead IT Project Manager, Department of IT)	15	02/15/2011

Add Row

Remove Row

**Sub Contracts**

10o. Subcontracts Table

Name of Subcontractor	Purpose of Subcontract	RFP Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Federal Funds	In-Kind Funds
Broadmap, LLC	Mapping & Planning	N	Y	08/01/2010	03/31/2012	800,640	0

Add Row

Remove Row

**Funding**

10p. How much Federal funding has been expended as of the end of the last quarter? \$255,690      10q. How much Remains? \$1,644,805

10r. How much matching funds have been expended as of the end of last quarter? \$850      10s. How much Remains? \$282,063

10t. Budget Worksheet

Mapping Budget Element	Federal Funds Granted	Proposed In-Kind	Total Budget	Federal Funds Expended	Matching Funds Expended	Total Funds Expended
Personal Salaries	\$242,530	\$29,670	\$272,200	\$0	\$600	\$0
Personnel Fringe Benefits	\$21,100	\$2,581	\$23,681	\$0	\$97	\$0
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	\$255,690	\$0	\$255,690
Subcontract #1	\$800,640	\$0	\$800,640	\$255,690	\$0	\$255,690
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	\$1,827,093	\$274,697	\$2,101,790	\$255,690	\$697	\$256,387
Total Indirect Costs	\$73,403	\$8,216	\$81,619	\$0	\$153	\$153
Total Costs	\$1,900,496	\$282,913	\$2,183,409	\$255,690	\$850	\$256,540
% Of Total	86	14	100	99	1	100

## Hardware / Software

10u. Has the project team purchased the software / hardware described in the application?  Yes  No

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

Server and ArcServer 10 This will be happening within Q1.

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 and persistent engagement with providers to collect needed and required data sets.

10cc. Please provide any other information that you think would be useful to NTIA as it assesses your Broadband Mapping Project

N/A

## 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

Pending a contract agreement between the Contractor Broadmap, LLC and their subcontractor One Economy.

11b. Please describe any challenge or obstacle that you have encountered and detail the mitigation strategies the project team is employing

Getting the Planning Program off the ground.

11c. Does the Project Team anticipate any changes to the project plan for Broadband Planning?  Yes  No

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

Details will be provided once contracts are finalized between the two contractors, planning changes are to be expected though and will be proposed to NTIA for approval.

## Funding

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

11g. How much matching funds have been expended as of the end of last quarter? \$0                      11h. How much Remains? \$0

### 11i. Planning Worksheet

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

### 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

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

N/A

12. 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.

12a. Typed or Printed Name and Title of Authorized Certifying Official  Andrew D Berquist  IT & Communications Specialist	12c. Telephone (area code, number, and extension)  684-633-5566
12b. Signature of Authorized Certifying Official  Submitted Electronically	12d. Email Address  Andrew.Berquist@DOC.AS  12e. Date Report Submitted (Month, Day, Year)  02-17-2011