RECIPIENT NAME:Olive Hill Community Economic Development

AWARD NUMBER: 37-42-B10533

DATE: 05/14/2014

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 6/30/2015

QUARTERLY PERFORMANCE PROGRES	SS REPORT FOR PUBLIC COM	IPUTER CENTERS		
General Information				
Federal Agency and Organizational Element to Which Report is Submitted Award	I Identification Number	3. DUNS Number		
Department of Commerce, National Telecommunications and Information Administration 37-42-E	310533	120607895		
4. Recipient Organization				
Olive Hill Community Economic Development P.O. Box 4008,	Morganton, NC 28680-4008			
5. Current Reporting Period End Date (MM/DD/YYYY)	6. Is this the last Report of the Award	Period?		
09-30-2013		○ No		
7. Certification: I certify to the best of my knowledge and belief the purposes set forth in the award documents.	at this report is correct and complete	for performance of activities for the		
7a. Typed or Printed Name and Title of Certifying Official	7c. Telephone (area c	ode, number and extension)		
Beverly Carlton	828-439-8893	828-439-8893		
	7d. Email Address			
President - CEO	olivehcedc@live.com	olivehcedc@live.com		
7b. Signature of Certifying Official	7e. Date Report Subn	nitted (MM/DD/YYYY):		
Submitted Electronically	05-14-2014			

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## Project Indicators (This Quarter)

1. Please describe significant project accomplishments completed during this quarter (600 words or less).

Completed project; increased the number of people served

2. Please provide the percent complete for the following key milestones in your project. Write "0" in the Percent Complete column and "N/A" in the Narrative column if your project does not include this activity. If you provided additional milestones in your baseline report, please insert them at the bottom of the table. 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 (300 words or less).

	Milestone	Percent Complete	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
2.a.	Overall Project	100	completed project
2.b.	Equipment / Supply Purchases	-	Progress reported in Question 4 below
2.c.	Public Computer Centers Established	-	Progress reported in Question 4 below
2.d.	Public Computer Centers Improved	-	Progress reported in Question 4 below
2.e.	New Workstations Installed	-	Progress reported in Question 4 below
2.f.	Existing Workstations Upgraded	-	Progress reported in Question 4 below
2.g.	Outreach Activities	-	Progress reported in Question 4 below
2.h.	Training Programs	-	Progress reported in Question 4 below
2.i.	Other (please specify):	-	Progress reported in Question 4 below

<sup>3.</sup> 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 (600 words or less).

No challenges or issues

4. Please provide actual total numbers to date or typical averages for the following key indicators, as specified in the question. Write "0" in the Total column and "N/A" in the Narrative column if your project does not include this activity. Unless otherwise indicated below, figures should be reported <u>cumulatively</u> from award inception to the end of the most recent reporting quarter. Please provide a narrative explanation if the total is different from the target provided in your baseline plan (300 words or less).

	Indicator	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
49	New workstations installed and available to the public	45	n/a
	Average users per week (NOT cumulative)		n/a
4.c.	Number of PCCs with upgraded broadband connectivity	45	n/a
4 A	Number of PCCs with new broadband wireless connectivity	20	n/a
4.e.	Number of additional hours per week existing and new PCCs are open to the public as a result of BTOP funds	12	n/a

5. Training Programs. In the chart below, please describe the training programs provided at each of your BTOP-funded PCCs.

Name of Training Program	Length of Program (per hour basis)	Number of Participants per Program	Number of Training Hours per Program
Microsoft Word	8	8	64
Microsoft Excel	8	10	80

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Microsoft Powerpoint 101	8	4	32
e-Mail Basics	2	5	10
Internet Basics	4	5	20
Computer Basics	4	15	62
Employment Testing	6	20	120
Entrepreneurship Training	4	20	80
Foreclosure Seminar	2	42	84
Financial Life Skills	6	32	192
Employability Skills	8	6	48
Motivation and Retention	8	6	48
Technology Awareness	8	4	24

Add Training Program

Remove Training Program

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Project	Indicato	rs (Next	Quarter)
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1. Please describe significant project accomplishments planned for completion during the next quarter (600 words or less).

None - project ended

2. Please provide the percent complete anticipated for the following key milestones in your project as of the end of the next quarter. Write "0" in the second column if your project does not include this activity. Figures should be reported cumulatively from award inception to the end of the next reporting quarter. Please provide a narrative description if the planned percent complete is different from the target provided in your baseline plan (300 words or less).

	Milestone	Planned Percent Complete	Narrative (describe reasons for any variance from baseline plan or any relevant information)
2.a.	Overall Project	100	
2.b.	Equipment / Supply Purchases	-	Milestone Data Not Required
2.c.	Public Computer Centers Established	-	Milestone Data Not Required
2.d.	Public Computer Centers Improved	-	Milestone Data Not Required
2.e.	New Workstations Installed	-	Milestone Data Not Required
2.f.	Existing Workstations Upgraded	-	Milestone Data Not Required
2.g.	Outreach Activities	-	Milestone Data Not Required
2.h.	Training Programs	-	Milestone Data Not Required
2.i.	Other (please specify):	-	Milestone Data Not Required

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 (600 words or less).

Project ended

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## **Public Computer Center Budget Execution Details**

## **Activity Based Expenditures (Public Computer Centers)**

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.

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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. Personnel	\$179,790	\$42,500	\$137,290	\$179,790	\$42,500	\$137,290	\$179,790	\$42,500	\$137,290
b. Fringe Benefits	\$17,349	\$4,101	\$13,248	\$17,349	\$4,101	\$13,248	\$17,349	\$4,101	\$13,248
c. Travel	\$10,000	\$5,000	\$5,000	\$10,000	\$5,000	\$5,000	\$10,000	\$5,000	\$5,000
d. Equipment	\$32,386	\$0	\$32,386	\$34,773	\$2,387	\$32,386	\$34,773	\$2,387	\$32,386
e. Supplies	\$59,418	\$0	\$59,418	\$59,418	\$0	\$59,418	\$59,418	\$0	\$59,418
f. Contractual	\$14,587	\$4,587	\$10,000	\$14,587	\$4,587	\$10,000	\$14,587	\$4,587	\$10,000
g. Construction	\$254,000	\$70,000	\$184,000	\$254,000	\$70,000	\$184,000	\$254,000	\$70,000	\$184,000
h. Other	\$12,400	\$5,000	\$7,400	\$12,400	\$5,000	\$7,400	\$12,400	\$5,000	\$7,400
i. Total Direct Charges (sum of a through h)	\$579,930	\$131,188	\$448,742	\$582,317	\$133,575	\$448,742	\$582,317	\$133,575	\$448,742
j. Indirect Charges									
k. TOTALS (sum of i and j)	\$579,930	\$131,188	\$448,742	\$582,317	\$133,575	\$448,742	\$582,317	\$133,575	\$448,742

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: \$0	b. Program Income to Date: \$0
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