DATE: 04/08/2014

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

OUADTEDLY DEDEADMANAE DDAG			AND INCO ACTOURTURE DOCUMENTS
QUARTERLY PERFORMANCE PROC	SRESS REPOR	FOR BROADB	AND INFRASTRUCTURE PROJECTS
General Information			
Federal Agency and Organizational Element to Which Report is Submitted	2. Award Identific	ation Number	3. DUNS Number
Department of Commerce, National Telecommunications and Information Administration	NT10BIX557003	32	107957268
4. Recipient Organization			
Lane Council of Government 859 Willamette ST	STE 500, Eugene	, OR 97401-3174	
5. Current Reporting Period End Date (MM/DD/YYY	Υ)	6. Is this the last Re	eport of the Award Period?
09-30-2013			Yes No
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 correct a	and complete for performance of activities for the
7a. Typed or Printed Name and Title of Certifying O	fficial	7c. Telep	phone (area code, number and extension)
Milo Mecham		5416824	1023
		7d. Ema	il Address
Program Manager		mmech	am@lcog.org
7b. Signature of Certifying Official		7e. Date	Report Submitted (MM/DD/YYYY):
Submitted Electronically		04-08-2	2014

DATE: 04/08/2014

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

Project Indicators (This Quarter)

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

Completed project. Provided connection to 139 total anchor institutions; including 32 schools, 23 medical facilities, 22 public safety facilities and eleven libraries. Provided improved service to a number of institutions including schools, offering them a substantial savings, sometimes amounting to a reduction by more than half of some school's operating costs. Brought fiber optic connectivity for the first time to twelve rural communities, which has already resulted in the opening of a call center increasing jobs by over 120 in the community, with a projected total employment of 200 within 18 months. Provided improved services to multiple communities, allowing additional, non-anchor institutions to access improved broadband connectivity, including a large hotel, which is the major employer in a small rural community. Developed a network extending across three counties, in twenty communities, creating over 400 miles of connectivity opportunities.

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 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 (300 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	100	Completed
2b.	Environmental Assessment	100	Completed
2c.	Network Design	100	Completed
2d.	Rights of Way	100	Completed
2e.	Construction Permits and Other Approvals	100	Completed
2f.	Site Preparation	100	Completed
2g.	Equipment Procurement	100	Completed
2h.	Network Build (all components - owned, leased, IRU, etc)	100	Completed
2i.	Equipment Deployment	100	Completed
2j.	Network Testing	100	Completed
2k.	Other (please specify): NA	0	NA

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 (600 words or less).

Equipment deployment was delayed by late delivery of the equipment. This problem was overcome.

4. Please report the following information regarding network build progress. Write "0" in the Total column and "N/A" in the Narrative 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 (600 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	104	The original baseline was an estimate of the distances involved. Actual construction was less.
New network miles leased	353	This represents the same number of miles in the application. Again a variance with some reports may have occurred based on original estimates which were not, in the end, accurate.
Existing network miles upgraded	0	NA
Existing network miles leased	0	NA

DATE: 04/08/2014

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

Indicator	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
Number of miles of new fiber (aerial or underground)	104	This is not a variance it is a more accurate measurement than the original estimates
Number of new wireless links	0	NA
Number of new towers	0	NA
Number of new and/or upgraded interconnection points	3	This is what the baseline projected

For questions 5 and 6 please include information relating to agreements that you are negotiating or have entered into, or that your sub recipient, 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	5
Number of agreements currently being negotiated with broadband wholesalers or last mile providers	0
Average term of signed agreements (in quarters)	80

5b. Please list the names of the wholesale and last mile providers with whom you have signed agreements (100 words or less). Providers: CoastCom, Inc., Douglas Fast Net, EWEB, City of Cottage Grove, Hunter Communications

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 (100 words or less). Wholesale services description:

We are providing 10 gigabit ethernet service along a portion of the route, for sale in 1 gigabit segments. The price for a one gigabit circuit will be \$2000 a month.

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 sub recipient, contractor, and/or subcontractor, and describe with specificity the portion of your network this third party operates (600 words or less).

CoastCom, Inc. 151 E. Olive St. Newport OR 97365; a contractor serving the Florence portion of our build.

Douglas FastNet, 480 NE Oakland Ave Roseburg, OR 97470 a contractor serving the Douglas County area.

City of Cottage Grove 400 E. Main St. Cottage Grove OR 97424 a contractor providing services to the City of Cottage Grove Eugene Water and Electric Board, 500 E 8th Ave Eugene OR 97401 a contractor serving the city of Eugene

Springfield Utility Board 250 A St Springfield OR 97477 a contractor serving the City of Springfield

Hunter Communications 801 Enterprise Dr Central Point OR 97502 a contractor serving other portions of Lane County and the entire portion of Klamath County.

6. Please provide the data according to the type of subscriber. Write "0" in the Total column and "N/A" in the Narrative column 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 (300 words or less).

Subscriber Type	Access Type	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)		
Wholesalers or I ast	Providers with signed agreements receiving new access	5	This is an increase over what was projected.		
	Providers with signed agreements receiving improved access	0	na		
	Providers with signed agreements receiving access to dark fiber	0	na		

DATE: 04/08/2014

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

Subscriber Type	Access Type		al	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)					
	Please identify the speed tiers that are available and the number of subscribers for each			Since we are using contractors to provide the service, we do not know the tiers and the number of subscribers to each tier. Generally the range of speeds range from 10 M to 100 M, The subscribers may vary their purchase depending on their needs.					
Community Anchor Institutions (including Government institutions))	This is an increase in the number projected in the application and baseline.					
	Subscribers receiving new acces	ss 83		This represents an increase in the original estimate.					
	Subscribers receiving improved	access 56		This represents an increase in the original estimate.					
	Please identify the speed tiers th available and the number or subscribers for each		Since we are using contractors to provide the service, we know the tiers and the number of subscribers to each tiel Generally the range of speeds range from 10 M to 100 N subscribers may vary their purchase depending on their						
Residential / Households	Entities passed	0		NA					
	Total subscribers served	0		NA					
	Subscribers receiving new acces	ss 0		NA					
	Subscribers receiving improved	access 0		NA					
	Please identify the speed tiers th available and the number of subscribers for each	at are		NA					
Businesses	Entities passed	0		NA					
	Total subscribers served	0		NA					
	Subscribers receiving new acces	ss 0		NA					
	Subscribers receiving improved	access 0		NA					
	Please identify the speed tiers th available and the number of subscribers for each	at are		NA					
-	special offerings you may provide te; from Eugene to Klamath Fall			o to 10 gigabit ethernet service at the wholesale level.					
8a. Have your network	management practices changed o	over the last qua	rter?	○ Yes ● No					
8b. If so, please describ	8b. If so, please describe the changes (300 words or less). NA								
connected to your netw cumulatively). Also ind	please provide a list by service are ork as a result of BTOP funds. Fi icate whether your organization is	gures should be currently provi	repor	nchor institutions (including Government institutions) red for the most recent reporting quarter only (NOT proadband service to the anchor institution. Finally, provide a unded infrastructure (300 words or less).					
Institution Name	Service Area (town or county) Service Institution (as defined in your baseline)	rative description of how anchor institutions are using BTOP-funded infrastructure							

DATE: 04/08/2014

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

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)	funded infrastructure			
Fern Ridge School District Offices	Veneta	Schoole	NO	To connect to all schools within the district			

Project Indicators (Next Quarter)

- Please describe significant project accomplishments planned for completion during the next quarter (600 words or less).
 Complete closeout.
- 2. Please provide the percent complete for the following key milestones in your project. Write "0" in the Planned 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 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 next 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	Planned Percent Complete	Narrative (describe reasons for any variance from baseline plan or any other relevant information)
2a.	Overall Project	100	This is as planned
2b.	Environmental Assessment	100	This is as planned
2c.	Network Design	100	This is as planned
2d.	Rights of Way	100	This is as planned
2e.	Construction Permits and Other Approvals	100	This is as planned
2f.	Site Preparation	100	This is as planned
2g.	Equipment Procurement	100	This is as planned
2h.	Network Build (all components - owned, leased, IRU, etc.)	100	This is as planned
2i.	Equipment Deployment	100	This is as planned
2j.	Network Testing	100	This is as planned
2k.	Other (please specify): NA	0	NA

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).

None

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.

В		from Project on nd of Current 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	\$39,000	\$39,000	\$0	\$110,000	\$39,311	\$70,689	\$110,000	\$39,311	\$70,689
b. Land, structures, right-of-ways, appraisals, etc.	\$30,000	\$18,000	\$12,000	\$30,000	\$18,000	\$12,000	\$30,000	\$18,000	\$12,000
c. Relocation expenses and payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
d. Architectural and engineering fees	\$400,430	\$26,000	\$374,430	\$422,905	\$48,475	\$374,430	\$422,905	\$48,475	\$374,430
e. Other architectural and engineering fees	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
f. Project inspection fees	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
g. Site work	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
h. Demolition and removal	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
i. Construction	\$8,390,475	\$2,030,505	\$6,359,970	\$8,326,079	\$2,006,835	\$6,319,244	\$8,326,079	\$2,006,835	\$6,319,244
j. Equipment	\$1,538,660	\$0	\$1,538,660	\$1,538,660	\$0	\$1,538,660	\$1,538,660	\$0	\$1,538,660
k. Miscellaneous	\$40,470	\$0	\$40,470	\$8,438	\$884	\$7,554	\$8,438	\$884	\$7,554
I. SUBTOTAL (add a through k) m. Contingencies	\$10,439,035	\$2,113,505	\$8,325,530	\$10,436,082	\$2,113,505	\$8,322,577	\$10,436,082	\$2,113,505	\$8,322,577
n. TOTALS (sum of I and m)	\$10,439,035	\$2,113,505	\$8,325,530	\$10,436,082	\$2,113,505	\$8,322,577	\$10,436,082	\$2,113,505	\$8,322,577

^{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