U.S. DEPARTMENT OF COMMERCE	2. Award Or Grant Number
	41-50-M09042
Performance Progress Report	4. Report Date (MM/DD/YYYY)
	10-30-2010

1. Recipient Name	6. Designated Entity On Behalf Of:
Public Utility Commission of Oregon	Oregon

3. Street Address	8. Final Report?	9. Report Frequency
550 Capitol Street NE, Suite 215,	○ Yes ◉ No	◉ Quarterly ○ Semi Annual ○ Annual ○ Final

5. City, State, Zip Code		
Salem, OR 97301-2567		

7. Project / Grant Period Start Date: (MM/DD/YYYY)	7a. End Date: (MM/DD/YYYY)	7b. Reporting Period End Date:	9a. If Other, please describe:
12-20-2009	12-19-2014	09-30-2010	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
113	84	45	44	44	65

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

The discussions have not changed from our last report.
* Do not want to participate with only 50 customers
* Will not take calls or discuss
* No resources to dedicate to this project
* Will not send any other than form 477 data
* Too small to participate
* No funds to do this work
* Emails go unanswered after initial contact
* Not able to participate at this time
* Can't afford to and low priority.

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

N/A

10f. Please describe the verification activities you plan to implement
* Secure Provider Portal will allow providers to validate their coverage at a micro level through a web application.

* 3rd Party Source Material
Comparison of collected and processed data against 3rd party source material will be performed to check accuracy. Discrepancies will be shared with providers.

* A Crowd Sourcing portal is planned for the State Broadband Web site. Statistics from the FCC speed tests may be reviewed to identify outliers or target discrepancies in provider data. However, the data collected from speed tests requires more time to draw meaningful conclusions because of inconsistencies in speed reports.

10g. Have you initiated verification activities? ◉ Yes ○ No

10h. If yes, please describe the status of your activities
* Provider maps (PDF format) were sent to every provider to validate that their coverage and broadband attribution is accurately represented based on the data they provided.
* Approximately 50% of providers responded and confirmed coverage and attribution.
* Coverage areas for roughly one fourth of the providers was compared against 3rd party source material.
* Discrepancies found will be shared with the providers.

10i. If verification activities have not been initiated please provide a projected time line for beginning and completing such activities
Prior to the next deliverable and subsequent deliverables:
* All providers will have access through the web application to review their coverage footprint and broadband attribution
* All provider broadband coverage areas and attribution will be checked with 3rd party data to confirm accuracy/identify possible errors. Results will be shared with providers.

Staffing

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

3.48

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

N/A

10m. When fully staffed, how many full-time equivalent (FTE) jobs do you expect to create or retain as a result of this project?

3.48

10n. Staffing Table

Job Title	FTE %	Date of Hire
Program Manager - Mapping	12	02/18/2010
Senior Quality Control Manager - Mapping	15	02/18/2010
Technical Project Manager - Mapping	5	02/18/2010
Database Administrator - Mapping	5	02/18/2010
Cartographic Specialist - Mapping	12	02/18/2010
Data Specialist - Mapping	80	02/18/2010
Business Analyst - Mapping	12	02/18/2010
Geo-coding and Conflation Engineer - Mapping	6	02/18/2010
GIS Systems and Mapping Engineer - Mapping	6	02/18/2010
Applications and Tools Engineer - Mapping	5	02/18/2010
Database and Requirements Engineer - Mapping	10	02/18/2010
Sr. Web Designer - Mapping	5	02/18/2010
External Affairs Manager - Mapping	25	02/18/2010
Program Manager - Planning	75	07/01/2010
Operations Manager - Planning	75	07/01/2010

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
One Economy LLC	Primary contractor for Mapping and Planning	Y	Y	02/18/2010	01/01/2016	2,108,302	527,093

Add Row   Remove Row

Funding

10p. How much Federal funding has been expended as of the end of the last quarter? $405,626   10q. How much Remains? $5,252,676

10r. How much matching funds have been expended as of the end of last quarter? $201,303   10s. How much Remains? $1,267,944

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	$420,558	$813,975	$1,234,533	$0	$79,237	$79,237

Mapping Budget Element	Federal Funds Granted	Proposed In-Kind	Total Budget	Federal Funds Expended	Matching Funds Expended	Total Funds Expended
Personnel Fringe Benefits	$207,125	$205,643	$412,768	$0	$0	$0
Travel	$58,570	$7,500	$66,370	$0	$0	$0
Equipment	$288,436	$750	$289,186	$0	$0	$0
Materials / Supplies	$80,420	$6,675	$87,095	$0	$0	$0
Subcontracts Total	$4,006,802	$150,000	$4,156,802	$0	$0	$0
Subcontract #1	$4,006,802	$150,000	$4,156,802	$405,626	$0	$405,626
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	$476,091	$284,704	$760,795	$0	$122,066	$122,066
Total Direct Costs	$5,538,302	$1,469,247	$7,007,549	$405,626	$201,303	$606,929
Total Indirect Costs	$120,000	$0	$120,000	$0	$0	$0
Total Costs	$5,658,302	$1,469,247	$7,127,549	$405,626	$201,303	$606,929
% Of Total	80	20	100	67	33	100

Hardware / Software

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

10v. If yes, please list

Geo-coder and on-line mapping application $15,000, NEW: server and platform.

10w. Please note any software / hardware that has yet to be purchased and explain why it has not been purchased

N/A

10x. Has the project team purchased or used any data sets? ●Yes ○No

10y. If yes, please list
Digital Baseline Maps $5,500
Digital Baseline Maps for Server $18,500
Anchor Institution and Business Listing & Survey Data $19,500
Household Demographic Data $9,500
Educational Database $3,000
US Zip Code and Zip+4 data $5,000
Cable DSL and Fiber Data $5,000
Fiber Networks $38,000
Fiber Lit Buildings $14,000
Spectrum Holdings for Wireless Providers $2,000
Geographic Boundary Data For All Cable Systems $1,000
Wireless Marketed Coverage Patterns $7,000
Wire Center Boundaries $1,000
Central Office Locations $800
Carrier Exchange Information $4,000
Carrier Information $2,000
Crowd sourcing Data $7,500
Tower Maps $2,000
WISP Data $5,250

In-kind data sets to be established for utilization throughout year:
Demography
Transportation
Emergency Services
Healthcare Services
Public Facilities
Terrain
Imagery
Land Use
Hydrography
Cadastral
Boundaries

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

Provider Portal still under review however using other methods for provider validation efforts.

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

The telephone broadband survey has been design, reviewed and approved. It will be conducted and completed later this year. Town halls were held and additional ones will be held next year.

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

The advertising of the town halls did go as well as expected. Additional media venues are planned for use next year.

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

We anticipate holding off on the additional town halls that were to be done this year and moving them into next year after the statewide interactive map is available to the public.

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

Planning Budget Element	Federal Funds Granted	Proposed In-Kind	Total Budget	Federal Funds Expended	Matching Funds Expended	Total Funds 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

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 Bryan Conway	12c. Telephone (area code, number, and extension) 503-378-6200
Administrator Telecomm.	12d. Email Address bryan.conway@state.or.us
12b. Signature of Authorized Certifying Official Submitted Electronically	12e. Date Report Submitted (Month, Day, Year) 12-06-2010