

Southcentral Foundation

October 26, 2006

Ms. Joey Ausel, Grant Manager & Analyst
Denali Commission
510 "L" Street, Suite 410
Anchorage, AK 99501

RE: McGrath Clinic Replacement
Grant #: 198-05

Dear Ms. Ausel:

In accordance with the above referenced grant, enclosed is Southcentral Foundation's Online Narrative and SF269 Financial reports for the period of 7/1/06 – 9/30/06, which are to be submitted online today.

If you have any questions concerning this grant, please feel free to contact Marisa Wang, Planning and Grants Manager, at (907) 729-4996.

Sincerely,

SOUTHCENTRAL FOUNDATION

Katherine Gottlieb (ACTING)

Katherine Gottlieb, MBA
President/CEO

Enclosures: as stated

Cc: James Sears, R & D Special Assistant
Greg Encelewski, Finance Director

4501 Diplomacy Drive • Anchorage, Alaska 99508
(907) 729-4955 • Fax (907) 729-5000





PROJECT DATA

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**Progress Report Submission for Southcentral Foundation Project #198-05
 McGrath: McGrath Clinic Replacement - Planning & Design**

Reporting Period

Funding

Expenditures

Milestones

Narrative

Attachments

Please provide a narrative summary of the project status and accomplishments to date, and address the following questions: is the project on schedule, is the project on budget, and what actions are planned to address any project problems.

Please limit the summary to 2000 characters, or attach a document if more space is needed (next step)

Up to 2000 characters. Current count: 540

In August, 2006, an appraiser completed the appraisal of the clinic site and valued the property at \$55,000.

In September, 2006, Kluge & Associates, an ANTHC term contractor, completed a draft site plan and floor plan for the proposed clinic. The final invoice has not been received, yet. Also, during September, ANTHC recommended approval of the site plan checklist.

The completed design application will be submitted to the Denali Commission in October, 2006 requesting funding for design pending the future availability of funds.

Note - clicking next, back or using the above navigation panel will save this data.

Step 5 of 7

User: jsears (Recipient) User Organization: Southcentral Foundation

DENALI COMMISSION
 510 'L' Street, Suite 410, Anchorage, Alaska 99501
 907-271-1414 Fax 907-271-1415 Toll Free 888-480-4321

FINANCIAL STATUS REPORT

(Short Form)

(Follow instructions on the back)

1. Federal Agency and Organizational Element to Which Report is Submitted Denali Commission	2. Federal Grant or Other Identifying Number Assigned By Federal Agency 198-05	OMB Approval No. 0348-0038	Page of pages
3. Recipient Organization (Name and complete address, including ZIP code) Southcentral Foundation 4501 Diplomacy Dr, Anchorage, AK 99508			
4. Employer Identification Number 92-0086076	5. Recipient Account Number or Identifying Number	6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Basis <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) 9/1/2005	To: (Month, Day, Year) 3/1/2007	9. Period Covered by this Report From: (Month, Day, Year) 7/1/2006	To: (Month, Day, Year) 9/30/2006
10. Transactions:	I Previously Reported	II This Period	III Cumulative
a. Total outlays	2,090.00	1,500.00	3,590.00
b. Recipient share of outlays	0.00	0.00	0.00
c. Federal share of outlays	2,090.00	1,500.00	3,590.00
d. Total unliquidated obligations			
e. Recipient share of unliquidated obligations			
f. Federal share of unliquidated obligations			
g. Total Federal share(Sum of lines c and f)			3,590.00
h. Total Federal funds authorized for this funding period			69,462.00
i. Unobligated balance of Federal funds(Line h minus line g)			65,872.00
11. Indirect Expense	a. Type of Rate(Place "X" in appropriate box) <input checked="" type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed		
	b. Rate	c. Base	e. Federal Share
		d. Total Amount	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.			
13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.			
Typed or Printed Name and Title Katherine Gottlieb, MBA President/CEO		Telephone (Area code, number and extension) (907) 729-4955	
Signature of Authorized Certifying Official 		Date Report Submitted October 25, 2006	