

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 264-07		OMB Approval No. 0348-0038	Page of 1 1 pages
3. Recipient Organization (Name and complete address, including ZIP code) City of Bethel P.O. Box 1388, Bethel, AK 99559					
4. Employer Identification Number 92-6001644		5. Recipient Account Number or Identifying Number 74503847		6. Final Report <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
7. Basis <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual					
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) 12/13/2006			9. Period Covered by this Report From: (Month, Day, Year) 7/1/2007		
			To: (Month, Day, Year) 12/31/2007		
			To: (Month, Day, Year) 8/8/2007		
10. Transactions:				I Previously Reported	II This Period
				III Cumulative	
a. Total outlays				47,369.00	0.00
b. Recipient share of outlays				4,341.00	0.00
c. Federal share of outlays				43,028.00	0.00
d. Total unliquidated obligations					0.00
e. Recipient share of unliquidated obligations					0.00
f. Federal share of unliquidated obligations					0.00
g. Total Federal share (Sum of lines c and f)					43,028.00
h. Total Federal funds authorized for this funding period					43,028.00
i. Unobligated balance of Federal funds (Line h minus line g)					0.00
11. Indirect Expense					
a. Type of Rate (Place "X" in appropriate box) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed					
b. Rate 0.00%		c. Base \$43028.00		d. Total Amount 0.00	
				e. Federal Share 0.00	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. Project completed. Ready to close grant.					
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 Laurie Walters, Finance Director				Telephone (Area code, number and extension) 907-543-1376	
Signature of Authorized Certifying Official <i>Laurie Walters</i>				Date Report Submitted August 8, 2007	

RECEIVED