



# FINANCIAL STATUS REPORT

(OPTIONAL FORM)

1. FEDERAL AGENCY AND ORGANIZATIONAL SLIP(S) TO WHICH REPORT IS SUBMITTED		2. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY		OMB APPROVAL NO. USE ONLY	PAGE OF																						
US Department of Labor - ETA		(0088-DC-2003-T1)			1 of 1																						
3. RECIPIENT ORGANIZATION (NAME AND COMPLETE ADDRESS, INCLUDING ZIP CODE)																											
STATE OF ALASKA, DEPARTMENT OF LABOR P.O. BOX 21149 JUNEAU, ALASKA 99802-1149																											
4. EMPLOYER IDENTIFICATION NUMBER		5. RECIPIENT ACCOUNT NUMBER OR IDENTIFYING NUMBER		6. FINAL REPORT	7. BASE																						
92-6001185		PR 52265 PMS# 0088-DC-2003-T1		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	CASH <input type="checkbox"/> ACCRUAL <input checked="" type="checkbox"/>																						
8. FUNDING PERIOD		9. PERIOD COVERED BY THIS REPORT																									
FROM: (MONTH, DAY, YEAR)		FROM: (MONTH, DAY, YEAR)		TO: (MONTH, DAY, YEAR)																							
May 15, 2003		June 30, 2008		April 1, 2007 June 30, 2007																							
10. TRANSACTIONS:																											
				I PROV. REPORTED	II THIS PERIOD	III CUMULATIVE																					
A. TOTAL OUTLAYS				2,358,938.44	139,809.70	2,498,748.14																					
B. RECIPIENT SHARE OF OUTLAYS				0.00	0.00	0.00																					
C. FEDERAL SHARE OF OUTLAYS				2,358,938.44	139,809.70	2,498,748.14																					
D. TOTAL UNLIQUIDATED OBLIGATIONS						261.07																					
E. RECIPIENT SHARE OF UNLIQUIDATED OBLIGATIONS						0.00																					
F. FEDERAL SHARE OF UNLIQUIDATED OBLIGATIONS						261.07																					
G. TOTAL FEDERAL SHARE (SUM OF LINES C AND F)						2,499,009.21																					
H. TOTAL FEDERAL FUNDS AUTHORIZED FOR THIS FUNDING PERIOD						2,500,000.00																					
I. UNOBLIGATED BALANCE OF FEDERAL FUNDS (LINE H MINUS LINE G)						990.79																					
11. INDIRECT EXPENSE		A. TYPE OF RATE		B. RATE		C. BASE		D. TOTAL AMOUNT		E. FEDERAL SHARE																	
		___ PROVISIONAL ___ PREDETERMINED ___ FINAL ___ FIXED		5.5%		69,681.05		3832.46		3832.46																	
12. REMARKS: ATTACH ANY EXPLANATIONS DEEMED NECESSARY OR INFORMATION REQUIRED BY FEDERAL SPONSORING AGENCY IN COMPLIANCE WITH GOVERNING LEGISLATION.																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Rate</th> <th>Base</th> <th>Total Amount</th> <th>Federal Share</th> </tr> </thead> <tbody> <tr> <td>6.0%</td> <td>61,020.91</td> <td>3661.27</td> <td>3661.27</td> </tr> <tr> <td>5.5%</td> <td>3,112.25</td> <td>171.19</td> <td>171.19</td> </tr> <tr> <td><b>Total</b></td> <td><b>64,133.16</b></td> <td><b>3,832.46</b></td> <td><b>3,832.46</b></td> </tr> </tbody> </table>												Rate	Base	Total Amount	Federal Share	6.0%	61,020.91	3661.27	3661.27	5.5%	3,112.25	171.19	171.19	<b>Total</b>	<b>64,133.16</b>	<b>3,832.46</b>	<b>3,832.46</b>
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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 PURPOSE SET FORTH IN THE AWARD DOCUMENTS																											
TYPED OR PRINTED NAME AND TITLE						TELEPHONE (AREA CODE, NUMBER AND EXTENSION)																					
Michael Weaver, Accountant III						(907)465-8577																					
SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL						DATE REPORT SUBMITTED																					
<i>JoAnn Riley</i> for						07/26/07																					

ACCEPTED