Form 641 – Parts A, B & C

ASHNHA Quarterly Project Budget Summary
& Performance Analysis Reporting Form

For All 2009 Denali Commission Approved Projects –
Projects No. 1140 – A through G

Project Name: CT Renovation and Implementation Project

Name of Hospital / Grant Recipient: Norton Sound Health Corporation

Reporting Period: ***April 1, 2010 through June 30, 2010***

Grant No.: 01004 – 05

641-A. Project Budget Summary (provide the following information; use additional pages as necessary):

1. *Original Project Budget Information:*

a. The *original* total approved project budget:

i. Amount of Denali Commission Grant Award: $550,218

ii. Amount of Facility Cost Share Match (CSM): $908,575.60

iii. Original Total Project Cost [line 1(a)(i) plus line 1(a)(ii)]: $1,458,793.60

2. *Actual Project Costs Recorded During the Current Reporting Period:*

a. Amount of the Facility's own Project CSM Expended (non-reimbursed expenditures) during the current reporting period: **-0-**

$ Amount of Facility funds expended during the current reporting period for which Denali Commission grant funds are being requested this period on Form 642 to reimburse your hospital for its project expenditures: **-0-**

b. Total amount of project costs recorded during the reporting period, whether expended facility CSM or reimbursement for facility expenditures is being sought (add lines 2a & 2b):

-0-

3. *Total Denali Commission Grant Funds Received to Date:*

Please report the **total** amount of Denali Commission grant funds **received** (whether received as an advance or as reimbursement for expenses) as of the end of the current reporting period (i.e., the total grant funds received to-date): **468,157.00**

$ *Total Facility Cost Share Match Funds Expended to Date:*

Please report the **total** amount of hospital funds **expended** (i.e., the hospital's share of the cost of the project for which reimbursement was not and cannot be sought from the Denali Commission) as of the end of the current reporting period (i.e., the total hospital matching funds expended to-date for which you did not seek reimbursement):

908,575.60

2. *Project Schedule:*

Please state the anticipated start and end dates of this funded 2008 Denali Commission Primary Care in Hospitals project, and provide a list appropriate milestone dates for the major phases or activities of your project.

Start date: 1/1/2008

End date: 11/30/2009

Description of Milestone Or Activity	Anticipated Completion Date
1.CT Scan fully operational	Project Completed 11/2009
2.	
3.	
4.	
5.	
6.	

641-B. Project Performance Analysis (add line items to the chart as appropriate):

2009 Project Budget Line Items:	Approved Budget:	Actual Cost:	Scheduled Completion Date:	Actual Work Performed:
CT SCAN	550,000	550,000	10/29/09	Installed and signed off on
CT Room Renovation	441,718.86	816,580,.53	10/29/09	Line item budget revision should have taken place
Power Injectors, service agreement staff training ,ect.	392,074.74	19,668.20	10/29/09	All Installed and employees hired and trained. Budget allocation should have taken place here.
HIM Renovation Move	75,000	72,544.87	09/25/09	HIM is moved and operational
Totals:	1,458,793.60	1,458,793.60		

641-C. Facility Certification:

The preparer of this report, by signing below, certifies on behalf of his or her employer that the information contained herein is accurate and complete to the best of his or her knowledge.

CWBrandt
Signature

7/30/10
Date

Cynthia W. Brandt / CFO
Printed Name and Official Title

Form 642

ASHNHA's Quarterly Reporting Form
Covering 2008 Denali Commission Projects
Numbered 1004 – A through N

Please Use this Form to File Your Facility's Quarterly Narrative Progress Report And /Or Make a Fund Disbursement Request

Project Name: Ct Scan Renovation

Hospital: Norton Sound Health Corporation

Reporting Period: ***April 01, 2010 – June 30, 2010***

Denali Commission Grant No.: 1004 - ___E___

A. Project Narrative (use additional pages as necessary):

1. What is the status of your 2008 "Primary Care in Hospitals" project as of June 30, 2010?
   (Please list all project phases completed or milestones achieved during the report period.)

Project Complete – CT Scan Operational in November, 2009

This is the Final on this CT Project.

2. Is your 2008 project on schedule? If not, what kind of problem(s) does the delay present? How will this be dealt with? Will the delay potentially extend the project beyond 6/30/2011?

Yes currently operational

3. Is the 2008 project on budget, or over or under budget? If over budget, how will this be dealt with? What funds is your facility using to cover the additional project costs?

Under Budget due to cost saving on the Ct scan and Training provided. Modified approved budget to match final expenditures.

4. Other comments, problems and solutions:

B. Project Fund Disbursement Request

We are requesting ASHNHA to release $_____**-0-**_____ in Denali Commission Grant Funds for our project at this time. *This funding request is either:*

1. /__/ a request for an *Advance* against Commission Project Grant Award Funds; **or**

2. /_ x_/ a request for *Reimbursement* from Project Grant Award Funds in order to cover project expenses incurred by our hospital *during the reporting period.*

(Copies of all invoices submitted and checks written in payment must accompany any request for reimbursement; copies of purchase orders or other commitment documents must accompany any request for an advance).