

**Denali Commission Quarterly
Project Narrative &
Funds Disbursement Request
Form 642**

Project Name: DIGITAL MAMMOGRAPHY

Agency: SOUTH PENINSULA HOSPITAL

Reporting Period: First Quarter (January – March) 2009

Grant No.: 01004-0A5

A. Disbursement Request

**We are requesting ASHNHA to release \$ 0 in Denali
Commission Grant Funds for our project at this time.**

B. Project Narrative

- 1. What is the status of your 2008 HNHFIIP project (include portions completed) as of 3/31/2009?** The digital mammography unit is scheduled to be installed in July/August of 2009 in coordination with the recertification of the existing mammography unit.

- 2. Is the project on schedule? If not, what kind of problem(s) does the delay present? How will this be dealt with?** The project is on schedule.

- 3. Is the project on budget? Over or under budget? If over budget, how will this be dealt with?** The project is on budget.

- 4. Other comments, problems and solutions:**

**Denali Commission
Quarterly Project Financial Report
Form 641(A)**

Project Name: DIGITAL MAMMOGRAPHY

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Please include the following information:

(Use additional pages as necessary)

Budget Information:

1. The total project budget—Denali Commission and other funds combined: \$422,000
2. The amount of Denali Commission funds awarded / committed to the project: \$211,000
3. The total project expenditures as of March 31, 2009: 0
4. The amount of Denali Commission funds expended for the project as of the end March 31, 2009: 0
5. The percentage of total expenditures to-date compared to the projected total project cost: 0
6. Project Schedule:

Show the project schedule with milestone dates for major design and construction phases:
Installation to be completed in July or August 2009

7. The Project Performance Analysis (PPA) [please use the Form 641(B) attached]

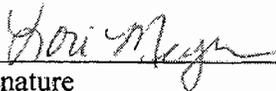
Form 641A

**Denali Commission
Quarterly Project Financial Report
Project Performance Analysis (PPA) Form 641(B)**

Project Name: **DIGITAL MAMMOGRAPHY**Agency: **SOUTH PENINSULA HOSPITAL**Reporting Period: **First Quarter (January – March) 2009**

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Line Items:	Approved Budget:	Actual Cost:	Scheduled Completion Date:	Actual Work Performed:
Digital Mammography Unit	422,000		07/31/2009	Multiple vendor quotes obtained; final selection to be made in May.
Totals:	422,000			


Signature

4/21/2009
Date

Lori Meyer, Controller

Print Name and Title

Form 641B