Attachment C: Quarterly Program Report (QPR)en

I. Grantee Information							
1. Grant Number	2. Grante	2. Grantee Company					
#2021-007	Marq6 I	Broadband, LLC					
3. Address		4. City	5. State	6. ZIP Code			
1385 SW Amberglen Parkway		Hillsboro	OB	97006			
II. Progress Report (Due 30 Days After the End of a Reporting Period)							
7. Reporting Period							
11/1/2020 – 2/28/2021		12/1/2021 - 2/28/2022	12/1/2022	_			
☐ 3/1/2021 − 5/31/2021		3/1/2022 - 5/31/2022	□ 3/1/2023 –				
☐ 6/1/2021 − 8/31/2021		6/1/2022 - 8/31/2022	G/1/2023 -	_			
☐ 9/1/2021 − 11/30/2021		9/1/2022 - 11/30/2022	☐ 9/1/2023 –				
construction on 6 sites once the ground thaws. Construction contracts have been signed and all engineering planning is almost complete. We have just completed implementing an LTE core in Cooks that will allow for faster speeds for our future customer base. 9. Have you encountered roadblocks to the implementation of this project? Yes No							
If yes, please provide details and describe your plan for overcoming the listed roadblocks. 10. Is your project on track with the overall project timeline? □Yes ☒ No If no, please provide details and describe your plan for moving the project back on track. Germfask delayed to April due to Weather.							
11. Please provide a narrative to accompany Attachment D. Complete and include Attachment D, indicating the census blocks with service available this reporting period, the speed of service offered, the price of service offered, the number of locations subscribing to your service. We have not built any infrastructure this quarter. Starting next quarter, we will see an increase in customer in the Grant Census Blocks. The area of Germfask will see the increase broadband speeds in April.							
III. Certification							
I certify all statements in this report, including all requested supplemental information, are true, complete, and accurate to the best of my knowledge. I understand failure to submit any required reports may result in the termination of the grant. I understand this grant may be terminated if DTMB concludes I am not in compliance with the conditions and provisions required by the contract covering this grant, or have falsified any information. By way of signature, I agree with all the conditions of this grant program.							
		Date 3/15/2021					

X JOhn S Webber

John Webber

Printed Name of Authorized Official John S Webber	г	Title of Authori President	ized Official or Financial Officer			
For DTMB Use Only						
Reviewed By:	Approved By	y:	Date:			
	Andrew 9	Halfman	4/14/2021			