Attachment A – Quarterly Financial Report (QFR)

	1. Grant Number 2021-040	2. Grantee Com LakeNet LLC					
3. Address 16690 Gratiot Rd		4. City Hemloc	4. City Hemlock MI		6. ZIP Code 48626		
	II. Financial Report (Due 30	Days After the End of	a Reporting Per	riod)			
	7. Reporting Period	1.1.1.1. 22. 23. 13.1 ·	a share a she	n norman a	n na sainte	traditional valent	
\geq	☑ 7/1/2021 – 8/31/2021	9/1/2021 -	- 11/30/2021		12/1/20	21 – 2/28/2022	
□ 3/1/2022 – 5/31/2022 □ 6/		6/1/2022 -	1/2022 – 8/31/2022		9/1/2022 - 11/30/2022		
□ 12/1/2022 – 2/28/2023 □		3/1/2023 -	/1/2023 – 5/31/2023		□ 6/1/2023 – 8/31/2023		
9/1/2023 – 11/30/2023		12/1/2023	12/1/2023 – 2/28/2024		□ 3/1/2024 – 5/31/2024		
	6/1/2024 – 8/31/2024	9/1/2024 -	9/1/2024 - 11/30/2024		12/1/2024 – 2/28/2025		
	3/1/2025 – 5/31/2025	6/1/2025 -	- 8/31/2025	3.5. S.S.	9/1/202	5 – 9/30/2025	
8. E	III. Expenditure Detail (Attach Accompanying Quarter Expense Line Item	ly Financial Detail Re	port (QFDR) and	invoice/payn		nentation) xpense by Category	
A	Buildings and Labor		(Total fro	m QFDR)	\$		
В	Customer Premise Equipment				\$	and a state	
С	Customer Premise Installation (Total from QFDR)				\$		
D	Electronics (Total from QFDR)				\$	a service and a service of the	
Е	Network Construction Labor (Total from QFDR)			\$	and the second state		
F	Network Construction Material (Total from QFDR)			\$	sterning for the state of the		
G	Permits (Total from QFDR)			\$			
Н	Professional Services and Engineering (Total from QFDR)				\$ 700.00	det chi schill	
1	Other (Total from QFDR)				\$		
10.	Total Expenses Incurred this Peric	d	(Total Fro	m QFDR)	\$700.00		
11. Total Match Amount this Period						\$ 259.00	
12.	Total Grant Amount Invoiced this I	Period	(Line #10	minus #11)	\$ 419.00	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
	IV. Reimbursement Requ	est			ALCHOROL .		
13.	Total Lump Sum Payment Receive		the off second sec		\$0	a deserver a	
			(Total from pre-	vious QFRs)	\$0		
15. Lump Sum Payment Remaining			(Line #13 minus #14)				
16.	Total Grant Amount Invoiced this I	Period		(Line #12)	\$ 441.00		
17.	Amount Requested for Reimburse		(Line #16 m \$0, whicheve	iinus #15, or er is greater)	\$ 441.00		
18.	Is this your final report? Yes	No No					
	III. Certification						
	I certify all statements in this re accurate to the best of my know termination of the grant. I under with the conditions and provision By way of signature, I agree with	wledge. I understand erstand this grant ma ons required by the c	d failure to subn by be terminated contract covering	hit any requir I if DTMB co g this grant, o	red reports ncludes I a	s may result in the am not in compliance	
	Grantee Authorized Official Signat		7/29/	-			
	Printed Name of Authorized Officia	ni Titi ハ	e of Authorized O	fficial or Finar	icial Officer		

Andrew Halfman

10/12/2021

Attachment A – Quarterly Financial Report (QFR)

I. Grantee Information									
	1. Grant Number2. Grantee Company2021-040LakeNet LLC								
3. Address			4. City 5. Sta		State	6. ZIP Code			
	16690 Gratiot Rd		Hemlock	MI		48626			
	II. Financial Report (Due 30 Days After the End of a Reporting Period)								
7. Reporting Period									
			⊠ 9/1/2021 – 11/30/2021			□ 12/1/2021 - 2/28/2022			
□ 3/1/2022 – 5/31/2022			□ 6/1/2022 - 8/31/2022			□ 9/1/2022 – 11/30/2022			
$\Box 12/1/2022 - 2/28/2023$			□ 3/1/2023 – 5/31/2023			□ 6/1/2023 – 8/31/2023			
9/1/2023 – 11/30/2023		_	□ 12/1/2023 – 2/28/2024		_	□ 3/1/2024 – 5/31/2024			
$\Box 6/1/2024 - 8/31/2024$		9	□ 9/1/2024 – 11/30/2024		12/1/20	□ 12/1/2024 – 2/28/2025			
$\square 3/1/2025 - 5/31/2025$		_	6/1/2025 – 8/31/2025		9/1/2025 – 9/30/2025				
	III. Expenditure Detail	_		_					
	(Attach Accompanying Quarterly	Financial D	Detail Report (QFDR) and i	nvoice/p	ayment docu	mentation)			
8. E	Expense Line Item		,		-	Expense by Category			
А	Buildings and Labor	(Total from	n QFDR)	\$	\$				
В	Customer Premise Equipment		(Total from	QFDR)	\$ 12781.	\$ 12781.48			
С	Customer Premise Installation (Total from QFDR)				\$				
D	Electronics (Total from QFDR)				\$ 33480.	12			
Е	Network Construction Labor (Total from QFDR)				\$				
F	Network Construction Material (Total from QFDR)				\$				
G	Permits								
н	Professional Services and Enginee	(Total from	n QFDR)	\$ 700	\$ 700				
I Other (Total from QFDR) \$									
10. Total Expenses Incurred this Period (Total From QFD					\$ 46961	.60			
11. Total Match Amount this Period					17375.79	17375.79			
12. Total Grant Amount Invoiced this Period			(Line #10 m	ninus #11) \$ 29585.	\$ 29585.81			
IV. Reimbursement Request									
13.	13. Total Lump Sum Payment Received at Project Start \$0								
14. Total Cumulative Expenditures Submitted to Date (Total from previous QFRs) \$441									
15. Lump Sum Payment Remaining (Line #13 minus #14)									
16. Total Grant Amount Invoiced this Period (Line #12)						81			
17. Amount Requested for Reimbursement this Period(Line #16 minus #15, or \$0, whichever is greater)						81			
18. Is this your final report? Yes No									
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.									
	Grantee Authorized Official Signature Date								
	Printed Name of Authorized Official		12/29/2021 Title of Authorized Off	icial or Fi	nancial Officer				
	Chrisopher Fabien	Member							

For DTMB Use Only								
Reviewed	Approved By:	Date:						
	Andrew Halfman	1/6/2022						

Attachment A – Quarterly Financial Report Instructions

The Quarterly Financial Report (QFR) and accompanying Quarterly Financial Detail Report (QFRD) are to be submitted within 30 days after the end of each reporting period. This report is a summary of grant funded expenditures for the indicated reporting period and serves as your formal request for reimbursement. If you received multiple awards, a separate and complete form must be submitted for each project.

- 1 6: Grantee information as it appears in the Grant Agreement.
- 7: Check the appropriate box to indicate the reporting period for this report
- 8 A-I: Expense Line Item categories approved in the Grant Agreement.
- 9 A-I: Enter the total expenditures by line item for this reporting period. Totals must equal the expenses reported in the accompanying QFDR and include both Grant and Match expenditures.
- 10: Add Lines 9A through 9I. This amount must match the total expenses reported in the accompanying QFDR and include both Grant and Match expenditures.
- 11: Enter the amount of Line 10 to be applied towards your match requirement. This must be equal to the match percentage identified in your grant agreement unless a match waiver has been approved.
- 12: Subtract Line 11 from Line 10. This is the total amount of grant funded expenses incurred for this period.
- 13: Enter the initial lump sum payment received at the project start.
- 14: Enter the cumulative total of Line 12 Total Grant Amount Invoiced from previous QFRs to date. This total does not include expenditures reported for this period.
- 15: Subtract Line 13 from Line 14. This is the amount remaining from the initial lump sum payment received and must be fully expended before additional payments can be requested.
- 16: Enter the total Grant Amount Invoiced this Period from Line 12 from this report.
- 17: Subtract Line 16 from Line 15. This is the reimbursement amount you are requesting for this period.
 - Your lump sum payment must be completely exhausted before any additional funds may be requested.
 - If you have not spent down your initial lump sum payment, you must still submit a report with a \$0 total
- 18: Indicate if this is your final report, which will begin the project closeout process.