

Alabama Broadband Accessibility Fund Closeout Form

Subrecipient Name: _____

Agreement Number: _____

Total Project Cost: \$ _____

Total Funds Requested: \$ _____

Grant as a Percentage of the Total Project Cost: _____%

Number of Passings:

Households: _____

Businesses/Industries: _____

Community Anchors: _____

Attach List of Addresses in Project Area

Number of New Customers Since Project Completion: _____

Number of Minority and/or Disadvantaged Contractors Used: _____

Check all that Apply:

- Minority-Owned Company
- Female-Owned Company
- Other Disadvantaged Company (Please Explain)

List of Minority and/or Disadvantaged Contractors Used:

Name of Company	Type of Company	Amount of Subcontract:

Submitted by: _____

Title: _____

Phone Number: _____

E-mail Address: _____