
INTERNET FOR ALL

Broadband Equity, Access, and Deployment Program

Semi-Annual Performance (Technical) Report Form



U.S. Department of Commerce
National Telecommunications and Information Administration

Broadband Equity, Access, and Deployment Program

Semi-Annual Performance (Technical) Report Form

This form will serve as a tool to capture the Broadband, Equity, Access, and Deployment (BEAD) Semi-Annual Performance (Technical) Report.¹

The Semi-Annual Performance (Technical) Report for the Broadband Equity, Access, and Deployment Program is due on a semi-annual basis for the periods of July 1 - December 31 and January 1 - June 30 of each year. The Semi-Annual Report is due within thirty (30 days) after the end of each reporting period (*i.e.*, January 30 and July 30).

Technical progress reports shall contain information as prescribed in 2 C.F.R. § 200.329 (<http://go.usa.gov/xkVqP>) and Department of Commerce Financial Assistance Standard Terms and Conditions (dated November 12, 2020), Section A.01.

If you have any further questions, or require technical assistance, please reach out to your assigned Federal Program Officer.

As outlined in the BEAD NOFO, Section IV.B.7, not later than 1 year after receiving grant funds under this Section, and semiannually thereafter until the funds have been expended, an Eligible Entity shall submit to the Assistant Secretary a semiannual report, with respect to the 6-month period immediately preceding the report date, that tracks the progress the Eligible Entity is making against its approved plans. Any such report should include, at a minimum, the following information: (i) a description of how the Eligible Entity expended the grant funds; (ii) a description of each service provided with the grant funds and the status of projects or other eligible activities supported by such funds; (iii) a description of the locations at which broadband service was made or will be made available using the grant funds, the locations at which broadband service was utilized, and the comparative demographics of those served; and (iv) a certification that the Eligible Entity complied with the requirements of this Section and with any additional reporting requirements prescribed by the Assistant Secretary. The semiannual report must also include an SF-425.

¹ This document is intended solely to assist recipients in better understanding BEAD and complying with the requirements set forth in the Notice of Funding Opportunity (NOFO) for this program. This document does not and is not intended to supersede, modify, or otherwise alter applicable statutory or regulatory requirements, or the specific requirements set forth in the NOFO and incorporated into BEAD awards. In all cases, statutory and regulatory mandates, and the requirements set forth in the NOFO and relevant award documents, shall prevail over any inconsistencies contained in this document.

Section 1 – Overview

General Information

| | |
|---|-----------|
| Recipient Legal Name | Automatic |
| Recipient Street Address | Automatic |
| Recipient City, State, Zip Code | Automatic |
| Federal Award Number | Automatic |
| Unique Entity Identification (UEI) Number | Automatic |
| Award Start Date | Automatic |
| Award End Date | Automatic |
| Report Submission Date | Automatic |
| Report Period Start Date | Automatic |
| Report Period Start Date | Automatic |
| Final Report | Y/N |

Summary

Instructions: Use these fields to highlight accomplishments, favorable developments, and challenges faced during the reporting period, in addition to anticipated accomplishments during the next reporting period. Please note that character limits are inclusive of spaces and punctuation throughout.

| | |
|--|-----------|
| Please describe significant accomplishments from the Report Start Date (i.e., January 1 or July 1) to the Report End Date (i.e., June 30 or December 31) (3000 characters or less) | Free Text |
| Please describe favorable developments or best practices which enabled meeting time schedules and objectives sooner, or at less cost than anticipated, or produced more or different beneficial results than originally planned. (3000 characters or less) | Free Text |
| Please describe any challenges (i.e., problems, delays, adverse conditions, cost overruns, high unit costs) to achieving activities from the Report Start Date (i.e., January 1 or July 1) to the Report End Date (i.e., June 30 or December 31) (3000 characters or less) | Free Text |
| Please describe significant accomplishments that you plan to complete during the next reporting period (3000 characters or less) | Free Text |

Section 2 – Initial Planning Funds

Statutory Requirements

Instructions: Use these fields to highlight progress on the Five-Year Action Plan, including accomplishments and challenges faced during the reporting period.

| 5-Year Action Plan | |
|---|-------------------|
| Due Date (i.e., 270 Days from Award Start Date) | <i>MM/DD/YYYY</i> |
| Percent Complete | <i>%</i> |
| Provide a brief description of the primary activities involved in reaching this percentage of completion (3000 characters or less) | <i>Free Text</i> |
| Please describe any challenges related to developing the BEAD Five-Year Action Plan during this reporting period funded through the BEAD Planning grant. (3000 characters or less) | <i>Free Text</i> |

Staffing of the State/Territory Broadband Office

Instructions: Use the field below to provide information on activities conducted during the reporting period.

| | |
|--|-----------|
| Is the State/Territory Broadband Office fully staffed? | Y/N |
| If not, please explain when the State/Territory Broadband Office is expected to be fully staffed. | Free Text |
| When fully staffed, how many full-time equivalent (FTE) jobs do you expect to create or retain as a result of the BEAD Program Initial Planning Funds? | Free Text |

Staffing Table

Instructions: Use the Excel-based **BEAD Semi-Annual Report Attachment, Staffing Tab** to provide information on the positions funded, or expected to be funded, by the BEAD Program Initial Planning Funds. Please include as an Excel attachment to this BEAD Semi-Annual Performance (Technical) Report to be submitted on the NTIA Grants Portal (NGP). Please note that any changes in Key Personnel on an award should be submitted to UGAM@ntia.gov. Reporting Key Personnel in the corresponding table does not constitute an approval of any Key Personnel changes.

- **Position Title:** All personnel should be identified by position title and not employee name.
- **Position Type:** Select the type of position funded.
 - State/Territory Broadband Office Employee
 - Eligible Entity Employee (*i.e.*, State/Territory Employee outside of the State/Territory Broadband Office)
 - Contracted Support
- **FTE %:** Enter the level of effort (*i.e.*, percent of their time charged to the BEAD Program Initial Planning Funds).
- **Date of Hire:** Insert the date of hire (MM/YYYY). If the position has not been filled, insert TBD.

| Position Title | Position Type | FTE % | Date of Hire |
|----------------|---------------|-------|--------------|
| Free Text | | % | Date OR TBD |
| | | | |
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Publications, outreach, and communications support related to broadband planning, deployment, mapping, equity and adoption

Instructions: Use the field below to provide information on activities conducted during the reporting period. If you select NA, please leave the corresponding table blank.

| | |
|---|--------|
| Have you produced publications, outreach, and communications support related to broadband planning, deployment, mapping, equity, and adoption (e.g., reports, studies, outreach materials) funded by the BEAD Program Initial Planning Funds? | Y/N/NA |
|---|--------|

Publications, Outreach, and Communications Support Table

Instructions: Use the Excel-based *BEAD Semi-Annual Report Attachment, Engagement Tracking Tab* to provide information on publications, outreach, and communications support: a) funded by the BEAD Program Initial Planning Funds; and b) during the reporting period. Please include as an Excel attachment to this BEAD Semi-Annual Performance (Technical) Report to be submitted on the NTIA Grants Portal (NGP).

- **Eligible Engagement:** Select from the drop down the eligible engagement category (e.g., publications, outreach, and communications support)
- **Engagement Title:** Include a brief title of the publication, outreach, or communications support (e.g., broadband adoption report; deployment planning informational flyer)
- **Engagement Type:** Select from the drop down the type of engagement (i.e., virtual, print, in-person, other).
- **Engagement Date(s):** Include the date(s) of engagement (e.g., publication) as MM/DD/YYYY.
- **Engagement Location:** If applicable, please include locations of where the support was disseminated. If the engagement was virtual, please include “virtual” and if available the link.
- **Target Audience:** Include a brief description of who the target audience of the publication, outreach, or communications support was for.
- **Target Audience Location:** Select from the dropdown the target audience location (i.e., local, regional, statewide, NA).
- **# Engaged:** Include the estimated number of people reached by the engagement (e.g., number of outreach material disseminated).
- **Notes:** If applicable, add additional context that may be important to understand the engagement, the topics the materials covered, etc. (Optional)

| Eligible Engagement | Engagement Title | Engagement Type | Engagement Date(s) | Engagement Location | Target Audience | Target Audience Location | # Engaged | Notes |
|---------------------|------------------|-----------------|--------------------|---------------------|-----------------|--------------------------|-----------|-----------|
| Dropdown | Free Text | Dropdown | Free Text | Free Text | Free Text | Dropdown | Number | Free Text |
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Technical assistance to potential subgrantees

Instructions: Use the field below to provide information on activities conducted during the reporting period. If you select NA, please leave the corresponding table blank.

| | |
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| Have you conducted technical assistance to potential subgrantees (e.g., workshops, events) the BEAD Program Initial Planning Funds during the reporting period? | Y/N/NA |
|---|--------|

Technical Assistance Table

Instructions: Use the Excel-based *BEAD Semi-Annual Report Attachment, Engagement Tracking Tab* to provide information on technical assistance: a) funded by the BEAD Program Initial Planning Funds; and b) during the reporting period. Please include as an Excel attachment to this BEAD Semi-Annual Performance (Technical) Report to be submitted on the NTIA Grants Portal (NGP).

- **Eligible Engagement:** Select from the drop down the eligible engagement category (e.g., Technical Assistance)
- **Engagement Title:** Include a brief title of the technical assistance engagement (e.g., subgrantee workshop; ISP informational event)
- **Engagement Type:** Select from the drop down the type of engagement (i.e., virtual, in-person, other).
- **Engagement Date(s):** Include the date(s) of engagement (e.g., date of workshop) as MM/DD/YYYY.
- **Engagement Location:** If applicable, please include the physical address of where the engagement took place. If the engagement was virtual, please include “virtual”.
- **Target Audience:** Include a brief description of who the target audience of the technical assistance.
- **Target Audience Location:** Select from the dropdown the target audience location (i.e., local, regional, statewide, NA).
- **# Engaged:** Include the estimated number of people reached by the engagement (e.g., number of participants in technical assistance engagement).
- **Notes:** If applicable, add additional context that may be important to understand the engagement, the topics the materials covered, etc. (Optional)

| Eligible Engagement | Engagement Title | Engagement Type | Engagement Date(s) | Engagement Location | Target Audience | Target Audience Location | # Engaged | Notes |
|---------------------|------------------|-----------------|--------------------|---------------------|-----------------|--------------------------|-----------|-----------|
| Dropdown | Free Text | Dropdown | Free Text | Free Text | Free Text | Dropdown | Number | Free Text |
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Training for employees of the broadband program or office of the Eligible Entity or employees of political subdivisions of the Eligible Entity

Instructions: Use the field below to provide information on activities conducted during the reporting period. If you select NA, please leave the corresponding table blank.

| | |
|--|--------|
| Have you conducted training for employees of the broadband program or office of the Eligible Entity or employees of political subdivisions of the Eligible Entity the BEAD Program Initial Planning Funds during the reporting period? | Y/N/NA |
|--|--------|

Training Table

Instructions: Use the Excel-based *BEAD Semi-Annual Report Attachment, Engagement Tracking Tab* to provide information on training: a) funded by the BEAD Program Initial Planning Funds; and b) during the reporting period. Please include as an Excel attachment to this BEAD Semi-Annual Performance (Technical) Report to be submitted on the NTIA Grants Portal (NGP).

- **Eligible Engagement:** Select from the drop down the eligible engagement category (e.g., Training)
- **Engagement Title:** Include a brief title of the training engagement (e.g., grants administration training)
- **Engagement Type:** Select from the drop down the type of engagement (i.e., virtual, in-person, other).
- **Engagement Date(s):** Include the date(s) of engagement (e.g., date of training) as MM/DD/YYYY.
- **Engagement Location:** If applicable, please include the physical address of where the engagement took place. If the engagement was virtual, please include “virtual”.
- **Target Audience:** Include a brief description of who the target audience of the training.
- **Target Audience Location:** Select from the dropdown the target audience location (i.e., local, regional, statewide, N/A).
- **# Engaged:** Include the estimated number of people reached by the engagement (e.g., number of participants who participated in the training with the BEAD Program Initial Planning Funds).
- **Notes:** If applicable, add additional context that may be important to understand the engagement, the topics the materials covered, etc. (Optional)

| Eligible Engagement | Engagement Title | Engagement Type | Engagement Date(s) | Engagement Location | Target Audience | Target Audience Location | # Engaged | Notes |
|---------------------|------------------|-----------------|--------------------|---------------------|-----------------|--------------------------|-----------|-----------|
| Dropdown | Free Text | Dropdown | Free Text | Free Text | Free Text | Dropdown | Number | Free Text |
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Surveys of unserved, underserved, and underrepresented communities to better understand barriers to adoption

Instructions: Use the field below to provide information on activities conducted during the reporting period. If you select NA, please leave the corresponding table blank.

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| Have you conducted surveys of unserved, underserved, and underrepresented communities to better understand barriers to adoption the BEAD Program Initial Planning Funds during the reporting period? | Y/N/NA |
|--|--------|

Survey Table

Instructions: Use the Excel-based *BEAD Semi-Annual Report Attachment, Engagement Tracking Tab* to provide information on surveys: a) funded by the BEAD Program Initial Planning Funds; and b) during the reporting period. Please include as an Excel attachment to this BEAD Semi-Annual Performance (Technical) Report to be submitted on the NTIA Grants Portal (NGP).

- **Eligible Engagement:** Select from the drop down the eligible engagement category (e.g., Surveys)
- **Engagement Title:** Include a brief title of the survey engagement (e.g., survey of [county])
- **Engagement Type:** Select from the drop down the type of engagement (i.e., virtual, in-person, other).
- **Engagement Date(s):** Include the date(s) of engagement (e.g., date of survey completion) as MM/DD/YYYY.
- **Engagement Location:** If applicable, please include the physical address of where the engagement took place. If the engagement was virtual, please include “virtual”.
- **Target Audience:** Include a brief description of who the target audience of the survey was.
- **Target Audience Location:** Select from the dropdown the target audience location (i.e., local, regional, statewide).
- **# Engaged:** Include the estimated number of people reached by the engagement (e.g., number of surveys received).
- **Notes:** If applicable, add additional context that may be important to understand the engagement, the topics the materials covered, etc. (Optional)

| Eligible Engagement | Engagement Title | Engagement Type | Engagement Date(s) | Engagement Location | Target Audience | Target Audience Location | # Engaged | Notes |
|---------------------|------------------|-----------------|--------------------|---------------------|-----------------|--------------------------|-----------|-----------|
| Dropdown | Free Text | Dropdown | Free Text | Free Text | Free Text | Dropdown | Number | Free Text |
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Local Coordination

Instructions: Use the field below to provide information on activities conducted during the reporting period. If you select NA, please leave the corresponding table blank.

| | |
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| Have you conducted stakeholder coordination/outreach events the BEAD Program Initial Planning Funds during the reporting period? | Y/N/NA |
|--|--------|

Local Coordination Event Table

Instructions: Use the Excel-based *BEAD Semi-Annual Report Attachment, Engagement Tracking Tab* to provide information on local coordination: a) funded by the BEAD Program Initial Planning Funds; and b) during the reporting period. Please include as an Excel attachment to this BEAD Semi-Annual Performance (Technical) Report to be submitted on the NTIA Grants Portal (NGP).

- **Eligible Engagement:** Select from the drop down the eligible engagement category (e.g., Local Coordination)
- **Engagement Title:** Include a brief title of the location coordination engagement (e.g., outreach workshop for teachers)
- **Engagement Type:** Select from the drop down the type of engagement (i.e., virtual, in-person, other).
- **Engagement Date(s):** Include the date(s) of engagement (e.g., date of outreach workshop) as MM/DD/YYYY.
- **Engagement Location:** If applicable, please include the physical address of where the engagement took place. If the engagement was virtual, please include “virtual”.
- **Target Audience:** Include a brief description of who the target audience of the stakeholder coordination/outreach event.
- **Target Audience Location:** Select from the dropdown the target audience location (i.e., local, regional, statewide).
- **# Engaged:** Include the estimated number of people reached by the engagement (e.g., number of participants in the workshop).
- **Notes:** If applicable, add additional context that may be important to understand the engagement, the topics the materials covered, etc. (Optional)

| Eligible Engagement | Engagement Title | Engagement Type | Engagement Date(s) | Engagement Location | Target Audience | Target Audience Location | # Engaged | Notes |
|---------------------|------------------|-----------------|--------------------|---------------------|-----------------|--------------------------|-----------|-----------|
| Dropdown | Free Text | Dropdown | Free Text | Free Text | Free Text | Dropdown | Number | Free Text |
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Subgrantees

Instructions: Use the field below to provide information on the subgrantees funded by the project. If you select N (No), please leave the corresponding table blank.

| | |
|--|-----|
| Do you have subgrantees funded by the BEAD Program Initial Planning Funds? | Y/N |
|--|-----|

Subgrantee Table

Instructions: Use the Excel-based **BEAD Semi-Annual Report Attachment, Subgrantees Tab** on the subgrantees funded by the BEAD Program Initial Planning Funds. Please include as an Excel attachment to this BEAD Semi-Annual Performance (Technical) Report to be submitted on the NTIA Grants Portal (NGP).

- **Subgrantee:** Include the legal name of the subgrantee.
- **Minority Business Enterprise:** Indicate if the subgrantee is a Minority Business Enterprise.
- **Women's Business Enterprise:** Indicate if the subgrantee is a Women's Business Enterprise.
- **Labor Surplus Area Firm:** Indicate if the subgrantee is a Labor Surplus Area Firm.
- **Award Start Date:** Include the start date of the subaward.
- **Award End Date:** Include the end date of the subaward.
- **Awarded Funds:** Include the total amount of the subaward.
- **Expenditures to Date:** Include the total expenditures of the subaward to date.
- **Balance:** Include the awarded funds minus the expenditures to date.
- **Percent Work Complete:** Indicate the estimated percent of work completed for the specific subaward.
- **Description of Work:** Provide a brief description of the work in the subaward.

Subgrantee Table

| Subgrantee | Minority Business Enterprise | Women's Business Enterprise | Labor Surplus Area Firm | Award Start Date | Award End Date | Awarded Funds | Expenditures to Date | Balance | Percent Work Complete | Description of Work |
|------------|------------------------------|-----------------------------|-------------------------|------------------|----------------|---------------|----------------------|---------|-----------------------|---------------------|
| Free Text | Y/N | Y/N | Y/N | MM/DD/YY YY | MM/DD/YY YY | \$ | \$ | \$ | % | Free Text |
| | | | | | | | | | | |
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Contracts

Instructions: Use the field below to provide information on the contracts funded by the project. If you select N (No), please leave the corresponding table blank.

| | |
|---|-----|
| Do you have contracts funded by the BEAD Program Initial Planning Funds? | Y/N |
|---|-----|

Contractor Table

Instructions: Use the Excel-based **BEAD Semi-Annual Report Attachment, Contracts Tab** on the contracts funded by the BEAD Program Initial Planning Funds. Please include as an Excel attachment to this BEAD Semi-Annual Performance (Technical) Report to be submitted on the NTIA Grants Portal (NGP).

- **Contractor:** Include the legal name of the contractor.
- **Minority Business Enterprise:** Indicate if the contractor is a Minority Business Enterprise.
- **Women's Business Enterprise:** Indicate if the contractor is a Women's Business Enterprise.
- **Labor Surplus Area Firm:** Indicate if the contractor is a Labor Surplus Area Firm.
- **RFP Issued:** Include if the RFP for the contract has been issued yet.
- **Contract Executed:** Include if the contract has been executed yet.
- **Contract Amount (Federal Funds):** Include the federal funds included in the contract amount.
- **Percent Work Complete:** Indicate the estimated percent of work completed for the specific contract.
- **Description of Work:** Provide a brief description of the Statement of Work.

Contractor Table

| Contractor | Minority Business Enterprise | Women's Business Enterprise | Labor Surplus Area Firm | RFP Issued | Contract Executed | Contract Amount (Federal Funds) | Percent Work Complete | Description of Work |
|------------------|------------------------------|-----------------------------|-------------------------|------------|-------------------|---------------------------------|-----------------------|---------------------|
| <i>Free Text</i> | Y/N | Y/N | Y/N | Y/N | Y/N | \$ | % | <i>Free Text</i> |
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Section 3 – Deployment and Non-Deployment Funds

Forthcoming – NTIA will release a revised Semi-Annual Report with substantive reporting requirements under Section 3 once Eligible Entities are allowed to undertake deployment and non-deployment activities pursuant to an approved Initial or Final Proposal.

Section 4 – Use of Funds

Initial Planning Funds

Instructions: Use the table provided to provide the following information about your planned and actual use of funds over the course of the BEAD Program:

- **Budget for Entire Project:** Indicate planned federal, non-federal, and total funds to be expended over the course of the BEAD Program, broken down by cost classification. This should align with the approved SF-424C (e.g., Column Total (Planned) should match column a (Total Cost) on the SF-424C; if field 17 on the SF-424C is 100%, every field in Non-Federal Funds (Planned) should be “0”). If you do not plan to expend funds in a cost classification, put “0” in the corresponding field.
- **Actuals from Project Inception through End of Current Reporting Period:** Indicate cumulative actual expenditures (i.e., costs that have been incurred and recorded as expenditures), broken down by cost classification. If you have not expended funds in a cost classification, put “0” in the corresponding field.

| Budget for Entire Project | | | | Actuals from Project Inception through End of Current Reporting Period | | | |
|---|-----------------------------|-------------------------|-----------------|--|---------------|-------|--|
| Cost Classification | Non-Federal Funds (Planned) | Federal Funds (Planned) | Total (Planned) | Non-Federal Funds | Federal Funds | Total | Percent of Federal Funds Expended (Cumulative) |
| Administrative and legal expenses | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Land, structures, rights-of way, appraisals, etc. | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Relocation expenses and payments | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Architectural and engineering fees | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Other architectural and engineering fees | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Project inspection fees | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Site work | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Demolition and removal | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Construction | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Equipment | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Miscellaneous | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Subtotal | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Contingencies | \$ | \$ | \$ | \$ | \$ | \$ | % |
| Totals | \$ | \$ | \$ | \$ | \$ | \$ | % |

Section 5 – Supplementary Information

Instructions: Use the fields below to provide additional information on your project. If you have nothing to report, please put “N/A” in the corresponding field.

| | |
|---|-------------------------|
| <p>Is there any additional information that you would like to share or that you think would be useful to assess your award (e.g., additional details of the description of each service provided with the grant funds and the status of projects or other eligible activities supported by such funds; a description of the locations at which broadband service was made or will be made available using the grant funds, the locations at which broadband service was utilized, and the comparative demographics of those served; etc.)? (3000 characters or less)</p> | <p><i>Free Text</i></p> |
| <p>Does the project team anticipate any changes to the Project Plan for broadband planning? Please note that NTIA will need to approve changes to the Project Plan before they can be implemented. (3000 characters or less)</p> | <p><i>Free Text</i></p> |
| <p>Please identify any additional resources or technical assistance you may require (e.g., to complete the BEAD Five-Year Action Plan, prepare the Initial Proposal, etc.) (3000 characters or less)</p> | <p><i>Free Text</i></p> |

Certification

I certify to the best of knowledge and belief that this report is a correct and complete description of activities undertaken for the purposes set forth in the award documents.

I certify to the best of knowledge and belief that during the reporting period, the Eligible Entity has complied with the requirements of Section 60102 of the Infrastructure Act and the reporting requirements contained in the BEAD NOFO.

| | |
|--|-----------|
| Authorized Certifying Official | Free Text |
| Date | Automatic |
| Telephone (area code, number, and extension) | Free Text |
| Email Address | Free Text |