

U.S. Department of Commerce			2. Award or Grant Number: 06-10-S13006		
Performance Progress Report			4. EIN: 680278801		
1. Recipient Name: California Governor's Office of Emergency Services			6. Report Date: 1/30/2015		
3. Street Address: 3650 Schriever Ave			7. Reporting Period End Date: 12/31/2014		
5. City, State, Zip Code: Mather, CA 95655			8. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		9. Report Frequency <input checked="" type="checkbox"/> Quarterly
10a. Project/Grant Period Start Date: 08/01/2013	10b. End Date: 07/31/2016				
11. List the individual projects in your approved Project Plan					
	Project Type (Capacity Building, SCIP Update, Outreach, Training etc.)	Project Deliverable Quantity (Number & Indicator Description)	Total Federal Funding Amount	Total Federal Funding Amount expended at the end of this reporting period	Percent of Total Federal Funding Amount expended
1	Stakeholder Meetings	350			
2	Training Sessions (Phase II)	0			
3	Broadband Conferences	2			
4	Staff Hires (FTE)	0			
5	Contract Executions	0			
6	Statutory or Regulatory Changes	0			
7	Governance Meetings	2			
8	Education and Outreach Materials	400			
9	Phase II Activities (including later Contract Executions)	0			
11a. Describe your progress meeting each major activity/milestone approved in the Baseline Report for this project; any challenges or obstacles encountered and mitigation strategies you have employed; planned major activities for the next quarter; and any additional project milestones or information. Cal OES continued to host the California First Responder Network board meetings every two months and held a Town Hall public outreach meeting in Sacramento.					
11b. If the project team anticipates requesting any changes to the approved Baseline Report in the next quarter, describe those below. Note that any substantive changes to the Baseline Report must be approved by the Department of Commerce before implementation. Cal OES will be adding one Limited Term, grant funded Engineer in the next quarter.					
11c. Provide any other information that would be useful to NTIA as it assesses this project's progress.					

11d. Describe any success stories or best practices you have identified. Please be as specific as possible..

12. Personnel

12a. If the project is not fully staffed, describe how any lack of staffing may impact the project's time line and when the project will be fully staffed.

12b. Staffing Table

Job Title	FTE %	Project(s) Assigned	Change
Statewide Interoperability Coordinator	.25	Telecommunications Governance	n/a
Staff Services Manager	.10	Grant Management	n/a
Associate Governmental Program Analyst 100%	1	Grant Management	n/a
Associate Governmental Program Analyst 100%	1	Project Management	n/a
Associate Governmental Program Analyst 100%	1	Project Management	n/a
Associate Governmental Program Analyst 100%	1	Project Management	n/a
Staff Services Analyst 70%	.70	Project Management Assistance	vacated
Career Executive Assistant II	.40	Project Management	n/a
Senior Telecomms Engineer	.80	Project Management	n/a
Department Program Manager III	.40	Project Management	n/a
Department Program Manager II	.45	Project Management	n/a
Staff Services Manager II	.65	Project Management	n/a
Associate Information Staff Analyst	.30	Project Management	n/a
Telecommunications System Manager	.40	Project Management	n/a

Add Row

Remove Row

13. Subcontracts (Vendors and/or Subrecipients)

N/A

13a. Subcontracts Table – Include all subcontractors. The totals from this table must equal the "Subcontracts Total" in Question 14f.

Name	Subcontract Purpose	Type (Vendor/Subrec.)	RFP/R FQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated	Project and % Assigned
Science Application International Corporation	Public Outreach and Education	Vendor	Y	Y	2/14/14	2/13/16	\$438,750		

Add Row

Remove Row

13b. Describe any challenges encountered with vendors and/or subrecipients. N/A

14. Budget Worksheet

Columns 2, 3 and 4 must match your current project budget for the entire award, which is the SF-424A on file.
 Only list matching funds that the Department of Commerce has already approved.

Project Budget Element (1)	Federal Funds Awarded (2)	Approved Matching Funds (3)	Total Budget (4)	Federal Funds Expended (5)	Approved Matching Funds Expended (6)	Total Funds Expended (7)
a. Personnel Salaries	\$711,645	\$1,050,063	\$1,761,708	\$203,464	\$144,406	\$347,870
b. Personnel Fringe Benefits	\$249,076	\$367,522	\$616,598	\$96,971	\$63,191	\$160,162
c. Travel	\$200,700	\$0	\$200,700	\$13,902	\$-739 correction	\$13,163
d. Equipment	\$0	\$0	\$0	\$0	\$0	\$0
e. Materials/Supplies	\$6,860	\$605	\$7,465	\$1,503	\$0	\$1503
f. Subcontracts Total	\$3,284,560	\$0	\$3,284,560	\$158,055	\$0	\$158,055
g. Other	\$36,554	\$1,007	\$37,561	\$10,486	\$0	\$10,486
h. Indirect Costs	\$1,187,391	\$0	\$1,187,391	\$114,344	\$0	\$114,344
h. Total Costs	\$5,676,786	\$1,419,197	\$7,095,983	\$598,725	\$206,858	\$805,583
i. % of Total	80%	20%	100%	74%	26%	100%

15. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purpose(s) set forth in the award documents.

16a. Typed or printed name and title of Authorized Certifying Official

Renee Mota-Jackson
 Chief
 Infrastructure Protection Grants Unit
 Homeland Security and Prop 1B Division

16c. Telephone (area code, number, and extension)

916-845-8404

16d. Email Address

Renee.jackson@caloes.ca.gov

16b. Signature of Authorized Certifying Official


 PETER TOWN FOR RENE E JACKSON

16e. Date Report Submitted (month, day, year)

2/13/15

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. Public reporting burden for this collection of information is estimated to average 10 hours per response for the application process, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Michael Dame, Director, State and Local Implementation Grant Program, Office of Public Safety Communications, National Telecommunications and Information Administration, U.S. Department of Commerce (DOC), 1401 Constitution Avenue, N.W., HCHB, Room 7324, Washington, D.C. 20230.