					2. Award or Grant	Est up noon				
U.S. Department of Commerce						10-10-518010				
SLIGP 2.0 Performance Progress Report						516000279				
1. Recipient Name State of Delaware					4. EIN: 6. Report Date					
an newport frame					(MM/DD/YYYY)	04/30/2018				
					7. Reporting Period	ero, addition				
3. Street Address	3050 Upper King Road				End Date:	03/31/2018				
					(MM/DD/YYYY)	0.0				
E Situ State 7in Sada	Dover, Delaware 19904			8. Final Report Yes	9. Report Frequency					
5. City, State, Zip Code	City, state, 21p code Dover, belawate 19904					Quarterly X				
10a. Project/Grant Period					NO X	- ST				
		10b. End Date:	Service descrip							
Start Date: (MM/DD/YYYY)	03/01/2018	(MM/DD/YYYY)	02/29/2020							
11. List the individual projects in yo	ur approved Project Plan									
	Activity Type (Planning,	Was this Activity	Project Deliverable							
	Governance Meetings,	Performed during the	Quantity (Number &	Description of Milestone Category						
	etc.)	Reporting Quarter? (Yes/No)	Indicator Description)							
Activities/Metrics for All Recipients	during the Reporting Quarte		[Description]			District on the Con-				
	Governance Meetings	No		Actual number of governance, subcommittee, or working group meetings related to th	e NPSBN held during t	he quarter				
2	Individuals Sent to	No		Actual number of individuals who were sent to national or regional third-party conferences with a focus area or training						
2	Broadband Conferences	NO		related to the NPSBN using SLIGP grant funds during the quarter						
3	Convened Stakeholder	No		Actual number of events coordinated - or held using SLIGP grant funds during the quarter, as requested by FirstNet.						
	Events									
4	Staff Hired (Full-Time Equivalent)(FTE)	Yes	0.31	Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal).						
5	Contracts Executed	Yes	2	Actual number of contracts executed during the quarter.						
	Subrecipient Agreements			Actual number of agreements executed during the quarter.						
6	Executed	No		Actual number of agreements executed during the quarter.						
	Data Sharing		11-25-1							
- 7	Policies/Agreements Developed	No		Yes or No if data sharing policies and/or agreements were developed during this reporting quarter.						
	Further Identification of		-							
8	Potential Public Safety	40000 000000000000000000000000000000000		Yes or No if further identification of potential public safety users occurred during this re	this reporting quarter.					
	Isers				100 70					
	Plans for Emergency									
9	Communications	No		Yes or No if plans for future emergecy communications technology transitions occurred	during this reporting	quarter.				
	Technology Transitions Identified and Planned to									
10	Transition PS Apps &	1		Yes or No if public safety applications or databases within the State or territory were i	dentified and transition	n plans were develope				
10	Databases	No		this reporting quarter						
	Identify Ongoing Coverage			Van Natifeation and in identifying and in identifying	46 la					
11	Gaps	No		Yes or No if participated in identifying ongoing coveage gaps using SLIGP funds during this reporting quarter.						
12	Data Collection Activities	No		(Opt-In and Opt-Out Post-SMLA Phase Only) Yes or No if participated in data collection	activities as requested by FirstNet or					
Attivity in for Opti-Our Stimes only in	ton Pro-SMU. Phase morns	the Appenting Quarter	10 10 10 10 10 10 10 10 10 10 10 10 10 1							
30	Stakeholders Engaged Education and Guttrach			Actual number of institiduals reached via staticisal des meetings or events during the or	Description of the second					
	Malanois plantauted in-		E 3.70, 12 8/5	Actual number of malarios mistriputes in-person during this quarter.						
	Person		(B) (B) (B) (B)							
	Education and Outreads		No. 18 Days	Attival volume of hits or impressions to any website, e-new electer, social media post, a	Name and Address of the	HAZAL STATE BOOK STATE				
	Materials disprouned.		4 × 12	language. System a social of unit of malfurations to making parties of communities focus unit in bost of	STILL BELOWIE TO BOOK	Construction of the				
	Electronically	MALE LANGE (PAR)	SMILE							

OMB Control No. 0660-0042 Expiration Date: 01/31/2021

11a. Narrative description for each activity reported in Question 11 for this quarter; any challenges or obstacles encountered and mitigation strategies you have employed; planned major activities for the next quarter; and any additional project
Staff has been identified to support this grant. Director Robbie Hunt will dedicate 7% of his time to this effort. Deputy Director Eric Wagner will spend 20% of his time on this effort. A contract specialist has been identified and will contribute 2% of
time in this effort also legal has been identified to assist with this effort and will contribute 2% of thier time during the grant period.

12. Personnel

 12a. Staffing Table - Please include all staff that have contributed time to the project with current quarter's utilization. Please only include FTE staff employed by the state not contractors. Please do not remove individuals from this table.

 Job Title
 FTE%
 Project (s) Assigned
 Change

 Director Robbie Hunt (SWCI)
 7%
 Assist SPOC with SLIGP activities

Provide oversight of all SLIGP activities	
Assist the SPOC with interal contract/procurement processes	
Assist the SPOC with legal and contractual processes	
	Assist the SPOC with interal contract/procurement processes

12b. Narrative description of any staffing challenges, vacancies, or changes.

Staff has been identified to support this grant. Director Robbie Hunt will dedicate 7% of his time to this effort. Deputy Director Eric Wagner will spend 20% of his time on this effort. A contract specialist has been identified and will contribute 2% of time in this effort also legal has been identified to assist with this effort and will contribute 2% of thier time during the grant period.

13. Contractual (Contract and/or Subrecipients)

13a. Contractual Table - Include all contractors. The totals from this table should equal the "Contractual" in Question 14f.

Name	Subcontract Purpose	Type (Contract/Subrec.)	RFP/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Fund Allocated
Micro-Tech	Program/ProjectSupport	Contract	N	Y	03/01/2018	02/29/2020	\$334,205.00	\$0.00
Rybynski Consulting	Subject matter expert/ Outreach	Contract	N	Υ	03/01/2018	02/29/2020	\$144,000.00	\$0.00
Rybynski Consulting	Pre-Award Support	Contract	N	Y	03/01/2018	02/29/2020	\$4,500.00	\$0.00

13b. Narrative description any challenges, updates, or changes related to contracts and/or subrecipients.

OMB Control No. 0660-0042 Expiration Date: 01/31/2021

Project Budget Element (1)	NTE Total Federal Funds Approved (2)	NTE Total Matching Funds Approved (3)	NTE Total Budget (4)	Federal Funds Obligated to Date (5)	Matching Funds Approved to Date (6)	Total Budget to Date (7)	Federal Funds Expended (8)	Approved Matching Funds Expended (9)	Total funds Expended (10)
a. Personnel Salaries		\$47,160.00	\$47,160.00	\$0.00	\$17,685.00	\$17,685.00	\$0.00	\$0.00	\$0.0
p. Personnel Fringe Benefits		\$13,205.00	\$13,205.00		\$4,952.00	\$4,952.00	\$0.00	\$0.00	\$0.0
c. Travel	\$50,136.00	2 - 7 - 11 - 1	\$50,136.00	\$18,801.00		\$18,801.00	\$0.00	\$0.00	\$0.0
d. Equipment			\$0.00	\$0.00		\$0.00	\$0.00	\$0.00	\$0.0
e. Materials/Supplies	\$1,334.00	\$887.00	\$2,221.00	\$193.00	\$887.00	\$1,080.00	\$0.00	\$0.00	\$0.0
f. Contractual	\$482,705.00		\$482,705.00	\$180,275.00		\$180,275.00	\$0.00	\$0.00	\$0.0
g. Other	\$15,825.00	\$76,248.00	\$92,073.00	\$731.00	\$26,476.00	\$27,207.00	\$0.00	\$0.00	\$0.0
n. Indirect			\$0.00	\$0.00		\$0.00	\$0.00	\$0.00	\$0.0
, Total Costs	\$550,000.00	\$137,500.00	\$687,500.00	\$200,000.00	\$50,000.00	\$250,000.00	\$0.00	\$0.00	\$0.0
. Proportionality Percent	80.00%	20.00%	100.00%	80.00%	20.00%	100.00%	#DIV/0!	#DIV/01	#DIV/0!
15. Certification: I certify to the be	est of my knowledge and belief	that this report is correct	t and complete for pe	rformance of activities for	the purpose(s) set	forth in the awar	d documents.		
16a. Typed or printed name and title of Authorized Certifying Official: Eric Wagner-SPOC- Deputy Director					16c. Telephone (area code, number, and extension)	302-698-8220			
16b. Signature of Authorized Certifying Official DETONY DIRECTION						16d. Email Address:	Eric.Wagner@state.de.us		
/-	10 1111	11000000	111				Date:		

Public Burden Statement: 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 number. Public reporting burden for this collection of information is estimated to average 12.5 hours per response. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Michael Dame, Program Director, State and Local Implementation Grant Program, National Telecommunications and Information Administration, U.S. Department of Commerce, 1401 Constitution Avenue, NW, Room 4078, Washington, DC 20230.