			Department of Comm Performance Progres			
1. Recipient Name	Florida Department of Management Services					
3. Street Address	4030 Esplanade Way Suite	180				
5. City, State, Zip Code	Tallahassee, FL 32399-701	6				
10a. Project/Grant Period						
Start Date: (MM/DD/YYYY)	03/01/2018	10b. End Date: (MM/DD/YYYY)	02/29/2020			
11. List the individual projects in	your approved Project Plan					
	Activity Type (Planning, Governance Meetings, etc.)	Was this Activity Performed during the Reporting Quarter? (Yes/No)	Project Deliverable Quantity (Number & Indicator Description)		Description of Miles	
Activities/Metrics for All Recipier	nts during the Reporting Qua	arter				
1	Governance Meetings	No	0		ance, subcommittee, or working group mee	
2	Individuals Sent to	Yes		-	uals who were sent to national or regional t	
	Broadband Conferences		1	related to the NPSBN usir	ng SLIGP grant funds during the quarter	
3	Convened Stakeholder Events	No	0	Actual number of events	coordinated - or held using SLIGP grant fund	
4	Staff Hired (Full-Time Equivalent)(FTE)	No	0.00	Actual number of state pe	ersonnel FTEs who began supporting SLIGP	
5	Contracts Executed	No	0	Actual number of contrac	ts executed during the quarter.	
6	Subrecipient Agreements Executed	No	0	Actual number of agreem	ents executed during the quarter.	
7	Data Sharing Policies/Agreements Developed	Yes		Yes or No if data sharing	policies and/or agreements were developed	
8	Further Identification of Potential Public Safety Users	Yes		Yes or No if further identi	fication of potential public safety users occ	
9	Plans for Emergency Communications Technology Transitions	No		Yes or No if plans for futu	re emergecy communications technology ti	
10	Identified and Planned to Transition PS Apps & Databases	No		Yes or No if public safety developed this reporting	applications or databases within the State of quarter	
11	Identify Ongoing Coverage Gaps	No		Yes or No if participated i	n identifying ongoing coveage gaps using S	
12	Data Collection Activities	No			-SMLA Phase Only) Yes or No if participated data collection determination by Opt-Out (I	
Activities for Opt-Out States only	in the Pre-SMLA Phase duri	ng the Reporting Quarte	r			
13	Stakeholders Engaged			Actual number of individu	uals reached via stakeholder meetings or ev	
14	Education and Outreach Materials Distributed In- Person			Actual number of materic	als distributed in-person during this quarter.	
15	Education and Outreach Materials distributed Electronically			Actual volume of hits or in the quarter.	mpressions to any website, e-newsletter, so	

	2. Award or Grant	12-10518012
	Number:	
	4. EIN: 6. Report Date	59-3458983
	6. Report Date (MM/DD/YYYY)	10/20/2019
	7. Reporting Period	
	End Date:	09/30/2019
	(MM/DD/YYYY)	
	8. Final Report	9. Report Frequency
	Yes 🗆	Quarterly X
	No 🔽	
ilestone Category		
meetings related to t	he NPSBN held during	a the quarter
	ences with a focus ar	
iai tinia-puity conjer	ences with a jocus un	
funds during the qua	rter, as requested by I	FirstNet.
GP activities during	the quarter (may be a	decimal).
oped during this repo	orting quarter.	
occurred during this	reporting quarter.	
gy transitions occurre	ed during this reportin	ng quarter.
ate or territory were	identified and transit	tion plans were
ng SLIGP funds during	g this reporting quart	er.
ated in data collectio	on activities as reques	ted by FirstNet or
ut (Post-SMLA) grant	ees.	
or events during the q	uarter.	
rter.		

, social media post, or other account supported by SLIGP during

11a. Narrative description for each activity reported in Question 11 for this quarter; any challenges or obstacles encountered and mitigation strategies you have employed; p This past quarter's activities involved continued updating of the digital grant files for filing invoices and receipts, further research of the latest technology compatible with th developments with AT&T/FirstNet. The Center For Disaster Risk Policy (CDRP) at Florida State University (FSU) continued with the series of workshops to assist county and re address public safety communications (voice and dedicated broadband data), situational awareness tools, integration of Smart City data and technology, and comprehensive in emergency and disaster response. There was one workshop (webinar) conducted on July 10, 2019, for this reporting period, which was a continuing effort of identifying por the future workshops were cancelled due to low attendance and lack of interest statewide. The workshop series is being closed out at this time. The Department began prep FloridaNet Committee members, as well as other higher-level members of the State's Domestic Security Task Force. These educational opportunities will be used to allow me integration for the remainder of the grant period.

One DMS staff member participated in the 2019 Public Safety Broadband Stakeholder meeting held in Chicago, IL on Juy 9 -11, 2019. This was an informational event providi and experience R&D updates impacting critical technologies for first responder communications. Participating in this event allowed for the opportunity to obtain training an communications, which will provide knowledge and resources related to AT&T's FirstNet deployment in Florida 12. Personnel

12a. Staffing Table - Please include a	ll staff that have co	ntributed time to the project with current quarter's utilization. Please only include FTE staff employed by the state not co
Job Title	FTE%	Project (s) Assigned
Contract and Project Manager	15%	Supervises Staff and Grant activities
DMS Chief Technology Officer	15%	Supervising the technology aspect of the Grant
Program Manager	49%	Overall Project Management and tracking progress of the Grant
DMS System Engineer	7%	Providing system interoperability and planning with current State communications plans.
Grant Specialist	15%	Provide Grant support to Grant Manager
Financial Analyst	15%	Track Grant Expenses
Financial Administrator	10%	Submit Grant Drawdowns
Grant Manager	100%	Managing the SLIGP 2.0 grant activities and Scope of Work / Deliverables

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

There were no additional staff hired for this period of 07/1/2019 through 09/30/2019 for grant activities.

13. Contractual (Contract and/or Subrecipients)

13a. Contractual Table – Include a	ll contractors. The totals from this table should equ	al the "Contractual" i	n Question 14f.			
Name	Subcontract Purpose	Type (Contract/Subrec.)	RFP/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	
Florida State University Center For Disaster Risk Policy	Workshop Development and Execution	Subrecipient	Ν	Y	10/16/2018	

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

There was one workshop (webinar) conducted on July 10, 2019. Attendance at these workshop have been well below expectations. On August 9, 2019 all future workshops

		t of public safety
contractors. Plea	ase do not remove indiv	iduals from this table.
		Change
		0%
		0%
		0%
		0%
		0%
		0%
		0%
		0%
End Date	Total Federal Funds	Total Matching Funds
End Date	Total Federal Funds Allocated	
		Total Matching Funds
	Allocated	Total Matching Funds Allocated
	Allocated	Total Matching Funds Allocated
End Date 09/19/2019	Allocated	Total Matching Funds Allocated

Only list matching funds that the		as already approved.	is the SF-424A on f		Matching	Telel D. de est			
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)	Funds Approved to Date (6)	Total Budget to Date (7)	Federal Funds Expended (8)	Funds Expended (9)	Total funds Expended (10)
a. Personnel Salaries	\$290,480.00	\$118,227.00	\$408,707.00	\$290,480.00	\$118,227.00	\$408,707.00	\$22,437.50	\$66,173.83	\$88,611.33
b. Personnel Fringe Benefits	\$97,042.00	\$40,109.00	\$137,151.00	\$97,042.00	\$40,109.00	\$137,151.00	\$5,146.62	\$20,010.78	\$25,157.40
c. Travel	\$267,356.00	\$0.00	\$267,356.00	\$267,356.00	\$0.00	\$267,356.00	\$8,329.07	\$0.00	\$8,329.07
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$30,572.00	\$0.00	\$30,572.00	\$30,572.00	\$0.00	\$30,572.00	\$15,029.23	\$0.00	\$15,029.23
f. Contractual	\$335,200.00	\$0.00	\$335,200.00	\$335,200.00	\$0.00	\$335,200.00	\$155,700.00	\$0.00	\$155,700.00
g. Other	\$99,350.00	\$121,664.00	\$221,014.00	\$99,350.00	\$121,664.00	\$221,014.00	\$2,555.00	\$7,729.54	\$10,284.54
h. Indirect	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
i. Total Costs	\$1,120,000.00	\$280,000.00	\$1,400,000.00	\$1,120,000.00	\$280,000.00	\$1,400,000.00	\$209,197.42	\$93,914.15	\$303,111.57
j. Proportionality Percent	80.00%	20.00%	100.00%	80.00%	20.00%	100.00%	69.02%	30.98%	100.00%
15. Certification: I certify to the b	est of my knowledge and bel	ief that this report is corr	ect and complete fo	r performance of activities	s for the purpose	e(s) set forth in the	e award documents.		
16a. Typed or printed name and t	title of Authorized Certifying	Official:					16c. Telephone (area		
Pam Gerard, Contract and Project Mananger					code, number, and extension)	(850) 487-1804			
16b Signature of Authorized Certifying Official:						16d. Email Address:	Pam.Gerard@dms.myflorida.com		
Sam Xterard						Date:	10/29/2019		

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