U.S. Department of Commerce		2. Award or Grant Number 13-10-S13013	
Performance Progress Report		4. EIN 580973190	
1. Recipient Name Georgia Emergency Management Agency		6. Report Date (MM/DD/YYYY) 10/25/2013	
3. Street Address 935 East Confederate Avenue, SE		7. Reporting Period End Date: 09/30/2013	
5. City, State, Zip Code Atlanta, GA, 30316		8. Final Report ☐ Yes X No	9. Report Frequency X 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	54			
2	Broadband Conferences	9			
3	Staff Hires	.4			
4	Contract Executions	0			
5	Governance Meetings	2			
6	Outreach Materials/Website	50			
7	Phase II Activities	0			
8					

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.

One stakeholder presentation was given on the overview of FirstNet. Held discussions with GTRI (contractor) to refine scope of work before contract is executed. Chief of Special Projects began partial FTE effort on project, additional staff time/ hires expected in Q2. One full meeting of PSIEC and one PSIEC working group held. Several flyers distributed. First quarter was mainly focused at strategy and organizational activities, as well as finalizing the grant obtainment process.

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.

No changes foreseen at this time.

11c. Provide any other information that would be useful to NTIA as it assesses this project's progress.

Current projections are that main contractor will be signed in Q2 and that targeted pace of outreach activities will increase beginning in first part of Q3 as planned.

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

PSIEC governance structure defined and verified in first meeting. Working group formed to provide more frequent interaction between internal SLIGP efforts and stakeholder agencies.

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.

Project is not fully staffed but is on target to meet projected staff levels by end of Q2. No project delays are foreseen.

12b. Staffing Table

Job Title	FTE %	Project(s) Assigned	Change
PSBN Coordinator		Not posted pending the grant award	Not hired
SWIC		position is existing, but did not work on SLIGP in Q1	Not yet assigned to project
Communications/ 911 Coordinator		position is existing, but did not work on SLIGP in Q1	Not yet assigned to project
Chief of Special Projects	.4	Began organizational efforts for the project in Georgia, finalized SLIGP grant process	Began work on effort
Secretary		position is existing, but did not work on SLIGP in Q1	Not yet assigned to project
Asst Director of Homeland Security		position is existing, but did not work on SLIGP in Q1	Not yet assigned to project
Grant Administrator		position is existing, but did not work on SLIGP in Q1	Not yet assigned to project
Compliance Officer		position is existing, but did not work on SLIGP in Q1	Not yet assigned to project
Division Director		position is existing, but did not work on SLIGP in Q1	Not yet assigned to project
Grants Specialist		position is existing, but did not work on SLIGP in Q1	Not yet assigned to project
Financial Ops Specialist		position is existing, but did not work on SLIGP in Q1	Not yet assigned to project
Dir of Operations		position is existing, but did not work on SLIGP in Q1	Not yet assigned to project
SOC Director		position is existing, but did not work on SLIGP in Q1	Not yet assigned to project

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13. Subcontracts (Vendors and/or Subrecipients)

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/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated	Project and % Assigned
GTRI	Outreach, education meetings, facilitation, website development	Vendor	N	N	TBD	TBD	$1,044,360	0	

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

None expected. RFP in Q2.

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	$413,866	$126,720	$540,586	$ 3,158	$8,118	$11,276
b. Personnel Fringe Benefits	$197,998		$197,998	$1,795		$1,795
c. Travel	$84,460		$84,460	$6,302		$6,302
d. Equipment						
e. Materials/Supplies	$13,600		$13,600	$58		$58
f. Subcontracts Total	$1,044,360		$1,044,360			
g. Construction						
h. Other	$1,552,373	$699,944	$2,252,317			
i. Total Costs	$3,306,657	$826,664	$4,133,321	$11,313	$8,118	$19,431
j. % of Total	80%	20%	100%	58%	42%	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	16c. Telephone (area code, number, and extension)
Micah Hamrick	404-635-7080
Director-Homeland Security Division	**16d. Email Address**
	micah.hamrick@gema.ga.gov
16b. Signature of Authorized Certifying Official	**16e. Date Report Submitted (month, day, year)**
Micah Hamrick	11-20-13