

U.S. Department of Commerce		2. Award or Grant Number 38-10-S13038	
Performance Progress Report		4. EIN 45-0309764	
1. Recipient Name State of North Dakota, Information Technology Department		6. Report Date (MM/DD/YYYY) 4/29/2015	
3. Street Address 600 East Boulevard Avenue, Dept. 117		7. Reporting Period End Date: 3/31/2015	
5. City, State, Zip Code Bismarck ND 58103		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: (MM/DD/YYYY) 09/01/2013	10b. End Date: (MM/DD/YYYY) 02/28/2018		
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	70	
2	Broadband Conferences	0	
3	Staff Hires	0	
4	Contract Executions	0	
5	Governance Meetings	0	
6	Education and Outreach Materials	168	
7	Subrecipient Agreements	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.			
<p>Stakeholder Meetings – In Q7 we completed our first round of county coverage priority review sessions. Each county in North Dakota has provided us with their public safety coverage priorities. We are now developing a process to consolidate this data at a statewide level and submit it to FirstNet in their requested format.</p> <p>Broadband Conferences – We did not attend any conferences in Q7.</p> <p>Staff Hires – We continue to use the part time services of a Program Manager, Accountant, CIO, CFO, Project Sponsor, Project Management Specialist, and a Procurement Officer. The SWIC is also contributing time to the project, but we are not expecting to bill any of this time to the grant.</p> <p>Governance Meetings – Our governance review has been completed. Review of this was postponed until Q8 because of our state legislative session requiring SIEC member resources during Q7.</p> <p>Education and Outreach Materials – Our website saw 151 hits during Q7. We also distributed 17 electronic copies of our SLIGP newsletter with the county coverage reviews.</p>			

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.

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.

Our coverage review sessions have allowed us a second chance to fill in any user population data that we did not obtain during our first round of outreach. This has greatly increased our accuracy for agency personnel counts.

SLIGP activities also exposed a wide variety of LMR problems across the state. This prompted the SIEC to fund begin a separate initiative to evaluate a statewide approach to LMR. Much of the SLIGP contact data and relationships were leveraged to expedite the outreach for this effort. SLIGP funds were not used to support this LMR effort.

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.

The project is fully staffed.

12b. Staffing Table

Job Title	FTE %	Project(s) Assigned	Change
Program Manager	50	Development of program activities and oversight of Subcontractors	No Change
Project Sponsor	2	Oversight of Program Manager and Subrecipient, steering of project	No Change
CIO	1	Oversight of project, interface with Governor's Office	No Change
CFO	0	Oversight of financial planning, tracking, and reporting practices	No Change
Accountant	0	Execution of financial tracking, and reporting practices	No Change
Project Management Specialist	0	Development of project management methodology	No Change
Procurement Officer	0	Develop, implement, and oversight of contract for subrecipient services	No Change

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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
Televate, LLC	SLIGP Support	Vendor	Y	Y	10/15/13	10/14/16	\$539,753	N/A	

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

None.

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	105,740	75,444	181,184	\$37,621	\$41,593	\$79,215
b. Personnel Fringe Benefits	34,894	24,897	59,791	\$12,796	\$18,143	\$30,938
c. Travel	157,972	7,399	165,371	\$30,594	\$796	\$31,390
d. Equipment	-	-	-	\$-	\$-	\$-
e. Materials/Supplies	22,563	-	22,563	\$8	\$-	\$8
f. Subcontracts Total	796,286	70,000	866,286	\$235,133	\$-	\$235,133
g. Other	50,520	114,254	164,774	\$1,211	\$172,107	\$173,318
h. Total Costs	1,167,975	291,994	1,459,969	\$317,363	\$232,639	\$550,002
i. % 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

Travis Durick
 Program Manager

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

701.328.1125

16d. Email Address

tdurick@nd.gov

16b. Signature of Authorized Certifying Official



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

4/30/2015

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