OMB Control No. 0660-0038 Expiration Date: 8/31/2016

							Expiration Date: 8/31/2016	
		U.S. Depar	2. Award or Grant Number	···· · ····				
			33-10-\$13033					
		Performa	nce Progress Report			4. EIN		
						02-6000618		
L. Recipi	ent Name		6. Report Date (MM/DD/YYYY)					
New Har	mpshire Department of Saf	fety	10/23/2014					
3. Street	Address					7. Reporting Period End Date:		
33 Hazer			9/30/2014					
	tate, Zip Code					8. Final Report	9. Report Frequency	
Concord,	, NH 03305					□ Yes X No	X Quarterly	
10a. Proj	ject/Grant Period	10b. End Date:	(MM/DD/YYYY)					
	Date: (09/01/2013)	08/31/16				ļ		
11. List (	the individual projects in y	our approved P	roject Plan					
	Project Type (Capacity		ct Deliverable Quantity	Total Federal	Total Federa	l Funding Amount expended	Percent of Total Federal Fundin	
	Building, SCIP Update,		ber & Indicator	Funding Amount	at the end of this reporting period		Amount expended	
	Outreach, Training etc.		iption)					
1	Stakeholder Meetings	156 (	people attended)	n/a	n/a		n/a	
2	Broadband Conference			n/a	n/a		n/a	
3	Staff hires	0		n/a	n/a		n/a	
4	Contract Executions	0		n/a	n/a		n/a	
5	Governance Meetings			n/a	n/a		n/a	
6	Education and Outreach		informational /	n/a	n/a		n/a	
	Materials		ational manuals)			<u>,</u>		
7	7 Subrecipient Agreements Executed			n/a	n/a		n/a	
8	Phase II Activities	N/A						
11a. De	scribe your progress meet	ting each major	activity/milestone appro	ved in the Baseline Re	port for this pr	roject; any challenges or obst	acles encountered and mitigation	
strategie	es you have employed; pla	inned major acti	vities for the next quarte	er; and any additional j	project milesto	ones or information.		
The last	quarter has been extremel	ly busy with outr	each events throughout	the state. Addressing c	oncerns in the	north country to expanding go	overnance (working groups) to	
planning	and conducting a SCIP-up	date Workshop,	preparing and conducting	g the second SIEC Mee	ting, to readyin	g the FirstNet Checklist for su	bmission by the end of October, th	
							ve work environment statewide th	
	met with very positive revi							
	014: 1 <sup>st</sup> SIEC Meeting (invit			· · · · · ·				
	014: Develop Interoperabi			le attended				
• •	014: Interoperability Conc							
	014: NH Fire Federation m		• – •					
	014: SIEC Meeting, Concor			T People accorded				
	TITA: NEC MEETINE LONCOR	n se – n pen	118 213811(181)					

Baseline Report must be approved by the Department of Commerce before implementation.

At this time, we do not anticipate any changes to take place the next quarter.

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

Progress regarding FirstNet and defining the SWIC's position has been to collaborate with FEMA Region 1 States through regional planning sessions. Attendance in the past year to the NCSWIC and RECCWG conferences, along with FirstNet Webinars has been instrumental in this capacity. The important milestones reached this past year have been the development of Governance, the actual standing up of the SIEC, gaining the legislative authority required by the SIEC, and updating the SCIP as a more readable and contemporaneous document that reflects the statewide effort, not to mention the positive relationships that have been fostered throughout the state by the Outreach Program. The NTIA Grant has allowed us that platform to move forward as we look ahead to FirstNet and the on-site consultation that will form the basis to move on to Phase II.

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

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.

In the Baseline/Expenditure Plan, NHDOS anticipates hiring a Business Systems Analyst as we begin to move into the near year. Much of the foundation needed to be in place before we anticipated future hires. We are currently evaluating the needs required to move forward and we anticipate staffing will be key to our future progress.

12b. Staffing Table

	FTE %	Project(s) Assigned	Change
SWIC	0.75	Management and coordination of grant project activities.	No change.
Program specialist III	.01	Financial Tracking and Reporting	No change.

Add Row

Remove Row

N/A 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
N/A	······································								
				Add Row	Remove	Row			

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

None at this time.

Page 2 of 3

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	Approved Matching	Total Budget	Federal Funds	Approved Matching Funds	Total Funds Expended (7)				
	Awarded (2)	Funds (3)	(4)	Expended (5)	Expended (6)					
a. Personnel Salaries	280,698	144,357	425,055	424	64,391	64,815				
b. Personnel Fringe Benefits	151,617	75,616	227,233	84	4,926	5,010				
c. Travel	30,168	0	30,168	1,356	99	1,455				
d. Equipment	0	0	0	0	0	0				
e. Materials/Supplies	19,445	0	19,445	10	0	10				
f. Subcontracts Total	335,550	0	335,550	0	0	0				
g. Other	11,080	0	11,080	496	0	496				
Indirect	51,329	0	51,329	240	0	240				
h. Total Costs	879,887	219,973	1,099,860	2,610	69,416	72,026				
i. % of Total	80%	20%	100%	4%	96%	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 a	and title of Authori	zed Certifying Official		16c. Telephone (area code, number, and extension)						
Pamela Urban-Morin, Grant	Administrator			(603) 271-7663						
			16d. Email Address							
			Pamela.Urban-Morin@dos.nh.gov							
16b. Signature of Authorized	<b>Certifying Official</b>			16e. Date Report Submitted (month, day, year)						
	Δ -		1							
Lomia V	Ulan-f	nan_		October 23, 2014						

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, U.S. Department of Commerce (DOC), 1401 Constitution Avenue, N.W., HCHB, Room 7324, Washington, D.C. 20230.