

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) 1/30/2014	
3. Street Address 600 East Boulevard Avenue, Dept. 117		7. Reporting Period End Date: 12/31/2013	
5. City, State, Zip Code Bismarck ND 58103		8. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9. Report Frequency x Quarterly
10a. Project/Grant Period Start Date: (MM/DD/YYYY) 09/01/2013	10b. End Date: (MM/DD/YYYY) 08/31/2016		

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	134			
2	Broadband Conferences	0			
3	Staff Hires	.14			
4	Contract Executions	1			
5	Governance Meetings	2			
6	Education and Outreach Materials	115			
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.

Stakeholder Meetings – During Q2, we hosted our first round of regional kickoff meetings. This round included meetings in Grand Forks, Fargo, and Bismarck. We also had scheduled a meeting in Williston during this week; however we were unable to secure enough participation to justify the meeting. Williston is located in the middle of our state’s oil production area where public safety agencies are having unprecedented difficulty with staffing and maintaining operations. Other than Williston, these kickoff meetings were very well attended, ranging from 30-40 participants each. The kickoff meetings outlined the overall SLIGP process, our process for developing a governance structure, needs assessments, LTE technology overview, and also outlined our working groups focused on developing more detailed evaluations of user needs. These meetings were attended by a very good cross section of 911 Coordinators, Emergency Managers, Fire, Law Enforcement, and also some potential secondary users such as Public Works, Game & Fish, & Corrections. This first round of meetings was very successful, but also pointed out that we needed to make further efforts in engaging the volunteer agencies and Tribal entities. We plan to host a second round of four additional meetings in January.

Broadband Conferences – There were no broadband conferences attended this quarter.

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.

This group's collective hours directly attributable to the project for Q2 total to .48 FTE's, an increase of .14 FTE's from Q1. The SWIC is also contributing time to the project, but we are not expecting to bill any of this time to the grant.

Governance Meetings – We held two governance meetings through the ND SIEC. The first one was to introduce our SLIGP contractor, Televate, and the second was to seek approval of the kickoff meeting plan and seek input on the activities and schedule.

We have also begun holding individual interviews to discuss the various governing bodies throughout public safety within North Dakota. We are hosting these interviews across State, County, and Municipal agencies to understand their opinions on how well current governing bodies serve their needs. We will use this individual information to evaluate if an existing governance structure is appropriate to support broadband decision making, or if modifications or a new entity would best serve this purpose. In Q2 we held seven interviews. We have several more scheduled for Q3 and expect to make significant progress on the evaluation of the existing governance structures.

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.

N/A

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

In Q3 we will have a significant number of federal expenses recorded for the activities in Q2. We will also have a significant volume of in kind hours from the kickoff meetings. Proportionality will be maintained.

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

The ND EMS Association, 911 Association, Firefighters Association, and Emergency Management association all helped to distribute the invitations for our kickoff meetings. These were a very significant source of our attendance.

We have also engaged the Emergency Management Department at North Dakota State University. We expect they will initially participate by reviewing upcoming survey materials, and we also hope to expand their participation in other elements of the project as we better understand the abilities of the department.

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.

We continue to ramp up the allocation of part time resources. We expect this to continue as planned.

12b. Staffing Table

Job Title	FTE %	Project(s) Assigned	Change
Program Manager	36	Development of program activities and oversight of Subrecipient	No Change
Project Sponsor	10	Oversight of Program Manager and Subrecipient, steering of project	No Change
CIO	0.77	Oversight of project, interface with Governor's Office	No Change

CFO	0.29	Oversight of financial planning, tracking, and reporting practices	No Change
Accountant	0.29	Execution of financial tracking, and reporting practices	No Change
Project Management Specialist	0.13	Development of project management methodology	No Change
Procurement Officer	1	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.

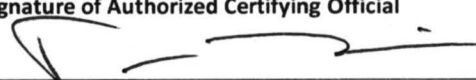
We are completing the vendor registration process, this delayed some invoices for Q2. This will be resolved for Q3.

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	105,740.00	75,444.00	181,184.00	0.00	28712.00	28712.00
b. Personnel Fringe Benefits	34,894.00	24,897.00	59,791.00	0.00	12829.00	12829.00
c. Travel	157,972.00	7,399.00	165,371.00	4934.00	796.00	5730.00
d. Equipment	0.00	0.00	0.00	0.00	0.00	0.00
e. Materials/Supplies	22,563.00	0.00	22,563.00	8.00	0.00	8.00
f. Subcontracts Total	796,286.00	70,000.00	866,286.00	0.00	0.00	0.00
g. Other	50,520.00	114,254.00	164,774.00	0.00	0.00	0.00
h. Total Costs	1,167,975.00	291,994.00	1,459,969.00	4942.00	42337.00	47279.00
i. % of Total	80%	20%	100%	10%	90%	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) 1/30/2014

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