			Department of Commo			Number:	88-10-S18088 55-1234567
1. Recipient Name	Department of Public Safety	у				6. Report Date	10/30/2018
3. Street Address	123 Spring Lane					7. Reporting Period	09/30/2018
5. City, State, Zip Code	Anywhere USA 34567					8. Final Report Yes □ No ☑	9. Report Frequency Quarterly X
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 yo	our 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 Milestone Category		
Activities/Metrics for All Recipients	during the Reporting Quart	ter					
1	Governance Meetings	Yes			ance, subcommittee, or working group meetings related to t		
2	Individuals Sent to Broadband Conferences	Yes		_	uals who were sent to national or regional third-party confe ng SLIGP grant funds during the quarter	ences with a focus are	a or training track
3	Convened Stakeholder Events	Yes	4	Actual number of events o	coordinated - or held using SLIGP grant funds during the qua	rter, as requested by F	irstNet.
4	Staff Hired (Full-Time Equivalent)(FTE)	Yes	0.1	Actual number of state pe	ersonnel FTEs who began supporting SLIGP activities during	the quarter (may be a	decimal).
5	Contracts Executed	Yes	1	Actual number of contrac	ts executed during the quarter.		
6	Subrecipient Agreements Executed	No	0	Actual number of agreem	nents executed during the quarter.		
7	Data Sharing Policies/Agreements Developed	Yes		Yes or No if data sharing p	policies and/or agreements were developed during this repo	orting quarter.	
8	Further Identification of Potential Public Safety Users	Yes		Yes or No if further identi	fication of potential public safety users occurred during this	reporting quarter.	
9	Plans for Emergency Communications Technology Transitions	No		Yes or No if plans for futu	re emergecy communications technology transitions occurre	ed during this reporting	g quarter.
10	Identified and Planned to Transition PS Apps & Databases	Yes		Yes or No if public safety of developed this reporting of	applications or databases within the State or territory were quarter	identified and transiti	on plans were
11	Identify Ongoing Coverage Gaps	No		Yes or No if participated in	in identifying ongoing coveage gaps using SLIGP funds durin	g this reporting quarte	r.
12	Data Collection Activities	No			- <mark>SMLA Phase Only)</mark> Yes or No if participated in data collection data collection determination by Opt-Out (Post-SMLA) grant	•	ed by FirstNet or
Activities for Opt-Out States only in	the Pre-SMLA Phase during	the Reporting Quarter					
13	Stakeholders Engaged			Actual number of individu	uals reached via stakeholder meetings or events during the q	uarter.	
14	Education and Outreach Materials Distributed In- Person			Actual number of materia	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, social media post, o	or other account suppo	orted by SLIGP during

OMB Control No. 0660-0042 Expiration Date: 01/31/2021

11 a.	11a. Narrative description for each activity reported in Question 11 for this quarter; any challenge	es or obstacles encountered and mitigation strategies you	u have employed; planned major activities for the	next quarter; and any additional
proj	project milestones or information.			

During this quarter, two governance meetings were held focusing on allowable activities. Two individuals attended the APCO Annual Conference in August to attend FirstNet tracks. We continued to convene FirstNet-requested stakeholder outreach meetings focused on various topics (4 this quarter). As noted below, the Special Projects Director (0.1 FTE) started charging to the grant this quarter. One new contract to SME Consultants LLC was executed this quarter. Other allowable activities performed this quarter include: Data Sharing Agreement developed with help from the new contractor, identifying potential users, and identified public safety apps for transition to the NPSBN during the FN-requested stakeholder meetings.

12. Personnel

12a. Staffing Table - Please include all staff that have contributed time to the project with current quarter's utilization. Please only include FTE staff employed by the state not contractors. Please do not remove individuals from this table.							
Job Title	FTE%	Project (s) Assigned	Change				
Project Director	25%	Grants Management, daily operations, and project reporting	No change				
Compliance and Data Coordinator	0%	Grants management, data collection, audit resolution, and reporting	Vacant - to be filled at 25% FTE again				
Grants Manager	25%	Grant set-up, Accounting and Reconciliation, Fiscal Monitoring, Financial Reporting and Fiscal Close Out	No change				
Assistant Project Director	0%	Grants Management, project reporting, supporting the project director with grant activities	Retired - will not be backfilled				
Special Projects Director	10%	Manages office space, responsible for logistics regarding travel, and governance meetings	New position added				

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

This quarter, the Special Projects Director starting charging to the SLIGP 2.0 grant at 0.1 FTE focusing on admin logistics, travel, and governance support. The compliance and data coordinator position employee departed the agency and we plan on hiring for this position in the next quarter. The Assistant Project Director retired and the agency will not backfill the position.

13. Contractual (Contract and/or Subrecipients)

13a. Contractual Table – Include all contractors. The totals from this table should equal the "Contractual" in Question 14f.

Name	Subcontract Purpose	Type (Contract/Subrec.)	RFP/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated
SME Consultants LLC	Assist with development of data sharing policies/agreements and transition plan	Contract	Y	Υ	08/01/2018	01/31/2020	\$53,550	\$10,000

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

We executed 1 contract this quarter with the SME Consultants LLC on August 1st to support data sharing agreements.

OMB Control No. 0660-0042 Expiration Date: 01/31/2021

14. Budget Worksheet Columns 2, 3 and 4 must match you Only list matching funds that the D	· · ·		the SF-424A on file.						
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)	Matching Funds Approved to Date (6)	Total Budget to Date (7)	Federal Funds Expended (8)	Approved Matching Funds Expended (9)	Total funds Expended (10)
a. Personnel Salaries	\$14,800.00	\$140,000.00	\$154,800.00	\$5,550.00	\$52,500.00	\$58,050.00	\$2,775.00	\$26,250.00	\$29,025.00
b. Personnel Fringe Benefits	\$5,368.00	\$0.00	\$5,368.00	\$2,013.00	\$0.00	\$2,013.00	\$1,006.50	\$0.00	\$1,006.50
c. Travel	\$17,600.00	\$0.00	\$17,600.00	\$6,600.00	\$0.00	\$6,600.00	\$3,300.00	\$0.00	\$3,300.00
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
f. Contractual	\$585,600.00	\$35,000.00	\$620,600.00	\$207,100.00	\$10,000.00	\$217,100.00	\$23,000.00	\$5,000.00	\$28,000.00
g. Other	\$1,650.00	\$0.00	\$1,650.00	\$619.00	\$0.00	\$619.00	\$309.50	\$0.00	\$309.50
h. Indirect	\$74,982.00	\$0.00	\$74,982.00	\$28,118.00	\$0.00	\$28,118.00	\$5,775.76	\$0.00	\$5,775.76
i. Total Costs	\$700,000.00	\$175,000.00	\$875,000.00	\$250,000.00	\$62,500.00	\$312,500.00	\$36,166.76	\$31,250.00	\$67,416.76
j. Proportionality Percent	80.00%	20.00%	100.00%	80.00%	20.00%	100.00%	53.65%	46.35%	100.00%
15. Certification: I certify to the be	est of my knowledge and belie	f that this report is correc	ct and complete for p	erformance of activities fo	r the purpose(s) s	et forth in the aw	ard documents.		
16a. Typed or printed name and ti	tle of Authorized Certifying O	fficial:					16c. Telephone (area		
Rebecca Sligp2					code, number, and extension)	555-5	55-5555		
16b. Signature of Authorized Certifying Official:						16d. Email Address:	SLIGP2.gov		
						Date:	10/30/2018		

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