

U.S. Department of Commerce		2. Award or Grant Number 09-10-S13009			
Performance Progress Report		4. EIN 066000798			
1. Recipient Name Connecticut Department of Emergency Services and Public Protection		6. Report Date (MM/DD/YYYY) 10/26/2014			
3. Street Address 1111 Country Club Road		7. Reporting Period End Date: 9/30/14			
5. City, State, Zip Code Middletown, Connecticut 06457-2389		8. Final Report No		9. Report Frequency X Quarterly	
10a. Project/Grant Period Start Date: 07/01/2013	10b. End Date: 06/30/2016				
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	120	0	0	0
3	Broadband Conferences	0	0	0	0
4	Staff Hires (Full-Time Equivalent)	0	0	0	0
5	Contract Executions	0	0	0	0
7	Governance Meetings	1	0	0	0
8	Education & Outreach Materials	0	0	0	0
9	Phase II Activities	Activities to be determined			
<p>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> <p>This quarter the following has been accomplished: The final refinements of the outreach materials have been completed. We are presenting to the agency commissioners and others in state leadership before release to your regional partners. The SPOC & ASPOC participated in 2 conference calls with the our federal program manager to discuss our status and We are continuing to schedule meetings with various professional emergency services organizations throughout the state (ie. CT Police Chiefs Association, CT Fire Chiefs Association...). Our staff began completing items on the State consultation checklist and participated in a conference call to discuss our progress for the State visit. The Public Safety Broadband Initiative (SLIGP) has become a standing agenda item at the State Interoperable Communications Committee and the E-911 Commission meetings. The Governance Group (a sub section of the State Interoperability Committee) has met and received a draft presentation of the Public Safety Broadband outreach materials.</p>					
<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.</p> <p>No significant changes are planned.</p>					

11c. Provide any other information that would be useful to NTIA as it assesses this project's progress.
 None at this time.

11d. Describe any success stories or best practices you have identified. Please be as specific as possible.
 None during this reporting quarter.

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.

12b. Staffing Table

Job Title	FTE %	Project(s) Assigned	Change
SWIC	25	Coordinate activities, administrative management attended Conference & PSBB workshop	No change
Emergency Telecommunications Director	10	Attended PSBB Work Shop	No Change
Telecommunications Engineer 3	5	Attended PSBB Work Shop	No Change

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
Applied Geographics	Project management support, meeting facilitation, technical writing, technical subject matter experts	Vendor	N	Y	January 2014	June 2015	\$645,000.00	\$0	48%
Vendor to be determined	Phase II and data collection efforts/support	Vendor	N	N	Fall 2014	Spring 2016	\$691,157.00	\$0	52%

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

None at this time.

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	\$0.00	\$185,099.00	\$185,099.00	\$0.00	\$34,654.11	\$34,654.11
b. Personnel Fringe Benefits	\$0.00	\$133,272.00	\$133,272.00	\$0.00	\$27,501.51	\$27,501.51
c. Travel	\$59,200.00	\$0.00	\$59,200.00	\$2598.43	\$0.00	\$2,598.43
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$7,300.00	\$0.00	\$7300.00	\$3821.94	\$0.00	\$3,821.94
f. Subcontracts Total	\$1,336,157.00	\$0.00	\$1,336,157.00	\$0.00	\$0.00	\$0.00
g. Other	\$3600.00	\$33,193.00	\$36,793.00	\$0.00	\$0.00	\$0.00
h. Total Costs	\$1,406,257.00	\$351,564.00	1,757,821.00	\$6420.37	\$62,155.62	\$68,575.99
i. % of Total	80%	20%		9.37%	90.63%	100.00%

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 Michael D. Varney 	16c. Telephone (area code, number, and extension) (860) 685-8146
	16d. Email Address Michael.Varney@ct.gov
16b. Signature of Authorized Certifying Official	16e. Date Report Submitted (month, day, year) 10/27/2014

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