							R Control No. 0660 0029
		U.S.	Department of Commerce	2. Award or Grant NumoMB Control No. 0660-0038			
				20-10-S13020 Expiration Date: 8/31/2016			
		Perf	formance Progress Report			4. EIN	
						48-6029925	
							nor)
	Redpient Name					6. Report Date (MM/DD/YY	YY)
ļ k	(ANSAS OFFICE OF	INFOR	MATION AND TECHNOL	OGY SERVICES		10/28/2014	
3. Street	t Address					7. Reporting Period	End Date:
LANDO	N STATE OFFICE BU	JILDING	i, 900 SW JACKSON STRI	09/30/2014			
5. City, Sta	te, Zip Code			8. Final Report	9. Report Frequency		
TOPEKA	, KS 66612					□ Yes	X Quarterly
	, 110 00011					X No	
10a. Projec	ct/Grant Period	10b. End	i Date:				
Start Da	te: 08/01/2013	07/31	./2016				
11. List th	e individual projects in y	our appro	oved Project Plan				
	Project Type (Capacity	,	Project Deliverable Quantity	Total Federal	Total Federal Funding Amount expended		Percent of Total Federal Funding
	Building, SCIP Update,		(Number & Indicator	Funding Amount	at the end of this reporting period		Amount expended
	Outreach, Training etc.)		Description)				
1	Stakeholder Meetings		804	d strong political		niekskop englendingspiel interació	
2	Broadband Conferences		0		Ali ing Marang Bara		
3	Staff Hires		0	0.5 2 65 15125 75 15116			
4 Contract Executions			0		or or or the pro-		
5 Governances Meetings		S	2		46 (\$1.46 (\$1.45))		
6	Education & Outreach		600		0.000 000 000 000		
Materials (flyers & handouts)		ndouts)			aid ann ag sán start		

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.

A lot of time was spent preparing for a statewide PSBN conference to broaden outreach information about FirstNet including direction and timeframes. Continued to attend stakeholder meetings and make as many contacts as possible.

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.

Not at this time.

Phase II Activities

N/A

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

We have been working with our FEMA regional 7 partners to enhance our outreach coordination. This has proven to be very beneficial for best practice effort.

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

We just opened up conversations with the University public safety departments which proved beneficial in realizing how they work with the community public safety officials and how they would utilize PSBN

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 .	.54	Provide oversight of all SLIGP project activities	No change
OEC Trainer	.54	Dissemination of SLIGP information to general public	No Change
OEC Trainer	.54	Dissemination of SLIGP information to general public	No change
Outreach Coordinator	1.0	Education & outreach of PSBN to general public	No change
Outreach Coordinator	1.0	Education & outreach of PSBN to general public	No change
Grant Administrator	1.0	Administer SLIGP grant	No change

Add Row

Remove Row

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 Federai Funds Allocated	Total Matching Funds Allocated	Project and % Assigned
TBD	Program Development Information Gathering Legal Assistance Assistance as Required		N	N	TBD	TBD	\$863,593	\$0	

Add Row

Remove Row

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

N/A

14. Budget Worksheet Columns 2, 3 and 4 must mate	ch your current pro	ect budget for the entire	award, which is th	e SF-424A on file.				
Only list matching funds that t	the Department of	Commerce has already ap	proved.					
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	\$481,500	\$267,300	\$748,800	\$106,878	\$92,087	\$198,965		
b. Personnel Fringe Benefits	\$198,756	\$109,353	\$308,109	\$41,866	\$34,689	\$76,555		
c. Travel	\$230,760	\$70,956	\$301,716	\$16,912	\$1,851	\$18,763		
d. Equipment \$0		\$0	\$0	\$0	\$0	\$0		
e. Materials/Supplies	\$9,750	\$2,589	\$12,339	\$8,092	\$0	\$8,092		
f. Subcontracts Total	\$863,593	\$0	\$863,593	\$0	\$0	\$0		
g. Other	\$16,431	\$0	\$16,431	\$5,311	\$0	\$5,311		
h. Total Costs	\$1,800,790	\$450,198	\$2,250,988	\$179,059	\$128,627	\$307,686		
i. % of Total	80%	20%	100%	58%	42%	100%		
15. Certification: I certify to t documents.	he best of my knov	vledge and belief that th	is report is correct	and complete for per	formance of activities for the pur	pose(s) set forth in the award		
16a. Typed or printed name a				16c. Telephone (area code, number, and extension) 785 296-7703				
Pamela Fink, CPM, Director-Office of Financial Management				16d. Email Address Pam.Fink@da.ks.gov				
16b. Signature of Authorized	Certifying-Official			16e. Date Report Submitted (month, day, year)				

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

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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.