	2. Award or Grant Number:	39MB-Control No. 0660-00-								
	4. EIN:	02-60000618								
Recipient Name New Hampshire Department of Safety						04/01/2019				
. Street Address	33 Hazen Drive	7. Reporting Period End Date: (MM/DD/YYYY)	03/31/2019							
. City, State, Zip Code	Concord, NH 03305				8. Final Report No	9. Report Frequency 0 Quarterly X				
0a. Project/Grant Period				(1) 在 A () 在 () () () () () () () () (
Start Date: (MM/DD/YYYY)	03/01/2018	10b. End Date: (MM/DD/YYYY)	02/29/2020		一种,					
1. List the individual projects in ye	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 Catego	Description of Milestone Category					
activities/Metrics for All Recipients	during the Reporting Quart	er stock a stock a second		NEW YORK STREET, AND THE PROPERTY OF STREET, S						
1	Governance Meetings	Yes	4	Actual number of governance, subcommittee, or working group meetings related t	to the NPSBN held during th	e quarter				
2	Individuals Sent to Broadband Conferences	Yes	1	Actual number of individuals who were sent to national or regional third-party conferences with a focus area or training track relate to the NPSBN using SLIGP grant funds during the quarter						
3	Convened Stakeholder Events	No	0	Actual number of events coordinated - or held using SLIGP grant funds during the quarter, as requested by FirstNet.						
4	Staff Hired (Full-Time Equivalent)(FTE)	No	0.00	Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal).						
5	Contracts Executed	No	0	Actual number of contracts executed during the quarter.						
6	Subrecipient Agreements Executed	No	0	Actual number of agreements executed during the quarter.						
7	Data Sharing Policies/Agreements Developed	No		Yes or No if data sharing policies and/or agreements were developed during this reporting quarter.						
8	Further Identification of Potential Public Safety Users	Yes		Yes or No if further identification of potential public safety users occurred during this reporting quarter. Yes or No if plans for future emergecy communications technology transitions occurred during this reporting quarter.						
9	Plans for Emergency Communications Technology Transitions	Yes								
10	Identified and Planned to Transition PS Apps & Databases	No		Yes or No if public safety applications or databases within the State or territory were identified and transition plans were developed this reporting quarter						
11	Identify Ongoing Coverage Gaps	Yes		Yes or No if participated in identifying ongoing coveage gaps using SLIGP funds during this reporting quarter.						
12	Data Collection Activities	No		(Opt-In and Opt-Out Post-SMLA Phase Only) Yes or No if participated in data collection activities as requested by FirstNet or following a documented data collection determination by Opt-Out (Post-SMLA) grantees.						
ctivities for Opt-Out States only in	the Pre-SMLA Phase during	the Reporting Quarter	FORTING STREET, ST.							
13	Stakeholders Engaged			Actual number of individuals reached via stakeholder meetings or events during th	ne quarter.					
14	Education and Outreach Materials Distributed In- Person			Actual number of materials distributed in-person during this quarter.						
15	Education and Outreach Materials distributed Electronically			Actual volume of hits or impressions to any website, e-newsletter, social media po quarter.	st, or other account support	ted by SLIGP during the				

.1.1 - Governance Meetings: I and April1st, 2019 during the	r each activity reported in Ques The Statewide Interoperability first quarter of 2019 with the F SAFECOM/NCSWIC Conference	Executive Committee met or irstNet Authority presenting.	n February 8th, 2019 v	les encountered and mitiga with presentations made b	ition strategies you y the FirstNet Auth	u have employed; nority. 2) The SIEC	planned major activitions's Data Communication	es for the next quarter; and s Working Group met Jan	ત્સ્વર્ધા કુકારા હતા. ત્યામ કરાયા કુકારા
1.9 Plans for Emergency Com	al Public Safety Users: NH continum nmunications Technology Transverage Gaps. Numerous commu	sitions: NH is currently collab	orating with Mutualin	nk to address a statewide p	rogram.	ns have occurred	in the North Country Is	eaving the southwestern	partian of NH mast
acking in coverage.	verage Gaps. Numerous commu	unities are testing AT&T conn	ectivity with farnishe	ed Alect test devices. Signif	icaut coverage gar	ns nave occurred	m the North Country, k	aving the southwestern	portion of NA most
2. Personnel									
	iclude all staff that have contrib	buted time to the project with	current quarter's util			ed by the state no	t contractors. Please do	not remove individuals fr	
Job Title	FTE%				ect (s) Assigned				Change
WIC/SPOC	40%	Management and coordin		tactivities					no change
rogram Specialist I	10%	Financial / Performance R Coordination of grant pro							no change add
Togram Specialist I	10%	Coordination of grant pro	ject activities						ado
25 Mary Alan Jana Jana Jana Jana Jana Jana Jana J									
ZD. Marrative description of a	any staffing challenges, vacanc	ies, or changes.							
3. Contractual (Contract and	/or Subracialants		_						
	de all contractors. The totals for	rom this table should equal t	he "Contractual" in O	Question 14f.					
Name		tract 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
endor TBD	MCPTT solution data gat	hering	Contract	N	N			\$380,000.00	\$0.00
			<u> L</u>	<u> </u>					
	y challenges, updates, or chang		or subrecipients.						
n RFP is in the planning stage	e but has not been released ye	t.							
		<u></u>							

14. Budget Worksheet									OMB Control No. 0660-0
Columns 2, 3 and 4 must match yo			s the SF-424A on file.						Expiration Date: 01/31/2
Only list matching funds that the D	Department of Commerce has	already approved.			1				
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	\$177,051.00	\$135,798.00	\$312,849.00	\$177,051.00	\$135,798.00	\$312,849.00	\$22.60	\$21,027.94	\$21,050.5
b. Personnel Fringe Benefits	\$86,955.00	\$21,755.00	\$108,710.00	\$86,955.00	\$21,755.00	\$108,710.00	\$4.44	\$2,159.43	\$2,163.8
c. Travel	\$12,544.00	\$17,406.00	\$29,950.00	\$12,544.00	\$17,406.00	\$29,950.00	\$0.00		\$0.0
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.0
e. Materials/Supplies	\$7,800.00	\$418.00	\$8,218.00	\$7,800.00	\$418.00	\$8,218.00	\$199.94	\$823.00	\$1,022.9
f. Contractual	\$380,000.00	\$0.00	\$380,000.00	\$380,000.00	\$0.00	\$380,000.00	\$0.00		\$0.0
g. Other	\$4,299.00	\$0.00	\$4,299.00	\$4,299.00	\$0.00	\$4,299.00	\$22.66		\$22.6
h. Indirect	\$31,185.00	\$0.00	\$31,185.00	\$31,185.00	\$0.00	\$31,185.00	\$4.89		\$4.8
i. Total Costs	\$699,834.00	\$175,377.00	\$875,211.00	\$699,834.00	\$175,377.00	\$875,211.00	\$254.53	\$24,010.37	\$24,264.9
j. Proportionality Percent	79.96%	20.04%	100.00%	79.96%	20.04%	100.00%	1.05%	98.95%	100.009
15. Certification: I certify to the be	est of my knowledge and belie	that this report is correct	t and complete for pe	erformance of activities for	the purpose(s) se	et forth in the awa	ard documents.		
16a. Typed or printed name and title of Authorized Certifying Official: Pamela Urban-Morin, Grants Administrator * Revised Va. J.S. D. V 12 - 19							16c. Telephone (area code, number, and extension)	603-271-7663	
16b. Signature of Authorized Certifying Official:						16d. Email Address:	Pamela. Urban-Morin@dos.nh.gov		
/Y/MY/	A Y Y \(\lambda \)	^ /					Date: (0 / 2 1) 16	04/01/2019	

Public Burden Statement: 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 number. Public reporting burden for this collection of information is estimated to average 12.5 hours per response. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Michael Dame, Program Director, State and Local Implementation Grant Program, National Telecommunications and Information Administration, U.S. Department of Commerce, 1401 Constitution Avenue, NW, Room 4078, Washington, DC 20230.