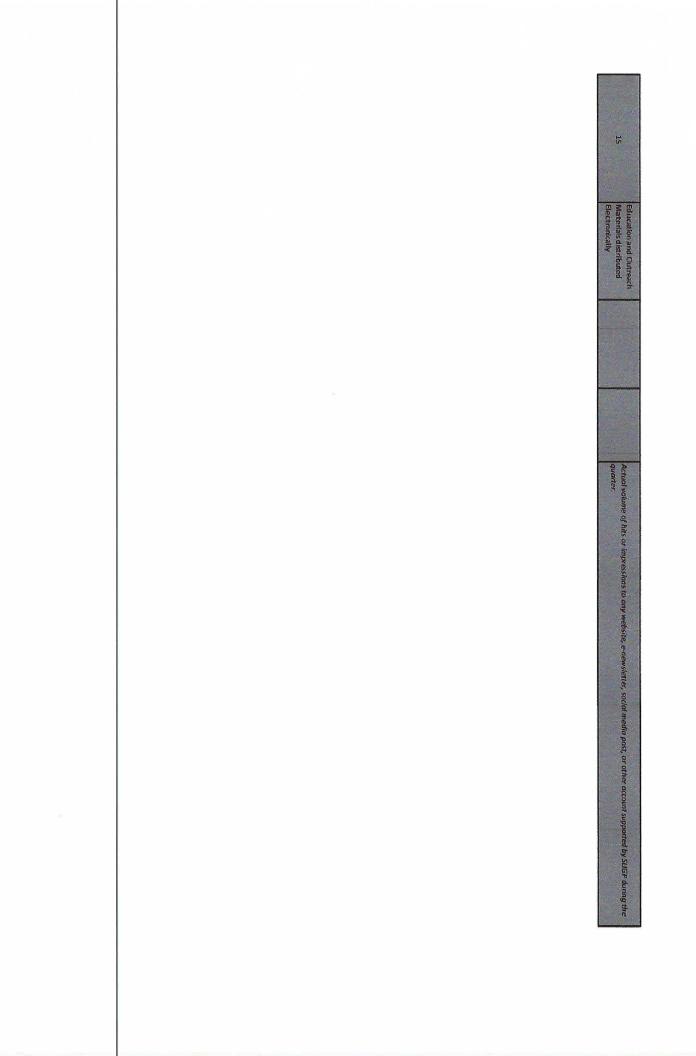
	2. Award or Grant Number: 4. EIN:	51-10-S18051 54-6002286								
	4. EIN: 54-600228 5. Report Date 07/24/2020									
. Recipient Name	ecipient Name Virginia Department of Emergency Management									
3. Street Address	9 711 Farrar Ct	(MM/DD/YYY) 07/24/2020 7. Reporting Period End Date: 06/30/2020 (MM/DD/YYY) 8. Final Report 9. Report Frequen								
. City, State, Zip Code Richmond, VA, 23236						9. Report Frequency Quarterly X				
.Oa. Project/Grant Period	with the second s				No 🕢					
Start Date: (MM/DD/YYYY)	03/01/2018	10b. End Date: (MM/DD/YYYY)	03/31/2021	An and the Same and Same						
1. List the individual projects in	your 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 Recipien	ts during the Reporting Quart	er			Service allocation					
1	Governance Meetings	No	0	Actual number of governance, subcommittee, or working group meetings related to t	he NPSBN held during th	e quarter				
2	Individuals Sent to Broadband Conferences	No	D	Actual number of Individuals who were sent to national or regional third-party confer to the NPSBN using SLIGP grant funds during the quarter	ences with a focus area	or training track rela				
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.							
9	Plans for Emergency Communications Technology Transitions	NO		Yes or No if plans for future emergecy communications technology transitions occurre	gy transitions occurred during this reporting quorter.					
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 this reporting quarter							
11	Identify Ongoing Coverage Gaps	No	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 First a documented data collection determination by Opt-Out (Post-SMLA) grantees.							
an	1Stakeholders Friegeets			A sticil and the book of the state of the st	inder "	7407 75 AM				
	E a tri printeac	25	The second s		A REAL PROPERTY AND A REAL					



11a. Narrative description for each	activity reported in Question 11 for this quar	rter: any challenges or obstar	les encountered and mitig	tion strategies vo	have employed n	lanned major activiti	es for the next quarter an	any additional project	
	Virginia's Governor declared a State of Emer	***************************************							
	Governor suspended all public gatherings of 1							Jemergency response	
status. As of mid warch virginia s o	Sovernor suspended all public gatherings of 1	to or more paticipants; and res	stricted state personnel tra	vel. At this time al	I SLIGP 2.0 related a	ctivities are deferred	•		
12. Personnel							The Company of Sectors 1		
and a second	all staff that have contributed time to the pro	oject with current quarter's ut	ilization. Please only includ	e FTE staff employ	ed by the state not	contractors. Please d	o not remove individuals f	rom this table.	
Job Title	FTE%	ojeet min current quarter 5 ui	and the second se	ject (s) Assigned	cu by the blute hot	contractoror recurso a	o not remote manual of	Change	
300 1116	112/0	rivjeti (a) Assigned						chunge	
1	Project Coordina	ation, daily operations, project	reporting						
Interoperability Program Manager	0%								
Grant Manager	0% Project Coordina	ation, grants management, pro	ject and financial reporting			a contraction of the second		Vacant	
And the second second second second									
12h Norrative description of any st	affing challenges, vacancies, or changes.						Construction of the second		
The current report reflects an incre-	ase in salary and fringe charges for the Intero	perability Program Manager d	lue to standard payroll cod	ing. Those charges	will be reallocated	through an internal p	payroll adjustment, which	will be reflected in next	
quarters reporting.									
daniers reporting.									
13. Contractual (Contract and/or Su	braciniants)					and the second		din a sistering and a single state of the sing	
	contractors. The totals from this table should	d aqual the "Contractual" in O	unction 14f						
15a. contractual Table – Include all	T		uestion 141.	L Contract			Total Federal Funds	Total Matching Funds	
Name	Subcontract Purpose	Туре	RFP/RFQ issued (Y/N)	Contract	Start Date	End Date			
		(Contract/Subrec.)		Executed (Y/N)			Allocated	Allocated	
Unknown	Program Outreach Coordinator	Contract	N				\$62,400.00		
Unknown	Program Admin Support Tech	Contract	N				\$24,960.00		
VA APCO	Virginia Interoperability Conference Support	Subcontract	N				\$15,000.00		
Unknown	Program Technical Support	Subcontract	N				\$58,125.00		
							000,120,000		
13b. Narrative description any chail	enges, updates, or changes related to contrac	cts and/or subrecipients.					and the second distance of the second distanc		

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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	\$343,490.00	\$0.00	\$343,490.00	\$343,490.00	\$0.00	\$343,490.00	\$113,258.26	\$567.41	\$113,825.6
b. Personnel Fringe Benefits	\$116,787.00	\$0.00	\$116,787.00	\$116,787.00	\$0.00	\$116,787.00	\$29,411.26	\$0.00	\$29,411.20
c. Travel	\$54,560.00	\$0.00	\$54,560.00	\$54,560.00	\$0.00	\$54,560.00	\$977.82	\$0.00	\$977.8
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$11,400.00	\$0.00	\$11,400.00	\$11,400.00	\$0.00	\$11,400.00	\$18,427.57	\$0.00	\$18,427.5
f. Contractual	\$427,960.00	\$0.00	\$427,960.00	\$427,960.00	\$0.00	\$427,960.00	\$0.00	\$0.00	\$0.00
g. Other	\$0.00	\$238,550.00	\$238,550.00	\$0.00	\$238,550.00	\$238,550.00	\$0.00	\$25,938.77	\$25,938.7
h. Indirect	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
i. Total Costs	\$954,197.00	\$238,550.00	\$1,192,747.00	\$954,197.00	\$238,550.00	\$1,192,747.00	\$162,074.91	\$26,506.18	\$188,581.0
i. Proportionality Percent	80.00%	20.00%	100.00%	80.00%	20.00%	100.00%	85.94%	14.06%	100.009
15. Certification: I certify to the be	st of my knowledge and belief	that this report is correct	and complete for pe	rformance of activities for t	the purpose(s) set	forth in the awa	d documents.	CONTRACTOR OF STREET	
16a. Typed or printed name and title of Authorized Certifying Official:							16c. Telephone (area	804-267-7600	
Cheryl Adkins							code, number, and extension)		
16b. Signature of Authorized Certi	fying Official:						16d. Email Address:	cheryl.lee@vdem.virgini	a.gov
The United							Date:	07/30/2020	
		revis	ed-9/4						
- Char	<u>III in</u>				nformation unless		Date:	07/30/2020	