	U.S. Department of Commerce	2. Award or Grant Number			
		51-10-S13051			
	Performance Progress Report	4. EIN			
		54-6002286			
1. Recipient Name: Virginia Depa	rtment of Emergency Management	6. Report Date (10/30/2014)			
3. Street Address: 10501 Trade Co	ourt	7. Reporting Period End Date: 06/30/2014			
5. City, State, Zip Code		8. Final Report	9. Report Frequency		
Richmond, VA 223236			□ Yes	X Quarterly	
			X No		
10a. Project/Grant Period	10b. End Date: (07/31/2016)		•		
Start Date: (08/01/2013)					
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11. List the individual projects in your approved 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 meeting	126			
2	Hiring Personnel	0			
3	Broadband Conferences	0			
4	Contract Executions	0			
5	Education and Outreach	0			
	Materials				

- 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.
 - 1. Stakeholder Meetings During this quarter the SWIC attended the Regional Preparedness Advisory Committee for Interoperability across the state. During these meetings the SEIC briefed the stakeholders on FirstNet, SCIP update, and new administration during this time period.
 - 2. Hiring Personnel An Interim SWIC has been appointed by the current Administration. There continues to be a delay in hiring of additional staff until the new SWIC is hired.
 - 3. Broadband Conferences -
 - 4. Contract Executions As stated in item 2, the administration will delay on making any contractual decisions until the new SWIC is hired.
 - 5. Education and Outreach Materials -

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.

1. None at this time

11c. Provide any	y other information that v	would be usefu	l to NT	IA as it asse	esses this proj	ject's progre	ss.			
1. None at this time										
11d. Describe a	ny success stories or best	practices you h	nave id	entified. Plo	ease be as spe	ecific as poss	ible.			
1. None	at this time				•	•				
12. Personnel										
12a. If the proje	ect is not fully staffed, des	cribe how any	lack of	staffing ma	y impact the	project's tin	ne line and	when the project wi	l be fully staffed.	
1. The p	roject is not fully staffed o	luring this quar	ter. At	this time t	his should no	t impact the	program.			
12b. Staffing Ta	able									
Job Title			FTE %	6			Project(s)	Assigned		Change
SWIC			50%	PSBN, F	irstNet,					
					Add Row	Remov	ve Row			
13. Subcontract	s (Vendors and/or Subred	cipients)								
13a. Subcontrac	cts Table – Include all sub	contractors. Th	ne total	s from this	table must e	qual the "Su	bcontracts	Total" in Question 14	lf.	
Name	Subcontract Purpose	Туре		RFP/RFQ	Contract	Start	End	Total Federal	Total Matching	Project and % Assigned
	,	(Vendor/Subr	ec.)	Issued	Executed	Date	Date	Funds Allocated	Funds Allocated	
		, ,	1	(Y/N)	(Y/N)					
Data Collection	To collect information from stakeholders for PSBN	Vendor		N	N			\$280,000		
Project Manager/Subj ect Matter Experts	Assist in development of planning for est of NPSBN	Vendor		N	N			\$1,147,380		
Regional Coordination/ Outreach/Offi ce Mgr	Organize stakeholder meetings; maintain website and awareness	Secretariat Of of Public Safe and Homelan Security	ty	Y	Y	10/1/20 13	6/30/1 5	\$402,480		
Interop Conference	Annual stakeholder conference , tracks will include	AAPCO		Υ	Y	10/1/20 13	12/201 5	\$150,000		

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13b. Describe any challenges encountered with vendors and/or subrecipients.										
14. Budget Worksheet										
Columns 2, 3 and 4 must mate				e SF-424A on file.						
Only list matching funds that t	he Department of Co	ommerce has already ap	proved.							
		T	T =	T =	T					
Project Budget Element (1)	Federal Funds	Approved Matching	Total Budget	Federal Funds	Approved Mat	-	Total Funds Expended (7)			
	Awarded (2)	Funds (3)	(4)	Expended (5)	Expende	ed (6)				
a. Personnel Salaries	\$228,000		\$228,000	\$26,814.7			\$26,814.78			
b. Personnel Fringe Benefits	\$82,609		\$82,609	\$10,426.4			\$10,426.40			
c. Travel	\$105,480		\$105,480	\$3,565.6			\$3,565.66			
d. Equipment	\$0		\$0	\$0.0	0		\$0.00			
e. Materials/Supplies	\$29,401		\$29,401	\$0.0			\$0.00			
f. Subcontracts Total	\$2,167,060		\$2,167,060	\$49197.1			\$49,197.16			
g. Other	\$144,300	689,213	\$833,513	\$0.0		\$13,907.83	\$13,907.83			
h. Total Costs	\$2,756,850	689,213	\$3,446,063	\$90,004.0	0	\$13,907.83	\$103,911.83			
i. % of Total	80%	20%	100%	3 '		15%	85%			
15. Certification: I certify to t	ne best of my knowl	edge and belief that this	report is correct	and complete for	performance of activi	ties for the purpo	se(s) set forth in the award			
documents.										
16a. Typed or printed name a	nd title of Authorize	ed Certifying Official		16c. Telephone (area code, number, and extension)						
Cheryl Lee				804 897 9760						
Cheryree			-	16d. Email Address						
Grants Director			100. Littali Addi C33							
Grants Birector			Cheryl.Lee@vdem.virginia.gov							
			Cite yinee & vacini vii ginia. 50 v							
16b. Signature of Authorized	Certifying Official		16e. Date Report Submitted (month, day, year)							
, and the second	, 0		10/31/2014							
Cheryl J. Lee				•						
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