

U.S. Department of Commerce Performance Progress Report				2. Award or Grant Number:	54-10-S13054
				4. EIN:	55-600147
1. Recipient Name	WV Dept of Homeland Security and Emergency Management			6. Report Date (MM/DD/YYYY)	7/26/2016
3. Street Address	1900 Kanawha Blvd East Room EB80			7. Reporting Period End Date: (MM/DD/YYYY)	06/30/2016 Qrt 12
5. City, State, Zip Code	Charleston, WV 25311			8. Final Report	9. Report Frequency
				Yes <input type="checkbox"/>	Quarterly <input checked="" type="checkbox"/>
				No <input type="checkbox"/>	
10a. Project/Grant Period					
Start Date: (MM/DD/YYYY)	9/1/2013	10b. End Date: (MM/DD/YYYY)	8/31/2018		
11. List the individual projects in your approved Project Plan					
	Project Type (Capacity Building, SCIP Update,	Project Deliverable Quantity (Number & Indicator Description)	Description of Milestone Category		
1	Stakeholders Engaged	352	<i>Actual number of individuals reached via stakeholder meetings during the quarter</i>		
2	Individuals Sent to Broadband Conferences		<i>Actual number of individuals who were sent to third-party broadband conferences using SLIGP grant funds during the quarter</i>		
3	Staff Hired (Full-Time Equivalent)(FTE)		<i>Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal)</i>		
4	Contracts Executed		<i>Actual number of contracts executed during the quarter</i>		
5	Governance Meetings	6	<i>Actual number of governance, subcommittee, or working group meetings held during the quarter</i>		
6	Education and Outreach Materials Distributed	2725	<i>Actual volume of materials distributed (inclusive of paper and electronic materials) plus hits to any website or social media account supported by SLIGP during the quarter</i>		
7	Subrecipient Agreements Executed		<i>Actual number of agreements executed during the quarter</i>		
8	Phase 2 - Coverage	Stage 4/5	<i>For each Phase 2 milestone category, please provide the status of the activity during the quarter:</i> <ul style="list-style-type: none"> • Stage 1 - Process Development • Stage 2 - Data Collection in Progress • Stage 3 - Collection Complete; Analyzing/Aggregating Data • Stage 4 - Data Submitted to FirstNet • Stage 5 - Continued/Iterative Data Collection • Stage 6 - Submitted Iterative Data to FirstNet 		
9	Phase 2 – Users and Their Operational Areas	Stage 4/5			
10	Phase 2 – Capacity Planning	Stage 4/5			
11	Phase 2 – Current Providers/Procurement	Stage 4/5			
12	Phase 2 – State Plan Decision	N/A			
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.					
We distribute: a monthly email, we also post it to our website we email FirstNet Weekly updates to all RIC's Regional Interoperable Committees, our governance body(SIEC), 911 directors, Emergency Managers We distributed a FirstNet flyer to all participants at our WV 911 Expo (700) and emailed it to the above groups We distribute news worthy articles to the above groups via email and in our newsletters					
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.					

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

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

We distributed a FirstNet flyer to all participants at our WV 911 Expo (700) and emailed it to RIC's Regional Interoperable Committees, our governance body(SIEC), 911 directors, Emergency Managers. We work on keeping "FirstNet" updates to all stakeholders and decision makers

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 - Please include all staff that have contributed time to the project. Please do not remove individuals from this table.

Job Title	FTE%	Project (s) Assigned	Change
SWIC GE McCabe	90%	Supervising and supporting activities related to technical considerations, outreach, education, phase 2 planning, staff activities, reporting	
Technical Support Advisor Mark Smith Patick McGue	40%	Provide technical support to the Broadband Committee, SPOC and SWIC. Administering and monitoring the Broadband traffic on the SIRN Broadband Network	
GIS Analyst Project Manager Lisa Paxton	100%	Oversee grant administrative support, outreach, assist with phase 2 planning, plan meetings and conferences	
Project Manager Tommy Dingess	5%	Oversee grant administrative support	
Data Collection Support Fred Mixer	100%	Assist with FirstNet Data Collection efforts	

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
	Legal Services	Vendor	N	N		9/30/2016	\$22,500.00	\$0.00
Lisa Paxton	Program Manager	Vendor	Y	Y		9/30/2016	\$25,200.00	\$0.00
	Support Assistant	Vendor	N	N		9/30/2016	\$100,000.00	\$0.00
Fred Mixer	FirstNet Data Collection Support	Vendor	N	Y	10/21/2015	1/8/2016	\$42,000.00	\$0.00
	Broadband SME	Vendor	N	N		9/30/2016	\$136,500.00	\$0.00

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

14. Budget Worksheet

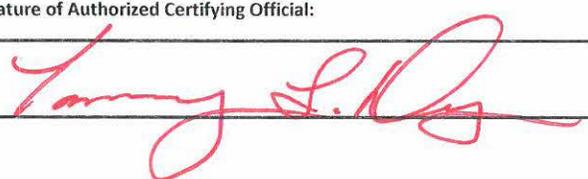
Columns 2, 3 and 4 must match your current project budget for the entire award, which is the SF-424A on file.

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	\$435,000	\$170,520	\$605,520	\$152,401.03	\$115,657.00	\$268,058.03
b. Personnel Fringe Benefits	\$130,500	\$0	\$130,500	\$31,076.00	\$0.00	\$31,076.00
c. Travel	\$122,428	\$11,014	\$133,442	\$18,335.87	\$13,121.00	\$31,456.87
d. Equipment	\$0	\$0	\$0	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$25,650	\$7,200	\$32,850	\$13,294.52	\$811.00	\$14,105.52
f. Subcontracts Total	\$326,200	\$0	\$326,200	\$31,271.94	\$0.00	\$31,271.94
g. Other	\$81,720	\$92,273	\$173,993	\$401.55	\$42,687.00	\$43,088.55
h. Indirect			\$0	\$0.00	\$0.00	\$0.00
i. Total Costs	\$1,121,498	\$281,007	\$1,402,505	\$246,781	\$172,276	\$419,057
j. % of Total	80%	20%	100%	59%	41%	100%

15. Certification: I certify to the best of my knowledge and belief that this report is

\$172,276.00

<p>16a. Typed or printed name and title of Authorized Certifying Official:</p>	<p>16c. Telephone (area code, number, and extension)</p>	<p>(304) 558-5380</p>
<p>Tommy Dingess, Director of Administration, WVDHSEM</p>	<p>16d. Email Address:</p>	<p>tommy.l.dingess@wv.gov</p>
<p>16b. Signature of Authorized Certifying Official:</p> 	<p>Date:</p>	<p>7-27-16</p>