

U.S. DEPARTMENT OF COMMERCE

Performance Progress Report

2. Award or Grant Number

12-50-M09034

4. Report Date (MM/DD/YYYY)

10-21-2014

1. Recipient Name

Florida Department of Management Services

6. Reporting Period End Date:

09-30-2014

3. Street Address

4030 Esplanade Way, Suite 180,

5. City, State, Zip Code

Tallahassee, FL 32399

7a. Project / Grant Period
Start Date: (MM/DD/YYYY)

12-01-2009

7b. End Date: (MM/DD/YYYY)

01-31-2015

8. Designated Entity on Behalf of:

State of Florida

9. List the individual projects in your approved project plan

	Project Type (Data Collection, Capacity Building, Technical Assistance, etc.)	Project Name (if different from Project Type)	Total Federal Funding Amount	Total Federal Funding Amount expended at the end of this reporting period	Percent of Total Federal Funding amount expended
1	Data Collection	Mapping	4,334,802	3,065,204	71%
2	Technical Assistance	E-rate/Grants	2,416,226	1,997,175	83%
3	Planning Teams	N/A	1,566,000	1,553,778	99%
4	Capacity Building	Library	560,000	559,980	100%
5	N/A				
6	N/A				
			\$8,877,028	\$7,176,137	81%

10. Personnel

10a. If the project is not fully staffed, describe how any lack of staffing may impact the project's timeline and when the project will be fully staffed.

Julie Gowen continues in the Director position with assistance from the previous Director, Tabitha Hunter as needed. Julie Gowen continues to work on the Mapping deliverable, meeting the grant requirements for data collection. Near the end of the quarter, two Technical Assistance personnel, Lauren Harris and Lyell Walker, were moved to FTE under the State of Florida to provide E-rate assistance to Florida Schools and Libraries. The E-rate assistance team continue to support deliverables meeting the grant objectives. All projects are meeting scheduled timelines and will not be impacted by staffing changes.

10b. Staffing Table									
Job Title				FTE %	Project(s) Assigned			Change	
DMS State of Florida Director				100	All			No Change	
DMS State of Florida Mapping Project Manager				100	Mapping			No Change	
DMS State of Florida E-rate Coordinator				100	Technical Assistance - E-rate/Grant			No Change	
DMS State of Florida E-rate Coordinator				100	Technical Assistance - E-rate/Grant			No Change	
DMS State of Florida E-rate Coordinator				100	Technical Assistance - E-rate/Grant			No Change	
DMS State of Florida E-rate Coordinator				100	Technical Assistance - E-rate/Grant			No Change	
DMS State of Florida Grants Assistance Manager				100	Technical Assistance - E-rate/Grant			No Change	
DMS Grants Writer				100	Technical Assistance - E-rate/Grant			No Change	
					Add Row			Remove Row	
11. Subcontracts									
11a. Subcontracts Table - Include all subcontractors. The totals from this table equal the "Subcontracts Total" from the Program Budget Worksheet (Q. 12, Column 2, 3, and 4)									
Name	Subcontract Purpose	RFP Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated	Project and % Assigned (Example: Data Collection 75)	
Connected Nation	Data Collection	Yes	Yes	12/27/2010	12/31/2011	1,774,449	11,605	Mapping	100
Regional Planning Council Interim Mapping	Data Collection	No	Yes	01/02/2012	12/03/2012	421,040	0	Mapping	100
BroadMap (Current Mapping Contractor)	Data Collection	Yes	Yes	10/15/2012	11/30/2014	525,148	0	Mapping	100
University of Florida	Planning Teams	Yes	Yes	06/22/2010	06/30/2012	500,000	0	Planning	100
Contracted Grad Students	Technical Assistance	Yes	Yes	02/06/2012	11/30/2014	249,600	80,000	Grants	100
Department of State Libraries	Capacity Building	Yes	Yes	07/19/2011	07/19/2012	560,000	0	Library	100
Paul Consulting (Portal Development)	Planning Teams	Yes	Yes	09/25/2012	10/31/2013	76,000	0	Planning	100
Other	Data Collection	No	No	10/30/2012	01/31/2015	955,132	0	Mapping	100

Regional Planning Council	Planning Teams	Yes	Yes	07/19/2011	10/31/2013	990,000	265,000	Planning	100	
					Add Row	Remove Row				
<p>11b. Describe any challenges encountered with vendors or subrecipients.</p> <p>Our vendors are performing according to expectation.</p>										

12. Budget worksheet						
Columns 2, 3, and 4 will match your current project budget for your entire award, which is the SF-424A on file. Only list matching funds that the Department of Commerce has already approved.						
Project Budget Element	Federal Funds Awarded	Approved Matching Funds	Total Budget	Federal Funds Expended	Approved Matching Funds Expended	Total Funds Expended
Personnel Salaries	\$2,534,876	\$677,397	\$3,212,273	\$2,127,988	\$935,510	\$3,063,498
Personnel Fringe Benefits	\$195,343	\$224,151	\$419,494	\$77,126	\$334,981	\$412,107
Travel	\$83,440	\$0	\$83,440	\$45,400	\$0	\$45,400
Equipment	\$0	\$11,328	\$11,328	\$0	\$0	\$0
Materials / Supplies	\$0	\$5,544	\$5,544	\$0	\$50	\$50
Subcontracts Total	\$6,051,369	\$356,605	\$6,407,974	\$4,925,114	\$510,764	\$5,435,878
Construction	\$0	\$0	\$0	\$0	\$0	\$0
Other	\$12,000	\$1,602,300	\$1,614,300	\$510	\$1,096,019	\$1,096,529
Total Direct Costs	\$8,877,028	\$2,877,325	\$11,754,353	\$7,176,138	\$2,877,324	\$10,053,462
Total Indirect Costs	\$0	\$0	\$0	\$0	\$0	\$0
Total Costs	\$8,877,028	\$2,877,325	\$11,754,353	\$7,176,138	\$2,877,324	\$10,053,462
% of Total	76	24	100	71	29	100

13. Hardware / Software
13a. List any hardware/software purchased during this reporting period. N/A
13b. Please note any hardware/software that has yet to be purchased and explain why it has not been purchased. N/A

14. SBI PPR Project Attachment (Skip question 14b if Data Collection is your only project).
14a. Complete a SBI PPR Project Data Collection Attachment and attach it to the PPR.
14b. Complete a SBI PPR Attachment for each additional funded project and attach it to the PPR.

15. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purpose set forth in the award documents.

15a. Typed or Printed Name and Title of Authorized Certifying Official

Julie Gowen

15c. Telephone
(area code, number, and extension)

15d. Email Address
Julie.gowen@dms.myflorida.com

15b. Signature of Authorized Certifying Official

Submitted Electronically

15e. Date Report Submitted
(MM/DD/YYYY)

10-30-2014