U.S. DEPARTMENT OF COMMERCE

Performance Progress Report

2. Award or Grant Number
39-50-M09039

4. Report Date (MM/DD/YYYY)
07-08-2013

1. Recipient Name
Ohio Office of Information Technology - DAS

6. Reporting Period End Date:
06-30-2013

3. Street Address
30 E. Broad Street, 39th Floor,

5. City, State, Zip Code
Columbus, OH 43215-3414

7a. Project / Grant Period Start Date: (MM/DD/YYYY)
12-20-2009

7b. End Date: (MM/DD/YYYY)
12-19-2014

8. Designated Entity on Behalf of:
State of Ohio

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	Data Collection, Mapping & Related Activities	3,267,111	1,969,207	60%
2	Capacity Building	N/A	1,859,992	1,056,906	57%
3	Technical Assistance	N/A	1,372,294	743,604	54%
4	Address File	N/A	526,365	72,500	14%
5	N/A	N/A	0	0	
6	N/A	N/A	0	0	
			$7,025,762	$3,842,217	55%

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.

N/A

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10b. Staffing Table

Job Title	FTE %	Project(s) Assigned	Change
GIS Intern	100	data validation, research & connection	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)	
Connect Ohio	Data Collection	No	Yes	12/19/2007	06/30/2015	3,069,243	714,937	data collection, mapp	40
Connect Ohio	Capacity Building	No	Yes	12/19/2007	06/30/2015	1,846,392	563,772	capacity building	30
Connect Ohio	Technical Assistance	No	Yes	12/19/2007	06/30/2015	1,358,572	478,000	technical assistance	30
Noble County	Address File	No	Yes	06/25/2012	12/31/2012	49,999	0	address file	100
Hocking County	Address File	No	Yes	06/11/2012	10/01/2012	45,000	0	address file	100
Various	Address File	No	Yes	12/08/2011	12/19/2012	28,881	0	various - address file	100
Various	Address File	No	No	01/01/2013	06/30/2014	402,485	0	various - address file	100

Add Row Remove Row

11b. Describe any challenges encountered with vendors or subrecipients.

N/A

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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	$59,196	$0	$59,196	$9,404	$0	$9,404
Personnel Fringe Benefits	$20,718	$0	$20,718	$2,002	$0	$2,002
Travel	$0	$0	$0	$0	$0	$0
Equipment	$0	$0	$0	$0	$0	$0
Materials / Supplies	$0	$0	$0	$0	$0	$0
Subcontracts Total	$6,800,572	$1,756,709	$8,557,281	$3,812,384	$1,362,864	$5,175,248
Construction	$0	$0	$0	$0	$0	$0
Other	$145,276	$0	$145,276	$18,427	$0	$18,427
Total Direct Costs	$7,025,762	$1,756,709	$8,782,471	$3,842,217	$1,362,864	$5,205,081
Total Indirect Costs	$0	$0	$0	$0	$0	$0
Total Costs	$7,025,762	$1,756,709	$8,782,471	$3,842,217	$1,362,864	$5,205,081
% of Total	80	20	100	74	26	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.

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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 Katrina Flory Administrator	15c. Telephone (area code, number, and extension) 614-995-5466 15d. Email Address katrina.flory@oit.ohio.gov
15b. Signature of Authorized Certifying Official Submitted Electronically	15e. Date Report Submitted (MM/DD/YYYY) 07-29-2013

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