

U.S. Department of Commerce Performance Progress Report				2. Award or Grant Number:	60-10-S13060
				4. EIN:	97-0000676
1. Recipient Name	AMERICAN SAMOA DEPARTMENT OF HOMELAND SECURITY			6. Report Date (MM/DD/YYYY)	7/31/2017
3. Street Address	P.O. BOX 4567			7. Reporting Period End Date: (MM/DD/YYYY)	6/30/2017
5. City, State, Zip Code	PAGO PAGO, AS 96799			8. Final Report	9. Report Frequency
				Yes <input type="checkbox"/>	Quarterly <input checked="" type="checkbox"/>
				No <input checked="" type="checkbox"/>	
10a. Project/Grant Period					
Start Date: (MM/DD/YYYY)	9/1/2013	10b. End Date: (MM/DD/YYYY)	2/28/2018		
11. List the individual projects in your approved Project Plan					
	Project Type (Capacity Building, SCIP Update, etc.)	Project Deliverable Quantity (Number & Indicator Description)	Description of Milestone Category		
1	Stakeholders Engaged	21+	Actual number of individuals reached via stakeholder meetings during the quarter		
2	Individuals Sent to Broadband Conferences	0	Actual number of individuals who were sent to third-party broadband conferences using SLIGP grant funds during the quarter		
3	Staff Hired (Full-Time Equivalent)(FTE)	0	Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal)		
4	Contracts Executed	0	Actual number of contracts executed during the quarter		
5	Governance Meetings	1	Actual number of governance, subcommittee, or working group meetings held during the quarter		
6	Education and Outreach Materials Distributed	21	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		
7	Subrecipient Agreements Executed	0	Actual number of agreements executed during the quarter		
8	Phase 2 - Coverage	Stage 4	For each Phase 2 milestone category, please provide the status of the activity during the quarter: <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			
10	Phase 2 - Capacity Planning	Stage 4			
11	Phase 2 - Current Providers/Procurement	Stage 3			
12	Phase 2 - State Plan Decision	Stage 1			
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.					
<p>April 2017 activities included Partnership Announcement conference call with FirstNet and AT&T; subsequent in person meeting with RIX OCONUS Consultation lead to discuss upcoming visit by AT&T Team on Island. May 2017 attended FirstNet SPOC webinar; held meeting of the Territorial Emergency Communications Committee Workgroup to discuss awarding of contract to AT&T, aspects of the Plan upon its release on the portal and other related matters pertinent to the FirstNet Program; and met with AT&T representative and FirstNet RIX OCONUS Consultation Lead to discuss upcoming visit by the AT&T Technical Team and meetings with the two local service providers. June 2017 attended the State Plan Kick Off Meeting held in Dallas, TX with a local team of four individuals comprising of the ASG American Samoa Telecommunications Authority (ASTCA), Office of Procurement, ASDHS technician and SPOC. Final activity in June 2017 was the scheduled quarterly SLIGP conference call with federal grantor partners.</p>					
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.

ASDHS leadership and program management envisions FirstNet activities to take on a more productive momentum in the next quarter as a result of successful actions toward recruitment of competent and creative individuals that will effect positive changes within the program. These actions or activities will be reflected in the next quarter PPR.

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

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.

Not having a full time program coordinator and technical team will inhibit the ability of the Department to deliver on some of the program activities necessary to elevate the territories progress to a more productive level. However, the r

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	0	Duties of the SWIC are performed collaterally by the Deputy Director of ASDHS.	
SLIGP Program Coordinator	0	Coordinate and manage the program and all its related activities including the compilation and timely submission of the required PPR.	
Technical/Administrative Support Staff	0	Provide administrative/technical support to the program.	
Technical/Administrative Support Staff	0	Provide administrative/technical support to the program.	

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

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	\$166,231.00	\$0.00	\$166,231.00	\$138,373.62		\$138,373.62
b. Personnel Fringe Benefits	\$33,326.00	\$0.00	\$33,326.00	\$22,444.92		\$22,444.92
c. Travel	\$155,891.00	\$0.00	\$155,891.00	\$111,215.97		\$111,215.97
d. Equipment	\$7,950.00	\$0.00	\$7,950.00	\$7,950.00		\$7,950.00
e. Materials/Supplies	\$24,797.00	\$0.00	\$24,797.00	\$25,090.85		\$25,090.85
f. Subcontracts Total	\$46,446.00	\$0.00	\$46,446.00	\$6,965.81		\$6,965.81
g. Other	\$20,802.00	\$0.00	\$20,802.00	\$9,076.96		\$9,076.96
h. Indirect	\$47,487.00	\$0.00	\$47,487.00	\$40,274.78		\$40,274.78
i. Total Costs	\$502,930.00	\$0.00	\$502,930.00	\$361,392.91	\$0.00	\$361,392.91
j. % of Total	100%	0%	100%	100%	0%	100%
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(s) set forth in the award documents.						
16a. Typed or printed name and title of Authorized Certifying Official:				16c. Telephone (area code, number, and extension)		
Samana Semo Ve'ave'a 				(684) 699-0411		
16b. Signature of Authorized Certifying Official:				16d. Email Address:		
				s.veavea@asdhhs.as.gov		
				Date:		