

**California State Library
Library Services and Technology Act**

Quarterly Narrative Report

Quarter:

- First quarter – Jul, Aug, Sept.**
- Second quarter – Oct, Nov, Dec.**
- Third quarter – Jan, Feb, Mar.**

This report is due quarterly, thirty (30) days after each three-month period of the project’s duration. Note that failure to submit these reports within the timeline of the grant program could jeopardize receipt of the final 10% grant payment. Submit ORIGINAL (please sign in blue ink) and TWO copies of the report to:

**California State Library
Budget Office – LSTA
P.O. Box 942837
Sacramento, CA 94237-0001**

Date: February 25, 2008

Grant Award ID #: 40-6810

1. **Grantee:** Inglewood Public Library
2. **Project:** Local History Digital Resources Project
3. **Describe significant events of this project report period. Relate activities to specific project objectives. Attach project statistics, publicity, publications, etc.** The Library selected and submitted the remainder of images to be included in this grant.staff for the LHDRP project. The Inglewood-Airport Area Chamber of Commerce, the Inglewood Unified School District, city agencies, and citizens provided materials for the project. Two staff members attended training sessions.
4. **Outline planned activities for the next quarter. Note: if these differ from activities proposed in the application for this period.** Staff is now working on documentation and the preparations of items needing rescanning. Planning is in progress for the continuation of local history digitization beyond the scope of the LHDRP grant. The Library will utilize the unexpended grant funds to aquire scanning equipment and fireproof storage furniture. The Library is working with the City's Information Technology and Communications Department to display the scanned images on the city web site. Staff continues to seek additional sources of historical photographs. Efforts will continue to obtain the the full cooperation of the Historical Society. (See question 6.)
5. **Is the project on schedule as described and approved?** **yes** **no**
Is the project within budget as approved? **yes** **no**

If either box is checked “no”, describe what corrective actions are being taken.

6. **Note any other present constraints or foreseeable problems that may affect the outcome of the project. How can such problems be overcome?** We continue to experience difficulty obtaining the full cooperation of the representative of the Historical Society. This has not prevented the satisfactory completion of our grant responsibilities due to our success in assembling photographs from other sources within the City. The collections of the Historical Society are, however, important to the further development of our local display of historical images.

7. **Signature:** _____ **Title:** Library Director
(Please sign in blue ink)

8. **Telephone:** 310-412-5397 **E-mail:** rsiminski@cityofinglewood.org